

ANNUAL ACTIVITY REPORT 2021-22



HEALTH & FAMILY WELFARE DEPARTMENT GOVERNMENT OF ODISHA

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Chapter-I

Activities of Health and Family Welfare Department

1.1 Introduction

Health & Family Welfare Department, Government of Odisha is committed to provide in conformity with National Health Policy, Govt. of India, affordable, accessible, equitable and quality health care services to its people with special focus on underserved and hard to reach areas of the State. The department to achieve this objective has been endeavoring to improve and enhance infrastructure development of the health facilities across the State in addition to addressing Human Resource Management, procurement of equipment & instrument, free supply of essential drugs and other logistics in all the Govt. Health facilities of the State.

Budgetary allocation for the health sector has been augmented to fill up shortage of doctors and infrastructure to deal with dispensation in the health care service delivery in the State.

Objectives

- To ensure adequate, qualitative, preventive & curative health care to people of the State.
- To ensure health care services to all particularly to the disadvantaged groups like scheduled tribes, scheduled castes & back ward classes.
- To provide affordable quality healthcare to the people of the State, not only through the Allopathic systems of medicine but also through the Homeopathic & Ayurvedic systems.
- To ensure greater access to primary health care by bringing medical institutions as close to the people as possible or through mobile medical health units, particularly, in the underserved & backward districts.
- To improve health care in the KBK districts of the State
- To eliminate diseases like polio & leprosy from the state & prevent as well as control other communicable diseases
- To reduce maternal, infant & neo-natal mortality rates
- To guarantee to the people of Odisha free treatment(including free medicines) for certain major communicable diseases
- To improve hospital services at the primary, secondary & tertiary levels in terms of infrastructure, drugs & personnel
- To impart training to doctors, nurses & other paramedical staff to upgrade their skills & knowledge to improve quality health care in the state and improve medical education in the State.
- To ensure that all children under the age of 2 years and pregnant women are fully immunized against seven preventable diseases under Mission Indradhanush.
- To ensure vaccination of all children against rotavirus as part of Universal Immunization programme.

1.2 Health care Infrastructure in the State

Table 1-Health Infrastructure in the State

Health Facility	Numbers
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Medical College and Hospitals	7
District Hospitals (in 30 districts + Capital Hospital, BBSR & R.G.H RKL)	32
Sub-Divisional Hospitals	32
Community Health Centres	374
Urban Community Health Centres	7
Other Hospitals	54
Infectious Disease Hospitals	5
Cancer Institute	1
Training Centres	5
Primary Health Centres (N)	1233
Urban Primary Health Centres	102
Sub-Centres	6688
A.N.M. Training Schools	21
G.N.M. Training School	8
M.P.H.W.(Male) Training School	3
Ayurvedic Hospitals (not attached to College)	2
Ayurvedic College & Hospitals	3
Ayurvedic Dispensaries	619
Homoeopathic College & Hospitals	4
Homoeopathic Dispensaries	561
Unani Dispensaries	9

(Source : DHS, 2021)

1.3 Resources and Budgetary Allocation for the Year 2021-22

For the financial year 2021-22(BE) an amount of Rs. **916426.04** Lakh had been made in the Health & Family Welfare Budget as detailed below:

Table 1-Resource and Budgetary allocation

Sl No.	Budget Head	B.E(in lakhs)
1	Administrative Expenditure	292641.04
2	Programme Expenditure	623785.00
	Total	916426.04

(Source: Budget Document-Health & Family Welfare Department)

Provisions for Majors Schemes/Programmes during 2021-22

STATE SECTOR SCHEMES		(Rs in Lakhs)
Sl No	Name of the Schemes	2021-22 (BE)
1	2	3
1	NIRAMAYA	60000.00
	NIDAN	22903.28
	SUNETRA	3200.00
	SAMMPurNA	0.01
	Emergency Medical Ambulance Service (EMAS)	7334.62
	Odisha State Treatment Fund (OSTF)	5000.00
	Strengthening of Blood Services (including Grants to SBTC)	3500.00
	Odisha comprehensive Cancer Care Plan	12000.00
	Strengthening of Casualty Emergency & Trauma Centre	1523.37
	Swasthya Sanjog	1444.79
	Swasthya Sahaya	6246.40
	NAT PCR Facilities	1500.00
	Mental Health Programme	200.00
	Mobile Health Unit (PPP Mode)	406.07
	SHAS Establishment and other cost (Including Pvt Hospitals)	6000.00
FTTF(New Scheme)	4000.00	
Total		135258.54
Mukhya Mantri Swasthya Seva Mission (MMSSM)	Infrastructure Development of Health Institutions (Non Res)Total	81000.00
	Infrastructure Development of Health Institutions (Res)	10000.00
	Redevelopment Programme of SCB MCH	50000.00
	Public Health Response	16107.60
	Health Investment Promotion Policy	100.00
Total		157207.60
3	Malaria Control Programme (DAMMaN)	999.97
4	De- addiction Centre	750.00
5	Bio Medical Waste Management	1000.00
6	Food Safety Programme	440.00
7	Dedicated Power Supply	100.00
8	Diet	7366.54
9	Bedding, Clothing& Linen	0.12
10	Bio- Medical Waste Management Expenses	1084.16
11	KHUSHI	3000.00

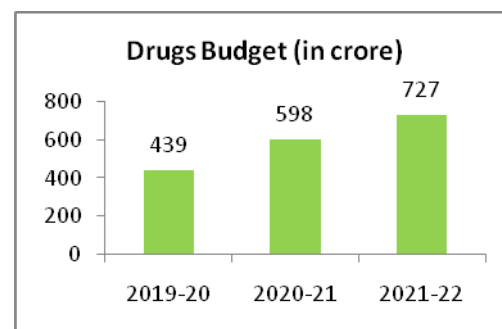
12	Digital Health		955.80
13	Jeevan Upar		200.00
14	Tele Medicine		410.00
15	Liver Transplant Unit		25.00
16	HMIS		1728.00
17	IEC		300.00
18	Sanitation expenses		0.34
19	Corpus Fund		1100.00
20	Sports, Medicine and Rehabilitation Centre		100.00
21	Sickle Cell & Thalasemia		572.10
22	Decretal Dues (Charged)		100.00
23	Emergency fund	H & FW Deptt.	75.00
		DHS	75.00
24	Equipment	Medical College & Hospital	3000.00
		District Head quarter Hospital	8000.00
		Drugs Controller	0.01
		AYUSH (Ayur) (Hom)	660.00
25	Family Welfare Scheme		41268.82
26	NIRMAL		37000.00
27	Training	ICU personnel & Nursing	181.37
28		Medical & Paramedical staff	40.00
29	Ayush		120.32
30	Infrastructure maintenance (PH)		1800.00
31	Family Planning Indemnity Scheme		35.00
32	Skill Lab(Cuttack)		1000.00
33	EAP(Externally Added Project)		1000.00
34	Awards to Health Professionlas /institute		500.00
35	Odisha Cardiac Care Programme		0.01
36	Renal Transplant Unit		46.00
37	ANM&GNMSchools		1017.58
38	Bone marrow Transplant Unit		10.00
39	Spare & Services		1100.00
40	Other Schemes		372.72
			117533.86
	Total State Sector Schemes		410000.00
	Centrally Sponsored Schemes		
41	Rastriya Swasthya Suraksha Yojana (60:40)		3.00
42	National Ayush Mission(60.40)		2000.00
43	Human Resource in Health & Medical Edn. (60:40) (PMSSY)		31200.00
44	Drugs Regulatory System (60:40)		1882.23
45	National Rural Health Mission (60:40)		172040.40

46	National Urban Health Mission (60:40)	3476.34
47	Pradhan Mantri Atma Nirvar Swasth Bharat Yojana (PMASBY)	
48	Tertiary Care Programme(60:40)	1.00
49	NMEP &NFCP-CSP &SS of CSP (50:50)	182.00
50	Setting up of Laboratories for Managing Epidemic and Natural Calamity	0.03
	Total Centrally Sponsored Schemes	210785.00
	Central Sector Schemes	
51	T.B. Control Programme (Material & Equipment)	0.01
52	AYUSH (Edn. Salary) & Medicine	6.27
53	Equipment for Hom. Edn.	69.82
54	National Goiter Control Programme (Other Contingency)	0.01
55	Materials & Equipment for Malaria eradication programme(NMEP)	0.01
56	Purchase of contraceptives , Equipments & Medicine	2923.85
57	Human Resources Development for Emergency Medical Services	0.03
	Total Central Sector Schemes	3000.00
	GRAND TOTAL (PE)	623785.00

1.4 Major Activities & Achievements during 2021-22

System Stenthening

- Implementing OeHMIS at DHH level and Functional Help desks at all FRUs for providing better information and services to the patients.
- **Implementing MO Sarkar across all 32 DHH:** Under this new initiative, Hon'ble Chief Minister, Ministers and Health Officials are making calls to common citizens to seek their feedback on the kind of response and service they received when they visited the government Health facilities. Based on the feedback various steps being taken to improve the service delivery and hospital amenities.
- **Niramaya: Free drug distribution scheme :**
 - Free Drugs provided to patients at all levels in Govt. facilities across the State under Niramaya Scheme. 750 types of drugs enlisted (Decided by District level Therapeutic Committee)
 - **532 computerised Drug Distribution Centres (DDCs)** have been established across the facilities up to CHC level
 - In addition to 39 District Drug Warehouses, efforts are on to operationalise **block level Drug warehouses** for distribution up to PHC level
 - 49 numbers of **dedicated GPS enabled transport vehicles** are engaged for doorstep delivery of drugs up to PHC level.
- 104 call Center : toll- free call centre providing information and counselling , Follow up of sample beneficiaries registered under RCH for verifying service provisions.



- Equipment procurement guidelines issued.
- Diet menu prepared for health institutions and free diet provided to patients.
- Free Ambulance Services, Free Dialysis Service (Sahay), Free Diagnostic Services ('Nidaan'), Free Drug Services (Niramaya), Free Blood Services, Free Cancer Care and Chemotherapy Services
- Strengthening of Ancillary Services at Public Health Facilities (Nirmal).
- Integrated Lab: Public health labs set up in all districts. CHC integrated labs set up
- Contingency increased + untied funds guidelines made for DHHs, CHC and PHCs under state and central budget.
- 41 CBNAAT machines are functioning across the State.
- NCD clinics are functioning effectively at 30 DHHs and 62 CHCs during April to December 2020.
- ICUs are functioning effectively in 10 districts during April to December 2020.
- **Dialysis Services (SAHAY)**
 - **Functional** : 31 Dialysis Centres in 28 Districts (PPP- 28 + System Managed - 3)
 - **Dialysis Machines** : Available 202 + 91 in process for Procurement
- **Free Diagnostic Services (NIDAAN)**
 - **MRI Services** : Plan to functionalise at functional / proposed MCHs (Operational- 4, Tender in process for rest 7 Centres)
 - **CT Scan Services**: Plan at 29 major DHHs except districts with old MCHs (Operational- 11, Tender finalised for rest 18 centres)
 - **Digitization & Reporting of X-Ray Services** -119/149 Facilities functional.
 - **Microscopy Centres at PHC HWCs**- Labs established & Microscopes provided
 - **LTs engaged at PHC-HWCs** – Mostly on Outsourced mode
 - **Special Fund to Facilities** out of State Specific Scheme –NIDAAN for managing recurring expenses on reagents & consumables (Example a PHC HWC receives about Rs. 70,000 per annum)
 - **Calibration** of equipment/instruments - M/s Kirloskar Technologies Pvt. Ltd (KTPL)
 - **High end Pathology Services** at all DHHs(Selected 20 Types of Tests) through PPP Mode .
- Comprehensive equipment maintenance programme is in place under SEMU.
- Strengthened 1635 Health & Wellness Centres with provision of IT system and introduced wellness activities like Yoga & health promotion till November,2021. **Tele-consultation Services with specialist of DHH and Medical Colleges under E-Sanjeevani started.**
- 100 nos. of AYUSH dispensaries have been identified for up-gradation as AYUSH Health & Wellness Center.
- 63 Malaria Sentinel site are functioning effectively during April to December 2020.
- Provision of Specialist Services in Urban PHCs/CHCs (Ama Clinic)
- Mukhya Mantri Swasthya Seva Mission: It is a basket of schemes which includes, Infrastructure development of Public Health Institutions (Non Residential and residential), Public Health Response fund to address public health emergency, Odisha State Treatment Fund to provide financial assistance for critical health care and Health Investment Promotion Policy.

- **Dental Clinics** established at all DHHs, SDHs & 353 CHCs (out of 388) with regular Dentist, Dental chairs and consumables (SCB Dental College – Nodal Centre for monitoring & mentoring).
- Blood services Comprehensive multiyear action plan in place: Government has prepared a detailed road map along with budgetary allocation to strengthen Blood Bank services in the State and to provide safe Blood to the patients

Service delivery

- **Ensuring free referral transport services:** 624 EMAS -108 ambulances (512BLS+112ALS) are operational in the state. More than 33 lakh patients have been benefitted. Ambulance Services are accessible with a single toll free number “108” & 25 seated Health Helpline with single toll free number “104”
- **BSKY: Free health services for all** (irrespective of income, status or residence) **in all State Government health care facilities.** All treatment is cashless and no document is required to be produced. **Free healthcare in empanelled private hospitals (280 nos.),** through annual health coverage of Rs. 5 lakh per annum (additional Rs. 5 lakh for women members) per family per annum. From 1st September 2021 onwards beneficiaries are availing entitlements under BSKY on production of New BSKY card or NFSA/SFSS card (if New BSKY Card not provided for some reasons). The BSKY benefit extends to 3.5 crore persons of 96.5 lakh NFSA/ SFSS card holder families out of 99 lakh families in Odisha.
- **Continue screening** of 30+ year’s population for Non Communicable Diseases (NCDs). More than 29.53 Lakh 30 + years population screened for NCD from April to December 2021.
- **Strengthening of Free Diagnostic Services (Nidaan)** in all Public Health Facilities up to Sub Centre Level. More than 1.5 crores tests done under Free Diagnostic Services (Nidaan) for patients attended public health facilities from April’21 to January2022.
- **Strengthening of High End Pathology Services** under Free Diagnostic Services (Nidaan) in all DHHs in PPP mode. 55,585 Patients received High End Pathology Services (More than 1.67 Lakhs Tests done) in 32 DHHs under Free Diagnostic Services (Nidaan) from April to December- 2021.
- **Strengthening of Free Dialysis Services (Sahay).** It is available in 29 districts with one district namely Sonapur tied to neighboring district.This year 1.54 Lakhs got Free Dialysis sessions from April’21 to January2022.
- More than 599897 patients received Free CT scan services since 2018 august till December, 2021. This year 1.74 Lakh got Free CT scan services from April to December 2021.Free MRI scan service given to 35000 patients done during April to December,2021.
- **Strengthening of Day Care Chemotherapy Centres** at DHH Level, More than 18,589 free chemo cycles in 32 centres operational at DHHs were done in 2020. 45527 patients enrolled till Oct, 2021.
- **Expansion of Universal Free Blood Services** in all Govt. Blood Banks (BBs) & Blood Storage Units (BSUs). More than 4,44,000 free Blood Units given to patients during January to December 2021.
- Ensured effective implementation of Cash Incentives @500/- per month for 20078 Blood Disorder Patients for continuing treatment till December,2021.

- **Ensured effective implementation of Niskhya Poshan Yojana** for provisioning of Cash assistance @500/- per month per TB patient. More than **21,819/28,895** new Patients received Cash incentive through DBT from April to November 2021.
- **27646/28895 TB patients put under treatment** during April to November 2021 with 88% Treatment success rate.
- **19,455 cataract operations conducted** and 10 Mobile Vision Centres established during April to October-2020.
- **Khushi:** Scheme for providing free sanitary napkins to school girls from Class 6 to 12 in all the government and government-aided schools in the state

Preventive

- Disease outbreak management for Jaundice, Dengue, Swine flu, Malaria (Tata trust, Daman, GFTAM)
- Guidelines and protocols issued to all districts on Covid-19 pandemic
- SOPs made for line depts & for collectors for disease outbreak management
- Strengthened review (fixed day monthly meeting)
- IDSP review by collectors
- LLIN use, Mass screening (both symptomatic and asymptomatic) in inaccessible and hard to reach areas, Intensifying malaria surveillance under integrated anti-COVID drive etc.

Tertiary care

- 7 new Government Medical College started with two new at Koraput and Baripada made functional from 2017-18 and Bolangir & Balasore Medical Colleges made operational from 2018-19.
- SishuBhawan construction / up-gradation has started
- AHRCC made a Centre of Excellence for Cancer Care in the eastern region and made a teaching institution with launching of PG courses.
- Two new Medical College & Hospitals at Jajpur & Phulbani has been taken up under MO SARKAR.
- Extension of Capacity of 5 Medical College & Hospitals from 500 to 650 seat (Balasore, Baripada, Bolangir, Koraput & Puri) under MO SARKAR announcement.

IMR, MMR reduction strategy:

For accelerated reduction of IMR and MMR in the State, a state specific scheme – ‘SAMMPurNA’ has been implemented in the State since 2015-16. Major interventions include identification, referral and treatment /management of high risk pregnant women and children, provisioning of mother and baby kit, reimbursement of transport cost @ INR 1,000/- for institutional delivery of Pregnant women in notified difficult villages, provision of stretchers for transportation of patients from difficult villages, organization of integrated VHND and Immunisation sessions at under-served and hard to reach areas, establishment of High Dependency Units (HDU) Paediatric Intensive Care Units (PICUs) for management of critical paediatrics cases at District Headquarter Hospitals.

Bio medical waste management: Currently all 1787 hospitals are under the Authorization administration of SPCB, Odisha. Liquid waste management system is established at 32 DHH, 30 SDH and 280 CHCs. 337 hospitals have received kayakalpa award in 2019-20.

Mental health: National Mental Health Programme is implemented in all 30 districts. Currently 30 DMHP (District Mental Health Programme) Units with six categories of staffs are established. Free psychotropic drugs made available through 'Niramaya'.

Food safety programme: Food Safety Appellate Tribunal has been established. State Food Testing Laboratory, Bhubaneswar is the approved statutory Laboratory by the FSSAI under Government of Odisha for testing & analysis of all types of food samples. One Mobile Food Testing Laboratory (MFTL) has been provided to the State by the FSSAI for ensuring spot quality testing & create awareness in different areas.

Strengthening Human Resources

- OMHS cadre was restructured with creation of 1330 number of new posts increasing the strength of cadre to 6719.
- Doctors are being posted through transparent computerized counseling process. Exit policy is also being implemented to allow doctors to be posted in Non-KBK & Non-TSP districts after completing a fixed tenure in KBK, KBK+ & TSP areas.
- **Placed Based Incentive:** The State Govt. has implemented place based incentive to Doctors who are serving in rural and remote areas with specific focus on KBK and KBK+ regions..
- **Corpus Fund:** Rs. 1 crore of corpus fund has been allotted to each KBK & KBK+ districts for human resources management.
- **Contractual doctors remuneration increased:** The State Govt. has hiked of Rs. 15000 to Rs. 20000 over and above the existing remuneration for doctors engaged on contractual basis against the vacant posts of Asst. Surgeons/Specialists
- Remuneration of contractual faculties in Medical Colleges enhanced to 1.25 Lakhs for Professor, 1.00 Lakhs for Associate Professor and 0.50 lakhs for Assistant Professor.
- Incentives for Medical College faculties introduced. Rs. 1.25 lakh for Professor, Rs. 1.00 lakh for Associate Professor and Rs. 50,000/ for Assistant Professor in KBK area & 30% of it in non-KBK area.
- Faculty in Clinical and Para-clinical subjects will avail Rs. 20000/- per month over and above the incentive.

Others Key RCH Intervention

- **First Referral Unit: 80 FRUs** are providing C section services out of 94 FRUs.
- **Janani Surakya Yojana (JSY):** Total **7716939** number of beneficiaries benefitted under JSY (from 2005-06 till **2021-22- upto 2nd Quarter**). During 2021-22 around 1,88,897 beneficiaries benefitted under JSY. Total **34,28,30** number of beneficiaries have been benefitted under JSY (from 2021-22 upto 3rd Quarter).
- **LaQshya:** Under this programme the LR & MOT will be standardized for providing quality care services. By 2nd Quarter of 2021-22, 14 nos. of OTs and 13 LRs have been certified from State and National Level.
- **Maternity Waiting Homes (Maa Gruha):** So far **91** MWH are operational out of **93** targeted.
- **Nursing education strengthened:** Started computerized counseling for admissions into all ANM and GNM colleges, establishment of Skill Labs, Computer Labs, Library, Model ANMTC & GNMTC, Scholarship for ST & SC Students.

- **44 Special Newborn Care Units (Target: 45) and 42 New Born Stabilization Units** are operational for preventing mortality and brain damage immediately after birth, **530** Newborn Care Corners are functional at Delivery Points.
- **Routine immunization** strengthened with introduction of IPV and Rotavirus and Mission Indradhanush, MR and JE campaign.
- **MHU: 170 Mobile Health Units** are operational under State budget to provide primary health care services at the community level in 18 districts.
- **RBSK: 636** Mobile Health Teams formed for screening, treatment and referral of children identified with defects, deformity, development delay and diseases at schools and AWCs.
- **RKSK: 230 AFHC** (Adolescent Friendly Health Centers) clinics has been established to provide services for adolescent girls & Boys. Integrated counseling centers up to CHC DPs. 4 One Stop Crisis Centres on pilot basis (Puri DHH, Sambalpur DHH, Capital hospital & MKCG Medical College) integrated with SHRADDHA clinic. Menstrual Hygiene Scheme (MHS) extended to 30 districts under NHM.
- **ASHA: 48,167 ASHAs in position** (49,037 target. **Total number of Incentives gone up to 53 with assured amount of Rs.4500/- per month** (Rs.3500/- NHM PIP + Rs. 1000/- State Budget).
- **National Urban Health Mission** implemented in 36 cities to ensure availability of primary health care services through urban public health facilities of 97 UPHC and 7 CHC and provision of outreach health care services with focus on urban slums through ANMs, ASHAs, Mahila Arogya Samiti (MAS). Ama Clinic launched for providing specialist care in selected Urban facilities.

Construction monitoring

- 7 new Medical College & Hospitals is being constructed at Bolangir, Koraput, Balasore, Puri, kalahandi, keonjhare & Mayurbhanja (**Koraput, Balasore, Bolangir & Baripada – Completed & functional**).
- Major Health Infrastructure developments are being taken up in premier institutions like SVPPGIP, Capital Hospital, AHRCC under MO SARKAR Announcement.
- Construction of Cardiac Care Hospital at Jharsuguda, Cancer Hospital at Baragarh, LINAC Building at AHRCC and comprehensive infrastructure development of SCB Medical College & Hospital also been taken up under MO SARKAR Announcement.
- **Establishment of MCH Wings** : Construction of 74 Maternal & Child Health Complex in District / Sub-district & Block Level of various bed strength; ranging from 125 bedded to 30 bedded is under progress (**Completed & functional – 47, Progress - 19**).
- Establishment of health wellness Centre **Infrastructure at 3634 SCs and 1233 PHCs upgraded.**
- **All DHHs shall have beds as per revised IPHS norms. So far 8 DHH completed.**

Ayush & Public Health System

- 1190 Independent AYUSH dispensaries (Ayur-620, Homoeo - 561, Unani - 9) are functional in the State. Apart from these 796 Ayurvedic Clinics, 680 Homoeopathy Clinics and 09 Unani Clinics have been co-located with allopathic health facilities (PHCs & CHCs).

- Regular Ayush Doctors under State : 930/1293
- Contractual Ayush Doctors under NHM : 1231/1485
- One Pachakarma unit is functioning at DHH, Kendrapara & two more Panchakarma unit will be made functional at DHH, Bargarh and Keonjhar.
- Two Ayurvedic hospitals are functional in the State.
- 7 AYUSH Medical Colleges are existing in the State (Ayur – 3, Homoeo – 4)
- Essential AYUSH drugs are being provided to all AYUSH co-located clinics at PHCs & CHCs.
- Process has been started to procure Homoeopathic Medicines through OSMCL, Bhubaneswar.

Covid-19 Management:

Odisha is a State well known for its rapid and effective response to disasters and this experience stood the State well in combating the Covid-19 pandemic. In a matter of weeks the State had set up fully equipped dedicated Covid hospitals and testing laboratories, which were expanded to a capacity of over 30,000 general beds, 8,000 oxygen supported beds and 1600 ICU beds. Starting with only one Covid testing laboratory in the State, Odisha soon had a network of about 30 RT-PCR laboratories, apart from Rapid Antigen, CBNAAT and TrueNAT testing with a daily testing level of nearly 50,000 tests. Over 1.99 Crore tests for Covid-19 done from April 2021 till 23rd Feb 2022. The positivity rate is 4.7% and recovery rate is 99%.

COVID Vaccination: More than 94% have received 1st dose and 75% have received 2nd dose of Covid Vaccination. Vaccination for 15 to 18 years age group 1st dose 76.9% and 2nd dose is 56.4% against due.

Impact of Health Interventions in Odisha

- Odisha has recorded the highest 35 points decline in IMR from 75 in 2005 to 38 in 2019 (SRS)(36 as per NFHS-5).
- Odisha recorded 135 points reduction in MMR from 303 (SRS 2006) to 150 (SRS 2016-18).
- State has already achieved the 12th Five year Plan goal w.r.t the Total Fertility Rate i.e 2.0, in 2015 and 1.8 in 2019 as per SRS, which is a great achievement towards population stabilization measure.
- % of institutional delivery has substantially improved from 22.6 % coverage in 1998-99(NFHS-2) to 85.4% in 2015 (NFHS-4) and 92.2% in 2019-21 (NFHS-5) which is better than national average of 88.6% (NFHS-5).
- **The full immunization coverage among children aged 12-23 months children** has increased substantially from 43.7% (NFHS-2) to 78.6% in 2015-16 (NFHS-4) to 90.5% in 2019-21 (NFHS-5) compared to National average of 70%.
- Due to effective implementation of TB Programme in the State, the overall State ranking of the composite TB index has been improved from 27 rank in 3rd quarter of 2018 to 10th rank in 3rd quarter of 2019 among all states in the country.
- Odisha's model in sharpest decline in Malaria has been acknowledged Globally by WHO, as Odisha has recorded the path breaking decline over 80% in reported malaria cases and death between 2016 to 2018.
- As per the 75th round of NSSO report (2017-18), about 75.1 % in Rural & 55.5 % in urban patients availed IPD services at public health facilities, which is 2nd highest in country followed by Assam.
- Women's Empowerment has also shown remarkable improvement as per NFHS-5:

- State has also shown great achievement in Women having a bank or savings account that they themselves use (%) which has increased from 56.2% in 2015-16 to 86.5% in 2019-21 and is better than National average of 78.6%.
- State has also shown great achievement in % of Women age 15-24 years who use hygienic methods of protection during their menstrual period which has increased from 47.4 % in 2015-16 to 81.5% in 2019-21 and is better than National average of 77.3%.

Chapter-2

National Health Mission

Introduction

The National Rural Health Mission has been in operation since June 2005 in Odisha and has been renamed as National Health Mission (NHM) after widening its service coverage to urban areas. Odisha, has shown a steady and sustained improvement in most of the key impact level indicators of health sector performance since the launch of NRHM in 2005. Odisha recorded highest IMR decline of 47 points in the country by reducing IMR from 75 in 2005 to 38 in 2019(SRS). Maternal mortality has also declined from 303 in 2006 (SRS) to 150 in 2018(SRS). The latest NFHS data shows wide improvement in all major process indicators such as ANC coverage, institutional delivery, immunization, nutritional status as against all India average. The state has shown reduction in deaths due to communicable diseases, particularly malaria as the overall TPR has come down to 0.37 in 2021 from 5.23, reported in 2017. Deaths due to malaria have come down from 24 in 2017 to 13 in 2021.

Major activities Undertaken:

2.1. Health Facility Strengthening

State's Mandate is to maximize access to Public Health Facilities, improve Quality Service Delivery and reduce Out of Pocket Expenditure. **The dependence on Public Health System in Odisha is high as per NSSO report 2017-18, the percentage share of Government Hospitals in Hospitalization cases (IPD) in Odisha is 75.1% compared to India which stands at 42%. The percentage share of Government Hospitals in OPD cases in Odisha stands at 72.2%. As per NFHS-5, Odisha reported 78.7% Institutional births in public facility against National average of 61.9%.**

Taking above facts into consideration revamping of Public Health Infrastructure is being done as per revised IPHS norms. State has initiated new Constructions in 21 DHHs (8 completed and 7 in progress). State has also initiated establishment of MCH wing at 74 high case load facilities qualifying GoI norms. Drug Ware House with Racking system established across all 32 DHHs and 314 blocks.

Strengthening HR:

- 6486 Paramedics under NHM have been Regularized in 2021-22 (3007 SNs, 318 LTs, 22 Pharmacist, 2554 ANM, 567 MPHWM, 18 Radiographer)
- 2010 MO MBBS positions created since 2018-19 & 2153 are recruited (including vacancies).
- 17006 positions of Nursing Officers created since 2019-20 and of which 5695 are recruited.

Strengthening Infrastructure development

- 10 new Medical College & Hospitals is being constructed at Bolangir, Koraput, Balasore, Puri, kalahandi, keonjhare Mayurbhanja, Kandhamal, Kalahandi & Sundargarh (**Koraput, Balasore, Bolangir & Baripada – Completed & functional**).
- Two new Medical College & Hospitals at Jajpur & Phulbani has been taken up under MO SARKAR.
- Extension of Capacity of 5 Medical College & Hospitals from 500 to 650 seat (Balasore, Baripada, Bolangir, Koraput & Puri) under MO SARKAR announcement.

- 20 DHH Buildings have been proposed for construction of new buildings of 300 bed capacity under MO SARKAR announcement (Bhadrak, Boudh, Deogarh, Sonepur, Koraput, Kendrapara, Puri, Jajpur – 300 bedded & Nawarangpur, Nayagarh, kalahandi, Anugul – 200/110/100 bed strength) under MO SARKAR announcement.
- Major Health Infrastructure developments are being taken up in premier institutions like SVPPGIP, Capital Hospital, AHRCC under MO SARKAR Announcement.
- Construction of Cardiac Care Hospital at Jharsuguda, Cancer Hospital at Baragarh, LINAC Building at AHRCC and comprehensive infrastructure development of SCB Medical College & Hospital also been taken up under MO SARKAR Announcement.
- Construction of 74 Maternal & Child Health Complex in District / Sub-district & Block Level of various bed strength; ranging from 125 bedded to 30 bedded is under progress (**Completed & functional – 47, Progress - 19**).
- Extension of Drug Ware House at DHH level – 31 Nos with a financial involvement Rs. 50.60 crore. (In progress – 15 Nos.)
- Construction of IPD & OPD complex at SDH/CHC, 80nos IPD/OPD complex has been under taken with an amount of Rs. 64.36 crore (Completed -7 & Progress- 13).
- 574 sub centers buildings with an approximate financial involvement of Rs.189.42 crore are being constructed (42 completed & 118 under construction).
- 208 PHC N buildings with an approximate financial involvement of Rs140.94 cr. constructed (6 completed & 30 under construction).
- 812 staff quarter are being constructed for health service provider such as Doctors, Staff Nurse, Paramedics & others (189 completed & 44 under construction).
- Strengthening of infrastructure of GAD/ GHD Buildings in main streaming of AYUSH - 57nos of Govt. Ayurvedic & Homeopathic Hospitals are being taken up and all are under progress.
- 102 UPHC/ UCHCs has been newly constructed with a financial involvement of Rs.75.00 lakhs @ per UPHC/UCHC (56 completed & 7 under construction).
- 2067 Nos of Sub Center buildings converted to Health Wellness Centre with a financial involvement of Rs.144.69 crore (Completed – 261 & Progress – 358)
- 1054 Nos of PHC Buildings converted to Health Wellness Centre with a financial involvement of Rs.73.78 crore (Completed – 88 & Progress – 366)
- Special & Critical Child Health Care facilities like SNCU, HDU, PICU/NICU, MNCU, NCD, DEIC, NRC, Skill Lab etc. has been established and functional at different level of health institutions.
- Strengthening of chain of distribution & management of drugs 381 Drug Ware House at different level has been constructed.
- Construction of 10 Nos CSSD with a financial involvement of Rs.23.10 crore.
- Construction of 10 Nos Modular Kitchen at DHH level with a financial involvement of Rs.18.50 crore.
- Construction of 77 Nos of CHC with a financial involvement of Rs.762.30 crore
- Construction of Training/ Knowledge Hub at DHH level with a financial involvement of Rs.15.40 crore

Budget sanctioned

Year	Amount approved (Rs. In lakhs)
2017-18	25,175.41
2018-19	27,986.71
2019-20	14,771.00
2019-20 (Supplementary)	28602.05

2020-21	20714.72
2021-22	32127.79

- Funds also been mobilized from State Plan, OMBADC, DMF, CSR grant, **MO SARKAR Announcement & Chief Minister's Swasthya Seva Mission** for additional infrastructure development of all level of health institutions



DWH at DHH Nabarangpur



Construction of L.M.O. at Medical College & Hospital, Balasore



Construction of DWH & 100 Bedded MCH at DHH Kendrapara



Construction of IPD at Bhagamunda CHC, Keonjhar



ANMTC at DHH Bolangir



Construction of SC at Jyotipur, Keonjhar



Const. of 50 Bedded IPD Building at SDH Baliguda,
Kandhamal



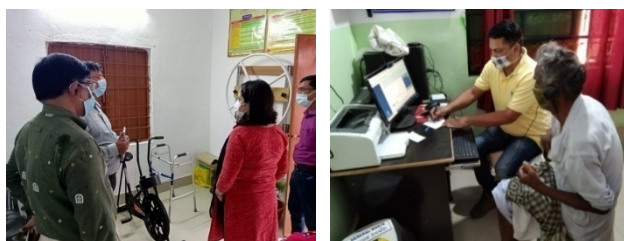
Const. of Labour Room at CHC Dukura, Mayurbhanj

2.2. Ayushman Bharat-Health and Wellness Centres: HWCs are envisaged to deliver expanded range services that of beyond maternal and child health care services to include care for NCDs, Palliative and Rehabilitative care, Oral, Eye and ENT care, Mental health and first level care of emergencies and trauma, including free essential drugs and diagnostics services. All PHC / UPHC & Sub center are being converted to Health & Wellness Centre with addition of one Community Health Officer (CHO) (GNM/BSc Staff Nurses or Ayurveda practitioners who are trained in Six Month Certificate course on Community Health) at Sub center level HWC. So far more than 1700 HWCs have been made functional with required manpower and services.



Other Major Initiatives at HWC level:

- Tele-consultation Services : 24,322 Sessions already conducted (6 Hubs, 32 Sub Hubs & 673 Spokes functional)
- E-Niramay (Online Drug Inventory System)- Extended to 45% PHC-HWCs
- Wellness Wing: Equipped for educational session, Yoga, Small meeting, Fixed Day services etc.



2.3 Free Diagnostic Services:

- Microscopy Centres at PHC HWCs- Labs established & Microscopes provided
- Lab Technicians engaged at PHC-HWCs – Mostly on Outsourced mode
- Special Fund to Facilities out of State Specific Scheme –NIDAAN for managing recurring expenses on reagents & consumables (Example a PHC HWC receives about Rs. 70,000 per annum).
- High End Pathology Services at all DHHs (Selected 20 Types of Tests) through PPP Mode .
- CT Scan Services: Plan at 29 major DHHs, Operational- 11
- Digitization & Reporting of X-Ray Services -119/149 Facilities functional
- Dialysis Services: 31 Dialysis Centres in 28 Districts (PPP- 28 + System Managed - 3) with Average 2.5 Sessions per day per Machine

2.4 Blood Safety: Free Blood provision made to all Patients treated at Govt Hospitals. **Transport assistance @Rs 500 per patient per month** is being provided to blood Disorder Patients. 15 districts covered under **CMC Vellore Project** for control of Sickle Cell & Thalassemia. **E-Blood Bank** software operational in the State.

2.5 RMNCH+A Related Major interventions

2.5.1 Reproductive Health

The focus during 2021-22 is on strengthening availability of integrated Reproductive health services by regular review through existing mechanisms as well as by providing supportive supervision and mentoring support through technical agencies. Due to the covid-19 pandemic the focus has been shifted to improve outreach services like home delivery of contraceptives and improving availability of Family planning commodities across the health facilities and ASHAs. Apart from the regular activities planned for the year 2021-22 a few additional activities done for the year which have been mentioned below:

- **Involvement of GKS/ VHSNC for strengthening male engagement in family planning:**
- **Incentives of Rs.750/- for Male Health Workers for Mobilizing clients for Vasectomy:**
- **Provisioning of Condom Boxes in UCHCs and UPHCs to improve access to condoms to male clients.**
- **Strengthening FP LMIS and ASHA level roll out of FPLMIS**

2.5.2. MATERNAL HEALTH

- **First Referral Unit: 80 FRUs** are providing C section services out of 94 FRUs.
- **Delivery points: In 2020-21 out of 1190** prospective delivery points **533** institutions are already functional.
- **Janani Surakya Yojana (JSY):** JSY have been instrumental in increasing the institutional deliveries. Total **34,28,30** number of beneficiaries have been benefitted under JSY (from 2021-22 upto 3rd Quarter).
- **Janani Shisu Surakshya Karyakram (JSSK)** –Total 2,37,213 nos. of pregnant women have received various JSSK entitlements during the first 2 Qtrs of 2021-22..
- **Comprehensive Abortion Care (CAC):** In the State 252 facilities are providing Comprehensive Abortion Care.
- **Village Health Sanitation & Nutrition Day:** 98% of VHSND Sessions organized during 2021-22 till Dec'21.
- **Obstetric HDU & Hybrid ICU:** For providing critical care for obstetrics cases, 3 High Dependency Units are functional in 3 DHH (Kandhamal, Kalahandi & Keonjhar district) and 2 Hybrid ICUs in MCH MKCG, & MCH SCB.
- **Maternity Waiting Homes (Maa Gruha)** Currently out of 93 State target Maa Gruha, 91 Maa Gruha are functional to accommodate the expected delivery cases from difficult geographical pockets for safe institutional delivery.
- **Initiatives for Anaemia Control:** IFA & Calcium Supplementation - About 4.5 Lakhs Pregnant women covered during 2021-22 (Upto Nov 2021). Inj. Iron sucrose, Inj. FCM & Blood transfusion services are made available at Institution level for pregnant women with severe anemia along with one time de-worming of all pregnant woman.
- **PMSMA:** This programme focused on screening of antenatal cases by doctor preferably O&G specialist at least once during 2nd or 3rd trimester. During the year 2021-22 (Upto December 2021) 84,220 nos. of antenatal cases have been screened. 6,528 nos. of high risk cases has been detected who were given Red Card.

2.5.3 Child Health

Major interventions undertaken through NHM for the reduction of infant and under-five mortality in the State are as follows:

- **Functionalization of 533 New Born Care Corner (NBCC) in all delivey points.42 New Born Stabilization Units (NBSU)** established and 3 NBSUs are under the process of establishment. Currently, the State has 44 functional Special Newborn Care Units (SNCU) (out of 45 planned) at different MCH, DHH,SDH for treatment of severely sick newborns. Kangaroo Mother Care to low birth weight & sick newborns provided at all 45 institutions.
- **Under Intensified Diarrhoea Control Month (IDCM)** around 3675923 Under 5 children were covered in 2021-22 . The proportion of U5 who were distributed with prophylactic ORS has increased from 84% in 2017-18 to 100%

in 2021-22. Under **India Newborn Action Plan (INAP)** all newborns are administered with Vitamin K1 for preventing vitamin K deficiency bleeding disorders and administration of antenatal corticosteroids to all pregnant women identified with preterm labour.

- **Home Based Care for Young Children (HBYC)** All ASHAs have been trained for making home visits to all young children for early identification and referral of newborns with danger signs/ development delays/ SAM and providing counselling to caregivers on home based care of young children, appropriate feeding practices, ORS & Zinc therapy and IFA supplementation. In 2021-22 (upto Sep.), 685015 children were visited, of which 3% were identified as sick and 76% of them were referred.
- **Childhood Pneumonia Management Programme: Social Awareness and Action to Neutralize Pneumonia Successfully (SAANS):** Under this programme, all doctors and Staff nurses are being trained on standard facility based management protocols for management of childhood pneumonia. Besides, an extensive IEC campaign was carried out from 12th November, 2020 till the end of February, 2021.
- **Other Facility level intervention: Child Health Review (CDR)** Committees have been formed at State and District level for detailed review and analysis of each under five child death and taking necessary corrective actions. Under NHM Paediatric **Emergency Triage Assessment & Treatment (ETAT) units** are now being established at each DHH level in the emergency or near the ward. The State has also established 4 **Paediatric Hybrid Intensive Care Units & Paediatric Intensive Care Units (PICU)** at medical college & hospital for treatment of very sick children.

2.5.4 Rashtriya Bal Swasthya Karyakram (RBSK)

Under this programme, 40 identified health conditions are to be addressed through '4D' approach which includes **Defect at Birth, Deficiencies, Childhood Disease and Developmental Delay & Disabilities**. Under this programme, 636 number of Mobile Health Teams are functional for screening of 1.07 Crore 0-18 years children.

Screening of Children at AWC & Schools: During the Year 2021-22, 18.33 Lakh children have been screened by MHT out of targeted 1.07 crore children. Due to Covid Pandemic situation, RBSK screening activities at AWC & Schools have been deferred. Periodical screening by MHTs at AWC & Schools will resume after opening of AWC & Schools.

Screening of New Born at Delivery Points:

- New born screening of visible birth defects continuing at Delivery Points by the service providers. During the year 2021-22, 241387 new born have been screened at delivery points and 2934 number of children have been identified with congenital birth defects.
- For early identification and timely intervention, New Born hearing screening is continuing in 28 DEICs of the State. All SNCU admitted babies and High risk new born at District Head Quarter Hospital are screened by DEIC. During the year 410 number of new Born have been identified with hearing defect and provided required follow up therapy by DEIC.
- To prevent Retinopathy of Prematurity related blindness, regular ROP screening sessions conducted at 10 Health facilities. During 2021-22, 2462 number of sick new born are screened and 122 numbers of identified babies are provided laser therapy to prevent blindness.

Early Intervention & Therapeutic services at District Early Intervention

Centers: For treatment of Birth defect children, therapeutic intervention for Developmental Delay and children with impairments, DEIC is established in 32 District Head Quarter Hospitals of the State. During the year, in spite of Covid pandemic situation, children with birth defect are provided referral treatment and 34,739 children are provided early intervention services at DEIC.

2.5.5 Rashtriya Kishor Swasthya Karyakram (RKSK): Rashtriya Kishor Swasthya karyakram (RKSK) expands the scope of preceding ARSH programme, through



identification of six priority areas viz. Nutrition, Mental Health, Substance abuse, Injuries and Violence, Prevention of Non- Communicable diseases and Sexual and Reproductive Health. Capacity building of service providers in these six thematic areas is vital for effective and successful implementation of RKSK programme.

The program focuses on adolescents belongs to age groups 10-14 years and 15-19 years with universal coverage, i.e. males and females; urban and rural; in school and out of school; married and unmarried; and vulnerable and under-served.

2.6 Integrated Patient Transport & Health Helpline Services

The ambulance services are accessible with a single toll free number “108” and Health Helpline with single toll free number “104”. All services are being managed through the existing centralized call center facility at 7th Floor, IDCO tower, Bhubaneswar.

A. Emergency Medical Ambulance Service (EMAS: 108)

Ambulances):

The fleet size of EMAS ambulances stands now at **624** (512 BLS +112 ALS) and that have been augmented in a phased manner. More than 38 lakh patients have been benefited by this service.

- Average response time of EMAS ambulances is 28 Minutes (Target-30 Min)
- Total 5,66,847 patients have availed the EMAS Ambulance Services during the year 2021-22 (up to December 2021)



B. Boat Ambulance Service

- As of now, 6 Boat Ambulances have been operationalized in 4 districts of the state (Kendrapada: 2, Koraput: 1, Malkangiri:2 & Kalahandi:1) since 26th February 2019 in phases. More than 350 patients have been transported by these Boat ambulances during Emergency situations.



C. Referral Transport Ambulance Service (108-Janani Express)

Under Referral Transport Ambulance Service , a fleet of **500 Janani Express** were made operational in order to provide free referral transport services to all pregnant women and sick infants seeking health care services at government health facilities. More than **34 lakh beneficiaries** have been benefited so far through this referral transport service system.

- Average response time of Referral transport ambulances is **29.11 Minutes** (Target-35 Min).
- Total 3,84,802 cases have availed these Referral transport Ambulance Services during the year of 2021-22 (up to December 2021).

D. 104 Health Helpline

- Initially, 104 Health Helpline with 10 seats was launched on 13th October 2015, **for making outgoing calls** for following-up with the sample beneficiaries who were registered under RCH by calling the high risk pregnant women on monthly basis and to those defaulters of services .

- Subsequently the **incoming call facility** was introduced to give advice and counselling support to the people on RMNCHA+ & related health schemes that are being implemented in the State. Also, the health advices, facility related information pertaining to hospitals, Blood Bank, Pharmacies, Diagnostic services etc. are being covered under this system. As of now, about 25 lakh calls have been received by 104 Health Helpline and about 10 lakh calls have been received during the Year of 2021-22 (Till Dec, 2021) .
- Early Childhood Development programme is being implemented by utilizing 8 Seats (for 6 Counsellors and 2 for Medical Consultants) of 104 Health Helpline
- Since the Covid-19 pandemic situation of March,2020, 104 Health Helpline has been functioning as the designated **State level Health Helpline for COVID-19** to address all public queries, grievances and to disseminate the required information and to provide counseling support services relating to the Covid-19 situation of the state.



Forward Plan: In accordance with the Govt. approval under **Emergency COVID Response Plan (ECRP)-Phase-II 2021-22**, the state has initiated the process for district wise up-gradation of 299 BLS ambulances as ALS ambulances under EMAS, for augmenting the referral capability of the service across the state .

2.7 Community Process (ASHA)

A. Positioning of ASHA

A total of 48,394 ASHAs are in place in the state (Target-49,037) to facilitate and promote health care service delivery at Rural & Urban community level.

B. Incentive Provision for ASHA:

ASHAs are paid performance-based incentive against the activities performed during a month. Incentive provisions has been made for 53 activities (14 assured activities and 39 activities under RMNCAH+N, DCP, NCD and others) during 2020-22. Provision has also been made for payment of Rs. 4500/- to all ASHA as minimum assured incentive per month.

Monthly assured incentive provision: As an effort to maximize and ensure a minimum assured amount, provision has been made for getting minimum assured incentive amounting to Rs. 4500/- per month by an ASHA (@ Rs. 3500/- towards performance against a set of 14 PIP approved activities and Rs.1000/- from state budget fund on conditional basis.



Welfare Schemes under ASHA Kalyan Yojana:

- Compensation for death and permanent disability:** Provision has been made for payment of financial compensation upto Rs.1 lakh in case death and permanent disability of a serving ASHA under ASHA Kalyan Yojana. During 2020-21, compensation towards death of ASHA @ Rs.1 lakh has been paid for 65 cases during 2020-21 and 58 cases by December, 2021.
- Exit Policy:** ASHA exiting from the health system on attainment of 62 years of age or voluntarily leaving the position after serving a minimum of 10 years as ASHA, is entitled to get lumpsum honorarium of Rs.20,000/-. A total of 46 ASHAs have been benefited under exit policy during 2020-21 and 42 cases by end of December, 2020.

iii) **Maternity Benefit for ASHA:** In order to have a proper care during delivery and child birth of ASHA, provision has been made to give an amount of Rs. 1000/- per month, for a maximum period of six months i.e. from the 3rd trimester of pregnancy to her child attaining 3 months of age. One ASHA is entitled to get the benefit up to two children. As a part of the initiative under ASHA Kalyan yojana a total of 28 ASHAs have been benefited under maternity benefit scheme during 2020-21 and 24 ASHAs by end of December, 2021.



iv) **Enrollment under PMJJBY & PMSBY:** In order to avail the benefit of insurance coverage upto two lakhs for death and disability provision has been made to enroll all eligible ASHAs under social security schemes like Pradhan Mantri Jiban Jyoti Bima Yojana (PMJJBY) and Pradhan Mantri Surakhya Bima Yojana (PMSBY). A total of 33271 and 39456 ASHAs have been enrolled under PMJJBY & PMSBY respectively by the end December, 2021.

D. Other support provisions for ASHA:

- i) **ASHA Gruha:** 142 ASHA Gruhas are functioning in major health institutions as a help desk for ASHAs and to provide stay at institutions while they accompany pregnant women for delivery.
- ii) ASHA who fulfill the eligibility criteria for admission into ANM/GNM is being given 2% extra marks for each completed year of service as ASHA, subject to a maximum of 20% additional marks. A total of 17 ASHAs have got the opportunity to take admission in ANM course.
- iii) For selection of ANM, additional weightage of 1% mark for each year of service for eligible ASHAs is being given, subject to a ceiling of 15% additional marks in the ANM recruitment process. After completion of the course a total of 9 ASHAs have been selected as ANM.
- iv) **ASHA Uniform:** ASHAs are paid an amount of Rs. 1000/- every year towards provision of uniform.
- v) **CUG SIM Card:** ASHAs have been provided free CUG SIM Card for better connectivity and sharing of information.
- vi) **Mobile allowance @ Rs. 250/- per month** (From April, 2021 onwards) given to ASHAs..
- vii) ASHAs are paid travel allowance @ Rs. 100/- per month (From April, 2021 onwards) in order to meet her travel expenses which she spends for visiting to health facilities and other places for various purposes.
- viii) **Diary and ID card:** Diary is being provided to all ASHAs on annual basis to record their daily activity performance. Similarly, Identity Card is provided to all ASHAs as a proof of their identity.
- ix) **Drug Kit:** ASHAs have been provided Drug Kit (with items like Paracetamol, ORS, Zinc, drugs for malaria and contraceptives) and Home Based Newborn Care Kit (with equipment like weighing scale, digital thermometer and digital watch) have been provided to all ASHAs.

E. Contribution of ASHAs during COVID-19:

As a front-line worker of the health team ASHAs are actively involved in undertaking several COVID related public health activities such as sensitizing community through home visits, health promotion, community surveillance and contact tracing, monitoring home quarantine, facilitating access to diagnostic tests, treatment along with COVID-19 vaccination and follow-up support etc. Besides, they are also ensuring and enabling the delivery of all non-COVID-19 essential health services for all age groups in their respective areas. In order to compensate the contribution and dedication of ASHAs in prevention and management of COVID-19, they have been provided special incentive as per the following provisions.

- a) **Special COVID Incentive** (1st phase - 2020-21): Special COVID incentive @ Rs. 1000/- per month has been paid to ASHAs from March to October, 2020 for their active involvement in creating awareness and management of COVID-19 related activities at community level.
- b) **Special COVID Incentive** (2nd phase - 2021-22): In the 2nd phase special Covid incentive @ Rs. 1000/- per month has been paid to ASHAs for six months i.e. from April to September, 2021 towards accomplishing additional activities related to prevention and management of COVID-19.
- c) **Provision of one-time assistance** (From State budget): In order to meet the various need of ASHAs, an amount of Rs. 10,000/- has been provided to all ASHAs of the state during the year 2021-22 as one-time assistance to enable them to undertake various activities for effective management of COVID and facilitating non-COVID essential healthcare services at community level.

F. Certification Programme for ASHA: ASHA certification programme is intended to enhance the competency and professional credibility of ASHAs and allow them to use a set of drugs. A total of 2517 ASHAs in 6 districts like Boudh, Bolangir, Cuttack, Kalahandi, Sonepur&Sundargarh have been enrolled under certification course by December, 2021.



G. Reward & recognition to ASHA: ASHA convention is organized every year in all districts of the state. On the occasion of convention, 1032 ASHAs awarded at block and district level for their better performance at community level during 2020-21.

2.8 Gaon Kalyan Samiti (GKS)

At present near about 46000 GKS are functional in the State involving the community members for improvement of health, nutrition and sanitation situation of the village

Community level initiatives using untied fund:

Annual untied fund of Rs.10000/- is being placed to each GKS in order to undertake various need based activities based Village Health Plan in a consultative manner at the community level The GKS untied expenditure is 101 % during the year 2020-21 and total expenditure occurred 80% by December, 2021.



Contributions in prevention and management of Covid:

Gaon Kalyan Samiti has played an exemplary role for the prevention and management of Covid at the community level. 38358no. of GKS undertaken miking to create awareness among the community for covid management, undertaken poster campaign in 31125 villages, 6108987 no. of leaflets are distributed among the people. Again, 34766 no. of GKS have conducted wall painting of messages on appropriate behaviour related to covid, 44707 no. of GKS organized demonstration session on hand washing etc. at the village level. Further, 3929126 no. of masks and 2206905 no. of soap were distributed among the community and 77298 no. of eligible person are provided mobility support for vaccination, 55118 person are provided mobility support for covid testing and 8140 covid positive cases are provided mobility support for treatment by GKS. To maintain cleanliness in the villages, 218125 no. of sanitation drive are conducted by the GKS and also 182160 no. of household are sanitized as part of campaign. GKS also take a lead role to



create awareness for maintaining social distancing and avoid organizing social function etc. as part of COVID management.

Additional fund to GKS under CMRF for management of 2nd wave covid:

During 2nd wave of covid in order to undertake various COVID related activities at the village level, additional fund of Rs.5000/- is placed to each GKS under Chief Minister Relief Fund (CMRF).

VISHWAS initiative to promote healthy behavior among people:

VISHWAS- is an 11 monthly initiative implemented across the State to promote health, water, sanitation and nutritional condition of the local community through demonstration, rally, sensitization meeting, wall painting of the messages and award provision etc. at the village level. Total 72272 GKS members are trained under the capacity building programme by December, 2021 during the year 20-21 to undertake the programme.

Awareness generation through Swasthya Kantha: Swasthya Kantha -. GKS has created a scope for wide publicity of health related service delivery system at the community level through writing of messages in Swasthya Kantha of GKS. Near about 45000 Swasthya Kantha is prepared at the prominent place of the village by the GKS.

Integration with PR system for better inter-sectoral convergence:

To develop better inter-sectoral convergence of health related activity with PR system, quarterly GP level meeting of health system is being organized under the chairpersonship of GP Sarpanch

Promoting healthy living:

GKS actively involved to organize various health check up camps for screening on TB, Malaria, eye and other geriatric health hazard etc in various parts of Odisha. GKS also actively involved to change the health scenario over the past few years i.e. promote institutional delivery improve in coverage of immunization & reduction in IMR & MMR through regular meeting, tackle on Malaria through LLIN distribution, control over Dengue Diarrhoea GKS also promote wellness activity at the village level through promoting Yoga etc.



2.9 NGO Collaboration Projects

PHC (N) Projects

Presently 38 PHC (N) management projects are operational in 16 districts. These PHC(N)s have shown remarkable improvement in major indicators like OPD, IPD, Institutional delivery and Laboratory test since they have taken over for management. Out of such 38 PHC (N)s, 35 PHC(N)s are Functional Delivery Points.

Achievement:

- Avg. 45 nos. per day per institution General OPD in the State.
- Avg. 20 nos. per day per institution Ayush OPD in the State.
- Avg. 12 institutional delivery per month.
- Avg.27 nos. per day per institution Lab test in the State.
- JAS: Functional in all PHC (N)s.



Sl No	Name of the NGO Projects	Nos. of operational projects	Nos. operational Districts	Annual project cost
1	PHC(N) Management	38(Target-42)	16	Rs. 25.52 lakhs

Sl No	Name of the NGO Projects	Nos. of operational projects	Nos. operational Districts	Annual project cost
2	Maternity Waiting Home (Maa Gruha)	93 (Target-91)	16	Rs. 14.28 lakhs
3	Arogya Plus (out of State budget)	21 (Target-22)	8	Rs. 18.49 lakhs

Arogya Plus (MHU):

Arogya Plus is a strategically intervention for delivery of public health services at the door step of the marginalized sections of the society residing inaccessible and difficult areas through NGO partnership. Total 21 Arogya plus projects in 8 districts are operational. The project is being operationalised out of the State budget. The project is covering selective 3/5 GPs in a block having inaccessible and difficult to reach areas.

Achievements:

- Total **7173** tagged villages have been covered during the period April' 21 to Jan'22.
- **3865** positive malaria cases diagnosed positive & given treatment.
- **6144** cataract cases identified and referred.
- **4542** no. of cases mobilized for male & female Sterilization (in no.)
- **4277** nos. of CC & OP distributed (nos. of cycles)
- **3809** nos. of cases facilitated for registration at HWF within 3 months of pregnancy.
- **958** immunization session organized
- **1152** nos. of delivery cases transported through vehicle to nearby institutions
- **38842** Health education sessions conducted in villages & schools.
- **225069** nos. of ORS distributed.

2.10 Mainstreaming of AYUSH

Contractual Ayush Doctor have been sanctioned in 314 CHC and 1162 PHC(N). Unani Stream is available in 3 DHH,CHC and PHC.

Services rendered by Ayush Doctors during COVID-19

Ayush Medical officer are rendering Clinical & Public Health Services to the community in PHC/CHC /HWCs. They also play managerial role in certain PHC where allopathic doctor position is vacant. During the 2nd & 3rd phase COVID-19 Pandemic their services are most commended.

Training of Ayush Doctors

Various types of training programme are being imparted to AYUSH Medical officers to upgrade their knowledge & skill during 2021-22.

- 6 days Induction training of AMO/HMO at State level
- 6 days Clinical Skill Development Training for Ayush Doctors working in Co-located units under NHM.
- Under Management Development Program, Ayush official Visited Shillong to gain knowledge & expertise.

2.11 Hospital Development activities

Quality Assurance

For improvement of overall quality of health care services in Public health facilities, sincere efforts were made to develop public health facilities for certification under National Quality Assurance Standards (NQAS) and LaQshya certification for quality of care at Labour room and OT. In addition, efforts were made to promote and sustain

Swachhata in public health facilities through Annual Kayakalpa Award for all categories of public health facilities and effective implementation of Nirmal– Strengthening of Ancillary services in Public health Facilities to ensure cleanliness of all public health facilities. In addition, under the Swachha Swastha Sarvatra scheme, @ Rs. 10 lakhs have allocated to one CHC of the 314 Open Defecation Free (ODF) Block to address critical gaps to achieve kayakalpa award.

National Quality Assurance Standard:

- **NQAS Certification:** In the Year 2021-22, total 241 Hospitals (DHHs -13, SDHs - 7, FRU CHC-3, Non FRU CHCs-44, PHCs-124 & UPHCs-50) are targeted for NQAS certification.

Current Status: One DHH, 4 CHCs, 7 UPHCs were NQAS certified. (DHH Kalahandi, CHC Ghatagaon- keonjhar, CHC Mandasahi-Jagatsinghpur, UPHC Ambapua, Ganjam, UPHC Agasahi, Ganjam, UPHC Askaroad, Ganjam, UPHC Khodasingi, Ganjam, UPHC Bhawanipatna, UPHC Unit-3, Bhubaneswar, CHC Harichandanpur, Keonjhar CHC Bhandra, Keonjhar, UPHC Uttarmukhi, Ganjam).



Laqshya: State has implemented National Quality Improvement Program for Intrapartum care delivered in Labour Room and Maternity OT.

- 12 DHH, 1 MCH, 1 CHC LaQshya certified (DHH Dhenkanal, Rayagada, Kandhamal, Gajapati, Malkangiri, Kalahandi, Jajpur, Nabarangpur, Capital Hospital, BBSR, BBMCH Bolangir, DHH Cuttack, Jagatsinghpur, Nayagarh and CHC Ghatagaon).

Kayakalp: : To promote cleanliness, hygiene promotion and Infection Control Practices in public Health Care Facilities and to create a sustainable practices Kayakalp Award was given to best performing Public Health facilities

In the year 2021-22, all the DHH, SDH/CHC, PHC & UPHC were taken up for the Kayakalp award programme.

Total 23 DHH, 16 SDH, 127 CHC, 1 UCHC, 286 PHC and 80 UPHC qualified for the Kayakalp award.

2.12 National Urban Health Mission (NUHM)

1. **Coverage:** National Urban Health Mission (NUHM) was launched in the State on 23rd February 2014 & it covers 47 ULB Cities/towns, out of the total 114 ULBs in the state. During this year(2022-22) 11 new ULB towns are included under NUHM to provide health services to urban population in general as well urban poor in the State. During 2014-2021, 102 nos of new Urban PHCs and 07 Urban Community Health Centres are functional in the State.

2. Health Infrastructure

- a) 102 UPHC are functional out of 106 UPHC approval
- b) Construction of New building in 58 Urban PHC is completed.

	Urban primary Health Centres (U-PHC)	State	
		Approved	Functional
i.	Total No. of UPHCs	106	102
ii.	No. of UPHCs new construction	66	58
Urban Community Health Centres (U-CHCs)		Approved	Functional
i.	Total No. of UCHCs	7	7

ii.	No. of UCHCs new construction	4	4
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3. Urban PHC-Health & Wellness Centre

Year	Target	Achievement
2021-22	106	102

Under the UPHC-HWC, 12 services are being provided.

4. Human resources

- All personnel are in position at SPMU, DPMU and CPMU.
- 328 ANMs, 183 Staff nurses, 86 LTs, 54 pharmacists, 93 Data Assistant-cum-Accountants and 18 Public Health Managers are in position under NUHM in different districts/cities.

5. Major Services

	State	
	Target	Achieved
UMHU Operational	9	9
Specialist Services under AMA clinic	106 UPHC + 7 UCHC	102 UPHCs + 7 UCHCs
PMSMA Services	106 UPHC + 7 UCHC	102 UPHCs + 7 UCHCs

Ama Clinic : The Specialist Clinic, an innovation by Govt. of Odisha is being implemented since December 2017. 10 types of specialist services are (Paediatric, O&G, Medicine, Psychiatric, ENT, Skin & VD, Ophthalmology, Dental, Nutrition, Physiotherapy) provided at Urban PHC/CHC level.

6. OPD Status :During 2021-22(till Nov'21) 2472490 OPD cases were reported in Urban Govt. health facilities.

7. Quality Intervention

Intervention	Achievement
NQAS	6
Kayakalpa (2020-21)	80
ISO – UPHC	66
ISO – UCHC	5

- Community process :** 1934 ASHA are in position in the slums of 47 cites/towns and incentives are being paid regularly. 3324 MAS are formed and annual untied grant of Rs.5000/- per annum being provided to create awareness, cleanliness drive, observance of important days etc. MAS has been playing very important role in the slums to increase institutional delivery, immunization coverage, covid vaccination, vulnerability mapping etc. They are maintaining an integrated register for reporting, accounts maintenance, recording of processing. MAS Calendar is provided to all MAS members. Grading of MAS being conducted since 2018-19. 1097 Ward Kalyan Samiti are being formed in all Ward and 102 Rogi Kalyan Samiti/Jan Kalyan Samiti have been formed in health institutions.
- Outreach :** Special outreach camps with above 75% achievement and UHND sessions with more than 96% achievement are being organized in urban areas. Health screening camps are being organized twice in a year for the Sanitary workers in 47 cities
- Training:** Ten training modules have been developed for the training of Medical Officer, ANM, Staff Nurse, ULB representative, PMU staff, MAS members, WKS member and RKS members. Compendium of Program and financial guidelines under NUHM published. IEC folders have been printed and distributed.

2.13. Training under NHM

Major Achievements as of Dec'21:

- 1318 BEmONC trained MBBS doctors are providing 'Basic Emergency Obstetric and Neonatal Care' at CHC and AB-HWC.
- 13386 SNs & ANMs are trained in SAB training and providing quality services 24x7 at FRUs, CHCs and AB-HWCs .
- 165 MBBS doctors are trained in LSAS and 53 MBBS doctors are trained in EmONC/CS training and providing CS services at FRUs
- 345 MBBS doctors and 244 LTs are trained in BSU management training and managing BSU at FRUs.
- 1785 MBBS doctors and 6864 SN& ANM are trained in NSSK training and providing quality neonatal care at labour room.
- 1677 MBBS and SN are trained in FIMNCI training and providing 24x7 services at SNCU.
- 55doctors and 108 SNs & Pharmacist are trained in 3 months ICU care and providing quality ICU services at DHH.
- 14529 School teachers are trained as 'Health Wellness Ambassador' in 10 districts under School Health Programme.
- 1922 MBBS & AYUSH doctors are trained on HWC & NCD training. All trained doctors are providing NCD services at AB-HWCs
- 263 CHOs are trained in 'Expanded Package of Services (EPS)' under AB-HWC.
- 45383 ASHAs, 11424 HW (F&M) & 48 executives of 104 centre are trained on COVID-19 to create social awareness and to minimize social superstitions.
- 3946 MPW (M&E) are trained on NCD & HWC to conduct Population based Screening at Community level under AB-HWC programme.
- 139 MBBS doctors & 124 SNs of Urban PHC-HWC are trained to provide 12 package of services in Urban HWC.

2.14 e-swasthya Activities

- **Odisha e-Hospital Management Information System (OeHMIS)** has been implemented in all 32 DHHs, SCB MCH, AHRCC and SISHUBHAWAN. The Portal is also integrated with MoSarkar Platform where the Patient demographic data along with phone nos are shared. (eswasthya.odisha.gov.in)
- **e-Blood Bank-** This web based MIS system provides instant stock position of blood units through website and mobile App and also integrated with e-raktkosh of GoI. A total of 82 blood banks across the state has been linked to the system and the data of around 4.0 lakhs units of bloods are being processed every year. (<http://ebloodbankodisha.nic.in>).
- **e-Niramaya Software :Real time monitoring of all aspects of the scheme, to avoid dislocation in indenting, procurement, Quality assurance, payment & distribution:**
- **RCH Portal/ANMOL:** To monitor the provisioning of Maternal and Child care services RCH portal has been implemented in all districts since 2016.ANMs trained in ANMOL are updating the services in the application using tablets provided to them by the State.
- **NCD App application** is also loaded in the ANM tablet for recording the enrollment and screening details by ANMs.
- **Health Management Information System (HMIS):** A web based system for capturing facility Service delivery data on monthly basis is being done in newly introduced IHIP portal since April 2020 onwards. Data is being captured from across 8527 Public institutions (MCH upto SCs level) and more than 400 Private health facilities.
- **Automation of DC Administration-** a web based system for management of retail, whole seller and manufacturer licenses through online along with enforcement process automation. (www.dcodishaonline.nic.in)

- **Integrated HRIS-** It is designed to provide an integrated platform for employees (Regular+ Contractual), their pay slip, appointment and transfers and performance appraisal. (www.odishahrh.nic.in).
- **GKS Monitoring System-** . In order to track the physical and financial activities of each GKS, this online system has been developed to capture the information at a periodic interval. (<http://gks.nhmodisha.in>)

2.15. Other key Initiatives

- **Nidaan Scheme:** Free Diagnostic Services at identified Public Health Facilities both through own system and PPP mode implemented. 1.5 cr. Tests done .
- **Sahay Scheme:** Free dialysis services provided to all patients at 29 identified Public Health Facilities both through own system and PPP mode. 1.54 Lakhs got Free Dialysis sessions from April'21 to January 2022.
- **SAMMPurNA Scheme:** Under NHM, besides Emergency Medical Ambulance Service (108/102), provision has been made for reimbursement of transportation cost @ Rs. 1,000/- per pregnant woman for institutional delivery in 7853 notified difficult villages targeting to benefit more than 60,000 pregnant women.
- **Cancer Care-cum-Chemo Units at DHH:** Cancer Chemotherapy is being started with 6-bedded Day Care Chemotherapy units in order to ensure cancer care services at 25 District Headquarter Hospitals including Cancer Chemotherapy and Palliative Care.
- **Sunetra:** Vision centres equipped with appropriate eye-care facilities and trained manpower established across the State in govt. facilities.
- More than **21,819** new Tuberculosis Patients received Cash incentive under Nikshay Poshan Yojana through DBT.
- Annually more than 10 lakhs slum populations are getting range of specialist healthcare services at doorstep through Ama Clinic – Specialist Services in Urban PHCs/CHCs.
- **Khusi:** Scheme for providing free sanitary napkins to school girls from Class 6 to 12 in all the government and government-aided schools in the state.
- Continued screening of 30+ year's population for Non Communicable Diseases (NCDs). More than 29.53 Lakh 30 + years population screened for NCD from April to December 2021.
- Ensured effective implementation of Cash Incentives @500/- per month for 20078 Blood Disorder Patients for continuing treatment till December, 2021.

CHAPTER 3

Directorate of Health Services

In three-tier system of administration (I. Administrative Deptt , II. Heads of Deptt & III. District Offices and Subordinate Offices there to), Heads of Deptt plays a key role between the Administrative Deptt of Govt. and District Offices and Subordinate Offices thereto. Director of Health Services, Orissa being the Heads of Deptt under the administrative control of Health & F.W. Deptt of Government of Orissa occupies a distinct position with following major activities.

Major Activities

1. Human Resource in Health & Research Human Resource

Various steps have been taken up for augmentation of Human Resources in Odisha which includes not only creation of new posts or increasing seats in medical colleges, but also appointment/engagement of regular / contractual doctors and measures for retaining them as well.

• Recruitment of Medical Officers

- Recruitment of Medical Officers is being done on regular basis through Odisha Public Service Commission (OPSC). A special drive for SC/ST candidate was under taken and 81 candidates were recommended by OPSC for posting. Requisition has been placed with OPSC for recruitment of 1871 no. of Medical Officers of all categories which is under process.
- Recruitment of 82 no, of Dental Surgeon is in process through OPSC.
- Engagement of contractual doctors through walk-in-interview is being done every month on regular basis both at district and state level for selection and posting of MBBS and Specialist doctors.

• Reforms undertaken to attract and retain doctors

- Restructuring of Odisha Medical & Health Services Cadre (OMHS) has been done during 2016-17 with creation of 1330 new posts of doctors as per Indian Public Health Standard (IPHS) norms and requirement of the state there by increasing the total number of posts of doctors to 6719. In each CHC, 4 posts of specialists, one each in O&G, Paediatrics, Medicine and Surgery, have been created. The number of posts in Pay Band-IV has been increased from 35 to 433 thereby, increasing the promotional avenues.
- Place based incentives (PBI) is given to the Medical Officers working in different difficult / remote areas in the state as per vulnerability status of the places taking into consideration certain key parameters such as difficult and backwardness of the location, tribal dominance, left wing extremism, train communication, road and transport facilities, social infrastructure and distance from state head quarter etc. All the 1751 peripheral Government Health Institutions of the State have been classified into five different categories and declared as V-0 to V-4. This incentive is applicable to contractual, ad-hoc and regular doctors. For example General (MBBS) doctors working in V4 CHCs and PHCs get Rs 40,000/- as incentive whereas a specialist working in V4 CHC gets Rs 80000/- as incentive. In the state there are 100 health institutions which are categorized as V-4 and 137 health institutions categorized as V-3.
- Doctors working in V1 to V4 institutions are entitled for additional mark in PG entrance examination. As a result, young doctors are interested to join remote and inaccessible areas to get additional marks for selection for PG courses.

- Incentives for Specialists have been provisioned for motivating Specialist doctors of Odisha Medical & Health Services (OMHS) cadre.
 - Incentive for Doctors with Super Specialization: Rs.30,000/-
 - Incentive for Doctors with Post-graduation: Rs.20,000/-
 - Incentive for Doctors with Post-graduate Diploma: Rs.10,000 /-
- To create more specialist doctors in the state, MoU has been signed with College of Physicians and Surgeons of Mumbai (CPS) for starting Post Graduate Diploma courses in the state. So far 100 enrollments have been done in 3 different batches since year 2019. The first batch students have successfully completed their 2 years course in the month of May, 2021 & they have now rendered their service in different Government Health Institutions. 2nd & 3rd batch of the students are now continuing their courses in different identified institutions.
- Bond has been introduced for the doctors who are doing post graduation. After completion of post graduation, they need to serve for two years under state govt.
- Corpus fund has been created in KBK and KBK plus districts for optimal utilization of human resources in inaccessible areas of these districts. This fund is being utilized for filling up the gaps in the districts for human resources. Doctors and Specialists are engaged on negotiable remuneration under this scheme.
- Doctors and Specialists are also engaged under District Mineral Foundation (DMF) Fund with negotiable remuneration. A total of 55 no. of doctors are working under DMF fund as on date.
- The remuneration of contractual doctors have been enhanced to 55,000/- for MBBS doctors and 60,000/- for Specialists with a hike of 3 % in every year on satisfactory completion of one year of contractual service w.e.f. 01.07.2018.
- **Recruitment & career path for various posts.**
 - Regular monitoring for filling up of vacancies of paramedics at district level.
 - About 1000 doctors have been promoted under DACP scheme.
 - Under the Vision 2020 of National Programme for Control of Blindness (NPCB) the training courses for Ophthalmic Asst has been resumed.
 - A comprehensive cadre rule of Ophthalmic Asst is prepared and submitted to government for approval.
- **Pharmacist:** Recruitment of 600 of newly created posts has been made and selection list of 473 candidates recruited by OSSSC has been published. The newly recruited Pharmacists have already joined. In order to overcome the difficulties experienced in absence of doctors in many of the single doctor hospitals which are managed by Pharmacists, Govt. have allowed the Pharmacists to dispense some drugs for ailments for treatment of the patient.
- **Laboratory Technician:** Recruitment of 1000 of newly created posts is under process. The Cadre Rule of Laboratory Technicians has been amended and another promotional hierarchy has been added to the cadre namely Technical Supervisor. The BMLT qualified candidates having basic qualification of DMLT are entitled for applying for the post of Laboratory Technician. Six posts of Technical Supervisor has been created at Blood Bank, Capital Hospital, Bhubaneswar, Blood Bank, DHH, Angul, Blood Bank, Municipal Hospital, Bhubaneswar, SCBMCH, Cuttack, MKCGMCH, Berhampur, VSSMCH, Burla. The promotion to the post of Technical Supervisor has also been made.
- **Radiographer:** Recruitment of 200 of newly created posts has been made and selection list of 99 candidates recruited by OSSSC has been published. The newly recruited Radiographers have already joined. ECG Technician & Ophthalmic Asst: The formation for cadre rules for ECG Technician and Ophthalmic Asst is under way.

- **Research:** Research & Ethical Committee has been constituted to examine different Research proposal and to encourage various professional, individuals to submit research proposal for benefit of the State. In 2020-21 a total of 54 no of proposals were received out of which 51 proposals were approved by Research & Ethical Committee.

2. State Drug Management Unit

The SDMU(O) mainly deals with Compilation & rationalization of requirements for instruments, equipments & furniture (EIF) and Drugs, Medical Consumables, Surgical & Sutures from the districts and medical colleges. The Essential Drug List (EDL 6th edition) has been updated and revised in consultation with all specialists of Medical Colleges and peripheral health institutions containing 496 molecules & 750 dosage forms. The Essential Drug List (EDL 7th edition) has already been published. Process is already initiated to prepare Essential Drug List for Super Specialty Drugs and EDL (8th edition). **Standard Treatment Guidelines (STG-2018)** have already been published & distributed to all prescribing doctors of the State. In addition **Prescription Audit is being done** to investigate the drug-use & to avoid irrational use of drugs in the health facilities.

3. OeHMIS

The aim is to streamline the treatment flow of patients, simultaneously empowering the workforce to perform to their peak ability, in an optimized and efficient manner. OeHMIS customizes the process of collecting clinical data according to each department, laboratory etc. and ease workload on doctors and other medical staffs for fast & reliable information storage, querying and retrieval and access to help managing resources, costs and margins. Odisha Government has decided to replicate OeHMIS in all health facilities of Odisha state and is going forward with a 5-year service agreement with CDAC for implementing the same effectively. Odisha Govt. has already approved the EFC for 5 years for smooth execution of the project. Odisha Govt. has already issued the letter to IDCOL for providing the 8 Nos of Informatic Assistant to each DHHs.

Present Status

i. SCB MCH

- OP Online Registration Live at Ophthalmology, Cardiology,
- OP Offline Registration Live at Orthopedic, Skin & VD, Casualty, Pulmonary Medicine, ARV, Immu Clinic, Surgery & Pediatrics & Dental, Gynecology, & Bio-Chemistry Departments.
- Biochemistry Department Laboratory is Live, with Sample Collection, Result Entry, Report Distribution processes
- Go-Live of SMS facility in Investigation Module of OeHMIS application completed.
- OeHMIS is Integrated with eNiramaya Pharmacy Counters completed.
- Emergency Registration live at Casualty & Nontrauma Department.
- ADT Live at Ophthalmology.

ii. Capital Hospital

- Patient Registration, Emergency Registration, ADT, Billing, Investigation – All Departments
- OP Doctor Desk – ENT, Medicine

iii. AHRCC

- Patient Registration, Emergency Registration, ADT – All Departments

iv. SVPPGIP

- Patient Registration, Emergency Registration, ADT – All Departments

v. District Headquarter Hospitals

- OPD & Emergency Registration module in all 32 DHHs (30 districts + RGH Rourkela + Capital Hospital)
- ADT Module Functional in 14 DHHs & Service area started in 1 DHH
- Contact Numbers of patients being collected through the OPD Registration Module of OeHMIS are being successfully transferred to the Mo Sarkar Portal.

4. Planning & Infrastructure Development

Planning & Infrastructure development section functions as a key section of DHS, to provide new health infrastructure to the state and also maintaining, upgrading the existing one. During the current financial year 2020-21 large number of infrastructural activity is also going on under “**MO SARKAR**” umbrella **Achievement.**

- i) Under MO SARKAR initiative construction work of Attendant rest sheds, Govt. accommodation of health service providers in the state are going on.
- ii) Approval of 5 (Five) Nos. of new DHH equipped with fully modernized instruments at Boudh, Deogarh, Koraput(Jeypore), Bhadrak&Sonepur and the construction activity has already started.
- iii) Extension of existing building of 7 DHH has also started.
- iv) Initiation of 100 bedded Trauma Centre in DHH Angul, Nayagarh, Kalahandi & Post Graduate Department in Capital Hospital, Bhubaneswar.
- v) Action initiated for construction of 300 bedded new DHH, Puri.
- vi) Under the CSR activity a modular OT in Capital Hospital & up gradation of CHC Niali, Cuttack are under process in support of Air Port Authority of India.
- vii) Modernization of Combined Health Directorate building is going on.
- viii) Maintenance work in all the Districts is going on. More upcoming Projects are now on process.

CHAPTER 4

Directorate of Public Health

4.1 National Vector Borne Disease Control Programme (NVBDCP)

National Vector Borne Disease Control Programme addresses six vector borne diseases (VBDs) that cause major public health concern in the states and country. Out of the six vector Borne diseases, five diseases are prevalent in Odisha. For **Lymphatic Filariasis** and **Malaria**, there is global as well as national call for elimination by 2030. Further, there is priority for prevention, control and management of arboviral diseases like **Dengue**, **Chikungunya** and **Japanese Encephalitis (JE)**. Kala-azar is not yet reported in the state. Except Filariasis, all other diseases are outbreak prone and need continuous surveillance and constant monitoring for identification of early warning signals to prevent outbreaks. Further, there should be efficient management system to control and contain the disease transmission, preventing them to cause public health nuisances.

Understanding the importance of this National urgency and keeping in view the current disease burden of the State, Vector Borne Disease Control Programme, Odisha has prioritized its activities.

Situational analysis:

Malaria

Malaria continues to be a major public health problem in the State. Given below is the malaria epidemiological scenario of the State for last six years.

Year	BSE	+ve	PF	Death	ABER	TPR	Pf%	API
2016	7201271	444842	384668	77	16.29	6.18	86.47	10.06
2017	6648889	347860	293718	24	14.84	5.23	84.44	7.76
2018	6157502	66311	54042	3	13.76	1.08	81.50	1.48
2019	6552293	39556	35772	9	14.50	0.60	90.43	0.88
2020	5998664	41739	38140	9	13.15	0.70	91.38	0.92
2021	6875913	25525	22618	13	15.07	0.37	88.61	0.56

The state has reported 25525 cases in 2021 which shows 38.5% decline over that of 2020 and 94% decline of cases, compared to the cases of 2016 which is observed to be the highest no. of cases reported in a year. Some of the notable and significant achievements of the State in 2021 can be highlighted as follows:

- State TPR (Test Positivity Rate) has come down to 0.37 in 2021 from 0.70 in 2020 and 6.18 from 2016
- API of Odisha has come down to 0.56 which is all time low in the state during last several decades
- All 30 districts have come down to API<10; Except Malkangiri (API 7.65), all 29 districts come under API <5
- **26 Districts are with API<2; 24 districts are with API <1; 13 districts are under ≤0.1.**

The above substantial decline is majorly attributed to the large scale distribution of LLIN, enhanced use of LLIN in community; follow up mass screening activity in inaccessible areas under State specific DAMaN programme, intricately working community process, intensive monitoring & supervision and large scale community mobilization. Basing on malaria epidemiological data of 2021 of the State and as per the definitions laid down in the **National Framework for Malaria Elimination** and **National Strategic Plan** of Govt. of India, 20 districts are coming under category 1, 4 districts are under category 2 and 6 districts are coming under category 3. This may be noted that the districts under category 1 & 2 are nearer to elimination and are under pre-elimination drive. Eight coastal districts

(Kendrapada, Jagatsinghpur, Bhadrak, Balasore, Khordha, Puri, Cuttack and Jajpur) are being pursued in the drive of malaria elimination.

Control Strategies undertaken:

1. Early Diagnosis and Complete Treatment (EDCT):

ASHAs and community volunteers are acting as Fever Treatment Depot (FTD) holders and doing malaria diagnosis at village level by using Rapid Diagnostic Test (RDT) kits and providing treatment with Anti-malaria drugs i.e. Artemisinin Combination Therapy (ACT), Chloroquine and Primaquine. > 48000 ASHAs, HWs, > 1000 Community volunteers (Alternate FTDs) are trained and involved in malaria diagnosis and treatment at the community level along with drugs and logistics

2. Integrated Vector Management (IVM):

Long Lasting Insecticidal Nets (LLIN): The entire community who are under malaria burden (SC areas with API>1) have been covered and protected with LLIN from the supplies of Govt. of India under GFATM support (1.13 Crores of LLIN whose distribution completed in 2021) and DBS support (44.28 lakhs of LLIN distributed in 2020). IRS is done in selectively most high burden areas to protect the most vulnerable population from malaria

3. IEC, BCC, Social Mobilization & Public Private Partnership

Following activities have been conducted:

Observance of World Malaria day on 25th April and National Dengue Day on 16th May. Further, Anti Malaria month was observed in the month of June and Anti Dengue Month campaign was done in July. 30 days mass media campaign was conducted using both Electronics and print media. Sensitization programme conducted for Para medical staff in all blocks. Sensitization of community volunteers and GKS members has been done in more than 1700 sub-centers. Further, more than 2700 number of village contact drive have been conducted in the remote and inaccessible villages/hamlets under DAMaN. Special community mobilization & IEC-BCC Campaign (major activities: village meeting by ASHA, miking through megaphones & Folk Theatre at village level) have been conducted in LLIN covered districts to sustain regular use of LLIN with proper maintenance.

4. Training:

Staff personnel have been trained and re-trained in 2021. 28 Nos of SSMTCs have taken refresher training in two batches and 9 SSMTCs of JE sentinel site Laboratories have taken one day refresher training at AIIMS, Bhubaneswar. 56 Nos of VBDSs have taken refresher training in two batches. Two batches of Induction training and two batches of refresher training has been conducted for LTs at ROH&FW Bhubaneswar. 27 Nos of FLAs have taken refresher training on Finance & Supply chain Management. 123 Nos MOs have been trained on Malaria & other VBDs. 13 Nos of Specialists (Med/Paed) doctors have been trained on Management of JE, Dengue & Chikungunya. Apart from this, more than 1450 ASHA have taken refresher training at district level & more than 750 MPHS s and 1500 MPWs have taken refresher training at District level.

5. Monitoring and Evaluation:

Monthly epidemiological data was analyzed thoroughly to identify the high case reporting CHC and SC areas and guidance was sent to districts on every month to help them for setting priorities for actions. Thus 12 M4 analysis reports have been sent to districts. Malaria positive Cases were followed up for ensuring treatment compliance through patient card. Periodical Reviews were conducted at various levels – district, state & National levels. Regular field tours were conducted to monitor the districts and sub-district level activities to bring improvement in their quality. Quality assurance of microscopy was ensured through crosschecking of malaria blood slides at reference laboratories of Govt. of Odisha and RoH & FW. Programme quality of high endemic Blocks were evaluated through Lot Quality Assurance Sampling (LQAS). Web-based reporting of malaria cases through IHIP are being done by districts

6. **Durgama Anchalare Malaria Nirakarana (DAMaN):** DAMaN has been implemented in 24 districts having remote and inaccessible villages/hamlets having high malaria burden and also villages/hamlets in accessible areas where incidence of Malaria is high. In 2021, a total number of 1874 no. of DAMaN camps conducted, in which 452681 number of population screened. 7959 malaria positive cases have been diagnosed and treated with appropriate anti malarial. Out of this 1616 are symptomatic and 6343 (80%) are asymptomatic cases. Along with malaria, various nutritional parameters of pregnant women, Lactating mothers and under five children have been assessed and necessary corrective measures taken to improve the hemoglobin status and other nutritional parameters.

7. **Public Private Partnership (PPP):** Malaria No More (MNM) have MoU with H&FW Dept. and is working with State VBDCP for prevention and control of Malaria in two malaria high burden districts of the State i.e. Malkangiri and Koraput. MNM is working in all the 7 blocks of Malkangiri and 6 blocks of Koraput. As TATA Trust has completed its tenure in malaria control activities in 2021, efforts are being made to renew the collaboration. Alternate FTDs in remote/inaccessible villages / hamlets have also been engaged under NGO/PPP mode in four blocks of three districts i.e. Rayagada (Patrapur, Borda, Chandrapur & Gudari), Kalahandi and Ganjam.

8. **Odisha Mineral Bearing Areas Development Corporation (OMBADC):** Districts Jajpur, Keonjhar, Mayurbhanj and Sundargarh have been supported for different activities of NVBDCP under OMBADC. Prevention and control of VBDs under OMBADC support is being extended from 45 blocks of these districts to the entire four districts. Activities like GKS Sensitization, SHG sensitization, display of hoarding, wall painting, construction of hatchery, dengue volunteer for source reduction etc. were prioritized under this important intervention along with the support of additional HR at the block and district level.

Dengue & Chikungunya

Dengue has become perennial in the state. There is increased reporting of dengue cases (7548 cases) compared to 496 cases reported during 2020. Increased case detection is due to increased screening of suspected dengue cases in the state. Two major dengue outbreaks were reported from the state during 2021 both are from urban areas i.e. Bhubaneswar urban area and in Rourkela and Sundergarh. The outbreaks could be contained with no death.

Action taken at state level

- Inter-departmental co-ordination meeting was held at state level under the chairmanship of chief secretary involving all line departmental secretaries on 24th June 2021. Similarly the activity was done in the districts under the chairmanship of Collector and DM.
- All 37 sentinel site laboratories along with the Apex Referral laboratory (RMRC, BBSR) were kept ready with availability of ELISA facilities, diagnostic test kits (NS1 & IgM), skilled and trained lab technicians and daily reporting mechanism.
- National Dengue Day was observed on May 16th 2021 across the state on virtual mode in view of ongoing pandemic.
- Directives from Chief Secretary to Secretaries of related Deptts. were given for preparedness to combat vector and water borne diseases
- Dengue guidelines/advisory /SOPs were sent by DPH (O) to CDM &PHOs & ADPHO (VBD) wing of all 30 districts to ensure readiness for prevention and control of dengue.
- Stocks with regards to drugs, equipments/instruments, kits, logistics and consumables were replenished timely.
- Pre monsoon and monsoon entomological risk assessment was done in major vulnerable areas for timely implementation of evidence based prevention and control measures.

No Chikungunya case is detected in 2021.

Lymphatic Filariasis

Currently the programme, “Elimination of Lymphatic Filariasis” is implemented under the umbrella programme of NVBDCP. The NFCP units undertake recurrent weekly anti larval operation using larvicides in the mosquito breeding sites and the NFCP clinics conduct microfilaria blood survey and provide necessary treatment to the Mf positive patients. For elimination of lymphatic Filariasis, Annual Mass Drug Administration (MDA) of single dose of Albendazole and DEC is the key strategy along with management of lymphoedema cases and Hydrocelectomy.

MDA was introduced in 20 districts of the state in the year 2004 by using DEC as the drug of choice for the community. Later albendazole was added. Out of these 20 high endemic districts, currently 9 districts are under different phases of elimination (districts showing clearance of different rounds of TAS). To this old 20 LF endemic districts 7 newly identified districts were added in 2021 based on fresh morbidity and night blood survey (mf rate) for MDA.

- In the year 2021, 17 LF endemic districts completed MDA namely Angul, Balasore, Bhadrak, Bargarh, Cuttack, Dhenkanal, Ganjam, Nuapada, Nayagarh, Jharsuguda, Kandhamal, Kordha, Keonjhar, Sambalpur, Sundergarh, Sonapur & Mayurbhanj.
- Three non endemic districts namely Bolangir, Rayagada & Kalahandi completed remapping of Lf morbidity load and NBS in their respective districts. Results indicated high transmission and need of MDA. Findings were submitted to filarial division of NVBDCP, GoI for further course of action.
- In the state six districts conducted 3rd and final Transmission Assessment Survey (TAS) out of which 5 districts namely Nawarangpur, Malkangiri, Puri, Boudh & Gajapati cleared. Koraput, Kendrapada are the districts who have cleared 3rd TAS in the previous years. Further district Jagatsinghpur have passed TAS 2 and qualified for TAS 3.
- Provisioned Morbidity Management and Disability Prevention (MMDP) kit to each one of the of line listed 67117 lymphoedema cases of the state. The distribution process is under progress currently.
- A total of 1473 hydrocelectomy operations were done in 2021 in comparison to the 469 operation during the year 2020.

Japanese Encephalitis (JE):

Japanese Encephalitis Virus (JEV) infection is a mosquito borne zoonotic disease. In Odisha, sporadic cases of AES/JE have been reported from many districts since 2016. In 2021, there were 19 JE cases in the state in contrast to 14 cases reported in 2020. 24 out of 30 districts are covered under JE vaccination through RI mode. However, all 30 districts have shown vulnerability which is addressed with special plan for prevention, control and management of the disease.

Activities undertaken:

1. Lab. Diagnosis & Surveillance:

There are 10 JE Sentinel Site Laboratories including one apex referral laboratory (provided below) functioning in the state for JE diagnosis which is made *free of cost*. JE IgM Kits (NIV, Pune) was supplied by Dte. NVBDCP, GoI.

Designated JE Sentinel Site Lab.	Districts from where CSF/Serum Samples of AES/Suspected JE Cases to be send to JE SSLs
Keonjhar- DHH	Keonjhar and Bhadrak
Koraput- DHH	Nawarangpur, Koraput, Rayagada, Kalahandi
Malkangiri- DHH	Malkangiri
Mayurbhanj-- DHH	Mayurbhanj and Balasore
SCB Medical College & Hospital, Cuttack	Cuttack, Jagatsinghpur, Kendrapada, Jajpur, Anugul & Dhenkanal

MKCG Medical College & Hospital, Berhampur	Ganjam, Gajapati and Kandhamal
VSS Medical College & Hospital, Burla	Sambalpur, Nuapada, Bolangir, Bargarh, Deogarh, Boudh and Sonepur
Capital Hospital, Bhubaneswar	Khurda, Nayagarh & Puri
AIIMS Bhubaneswar	Newly Added 2021
Ispat General Hospital, Rourkela	Sundargarh & Jharsuguda
RMRC Bhubaneswar	Apex Referral Laboratory-JE in State

2. JE Vaccination: 24 districts have been covered under JE vaccination in routine mode.

3. Entomological & veterinary Surveillance: Entomological investigation was carried out by state and zonal entomology unit whereas sero-surveillance from pig was ongoing in collaboration with ADRI, Phulanakhara under Department of Animal Husbandry Govt. of Odisha. During 2021, **140 no. of Pig samples (EDTA Blood and Nasal Swab) has been sampled from 7 districts for screening of JEV antigen in the amplifying host (under process).**

4. Capacity Building: 48 batches of training on JE have been imparted at district and state level. Medical Officers-7, Medicine & Paed. Spst-1, VBBDTs - 4, SSMTCs / LT-1

5. Major activities:

- State level review on functionality of all JE SSLs conducted under the Chairmanship of DPH, Odisha (Virtual Mode)
- Identified AES cases admitted in the IPD/ICUs of either Medicine and/or Pediatrics ward in district/tertiary care hospitals are screened for the JE through IgM-ELISA based assay as referred by the treating physicians.
- AIIMS Bhubaneswar added to JE SSL network of State as new JE SSL which increased the AES surveillance in the state
- Orientation to Laboratory and Clinical team of AIIMS Bhubaneswar was done on “Programmatic aspect of AES Surveillance and its mechanism of reporting and case management”
- Entomological investigation of JE carried out by Zonal and State Entomological team in both Cuttack and Puri.
- All the JE reported districts have been communicated for conducting eco-epidemiological investigation following national guideline and was carried out at district level.
- Advisories from NCVBDCP, GoI has been issued to all CDM&PHOs of all districts and all the DHHs, SDHs and MCHs were instructed for maintenance of AES Case Register
- Continued surveillance of pig samples through liaison with Animal Disease Research Institute under Dte. of Animal Husbandry & Veterinary Sciences, Govt. of Odisha.

4.2 National Tuberculosis Elimination Programme

National Tuberculosis Elimination Programme (NTEP) is implemented in the state with the objective to eliminate TB by the year 2025.

Achievement

- TB Notification activities conducted to get more number of TB cases from the community and treat them successfully to achieve TB elimination by 2025.
- TB Forums established in all 31 NTEP districts.
- Patient Provider Support Agency (PPSA) has been engaged in six districts of Khordha (including Bhubaneswar MC)/ Cuttack/ Ganjam/ Mayurbhanj/ Sundargarh & Sambalpur to enhance Private Sector notification of TB cases.

- All shorter regimen & longer regimen rolled out for treatment of Drug Resistant TB (DRTB) patients.
- State level training programme on TB Preventive Therapy conducted on virtual mode with participation of concerned districts level officials.
- Bi-directional TB COVID screening are going on and districts are reviewed continuously.
- Bi-directional TB co-morbidity screening activities (TB screening among diabetics, HIV, Nutrition, Tobacco users) are implemented in all districts.
- TB patients notified under NTEP get financial incentive under “NIKSHAY POSHAN YOJANA” (NPY) through Direct Benefit Transfer (DBT).

Year wise Achievement

Year	Total TB Notification (Current year)	Total Success Rate (previous year)
2017	51434	71.4%
2018	48856	87.8%
2019	53378	88.8%
2020	45702	88.2%
2021	52346	88.5%

Major priorities for the year 2022

- Active involvement of Private Sector by liaising with private bodies of IMA, IAP, FOGSI etc to increase TB Notification.
- TB Comorbidity – Coordination with NCD, Nutrition, OSACS, Tobacco cell.
- Setting up/strengthening of DMCs – strengthening of TB activities in 565 model HWCs
- Increase utilization of CBNAAT and TruNAAT facilities for improvement in TB diagnosis and UDST.
- Ensure supply chain of anti TB drugs & materials
- Active Case finding (ACF) – Qualitative Routine bi-annual ACF rounds among vulnerable population, Sunday ACF
- TB Preventive Therapy implemented throughout the State.
- Involvement of TB champion in community engagement activities.
- Targeted intervention of NTEP through visible Advocacy Communication Social Mobilization (ACSM).
- Incentive for beneficiaries, treatment supporter, private providers, tribal patients through DBT.
- “TB Harega Desh Jeetega” campaign implemented to achieve “TB Mukht Bharat” by the year 2025.



Review Meeting

4.3 National Leprosy Elimination Program (NLEP), Odisha

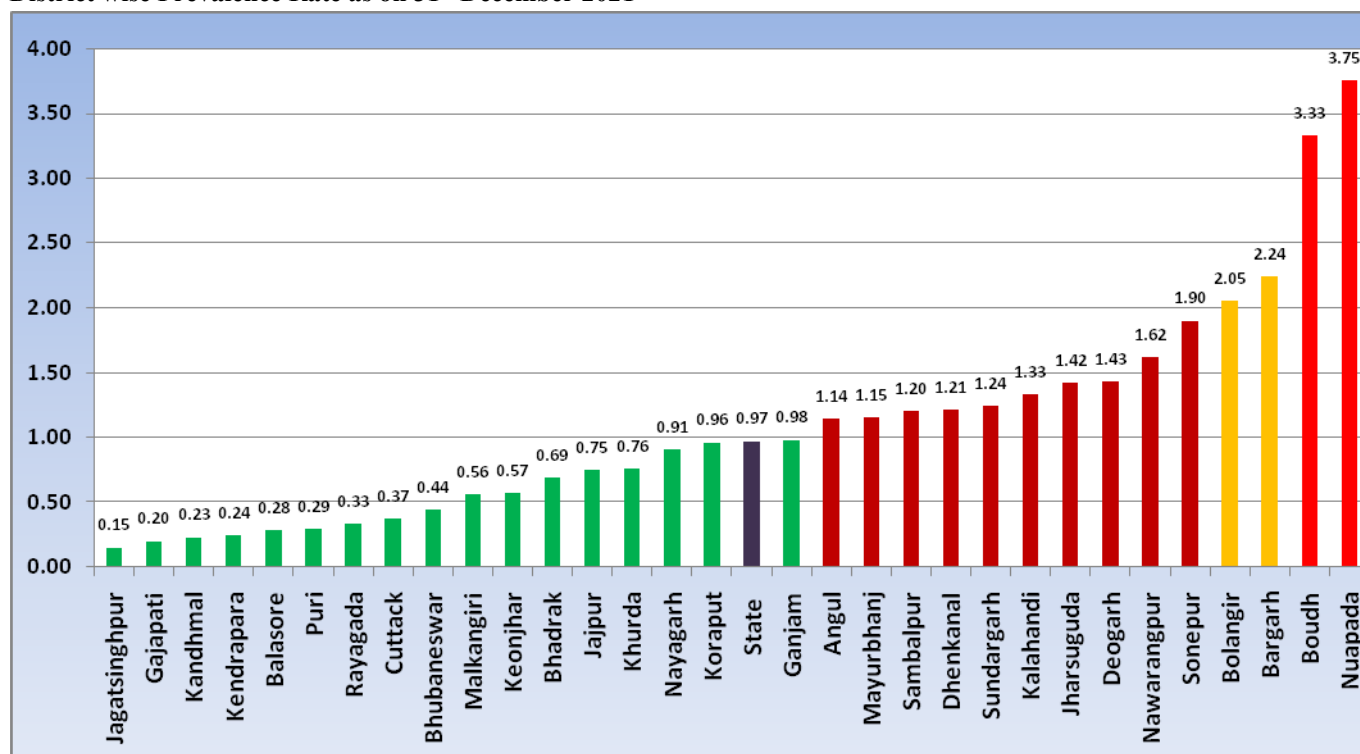
The National Leprosy Eradication Programme (NLEP) with Multi Drug Therapy (MDT) started in the year 1983 with the objective of achieving eradication of leprosy from the country. Prior to introduction of MDT, Odisha was one of the very high endemic states of the country. With introduction and successful implementation of Multi Drug Therapy (MDT) programme in the State since March, 1983, the PR as well as ANCDR of leprosy has drastically declined. At present the Prevalence Rate (PR) is 0.97 per 10,000 population as on 31st December 2021

Targets set by GoI & WHO:

- PR <1 per 10000 population in each district
- G2D proportion <2 among new cases. Grade 2 disability cases < 1 case per million population.
- Zero backlog of eligible patients for RCS.

Major activities & Achievements of NLEP for 2021-22:**1. Leprosy Scenario in the State:**

Indicator	2017-18	2018-19	2019-20	2020-21	2020-22 (Dec.2021)
New case detected	9576	10786	10077	6148	4342
No. of cases under Treatment	6325	7117	6845	5270	4638
PR per 10000 Population	1.37	1.53	1.45	1.1	0.97
MB proportion	48.2	47.6	48.8	52.16	55.8
Female proportion	40.7	41.2	39.2	39.2	36.8
Child proportion	7.89	7.6	6.75	6.9	6.9
G2D percentage with absolute number	4.87 (466)	3.16 (341)	2.0(200)	1.96 (178)	3.0(130)
Child Grade-2 cases	11	08	04	06	06

District wise Prevalence Rate as on 31st December 2021

2. Active Case Detection Activities:

A.) Special Leprosy case Detection Drive (SLCDD): The State has conducted Special Leprosy case Detection Drive (SLCDD) in the month of January 2021.

Results of SLCDD (2020-21)

No. of Blocks implemented	Suspects identified by ASHA	No. of Cases Confirmed		
		New Cases	G2D	G-I
208 (except Kandhamal, Jagatsinghpur & BBSR)	64306	1791 (147 child)	42 (2 Child)	94 (2 Child)

B) Integrated Leprosy screening along with COVID-19 survey (23rd May to 26th August 2021)

Activity	Achievements
Population screened	4,10,73,092
Cases confirmed	1695

C) During this year, the state has implemented active case detection campaign in the name of Active Case Detection & Regular Surveillance (ACD & RS) as per Central Leprosy Division guidelines. The State level, district & sub-district level have completed training for all the General Health Care Staff including ASHA. The population screening activity was started from 1st October 2021 and it is continuing in all the villages and urban slum areas where new cases detected in last 3 years.

Results of ACD & RS (Oct-Dec 2021)

Population screened	New Cases Detected
1,70,23,516	1421

3. Leprosy post-exposure prophylaxis (LPEP): Post Exposure Prophylaxis (PEP) with single dose of Rifampicin given to contacts of all index cases to prevent the infection by *M. Leprae* in people with a higher risk of exposure to the disease. **PEP Implemented in the state from June 2018** and the same is continuing. By end of March 2020 1,10,000 contacts have been provided Single Dose of Rifampicin (SDR). **During this financial year 52471 contacts have been administered SDR. Total 1,71,199 contacts have been administered SDR**

4. Disability Prevention and Medical Rehabilitation (DPMR):

- Disability services like ulcer care, complication management, distribution of MCR foot wears and ulcer kits in Disability Prevention and Medical Rehabilitation (DPMR) clinics functioning in all block CHCs, Sub-division Hospitals and District Head Quarters Hospitals in the State.
- Reconstructive surgeries (RCS) are being conducted in 14 Govt institutions. From 1994 till Dec 2021 as on today 6442 nos are underwent surgery. During this year (2021-22) **117 RCS surgeries have been conducted.** Rs 8000/-

is provided as loss of wages to the patients who are undergoing RCS. Out of which Rs 5000/- is provided at the time of discharge and Rs.1500/- twice after follow up.

- This year 5684 MCR foot-wears and 5914 ulcer care kits have been provided to PALs (People Affected with Leprosy)
- Leprosy affected persons remaining in the colonies are being provided services like ulcer dressing, MCR footwear, Ulcer kits and treatment for minor ailments. Four leprosy Home & Hospitals i.e 205 beds in Cuttack, 204 beds in Sambalpur, 33 beds in Balasore & 16 beds in Paralakhemundi are sanctioned. They are being provided with food, clothes and medical services through HKNS Odisha branch.

5. Training:

Category of Staff	Planning in 2021-22	
	No. of Batches	Achievement
2 days training of MBBS / AYUSH MOs at Dist. Level	5 (150)	Completed
2 days orientation training to district Lab. Technicians	2 (30)	Completed
2 days Re-orientation training of Physiotherapists	3 (60)	Planned but not conducted due to COVID-19
3 days Re-orientation training to DLC / NMS	2 (31)	Planned but not conducted due to COVID-19

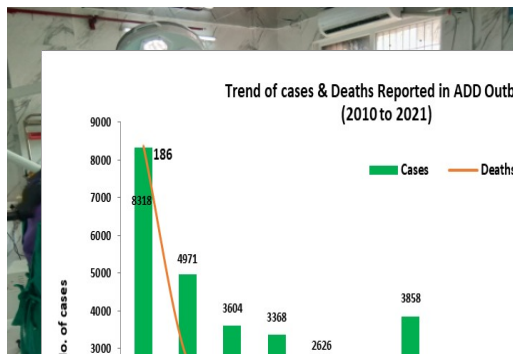
6. IEC / BCC Activities: IEC activities have been carried out throughout the State through print and electronic media. During various campaign activities messages on leprosy are extensively broadcasted in TV channels and published in newspapers. Posters, leaflets, flipbooks, wall paintings used to educate the people.

7. Financial status:

	Amount (Rs in Lakh)
Approved budget for 2021-22	2240.92
Fund Received till date	1022.40
Expenditure up to December 2021	228.98
% of Expenditure against fund received / Budget	22.3 % / 10%



Training of Medical Officers



Re



Integrated Disease Surveillance Programme

Background:

Integrated Disease Surveillance programme aims at strengthening/maintenance of a decentralized laboratories-based IT enabled disease surveillance system for epidemic prone diseases to monitor the disease trends and also to detect and respond to outbreaks in early rising phase through trained Rapid Response Team (RRTs).

It is intended to detect Early Warning Signals of impending outbreaks and helps to initiate an effective response in a timely manner. IDSP monitors core diseases/health events of public health importance. IDSP plays an important role of State Health Control Room during natural calamities and disasters like flood, cyclone and heat wave etc.

Programme Components:

- Use of Information Communication Technology for collection, collation, compilation, analysis and dissemination of data.
- Strengthening of public health laboratories.
- Inter sectoral Co-ordination for zoonotic diseases

Management of cyclones

In the year 2018: Titli, in 2019: Fani, in 2020: Amphan and in 2021: cyclone Yaas managed successfully. During the cyclone State & District preparedness activities like micro-planning for Medical relief operations, manpower deployment, supply & prepositioning of drugs & disinfectants, additional mobility support, preventive disinfection of

drinking water sources, intensified IEC/BCC activities were undertaken, which resulted in occurrence of no major outbreaks in the affected area.

Sharp reduce in cases of diarrhoeal disease including cholera

The trend of acute diarrheal disease cases & deaths substantially declining from 2010 to 2021 due to effective surveillance at district & sub district level for early case detection & prompt management, upscaled community awareness through IEC activities and timely diagnosis of outbreak prone diseases at District Public Health Laboratories (DPHL).

No. of outbreaks reported from the year 2017 to 2021

Years	No. of outbreaks reported					
	ADD	FP	Hepatitis	Chickenpox	Anthrax	Measles
2017	62	45	40	34	19	30
2018	43	58	40	19	9	8
2019	74	70	32	17	9	0
2020	4	10	0	7	0	0
2021	11	18	1	5	1	0

(ADD= Acute Diarrhoeal Diseases, FP = Food Poisoning)

A H1N1 (SWINE FLU)

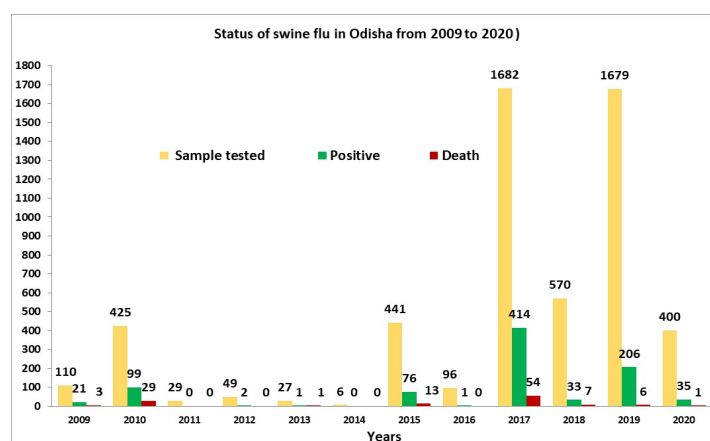
In the year, 2017, total 1682 no. of samples tested with 414 positive cases and 54 deaths. In 2018, total 570 no. of samples were tested with only 33 positive cases and 7 deaths. In the year, 2019, total 1679 samples were tested with only 212 positive cases and 6 reported deaths.

In the year, 2020, total 384 samples were tested with only 35 positive cases and 1 death. In the year 2021, total 37 samples were tested with nil positive and nil death. The state has taken action for isolation facility for case management, strengthening surveillance for ILI / ARI cases, involvement of private and public sectors for case management & other procurement of drugs & logistics.

Other Activities undertaken

IDSP data is collected on epidemic prone diseases on weekly basis. The information is collected on three specified reporting formats, namely “S” (syndromic cases), “P” (presumptive cases) and “L” (laboratory confirmed cases) generated and filled up by Health Workers, Clinicians and Laboratory staff respectively. The weekly data gives information on the disease trends and seasonality of diseases.

- In 2020, completeness of weekly reporting with respect of Form S (Health Worker) 89% & Form P (Health Institution) 96% and Form L (Laboratories) 97%.
- Daily scanning of print & electronic media is being done by Media scanning & rumor verification cell, SSU. Out of total rumors investigated by Block/ District/State RRT around 80% were laboratory confirmed.
- All the outbreaks reported from 2017 to 2021 investigated by district and block RRTs.



- The trend of communicable disease is being monitored regularly to timely response of unusual health events. The trained Rapid Response Teams (RRT) is ready at state, district as well as sub-district level for control of outbreak prone diseases.
- With regards to heat related illness, State Health Control Room & District Health Control Room starts functioning from 1st March to 30th June. Districts opened a dedicated heat stroke room at MCH / RGH / DHHs / SDHs / CHCs/ other hospitals with provision of Air Conditioners / Coolers / Cold water / IV fluid, ORS and other essential drugs. Ear marked beds are also available at PHC level to treat heat related illness patients. Till 22.06.21 - 3202 beds, 870 ACs, 2116 coolers have been earmarked by all the 30 districts / RGH / CH / MCHs.
- The three Govt. Medical College & Hospitals of the state are functional as three State Referral Laboratories (SRLs) & 30 District Public Health Laboratories to conduct the laboratory confirmation of epidemic prone diseases such as Cholera, Viral Hepatitis, Measles, Meningitis, Diphtheria, Dengue, Chikungunya, AES/JE, Anthrax, Leptospirosis, Scrub typhus etc.
- Total 377070 nos. of persons from different point of entry have been put under active surveillance by the State Integrated Disease Surveillance Programme Control Room. The prevention measures were undertaken through aggressive spreading of revised advisories and guidelines on standard precautions, Do's & Don'ts, work place advisory, School advisory, guidelines on ambulance transportation through IEC/BCC. The dedicated RRTs at block and district level have been doing contact tracing, sample collection, supervision of COVID vaccination and community awareness. Airport Authorities & Railway Authorities have been asked to follow the standard guidelines and precautions.
- The passengers from hotspot countries and migrants of other hotspot areas are under surveillance.
- The hepatitis outbreaks at urban municipality & rural areas were investigated by state & district Rapid Response Team and successfully contained with inter-sectoral coordination.
- Water quality monitoring is being conducted regularly in the vulnerable areas of different blocks to prevent water borne diseases. The results are shared with RWSS & PHEDDeptt. for effective coordination to contain outbreaks.
- Inter-sectoral convergence with related Deptt. of Govt. such as PRI,WCD, RD, H&UD, Industry, SC&ST, School & Mass education, Works, ARD, Forest &Environment & Private Medical Colleges for better coordination of surveillance of communicable diseases & containment measures during outbreaks.

Integrated Health Information Platform (IHIP)

A programme developed by GOI for the real time entry of each & every case of outbreak prone diseases up to village level in the Integrated Health Information Platform through on-line portal with well equipped IT system.

Activities under taken:

- Updation of the district, block & health facility profile
- Sub-centre and village mapping & validation exercise across the state
- Training of block level functionaries like MO i/c, Pharmacist, LT, BPM, BDM & Data entry operator
- Orientation of Front line workers like – MPH (F), Sector Supervisor etc.
- Presumptive / Lab confirmed cases to be reported for all notifiable cases
- In priority all Outbreaks and VPD surveillance cases to be updated in IHIP and to be validated
- Interim assessment of roll out by independent agencies

Progress so far:

State TOT Trainings on IHIP Completed.

- Current users of P form-1780, S form users- 6966, and L form users- 1690 have been updated in the IHIP Portal.

- All the 30 districts, 26 DPHL have User profile login in IHIP.
- 93.3% training completed at district level and updated.
- Training of block level functionaries like MO I/C, Pharmacist, LT, BPM, BDM & Data entry operator conducted.
- Orientation of Frontline workers like – MPH (F), Sector Supervisor etc. conducted
- 99.9% villages are mapped in the portal (one of the best in the country)
- Presumptive / Lab confirmed cases are reported but yet to be realised in full spirit
- Interim review conducted by DPH, AD IDSP and SRTL WHO (state focal point)

Status of IHIP reporting										
Sl. No	Odisha	S Form			P Form			L form		
		Total Units	Average No of units Reported (%)	Average cases reported per sub centre per week	Total Units	Average No of units Reported (%)	Average cases reported per health facility per week	Total Units	Average No of units Reported (%)	Average samples tested per lab per week
1	IDSP (2018-2020 average)	6742	5591 (83%)	10	1719	1449 (84%)	108	430	335 (78%)	84
2	IHIP -2021	6996	4175 (59.6%)	7.5	1795	1581 (88.1%)	23.6	1713	1335 (77.9%)	9.3

National Viral Hepatitis Control Program

- Hepatitis-B and Hepatitis- C are two silent killer diseases which if remain untreated for prolonged period end up in Cirrhosis / Hepato-cellular Carcinoma.
- Screening tests are being conducted at district level of all High Risk Groups like frequent blood transfusion recipients, Female sex workers, Transgender, Intra-venous drug users, migrants, truckers etc for both Hepatitis-B and Hepatitis- C.
- Similarly all pregnant women will undergo screening for Hepatitis-B so that positive mothers will deliver at dedicated facilities where the newborns will be administered HBIG.
- Quantitative Viral Load testing for HBV & HCV is being carried out across the State at all DPHLs.
- Free Drugs as well as free treatment facility has been made available at **Treatment Centers** of all District headquarter hospitals.
- It has been proposed to extent the services to Govt. Medical Colleges during coming financial year 2022-23.

National Rabies Control Program

- Rabies is a 100 % fatal disease which is totally preventable.
- Currently Anti Rabies Vaccine is available in all District Head Quarter Hospitals and Sub-divisional Headquarters Hospital.

- Now the Anti Rabies Vaccine services have been extended up to all Community Health Center level during current financial year 2021-22.
- A total numbers of 166888, 177404 and 158705 dog bite cases have been managed in the years of 2018, 2019 and 2020 respectively.
- District ToT training imparted to Medical Officers and sensitization of DPHOs, Epidemiologists, Staff nurses done about the management of animal bite cases at CHCs, SDHs, DHH level.

4.7 National Iodine Deficiency Disorders Control Programme (NIDDCP)

The National Iodine Deficiency Disorders Control Programme (NIDDCP) started in our state since December- 1989. It is a 100% Central Plan Scheme. As per the Survey, 17 Number of districts of our state are found to be endemic, having goiter prevalence more than 10%.

Policy: Notification on complete Ban on Sale & manufacture of Non –Iodized salt for human consumption in Odisha was issued vide Notification Letter No. 12544/Dt. 18.10.2001.

Major Activities in FY 21-22:

- Salt testing kitare being procuredfor determining the iodine levels in salt samples at household levels/ AWC/ schools, the same is distributed to 24358 ASHAs in 17 endemic districts(Angul/ Bargarh/ Cuttack/Dhenkanal/ Gajapati/ Ganjam/ Kandhamal/ Keonjhar/ Khurda/ Koraput/ Malkangiri/ Nawrangpur/ Nuapada/ Puri/ Rayagada/ Sambalpur/ Sundargarh).
- Under this programme there ASHA incentive has been provisioned for testing the household salt samples in the 17 endemic districts @ 50p/sample tested for 2 months.
- The salt samples drawn by the Food Safety Officers from various sources are tested at State IDD laboratory set up at State Food Testing Laboratory, Bhubaneswar for estimation of the iodine content in salt samples.
- ‘Global Iodine Deficiency Disorders control Day’ was observed virtually on 21st October 2020 in the state level with the district level officials of H&FW, WCD, S&ME & S.T. & S.C. Dept.
- To generate awareness across the state, IEC BCC activities were taken up on Global IDD prevention day.

4.8 National Mental Health Programme

- **30 District Mental Health units are functional at district level** with 110 dedicated DMHP staffs.

Status of NMHP (2021-22)			
OPD (New case)	IPD	Follow up	Referral
13258	683	50355	114
1 st & 2nd QTR 2021-2022			
6987	312	34416	99

- **Capacity building on Mental Health:**
 - The training programme for Medical Officers on ‘**Diploma in Community Mental Health Care for Doctors**’ by NIMHANS, Bengaluru is ongoing.



- Virtual training programme of Medical Officers of PHC & CHC is ongoing.
- Total **1505** TMC/SH/QF/HI visited by DMHP units and **38643** migrant workers were counselled by the team.
- **30 Mobile Mental Health Unit (MMHU)** across 30 districts for counseling, doorstep delivery of psychotropic drugs, rescue of wandering PwMI and upscaling public awareness in the community. The MMHU vehicle moved to CHC, village, TMC, CCC/CCCHC/DCHC for providing fixed day services and counseling to the persons with mental illness. Total 986 (CHC), 1443 (Village) times visited and provided psychosocial services to the persons with mental illness.
- **30 Outbound call centre functional at DMHP unit** to follow up, counsel and provide psychosocial support to the COVID positive/cured and discharged persons. Total **105797** persons were counseled by DMHP units.
- **43 Webinars** conducted virtually for MOs, SNs, Counselors of other schemes, DMHP staffs. **4414** persons were trained virtually.
- **25/30 districts conducted Tele-monitoring** and tele-consultation by DMHP team. Total **11,674** persons with mental illness were counseled and monitored by the team.
- IEC materials like prototype of **FAQs& Booklet for ASHA** were shared to all the districts.
- **Tele-monitoring of persons with COVID symptomatic/cured/discharged** done by State Mental Health Cell as a part of COVID Control Room Duty. Total 984 persons counseled.
- **Panel discussion on Mental Health Issues** conducted on Doordarsan for upscaling public awareness. Total 2 Panel discussions were conducted.
- The **screening camps (30), workplace stress management (36 batches), life skill education (42 batches)** for school teachers, **training of Paramedical staffs& Medical Officers(52 batches)** continued by district DMHP units for awareness generation on mental health.
- Total **30 Mental Health Care Review Board** established at **district level**
- Received the excellence award for Mental Health in **National Health Conclave 2021** by PHFI.



4.9 National Programme for Cancer Diabetes Cardio Vascular Diseases and Stroke (NPCDCS):

Under NPCDCS, screening for early diagnosis, treatment and follow up for complications and treatment adherence are ongoing in the State as population



Based Screening (PBS) and Opportunistic Screening. Under Population Based Screening, individuals above 30 yrs are screened for Diabetes, Hypertension and three common Cancers (Oral, Breast & Cervical).

Achievements of PBS (April 2021 to December 2021):

Population enumeration done	30 plus Population Enumerated	30+ population Screened	Individuals suspected and referred	Individuals confirmed with diagnosis	Individuals put under Treatment
2481209	1866040	2286827	126989	Diabetes: 31148 Hypertension: 68918 Oral Cancer: 44 Breast Cancer: 5 Cervical Cancer : 20	Diabetes: 26642 Hypertension: 54259 Oral Cancer: 43 Breast Cancer: 5 Cervical Cancer: 18

Under NPCDCS, following facilities are established in the state:

1. District NCD Clinic – 32
2. District NCD Cells - 30
3. CHC NCD Clinic- 62 (Operational in integrated manner in all 371 CHCs)
4. District Day Care Cancer Chemotherapy Centres – 32
5. District Level CCU/ICU – 18
6. Dialysis Units under Pradhan Mantri National Dialysis Programme (PMNDP)- 35

Training programmes under NPCDCS:

- 312 Medical Officers, 530 CHOs, 6700 ANMs and 45000 ASHAs are trained on NCD programmes.
- 120 Medical Officers of H&WCs are trained on NCD

4.10 National Programme for Health Care of Elderly (NPHCE):

NPHCE has been implemented in all the 30 districts. Provisions have been made at each District Headquarters for a special Geriatric Ward of 10 beds strength. Elderly serviced in all DHH are integrated with Integrated Physiotherapy Units (IPUs) established. Apart from that Elderly Care is also being provided in 59 CHCs and outreach activities by Physiotherapists and health worker teams under each Health and Wellness Centres (1394). A total of 7,90,686 numbers have been provided treatment at Geriatric OPDs and from them 5,37,362 have availed IPD services with 57,384 numbers of laboratory services and 1,26,912 numbers of health cards distributed.

Health camps are being organised during Pension Days at each Panchayat level for health check -ups and treatment and education on life style modification like stress management.

4.11 National Programme for Prevention and Control of Deafness (NPPCD):

NPPCD programme is being implemented in all the 30 districts. Based on the WHO report, about 6.8% of population having hearing impairment of whom 50% can be prevented if interventions could have been made in right time. Audiometry provisions of sound proof rooms with services of audiologists (RBSK) are available at District Headquarters Hospitals for screening from neonatal to elderly in all 30 Districts. A mechanism of referral from remotest villages through the health care facility network is established. With assistance from Ministry of Social Justice and Empowerment (MSJE) hearing aids are distributed free of cost. So far till now 1953 numbers of hearing aids have been distributed free of cost from 2215 having been referred for rehabilitation. A total of 27 numbers of ENT specialists, all across the state, have been trained under this programme at SCB Medical College & Hospital- the Centre of Excellence.

Management of common ear nose and throat problems drugs, nasal and ear drops including wax softeners are being provided under free drug (NIRAMAYA) scheme of Govt. of Odisha.

4.12 National Oral Health programme:

- Under NOHP Dental Units are established at 30 District Hospitals, Capital Hospital, RGH Rourkela and 245 CHCs where Dental Surgeons are placed with infrastructure of Dental chairs and Dental instrument equipments.
- Under state Govt initiative, 359 Dental Surgeons are placed at CHCs as regular cadre.
- Under NOHP during April'21 to December'21, total 1226 Medical Officers of HWCs are trained on Oral Health Care by SCB Dental College under comprehensive Primary Health Care initiative.
- Consumables and instrument equipments are provided to 1306 HWCs under NOHP.

4.13 National Tobacco Control Programme (NTCP):

- Tobacco Cessation Centres Established – At 30 District Head Quarters Hospitals, Capital Hospital Bhubaneswar and RGH Rourkela. The Dental Surgeons are made Nodal Officers for Tobacco Cessation activities in the facilities. 19426 individuals are counselled at Tobacco Cessation Centres.
- State level Coordination Committee formed under the chairmanship of Chief Secretary, Govt of Odisha for implementation and monitoring of Tobacco Control Programme. District Level Coordination Committees are formed in all 30 districts. 28 number of DLCC meetings held in the year.
- 245 Medical Officers are trained on Tobacco Cessation
- 96 sessions of Stakeholders' training is organised in the state where 1845 stakeholders are trained on Tobacco Control
- IEC material display done in 337 Health institutions
- 1130 Schools and 60 colleges are covered under Tobacco Free Educational Institution Programme. This covered around 65,000 students.
- 12000 Village Level committees formed for Tobacco Control activities.

4.14 District Comprehensive Cancer Care Programme:

Under NPCDCS, screening for common Cancers i.e. Oral, Breast and Cervical Cancer are being conducted under Population Based Screening by ANMs trained on Cancer screening at sub center level routinely on every Thursday and in campaign mode too. More than 660 Staff Nurses and ANMs are trained in VIA screening for Cervical Cancer. More than 6000 ANMs are trained in Clinical Breast Examination (CBE) and Self Breast Examination (SBE) for screening Breast Cancer and Oral Cancer screening with incandescent light, disposable spatula and examination mirror. Till date they have identified 26,000 Oral Cancer, 12,000 Breast Cancer and 37,000 Cervical Cancer cases and referred them to Tertiary Centres for confirmation of diagnosis. Cancer screening and consultation camps are organized in presence of Oncologists of AHRCC, Cuttack and Dr. Dinesh Pendharkar, Sr. Oncologist, Sarvodaya Cancer Hospital, Faridabad, Delhi. Till date more than 114 camps where 7128 suspected cancers are screened and 219 cases have been identified as new cancer patients and 3868 cancer patients are provided free consultation in different districts during 2021-22.

District Day Care Cancer Chemotherapy Centers are established in 30 DHH, RGH, Rourkela and Capital Hospital, Bhubaneswar where 55,327 Cancer patients are provided consultation and 44,264 Chemotherapy Cycles are administered by trained Medical Officers and Staff Nurses. District Palliative Care Programme is being managed by trained Medical Officers and Staff Nurses in integration with Day care Chemotherapy Centre in 20 districts and there is dedicated Palliative Care unit in 10 district hospitals. Till date 27,335 cancer patients have received Palliative Care in

these facilities. These facilities providing Palliative Care are exempted from licensing for procurement, storage and dispensing Narcotic Drugs like Morphine for pain management by Drugs Controller, Odisha.

4.15 National Programme for Palliative Care (NPPC):

Under NPPC, facility based Palliative care is being provided in dedicated 6 bedded palliative Care units established at District head Quarters Hospitals (10 Districts). In another 22 facilities in 20 districts the Palliative Care Services are being provided in integration with Day Care Cancer Chemotherapy centres where Trained Medical Officers and Staff Nurses are providing services. Pain clinics and Narcotic analgesics are also provided at these facilities. Already 34 Medical Officers and 62 Staff Nurses are trained in Essential Palliative Care at AHPGIC, Cuttack and outside the state

4.16 National Programme For Control Of Blindness & Visual Impairment (NPCBVI)

Blindness is a major public health problem in India with an estimated 12 million blind persons in the country. India is the first country in the world to launch the National Programme for Control of Blindness (NPCB) in the year 1976 with the commitment to reduce the burden of avoidable and treatable blindness with the goal to reduce the prevalence of blindness from 1.4% (1974) to 0.25% by the year 2025 by developing eye care infrastructure human resources, improving accessibility quality of eye care services. Subsequently the programme is extended to include Visual Impairment (VI) and the name changed to NPCB&VI.

The NPCBVI activities are being implemented by Govt. & registered NGO/Pvt. Practitioners.

Major Coverage area:

- Cataract surgery
- Spectacles to school children
- Spectacles to old person for near vision
- Treatment/management of other eye diseases including Diabetic Retinopathy, Childhood Blindness, Glaucoma, Keratoplasty, Vitreoretinal surgery
- Cornea collection for transplantation

1) **Cataract Surgery:** Cataract surgeries have been done in Govt. & NGO sector by trained Eye Surgeons out of which more than 99% are micro surgery with IOL implantation.

Year	Annual Target(Allocated by Govt. of India)	Achievement
2020-21	276853	78004
2021-22 (upto Dec'21)	225750	101325

2) **School Eye Screening** School Eye Screening programme is carried out by PMOAs posted in blocks and also by Eye Specialists at SDH/DHH level. Also children having defective vision detected by basic health workers in biannual screening programme are examined by Ophth. Assts. and referred to Eye Specialist in SDH/DHH whenever needed for better treatment. After opening of the schools school eye screening will be resumed.

Year	Free spectacles provided to school students	
	Target	Achievement
2020-21	100000	668
2021-22 (upto Dec'21)	50000	514

3) **Spectacles to old person for near vision)**

Year	Annual Target	Achievement
2020-21	120000	7821
2021-22 (upto Dec'21)	60000	21810

4) Eye Donation : Eye Donation activities is gradually improving in our state due to extensive community awareness activities done at state / district level and also due to good co-ordination and remuneration to NGOs.

Year	Target	No. of Eyes Collected	No. of Eyes Utilised
2020-21	1300	593	523
2021-22 (upto Dec'21)	1300	818	684

5) Other Eye Diseases (Treatment / Management)

Year	Glaucoma	Diabetic Retinopathy	Childhood Blindness	Squint	ROP	Low Vision	Vitreo retinal surgery	Ketatoplasty
2020-21	2374	9151	1593	442	414	126	193	511
2021-22 (upto Dec'21)	3967	8854	1904	484	701	894	3960	620

6) Capacity building:

Vision Centre at CHCs:

- 183 nos. of Vision Centres have been functioning at CHCs level in the state for providing eye care services to rural people.
- 60 nos. of Vision Centres are approved in PIP 2021-22 to be functional at HWC level
- 60 Ophth. Assts. posts are approved in PIP 2021-22 for posting at Vision Centres and Mobile Ophthalmic Unit



Mobile Ophthalmic Units:

- One Tele-Ophthalmology is functioning at MKCG, Berhampur, Ganjam to provide specialist and super specialist eye care service at door step in remote areas.
- One Mobile Ophthalmic Unit is functioning at DHH, Sundargarh to provide specialist and super specialist eye care service at door step in remote areas.
- 33 nos. of Mobile Ophthalmic Units are approved in PIP 2021-22 for balance 28 districts and 5 Municipality Corporations.

Ophthalmic Equipment / Instrument:

- The ophthalmic equipments, instruments, surgical sets etc. are being provided to Districts for eye surgeries

Retina Centre:

- One Retina Centre is functioning at Capital Hospital, Bhubaneswar.

Eye Banks / Eye Donation Centres:

- At present six nos. of Eye Banks (3- old Govt. MCHs & 3- NGO/Pvt.) are functioning in the State
- Another six Eye Banks one each at RGH, PRM MCH, FM MCH, SLN MCH, BB MCH & Capital Hospital-establishment in process
- Six nos. of Eye Donation Centres (2-Govt. & 4-NGO) are functioning in the state

**Training:**

- Ophthalmic Surgeons have been sent inside and outside the State for training in sub-specialty in micro surgery like Phaco, Glaucoma, SICS, ECCE, Oculoplasty surgery and Medical Retina & Laser Technique etc.
- Refresher training is being imparted at zonal level to the Ophthalmic Assistants & Staff Nurses for providing better service.

Civil Work:

- One 20beded Eye Ward/OT established at DHH, Ganjam
- Two nos. of 10 beded Eye Ward/OT (SDH, Biramaharajpur, Sonapur & SDH, Rairakhole, Sambalpur) are established.
- One no. of 20 beded Eye Ward/OT is in progress at DHH, Boudh
- Expansion of Eye Ward/OT at DHH, Sundargarh
- Renovation of existing Eye Unit at DHH, Jharsuguda, Jeypore & Boudh

Manpower:

- 02 nos. of contractual Eye Surgeons are engaged.
- 55 nos. of contractual Ophthalmic Assistants have been posted at districts.
- Another 60 nos. new contractual Ophthalmic Assistants posts are approved in PIP 2021-22- steps are being taken for recruitment
- 9 nos. of Counselors have been posted in Eye Bank & Eye Donation Centres established at Cuttack, Ganjam, Khurda & Sambalpur for carrying out Eye Donation activities.

4.17 Bio- Medical Waste Management

Biomedical Waste (M&H) Rules 1998 was implemented in Odisha since the year 2000. From March 2016, New BMW (Management) Rules, 2016 is being implemented across 1787 Hospitals (MCHs/DHH/SDH/CHC/PHC/OH). State Govt. provides funds for outsourcing of BMWM, logistics and consumables, training, Immunization, equipments & instruments (autoclaves, shredder & Microwaves), liquid waste management and outsourcing of dedicated HR at DHH, SDH, CHC for BMW work.

- Bio-medical Wastes are segregated into colour coded bins as per protocols of BMW Rules 2016 at DHH, SDH and CHCs & PHCs at the point of generation by waste handlers.
- BMW equipments such as autoclaves and shredder are placed at 60 destinations (30 DHH, 27 SDH, 3 IDH) for management of biomedical waste as per protocol of SPCB in 2016. Now 1739, Biomedical Autoclave vertical

(40 Litres), 1753 shredder machines (25 kg/hr), 14 horizontal autoclaves, 4 microwaves are getting supplied by OSMCL to all the HCFs and installation is going on.

- Dedicated outsourcing agencies at districts level collect, transport, treat & dispose the waste as per protocols laid down by BMW rules 2016 in their own captive pits/ or nearby CBWTF.
- The OS agencies responsible for Bio-medical waste management obtain authorization from the SPCB, Odisha.
- State Govt. provides funds for out sourcing of BMWM, logistics and consumables, training, Immunization, liquid waste management and outsourcing of dedicated HR at SDH and CHC for BMW work. During 2018-19 Rs 500 lakhs have been provided. But during 2019-20 & 2020-21 an amount of Rs.945 lakhs was provided. This year i.e. 2021-22, Rs. 1499 lakhs under Biomedical Waste Management Scheme (BMWM) &Rs. 445.3 lakhs under Biomedical Waste Management Expenditure (BMWME) already allocated.
- The solid general waste from the hospitals at DHH/SDH level is managed by municipality and NAC. However solid general waste CHC/ PHC are managed by compost pit or Gram Panchayats.
- All the HCFs (1787 no.s) have applied for authorization to SPCB (O), out of which 1736 HCFs are having valid authorization & rest 51 are under process with SPCB (O).
- Further 313 MOs, 1992 Health staffs have been trained on BMWM. Annual Report and training Manual, SOP developed for BMWM as per protocol, coloured booklet are supplied to all the districts.
- HR & outsourcing of BMW: The Biomedical Waste Management is outsourced at all 30 DHH, Capital Hospital BBSR, RGH RKL.A dedicated Group-D staffs has been engaged through outsourcing at 32 SDH and 374 CHCs.
- Liquid waste management: Liquid waste management system is established at 437 HCFs.
- Two new CBWTF are functioning now, one at Sheragada of Ganjam district and one at Amasaranga of Sundergarh district over and above one at Tangiapda, Khurda and 3 old Medical Colleges.
- DPRs of 29 DHH, and 34 SDH/IDH have already been received from Odisha Water Supply and Sewerage Board for construction of integrated STP & ETP.
- All the guidelines, Model Plan and handbook related to COVID-19 waste management had been shared to all the HCFs of Odisha.
- Daily reporting of generation of COVID-19 waste are collected through google sheet from districts & submitted to SPCB (O) on weekly basis.
- The same data also uploaded by the concerned HCFs in COVID-19 waste tracking App.

Awards & Recognition:

- 586 hospitals have received Kayakalpa award in 2020-21.
- 337 hospitals have received Kayakalpa award in 2019-20.
- 186 hospitals have received Kayakalpa award in 2018-19.
- 91 hospitals have received Kayakalpa award in 2017-18.
- 20 hospitals have received Kayakalpa award in 2016-17.

4.18 National Programme for Prevention and Control of Fluorosis (NPPCF)

- National Programme for prevention and control of fluorosis(NPPCF) has been implemented in a phased manner in three districts namely Nayagarh, Angul&Nuapada since 2008-09.
- 1 Consultant (Nayagarh) & 1 LT (Angul) are in place.
- Surveys for detection of dental and skeletal fluorosis cases conducted in different selected villages. Free Drugs and treatment are being given for these identified cases.

- Lab services made available at district level to detect the flouride content of water and urine. IEC/BCC activities conducted in the villages/blocks of the district to upscale awareness in the community.
- Inter-sectoral convergence done with related departments like RD, H & UD & PRI etc.

CHAPTER 5

Directorate of Family welfare

5.1 Reproductive Health

The focus during 2021-22 is on strengthening availability of integrated Reproductive health services by regular review through existing mechanisms as well as by providing supportive supervision and mentoring support through technical agencies. Due to the covid-19 pandemic the focus has been shifted to improve outreach services like home delivery of contraceptives and improving availability of Family planning commodities across the health facilities and ASHAs.

During the pandemic, the mobility of clients to health facilities had been severely affected which directly impacted the health seeking behaviour and accessibility to FP services. So, special emphasis was given to make reversible methods of contraception available for the clients through ASHAs. Periodic reviews and commodity availability improved the utilization of all methods of Family Planning (refer to table below for FP service statistics).

Indicator	Apr-Dec (2020-21)	Apr-Dec (2021-22)
Female Sterilization	23989	50413
Male Sterilization	430	589
Interval IUCD Inserted	41185	39253
PPIUCD Inserted	100497	75542
PAIUCD Inserted	5035	3812
Condoms Distributed	6198170	6412687
Chhaya Distributed	52835	101437
Mala N Distributed	1422942	1285578
ECP Distributed	43014	39139
Antara	23906	35730

Apart from the regular activities planned for the year 2021-22 a few additional activities have been planned for the year which have been mentioned below:

1. Involvement of GKS/ VHSNC for strengthening male engagement in family planning

For the strengthening of male engagement in family planning as well improve involvement of GKS in family planning, GKS level meetings are to be organized. The meetings are to be used as a platform for community mobilization and awareness activities through various sessions as well as IEC/BCC activities. These meetings will be conducted in 20 percent of the identified GKS throughout the State.

2. Incentives for Male Health Workers for Mobilizing clients for Vasectomy

In order to strengthen community mobilization activities for increasing acceptance of male sterilization, it is proposed to involve MPHWM to increase the level of acceptance to the desired level as well as to support ASHA in mobilization. MPHWM will use the platform of GKS level meetings as well as other platforms for motivation and mobilization of

male clients for sterilization. An incentive of Rs.750/- to be provided to each Male Health Worker for motivating at least 5 clients for vasectomy.

3. Provisioning of Condom Boxes in UCHCs and UPHCs

In order to improve access to condoms to male clients visiting the health facility, Condom boxes are to be made available to each FRU, UPHC and UCHCs for promoting use of condoms while maintaining anonymity of client. The boxes are to be strategically placed in places like male toilets for ease of access as well as ensuring privacy to the interested clients.

4. Strengthening FP LMIS and ASHA level roll out of FPLMIS.

To ensure uninterrupted supplies of FP commodities multiple reviews and reorientation meetings have been planned for FPLMIS which will be supplemented by ASHA level training on FPLMIS. In continuation of the roll out of FPLMIS at all levels, all ASHAs are to be trained on FPLMIS in 1615 batches throughout the State, so as to utilize the mobile based application for indenting FP commodities.



Prize Distribution Ceremony

5. Improving follow-up and continuation of Antara

To improve the follow up and continuation of Antara Injectable contraceptives an Antara MIS is being developed under NIC which would send reminder messages to clients for subsequent doses as well as generate due list of clients who need to be followed up. This activity is supplemented by Tele-counselling services on RH issues by O&G specialists which would further improve the follow-up activities on Antara as well as other FP methods. (Planned for urban cities of CTC and BBSR).

5.2 MATERNAL HEALTH

- **First Referral Unit: 80 FRUs** are providing C section services out of 94 FRUs. Specialist manpower with Blood Banks in 51 facilities and Blood Storage Units in 42 facilities are functional in the State.
- **LSAS & EmOC:** In last five years **14 LSAS & 14 EmOC** doctors have been trained. After accommodation, transfer & promotions 91 LSAS trained doctors & 7 nos. of EmOC trained doctors are posted in FRUs and providing Comprehensive Emergency & Obstetrics care services.
- **Delivery points:** The State has prospective target of 1190 delivery points of which **533** institutions are already functional and steps are being taken for functionalizing remaining DPs. Alongwith that another 4 Medical Colleges are also providing Delivery Services.
- **Janani Surakya Yojana (JSY):** JSY have been instrumental in increasing the institutional deliveries. As per NFHS-5 Institutional Delivery 92%, which has increased from 82% in NFHS-4 (2015-16). Total **34,28,30** number of beneficiaries have been benefitted under JSY (from 2021-22 upto 3rd Quarter).
- **Janani Shisu Surakshya Karyakram(JSSK)** – Free services which include free drug, blood, diagnosis, diet & referral services are provided to all pregnant women and sick newborn and infants (upto 1 year) through implementation of, Janani Shisu Surakshya Karyakram at public health facilities. 2,37,213 nos. of pregnant women have received various JSSK entitlements during the first 2 Qtrs of 2021-22. Due to implementation of JSSK, Institutional deliveries have also increased. The entitlements of free drug have increased from 89% to 99%, diet from 91% to 97%, diagnostic from 83% to 95%, 1st Referral 51% to 80% & Drop back 37% to 53% since last 5 years.
- **Skilled Attendant at Birth (SAB)** training was given to the Paramedics and AYUSH doctors to augment the institutional delivery (Public Facilities) and Home Deliveries in hard to reach areas. During the period, 255753nos. of Deliveries have been conducted/assisted by SAB trained staffs. Over a period of five years 14875 nos. of para medical staffs have been trained in SAB.

- **Maternal death review (MDR) committees** are formed at State and district level to review the maternal death. During 2021-22, **376** nos. of maternal death have been reported by September 2021 (MDR Report) and out of that **300** nos. of death are reviewed by CDM&PHOs of the district. During last five year maternal deaths reported are mentioned below:

Year	No. of Maternal Deaths
2017-18	773
2018-19	708
2019-20	752
2020-21	751
2021-22 (upto Sep 21)	376

The data shows the maternal deaths are not in increasing trend.

- **Comprehensive Abortion Care (CAC):** In the State 252 facilities are providing Comprehensive Abortion Care services where trained doctors are available for providing services along with counseling & scope of post abortion contraceptive services.
- **Village Health Sanitation & Nutrition Day:** Fixed day health & Nutrition day (VHSND) is being organized every Tuesday / Friday at village Anganwadi centers. So far 98% of VHSND Sessions have been organized against the target during 2021-22 (Up to September-21). Also in hard to reach areas special VHSND and RI Sessions are held to address all left out and drop out cases. Trend of VHSND Session planned vs held has been 98% since last 5 years.
- **LaQshya:** Under this programme the LR & MOT will be standardized for providing quality care services. This will put focus on improvement of infrastructure providing respectful maternity care and ensuring regular supplies to labour room & Maternity OT. The target is set to standardize all Medical Colleges & FRUs as prospective target. By December 2021 (2021-22) 14 nos. of OTs and 13 LRs have been certified from State and National Level.
- **Obstetric HDU & Hybrid ICU:** For providing critical care for obstetrics cases, 3 High Dependency Units are functional in 3 DHH (Kandhamal, Kalahandi & Keonjhar district) and 2 Hybrid ICUs in MCH MKCG, Berhampur & MCH SCB Cuttack are operational since last two years.
- **Maternity Waiting Homes (Maa Gruha)** The Maa Gruha are established near to delivery points to accommodate the expected delivery cases from difficult geographical pockets at least before 7-10 days of Expected Date of Delivery for having safe institutional delivery. Maa Gruha not only provides facilities of temporary rest shed but also a home with counseling services to mothers on personal hygiene, family planning measures and new born care etc. Currently out of 93 State target Maa Gruha, 91 Maa Gruha are functional of which 36 nos. are functional within last five years.
- **Initiatives for Anaemia Control:** IFA & Calcium Supplementation - About 4.5 Lakhs Pregnant women covered during 2021-22 (Upto Nov 2021). Inj. Iron sucrose, Inj. FCM & Blood transfusion services are made available at Institution level for pregnant women with severe anemia. One time de-worming of all pregnant woman ensured during pregnancy in second trimester. During the year 2021-22 all registered ANC and PNC cases are provided with IFA & Calcium. Also the ANC Cases in 2nd trimester are given Deworming tablets. The consumption of IFA & Calcium tablets have shown remarkable improvement in last five years. The percentage of IFA consumption has



been increased for 78% (FY 2017-18) to 91% (FY 2021-22) and Calcium tablet consumption has improved from 26% (FY 2017-18) to 88% (FY 2021-22) in last 5 years.

- PMSMA:** This programme focused on screening of antenatal cases by doctor preferably O&G specialist at least once during 2nd or 3rd trimester. This activity is implemented on 9th of every month on fixed day basis. PMSMA also encourages participation of private practitioner. All the facilities in the level of CHC and above are implementing this programme as per mandate. The prime objective of the programme is to screen for high risk pregnancies and initiate its management as appropriate. During the year 2021-22 (Upto December 2021) 84,220 nos. of antenatal cases have been screened. 73 nos. of volunteers are providing services in the PMSMA clinic days in different government health institutions and 6,528 nos. of high risk cases has been detected who were given Red Card. During last five years 7,42,003 nos. of antenatal cases have been screened under PMSMA Programme.
- SUMAN:** Surakshit Matritva Aswasan (SUMAN) is a programme which has been implemented in the year 2020-21 with the aim to provide assured, dignified, respectful and quality health care at no cost and zero tolerance for denial of services for every pregnant woman newborns and all mothers upto 6 months post delivery cases visiting the public health facility in order to and all preventable maternal and newborn deaths and morbidities and provide a positive birthing experience. Under SUMAN a prospective target of 554 DPs have been made for notification under various SUMAN packages viz SUMAN Basic, SUMAN BEmOC & SUMAN CE moNC. By December 2021, 338 nos. facilities have been already notified by the respective DQACs for providing services as per SUMAN package.



5.3 Child Health

Major interventions undertaken through NHM for the reduction of infant and under-five mortality in the State are as follows:

- New Born Care Corner (NBCC):**
 The State has established 530 newborn care corners at functional delivery points, i.e. both at labour rooms and maternity OTs for providing essential newborn care & resuscitation and thereby preventing mortality & brain damage immediately after birth. In the last 5 years, the State has a similar trend in the NBCCs, with about 7-8% live births resuscitated and 4-5% live births referred to higher centres for appropriate treatment in a year.
- New Born Stabilization Units (NBSU):**
 For treatment of moderately sick & low birth weight newborns and for stabilization of sick newborns prior to referral, the State has established 42 Newborn Stabilization Units and 3 NBSUs are under the process of establishment. Further, the State has also planned to establish new NBSUs in all FRUs and some high case load non-FRUs in a phased manner. In the last 5 years, although the overall admission of newborns in the NBSUs has declined, the proportion of newborns successfully discharged from NBSUs has increased from 68% in 2017-18 to 73% in 2021-22 (upto Sep.2021). The proportion of referrals from NBSUs to higher centres for appropriate treatment ranges from 24% to 31%.

- Special Newborn Care Units (SNCU):**
Currently, the State has 44 functional Special Newborn Care Units (SNCU) (out of 45 planned) at different medical college & hospitals, district headquarter hospitals and sub-divisional hospitals for treatment of severely sick newborns. Provision of CPAP & other sophisticated gadgets has been done to SNCUs of MCH and high case load districts. In the last 5 years, the overall admissions in SNCUs in the State have increased from 46538 in 2017-18 to 47176 in 2021-22 (upto Dec. 21). Also, the proportion of newborns successfully discharged from these units has increased from 72% in 2017-18 to 76% in 2021-22 (upto Dec.21) and the referrals have gone down from 14% to 12% in the last 5 years.
- Kangaroo Mother Care (KMC) Units:**
KMC units have been established in all 45 institutions adjoining the SNCU and 15 high case load NBSUs for providing Kangaroo Mother Care to low birth weight & sick newborns, i.e. for maintenance of warmth and promotion of early initiation of breastfeeding through skin-to-skin contact with special focus on preterm, LBW and sick newborns. During 2017-18 to 2021-22 (up to Dec.21), the proportion of LBW admissions in SNCUs receiving KMC has gone up from 33% to 54% in the State.
- Home based new born care (HBNC):**
All ASHAs have been trained for making home visits to newborns for early identification and referral of newborns with danger signs and providing counselling to caregivers on home based newborn care. Under HBNC, 86%-87% of all live births are visited by ASHAs and the proportion of newborns receiving six visits has gone up from 92% in 2017-18 to 94% in 2021-22 (upto Sep. 21). The high risk newborns identified ranges from 3%-4% and the % of high risk newborns referred ranges from 91%-93% in the last 5 years.
- Intensified Diarrhoea Control Month (IDCM):**
During 2018, the campaign was modified to cover each household and a prophylactic ORS packet was distributed by ASHA to each household for prevention & control of diarrhoea in both adults & children. During the campaign, ASHA made home visits to each household in her area and counselled the mother/caregiver on preparation of ORS with demonstration, danger signs and when to seek help in case of an incidence of Diarrhoea. Besides, ORS corners are established at all facility level to address any diarrhoeal case as well as counsel parents/caregivers on ORS preparation & treatment and a special zinc awareness campaign was taken up to increase the utilisation of zinc during diarrhoea. While 3069602 under five children were covered in 2017-18, 3675923 U5 were covered in 2021-22. The proportion of U5 who were distributed with prophylactic ORS has increased from 84% in 2017-18 to 100% in 2021-22.
- National Newborn Week (NNW):**
A week of dedicated IEC activities was carried out during November 15th to 21st each year for awareness generation on newborn care at home. Besides, all newborns are screened at delivery points and medical colleges and home visits to all newborns by ASHAs. NNW is being celebrated in the State since 2019-20, where 9264 newborns were visited by ASHA during the week and subsequently during 2021-22, 30671 newborns were visited by ASHA during the week.
- India Newborn Action Plan (INAP):**
Under the India Newborn Action Plan (INAP), all newborns are to be administered with Vitamin K1 for preventing the newborn deaths occurring due to vitamin K deficiency bleeding disorders and

administration of antenatal corticosteroids to all pregnant women identified with preterm labour is done in order to prevent newborn deaths occurring due to respiratory distress syndrome. Administration of Vitamin K to newborns has increased from 67% in 2017-18 to 89% in 2021-22 (up to Sep.21). Similarly, administration of antenatal corticosteroids to mothers with preterm labour has increased from 7% in 2017-18 to 24% in 2021-22 (up to Sep. 21).

- **Home Based Care for Young Children (HBYC)**

All ASHAs have been trained for making home visits to all young children for early identification and referral of newborns with danger signs/ development delays/ SAM and providing counselling to caregivers on home based care of young children, appropriate feeding practices, ORS & Zinc therapy and IFA supplementation. The implementation of HBYC programme started in 2019-20 in the State in 14 districts which was later scaled to all 30 districts. In 2019-20, 102657 children were visited of which 8% children were identified as sick and 93% of them were referred. In 2021-22 (upto Sep.), 685015 children were visited, of which 3% were identified as sick and 76% of them were referred.

- **Childhood Pneumonia Management Programme: Social Awareness and Action to Neutralize Pneumonia Successfully (SAANS)**

SAANS programme was rolled out in 2020-21 on World Pneumonia Day on 12th November, 2020 by the Additional Chief Secretary, H&FW Deptt., Govt. of Odisha. Under this programme, all doctors and Staff nurses are being trained on standard facility based management protocols for management of childhood pneumonia. Besides, an extensive IEC campaign was carried out from 12th November, 2020 till the end of February, 2021. All ASHAs and ANMs have also been trained on early identification and prompt management of childhood pneumonia cases. In the last 5 years, the number of under-five pneumonia cases reported in the State has declined from 12759 in 2017-18 to 9822 in 2021-22 (upto Sep.21).

- **Child Health Review (CDR):**

Child death review has been implemented in the state during 2015-16 under which committees have been formed at State and District level for detailed review and analysis of each under five child death and taking necessary corrective actions. The total no. of under-five child deaths in the State shows a declining trend, with 16077 deaths in 2017-18 and 6692 deaths in 2021-22 (upto Sep.21). The proportion of U5 deaths reviewed has increased from 82% in 2017-18 to 85% in 2021-22 (up to Sep. 21) and the proportion of neonatal deaths reported shows a decline from 61% to 57% in the last 5 years.

- **Emergency Triage Assessment & Treatment (ETAT) units:**

Under NHM, Paediatric ETAT units are now being established at each DHH level in the emergency or near the ward for triaging of patients and for providing emergency & immediate care to severely ill children. The State has planned to establish 32 ETATs, i.e. one in each of the district headquarters hospitals.

- **Paediatric Hybrid Intensive Care Units & Paediatric Intensive Care Units (PICU):**

The State has also established 4 PICUs at medical college & hospital level for treatment of very sick children. Besides, under ECRP-2, the State is now establishing a 12 bedded hybrid ICU (HDU+ICU) at 29 DHHs in the State for treatment of very sick children.

- **Capacity building of Specialists, MOs, nursing officers and Health workers involved in Newborn & child care is being done from time to time to ensure quality service delivery.**



SNCU



KMC Unit

5.4 Rashtriya Bal Swasthya Karyakram (RBSK)

Rashtriya Bal Swasthya Karyakram (RBSK) rolled out in Odisha by Honourable CM at Baripada on 1st March-2014 .The objective of the programme is to screen the children at early stage and provide complete treatment. Under this programme, 40 identified health conditions are to be addressed through '4D' approach which includes **Defect at Birth, Deficiencies, Childhood Disease and Developmental Delay & Disabilities**. Under this programme, 636 number of Mobile Health Teams are functional for screening of 1.07 Crore 0-18 years children.

Screening of Children at AWC & Schools:

- During the Year 2021-22, 18.33 Lakh children have been screened by MHT out of targeted 1.07 crore children. Due to Covid Pandemic situation, RBSK screening activities at AWC & Schools have been deferred. Periodical screening by MHTs at AWC & Schools will resume after opening of AWC & Schools.

Screening of New Born at Delivery Points:

- New born screening of visible birth defects continuing at Delivery Points by the service providers. During the year 2021-22, 241387 new born have been screened at delivery points and 2934 number of children have been identified with congenital birth defects.
- For early identification and timely intervention, New Born hearing screening is continuing in 28 DEICs of the State. All SNCU admitted babies and High risk new born at District Head Quarter Hospital are screened by DEIC. During the year 410 number of new Born have been identified with hearing defect and provided required follow up therapy by DEIC.



➤ To prevent Retinopathy Of Prematurity related blindness, regular ROP screening sessions conducted at 10 Health facilities. During 2021-22, 2462 number of sick new born are screened and 122 numbers of identified babies are provided laser therapy to prevent blindness.



Early Intervention & Therapeutic services at District Early

Intervention Centers :For treatment of Birth defect children, therapeutic intervention for Developmental Delay and children with impairments, DEIC is established in 32 District Head Quarter Hospitals of the State. During the year, in spite of Covid pandemic situation, children with birth defect are provided referral treatment and 34,739 children are provided early intervention services at DEIC.

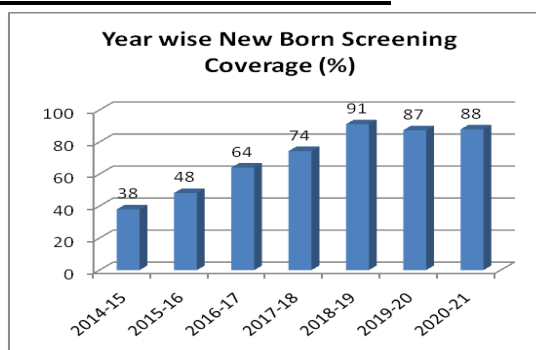
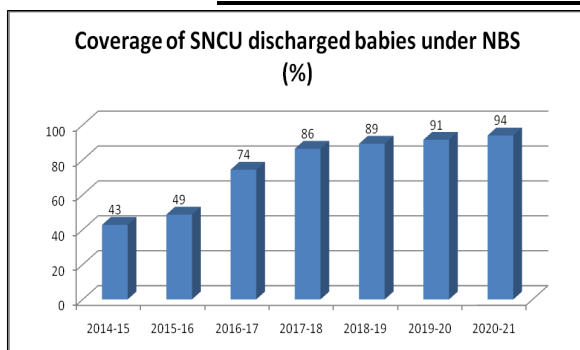
Major Health Conditions treated under RBSK during the year is as follows.

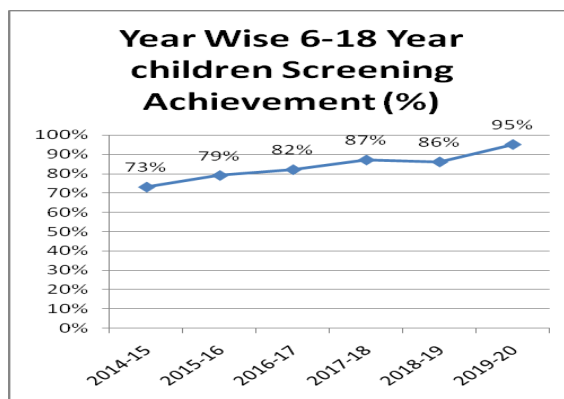
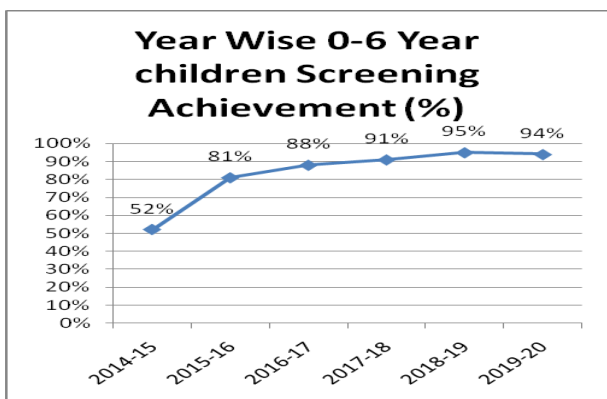
Major Health Condition	Achievement during 2021-22
NTD	55
Down Syndrome	236
Cleft Lip & Palate	476
Congenital Cataract	220
Club Foot	621
Hearing Impairment	510
CHD	412
Other Surgeries	174
Retinopathy of Prematurity	122
SAM children referred to NRC	2558
Developmental Delay	34739

Tie Up with Different Institutions for Treatment of identified children:

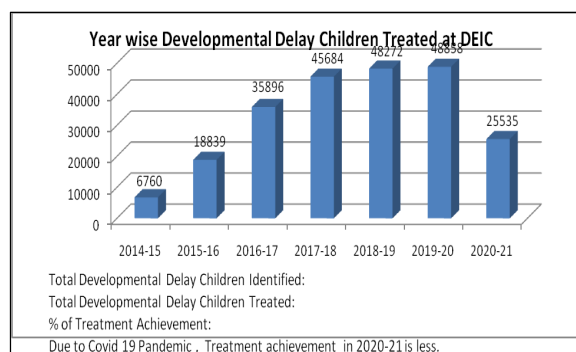
Health Condition	Name of the Institution tied up
Neural Tube Defect	SCB MCH, Cuttack, SVPPGIP, Cuttack & AIIMS,BBSR
Cleft Lip & Palate	SCB MC&H, MKCG MC&H, AIIMS and Five Smile train empanelled hospitals
Congenital Cataract	LVPEI, BBSR
Hearing impairment	Ali Yavar Jung National Institute for Hearing Handicapped, Janala
Congenital Heart Disease	SCB MC&H, Capital Hospital, BBSR, Narayana Hrudayalaya, Mission Hospital, Durgapur & Sathya Sai Heart Hospital, Ahmadabad
Club Foot	Cure International Trust
RoP	LVPEI, BBSR
Other Surgery Cases	SCB MCH, VSS MCH, MKCG MCH , SVPPGIP & AIIMS, Bhubaneswar

Trend of Year Wise Achievement of different Indicators:





Year	Birth Defect Identified	Birth Defect Treated	% of Treatment Achievement
2014-15	1803	1305	72
2015-16	4413	3341	76
2016-17	6189	4967	80
2017-18	9744	7989	82
2018-19	10240	8605	82
2019-20	10356	8725	84
2020-21	4220	5043	135
Total	46965	39975	86



5.5 Rashtriya Kishor Swasthya Karyakram (RKSK)

Rashtriya Kishor Swasthya karyakram (RKSK) expands the scope of preceding ARSH programme, through identification of six priority areas viz. Nutrition, Mental Health, Substance abuse, Injuries and Violence, Prevention of Non- Communicable diseases and Sexual and Reproductive Health. Capacity building of service providers in these six thematic areas is vital for effective and successful implementation of RKSK programme.

The program focuses on adolescents belongs to age groups 10-14 years and 15-19 years with universal coverage, i.e. males and females; urban and rural; in school and out of school; married and unmarried; and vulnerable and under-served.

The program implemented under RKSK are as follows:

- Peer Education:** Community based interventions that focus on peer education for establishing direct communication platforms such as (quarterly adolescent health day, weekly and monthly adolescent health sessions and establishing convergence with other programs) with target adolescents on regular basis. The peer education program aims to ensure that target adolescents benefit from regular and sustained peer education sessions covering the six identified health issues (nutrition, sexual and reproductive health, conditions for NCDs, substance misuse, injuries and violence including gender based violence and mental health). This is eventually expected to improve life skills, knowledge and aptitude of adolescents.



The programme implemented in 4 districts (Dhenkanal, Bolangir, Koraput & Bhadrak). Peer Education program

has been rolled out covering 5901 villages in 43 blocks and 28620 Peer Educators identified.

To strengthen peer Education programme following activities are undertaken:

1. All Selected Peer Educators are trained and provided with Peer Kit.
2. Peer Educators are provided with T-Shirt, Cap and badge for their recognition.
3. In AFC meeting all PEs are provided with non financial incentives.
4. NGO support for handholding of PEs has been started.
5. Provision of Pico projector at sub centre level has been accorded for audio video and other infotainment activity.

Name of the programme	2017-18		2018-19		2019-20		2020-21		2021-22 (up to 12-21)	
	T	A	T	A	T	A	T	A	T	A
Peer Education A. District coverage	--	2	--	2	2 old+ 2 new	4	--	4	--	4
B. Total selection of peer Educator and provided with 6 days training	13464	12696	--	12696	13464 + new 15924	28620 (Cumulative)	--	28620 (Cumulative)	--	28620 (Cumulative)

- **Adolescent Health Day(AHD) :**

The objectives of Adolescent Health Day (AHD) are:

Improve coverage with preventive and promotive interventions for adolescents. Increase awareness among adolescents and stakeholders on adolescent health needs, Increase awareness among adolescents about the determinants of adolescent health such as nutrition, SRH, mental health, injuries and violence (including Gender Based Violence - GBV), substance misuse and conditions for Non-Communicable Diseases (NCDs) & Improve awareness of other Adolescent Health related services, in particular Adolescent Friendly Health Clinics (AFHCs)/Shradha clinics.



AHDs organised by ANMs with the help of ASHA, AWW & PEs focusing on activities like sharing **Information on** Nutrition,SRH,Mental Health,GBV & NCDs, provision of **Commodities** like Sanitary Napkins,IFA,Albendazole & contraceptives and different **Services like** General health check-up, (BMI& anemia),Referral to SHRADHA clinics (for counseling and clinical services).

Currently the program implemented in 4 districts (Dhenkanal, Bolangir, Bhadrak & Koraput) .

Name of the programme	2017-18		2018-19		2019-20		2020-21		2021-22 (up to 12-21)	
	T	A	T	A	T	A	T	A	T	A
Adolescent Health Day(AHD)	8712	8403	11616	10339	15741	13248	30576	21485	39464	26516

- **Menstrual Hygiene Scheme (MHS):** The MHS program aimed at promotion of menstrual hygiene

among adolescent girls aged (10-19 years) in rural areas to increase awareness among adolescent girls on menstrual hygiene, build self-esteem, and empower girls for greater socialization, to increase access to and use of high quality sanitary napkins by adolescent girls in rural areas, and to ensure safe disposal of sanitary napkins in an environment friendly manner. Currently the program implemented in all 30 districts.

The channel of interventions is mainly through social marketing of sanitary napkins by ASHA. Adolescent girls can purchase sanitary napkin (Rs.6/-pkt) from ASHA. In Odisha the sanitary napkin packet branded as “Khushi”. Total 466414 out of school adolescent girls targeted under the programme and distributed sanitary napkins through AHSA.

- **The Weekly Iron and Folic Acid Supplementation (WIFS)** program involves the administration of supervised Weekly Iron-folic Acid Supplements of 60 mg elemental iron and 500 mcg Folic acid using a fixed day approach for school and non school going adolescents respectively, screening of target groups for moderate/severe anemia and referring these cases to an appropriate health facility, biannual de-worming (Albendazole 400mg) for control of helminthes infestation, information and counseling for improving dietary intake and for taking actions for prevention of intestinal worm infestation.



- The IFA distributed at all schools and AWC on weekly basis.

WIFS Coverage in %				
	2018-19	2019-20	2020-21	2021-22 (April to Dec 21)
Girls (6th -12th) provided 4 IFA tablets in schools Total Beneficiaries : 1525448	28.9	38.3	65.5	52.4
Boys (6th -12th) provided 4 IFA tablets in schools Total Beneficiaries : 1574262	28.9	37.5	63.9	49.6
Number of out of school adolescent girls (10-19 years) provided 4 IFA tablets at AWCs Total Beneficiaries : 812568	26.3	35.2	70.5	47.0

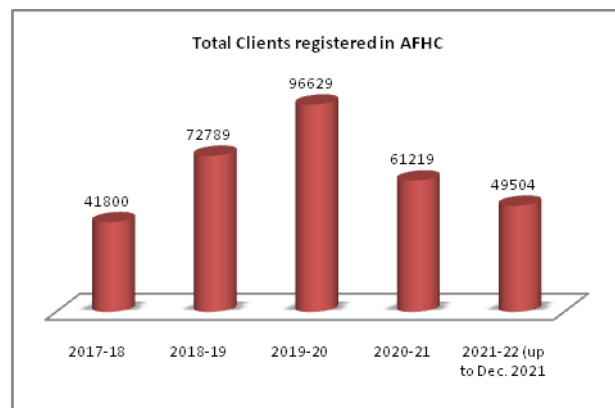
- **Adolescent Friendly Health Clinic:** The facility level interventions are mainly linked to strengthening of adolescent friendly health clinics (designated as Shraddha clinics in Odisha). The shraddha clinics provides counseling and curative services at primary, secondary and tertiary levels of care on fixed days and fixed time with due referral linkages. The three key functions of the clinics are availability of commodities (WIFS tablet, albendazole, sanitary napkins, non-clinical contraceptives and medicines), information sharing and counseling on six identified health issues of adolescents through behavior change communication tools and curative services.



251 Shraddha clinics are Operational covering all 30 districts in DH, SDH and some designated CHC level. At District Hospitals the Shraddha clinics clubbed with Integrated Counseling Centre.

- **School Health Programme Under AYUSHMAN Bharat:**

School Health programme is a joint initiative of Department of Health and Family Welfare and Department of School & Mass Education. Under the programme two teachers, preferably one male and one female, in every school designated as “Health and Wellness Ambassadors” and will be trained to transact health promotion and disease prevention information in the form of interesting activities for one hour every week in schools. **In Odisha 10 aspirational districts were targeted in 2020-21 to implement the programme with a target to cover 8456 schools in 101 blocks of 10 districts and expanded to 10 more districts in 2021-22 with a target to trained 17940 HWAs.**



5.6 Routine Immunization

Immunization is one of the most cost effective interventions for disease prevention. Traditionally, the major thrust of Immunization services has been the reduction of infant and child morbidity and mortality. To maintain the quality of vaccination efficient supply chain management & Cold chain management State of Odisha has 1 State Vaccine Store, 9 Regional Vaccine stores & 32 District Vaccine stores & 1255 Functional Cold chain points across the State which targets to 9,38,255 Pregnant women & 8,01,356 infants through Routine Immunization. Every year, 3,52,082 numbers of sessions are being conducted every year to vaccinate the target beneficiaries.

The State is providing immunization services to children & pregnant women to prevent 12 vaccine preventable diseases i.e. as per immunization schedule Govt. of India, through fixed immunization day approach (In Wednesday). In addition to this, integrated VHND & RI sessions are being conducted in identified hard to reach villages under SAMPURNA strategy.

Odisha's Full immunization coverage as per different surveys.

- Annual Health Survey 2010-11 – 55 %
- Annual Health Survey 2011-12 – 62.3 %
- Annual Health Survey 2012-13 – 68.8 %
- National Family Health Survey 2015-16 – 78.6 %
- Integrated Neonatal & Childhood Survey 2016 – 83.8%
- National Family Health Survey 2019-21 - 90.5 %

Special Immunization drive in Low performing 135 Blocks of 28 Districts and all UPHC of 5 Municipal Corporation.

Spl. Imm. Drive is conducted in 131 low performing Blocks of 26 Districts from November 2021 to January 2022.

IMI 4.0 drive : IMI 4.0 drive will be conducted from March 2022 for 3 months.

IPPI (NID) 2022 : The NID 2022 will be conducted in one round in Odisha i.e. 27.02.2022

Electronic Vaccine Intelligence Network (eVIN) –

- Now State is managing vaccine logistics supply chain till last mile & able to minimize stock out instances, wastage rate & able to manage the temperature in all the cold chain equipments of the State.

National Cold Chain Management Information System(NCCMIS)-

Total Functional Cold Chain Equipment :-1255

No of Functional ILR(Cold Chain Equipment) :-2621

No of Functional DF(Cold Chain Equipment):-1751

Sickness Rate (Breakdown Rate) :- 0.3%

Antigen	Achievement in %
Td (pregnant women)	74
BCG	75
OPV	77
Pentavalent	77
MR	87
IPV	74
Rota Virus Vaccine	77
Full Immunization	87

Source HMIS

Till Date Achievement Covid-19 Vaccination: - 56646617

- 1st Dose Achievement 31927011 (94%)
- 2nd Dose Achievement 24302243 (75%)
- Precaution Dose Achievement : 417363

Dedicated Power Supply under Routine Immunization Programme – 2021-22

1. **Achievement :-** One genset for State Vaccine Store, four nos. Genset for RVS and 31 Nos. of genset for DVS, 286 inverter and 154 Generators for Cold Chain Points, four servo voltage stabilizer for RVS and 380 low voltage stabilizer for Cold Chain point have been purchased and installed respectively and on going expenditure of electricity charges. Maintenance and repair of Vaccine Van, DOL for generator & AMC for repair of Generator will met for activities from this fund as when required in every year and installation of Genset for newly supply of WIC & WIF at SVS and 6 RVS level(Koraput, Ganjam, Sambalpur, Sundargarh, Balasore and Cuttack). Installation of Transformer for WIC Cuttack and Installation of WIC/WIF , Genset of State Vaccine store , Bhubaneswar. The money has been utilized for upgradation Cold Chain points for COVID-19 vaccination.

5.7 NUTRITION

The state has been adopting diverse Nutrition program interventions are as mentioned below :

I. Promotion of Infant and Young Child Feeding practices for preventing under-5 child death (through community & facility based interventions by – Capacity building of ANMs/ASHA/AWW on IYCF/Mothers’ Counselling on Breast feeding & Complementary feeding)

Facility /Community level initiative for various training and IEC activities are going on Under MAA Programme

- Initiation of Breast feeding within one hour of Birth
- Exclusive Breast feeding up to six months
- Complimentary feeding practices and age appropriate diverse foods from six months of age
- Continuation of Breast Feeding up to 2 years or more.

Coverage :

- 148 Master trainers are trained on MAA in 7 days state level TOT.
- 3623 Medical Officers, 140 Counsellors, 3091 Staff Nurses, 7336 ANMs and 34984 ASHAs were trained of Infant and Young Child Feeding practices and improved counseling skills.

National Iron Plus Initiatives

National Iron Plus Initiative (NIPI) programme, an anaemia control programme, has been implemented across the state by Health and Family Welfare Dept. in coordination with School and Mass Education Dept. (S&ME Dept.), Women & Child Development Dept (WCD Dept) and ST & SC Development Dept.

II. This programme is catering to the following beneficiaries:

- Children 6 months to 5 years age group: IFA syrup (1 ml contains 20 mg elemental iron and 100 mcg Folic Acid) are administered by ASHA bi-weekly (Tuesday & Friday).
- Children 6 to 10 years age group: WIFS Junior (Pink Tablets), IFA tablets (45 mg elemental iron and 400 mcg Folic Acid) are administered on Monday by teachers to children in class 1 to 5 at all Govt. & Govt. Aided schools.
- Adolescents (10 to 19 years age group):
 - For School going Adolescents: WIFS (Blue Tablets), IFA tablets (60 mg elemental iron and 500 mcg Folic Acid) are administered on Monday by teachers to adolescents in class 6 to 10 at all Govt. & Govt. Aided schools.

- For Out of School Adolescent Girls: WIFS (Blue Tablets), IFA tablets (60 mg elemental iron and 500 mcg Folic Acid) are administered on Saturday to adolescents girls at Anganawadi Centres by AWWs.

State Coverage:

Year	Children 6-59 months	Children 5-9 yrs	Adolescent 10-19 yrs (In school)	Adolescent Girls 10-19yrs (out of school)	Source
2020-21	29.6%	62.5%	60.0%	-	AMB Dashboard
2021-22 (Up to 3 rd Qtr)	36.34%	59.32%	50.99%	47.06%	HMIS

III. NRC / Facility based Interventions for management of Severely Acute Malnutrition (SAM) Children

- A Nutrition Rehabilitation Centre (NRC) is a unit for the management of severely acute malnourished children- Children admitted with defined admission criteria who are referred by from VHND and RBSK teams
- Children kept under observation and provided with medical and therapeutic care
- Focus on improving the skills of mothers on complete care and feeding.

State Coverage

Year	No. of NRC Functional	No. of Admission	Total Discharge	% of Recovery
2020-21	66	6307	5712	90%
2021 (Upto Dec.)	67	6023	5155	85%

IV. Vitamin-A supplementation

Children of age group 9 months-5 years receive Vitamin – A supplementation biannually along with Routine Immunization in total of 9 doses are administered to the children <5.

State Coverage:

Year	1 st . Round	2 nd Round
2020	96% (Feb. Round)	97%(Sep. Round)
2021	98.6%(Feb. Round)	98.5%(Aug Round)

V. National Deworming Day (NDD):

- Administered with Albendazole at AWC and Schools.
- It is a fixed day approach with a mop up day to cover left outs due to absenteeism or sickness
- Started since February, 2016 & conducted biannually in February and August every year

State Coverage:

Year	1 st . Round	2 nd Round
2020	95.6% (Feb. Round)	97%(Sep. Round)
2021	97.4%(Feb. Round)	98.1%(Aug. Round)

5.8 SAMPurNA

❖ Objective:

- The State aims to achieve an additional 30% decline of State Maternal Mortality Ratio (MMR) and Infant Mortality Rate (IMR) from the current rate of decline.
- Provision of good quality care to pregnant women & children for their survival by identifying high risk cases, referral and management.

❖ Strategy :

1. **Joint Home Visit:** Joint home visits by MPHWH (F) and MPHS (F)/(M) to high risk cases to monitor the health of the mother. Total **16661nos** of high risk pregnant women were covered under Joint home visits by MPHWH (F) and MPHS (F)/(M) from April April 2021 to November 2021
2. **Reimbursement of transportation cost to pregnant women from difficult villages:** Provision of reimbursement of Rs.1000/- (Rupees one thousand) per pregnant woman from difficult villages towards transportation cost to nearest motorable point.**(Implemented from 23/09/2017): 1811nos.** of pregnant women were provided with transportation cost from difficult villages to motorable points from April 2021 to November 2021
3. **Drop Back incentive package to pregnant women & sick infant:**
Provisions of Rs.500/- towards assure drop-back Transport Services for Pregnant Women after Institutional Delivery & Sick Infants treated at Public Health Facilities. **(Implemented on Sept- 2018)**
 - **99632nos.** of pregnant women were provided with drop back cost after Institutional Delivery from April 2021 to November 2021.
 - **7501nos** of Sick Infants were provided with drop back cost for treated at Public Health Facilities from April 2021 to November 2021.
4. **Incentive for ASHA for survival of high risk PW & Children:**Incentive (@ Rs.500 per case) is being provided to ASHA on survival of high risk pregnant woman up to 42 days after delivery and high risk child up to 18 months of age.
5882nos of ASHAs were paid incentive for survival of high risk pregnant woman up to 42 days after delivery and high risk child up to 18 months of age from April 2021 to November 2021.
5. **Free diet:** Free diet to pregnant mother including one attendant those who reside at maternal waiting home, also for children below five years.

5.9 EQUITY & ADVOCACY

Statistics pertaining to sexual and physical violence against women in this country are alarming as around one in three is likely to face this sort of violence in her lifetime. Thirty three percent plus is a big number while the approach to mitigating such problems has to be a holistic one cutting across boundaries.

Thirty (30) One Stop Centers have been established in the State, to address Gender based violence victims. 47 thousand ASHAs have been trained in Gender Based Violence. PC & PNDT Act implemented in all 30 districts. 60 doctors of public facilities trained on the guidelines & protocols on Medico-legal care for survivors/victims of sexual violence. 180 staff nurses training on the GUIDELINES & PROTOCOLS on Medico-legal care for survivors/victims of sexual violence is on the anvil.

5.10 Strengthening Implementation of PC & PNDT ACT

Pre-Conception and Pre-Natal Diagnostic Techniques (PCPNDT) Act, 1994 with Rules made thereunder is an Act of the Parliament of India enacted to safeguard the girl child, to stop female foeticides and arrest the declining sex ratio in India. The act banned prenatal sex determination. The Courts have at all material times and in all possible manners delivered judgments indicating therefore that the PC-PNDT Act is actually a whip to penalize those indulging in sex determination and to serve as a deterrent to others. The recent judgments of the Courts are also supportive of the strict implementation of the PC-PNDT Act.

The State Government has taken the following steps for effective implementation of Pre-Conception & Pre-Natal Diagnostics Techniques (Prohibition of Sex Selection) Act, 1994:

- Institutional mechanisms for act implementation are in place and regular reviews and meetings are being organized at State and District levels.
- Influencing state policy, special provision has been made in the State Policy for Women & Girls for protection and promoting value of the Girl Child.
- To assist the parents in providing a better future for the girl children and to create community awareness regarding value of girl child the State Government has taken up a scheme named as “Biju Kanya Ratna Yojana”. The scheme is similar to the Beti Bachao Beti Padaho programme.
- Biju Kanya Ratna Yojana is being implemented in Dhenkanal, Angul and Ganjam District having low child sex ratio and BBBP programme in Nayagarh district.
- Training and Capacity building programme’s are being organized for the key stake holders such as, Appropriate Authorities, Advisory Committee Members, Doctors, Lawyers, Judicial Officers, prosecuting Officers, College Students, Medical interns & budding doctors, NGO, , Media representatives, PRI members, IMA, FOGSI & IRIA members, SHG members etc.
- Community level action initiated for addressing gender discrimination and sex selection. The community are being sensitized through interactive sessions, audio jingles, advertisement in print & electronic media, panel discussion, docudrama, TV spots, information on village Swarthy Kantha, hoardings & wall paintings, tabloid during observance of Republic day parade at State and District level etc. Dedicated PC & PNDT website hosted for sharing of knowledge and information of public.
- Resource and communication material in form of FAQ, leaflet, poster, banner, doctor’s kit, legal kits etc. have been developed disseminated for awareness generation.
- Inspection teams have been constituted at state and district levels and regular inspections are being made to apprehend the law breakers.
- 72 cases have been filed for violation of PC & PNDT Act, 1994. 15 cases have been disposed up in the court with 6 convictions. 5 proposal submitted to the State Medical Council u/s 23 (2) of PC & PNDT Act, 1994.

Achievements

- State has made Online Registration and Renewal mandatory for all Ultrasound Centres from January 2021 onwards. FORM A, B, C and F mandated under the PC & PNDT Act including Online Payment.
- Budget allocated for Informers’ Incentive in NHM PIP since 2017.

Key Indicators	2017	2018	2019	2020	2021
New USG Registration	44	54	86	66	91
New USG Renewal	106	43	51	44	48
Inspections	378	305	391	224	265
Registration Cancelled / Suspended	34	17	16	07	14
Sex ratio at Birth	920	930	929	930	931
PC PNDT website	√	√	√	√	√

CHAPTER 6

Directorate of Food Safety

HUMAN RESOURCE:

- ❖ For ensuring effective & proper monitoring of food safety activities in the State, 37 new posts of Designated Officers were created.
 - ❖ Recently 35 No. of FSOs are empanelled for new recruitment.
- (1) **FOSCOS(Food Safety and Compliance System)** The online FOSCOS was first started in Odisha among all larger states from 1st March ,2020 and all license and registrations are issued at the earliest for ease of doing business.
 - (2) To facilitate FSS activity recently mobility support is also provided to all the district and ULBs .
 - (3) **In 2020-21 the All India ranking of Odisha in the National Food Safety Index increased from 13th position to 4th position.**

UPGRADATION IN FOOD TESTING FACILITY

- The State Food Testing Laboratory is now NABL accredited and the cadre of the State Food testing Laboratory is approved.
 - Kalyani Laboratory, Bhubaneswar (NABL and FSSAI empanelled) is now utilized for quick checking surveillance Food samples for effective enforcement.
 - Regional Food Testing Laboratory are already in process of setup under OMBADC in Sukinda, Keonjhra, Sundargarh and Mayurbhanj.
 - The RWSS laboratories at District level are now also available for testing water samples in all districts required for Food license, Registration and surveillance checking of water samples.
- a. **Sample Collection & Testing:** The Food sample (both Legal & Surveillance) are being collected regularly by the Food Safety Officers to check the quality & standard of the Food products.

Year	Total No. of Samples Received	No. of Samples Analysed	No. of Samples found adulterated and Mis-branded	No. of Cases Launched	
				Criminal	Civil
2016-17	508	508	75	19	42
2017-18	229	229	54	13	29
2018-19	327	327	91	14	33
2019-20	702	702	73	12	61
2020-21	994	896	108	33	84
2021-22(Jan)	852	852	114	45	20
TOTAL:				136	269

Total No of Compounding Cases =280, Fine collected=Rs 8.2 lakhs

Year	Total No. of Samples Received	No. of Samples Analysed	No. of Samples found adulterated and Misbranded
2016-17	1040	1040	314
2017-18	1376	1376	373
2018-19	1599	1599	477
2019-20	2200	2200	523
2020-21	2730	2153	468
2021-22(Jan)	2365	2295	364

b. One Mobile Food Testing Laboratory(MFTL) MFTL is regularly covering 30 districts and 6 ULBs of Odisha,

c. **ENFORCEMENT:**

Food License and Registrations:

Online Licenses Issued Till date	29102
Online Registration Certificates issued till date	86285
Total Amount Collected by the State	Rs.18,21,58,220.00

- Use of IT enabled inspection techniques of Food Businesses Unit through FoSCoRIS(Food Safety Compliance through Regular Inspection and Sampling System)

TRAINING AND OTHER ACTIVITIES.

- (i) (Food Safety Training & Certification program) Training have been conducted in Odisha to ensure safe and hygienic food to the consumers. Till Now more than 38,000 Food Business Operators are trained in different parts of Odisha.
- (ii) Digital Mitra Training: To increase the online FOSCO trainings were conducted where applicants were trained to help the FBOs for filing online applications for ease of doing business.
- (iii) PAN India survey conducted on Oil, Paneer, Khoya, Milk and Milk products conducted in all districts
- (iv) **Different newer initiatives have been started regarding Food Safety** i.e.
 - a. Clean Street Food Hub- is implemented in Khaogali, Bhubaneswar
 - b. Eat Right Campus –Established in Food academics, Treatment & business establishment in capital and AMRL, KIIT, APOLLO, IHM JP Hospital have been declared as Eat Right Campus
 - c. BHOG- 3 temples (SaniMandir, Kali Mandir, SaiMandir at Bhubaneswar) are chosen to be established. ISCON, Bhubaneswar and Tarini Mata Mandir, Rourkela certified under BHOG.
 - d. Bhubaneswar Railway Station is declared as the Eat Right Station which is sixth one in all over the country this year in Eat Right practices.
 - e. SNF- Different Fortification procedures and RUCO for restrictive use of overcooked oil initiatives have started to function.
 - f. Share Food- Under this initiative surplus foods are distributed at the hunger point through NGO.

Special Drives

Food Fortification :Online Training on fortification has been given to Food Safety Officers and Lab personnel by KHPT on 21st December 2021

- Training to milk manufacturing units was given by KHPT in online mode on 4th January, 2022

Eat Right India Movement :

- Commissioner Food Safety, Odisha has been selected as a member of the **National Level Advisory Committee on Eat Right Movement in India** by FSSAI.
- Under this initiative different campus including schools, **colleges, health institutions**, workplaces, **jail, food establishments** will be checked for food safety and nutrition and will be rated after meeting the compliance.
- Presently Bhubaneswar Municipal Corporation (BMC), Gajapati, Sambalpur, Cuttack and Balasore have completed the parameters for Eat Right Challenge.
- Eat Right Mela and Walkathon will be conducted in Bhubaneswar and Puri in March, 2022

CHAPTER 7

Director of Medical Education and Training

- MBBS course in two New Medical College & Hospitals of the State i.e. at Pandit Raghunath Murmu MCH, Baripada & Saheed Laxman Nayak MCH, Koraput has been renewed for the 4th batch during 2020-21.
- In order to meet the demands of Doctors of the State, MBBS course has been started from the academic session 2018-19 in two new Medical Colleges and hospitals of the state, i.e. at Fakir Mohan Medical College & Hospital Balasore & Bhima Bhoi Medical College & Hospital Bolangir and 3rd renewal done during 2021-22.
- The admission procedure for MBBS students with 100 intake capacities is going to be started during the year 2021-22 at Shri Jagannath MCH, Puri. Further, the construction work of another two new Medical Colleges i.e. Keonjhar & Sundargarh with 100 intake capacities of MBBS students are under process and the admission will be started during the year 2022-23.
- Steps have been taken for enhancement of P.G seats in different disciplines at three Govt. Medical Colleges, i.e. at SCBMC Cuttack, MKCGMC Berhampur & VIMSAR Burla.
- All the Medical Colleges of the states have been equipped with RTPCR facilities and VRDL for COVID testing and to tackle any future Epidemic.
- One New Super Specialty Course has been started in Department of Pulmonary Medicine at SCB MCH, Cuttack during session 2020-21.
- Online Registration of Clinical Establishment has already been started.
- Establishment of Tertiary Cancer Centre at MKCG MCH, Berhampur & VIMSAR, Burla are under process.
- Steps are being taken for functionalisation of Liver Transplantation Unit (Adults) at SCB MCH, Cuttack. Further, the EOI for Liver Transplantation Unit (Paediatric) at SCB MCH, Cuttack has been invited and is under process.
- 176 Nos. of Kidney transplantation has already been conducted at SCB MCH, Cuttack till date.
- SOTTO has co-ordinate 4 nos. of Cadaveric Kidney Transplantation till date i.e. 1 no. at SCB MCH, Cuttack, 2 nos. at Apollo Hospital, Bhubaneswar and 1 nos. at AMRI, Hospital, Bhubaneswar.
- 33 no. of Trauma Care Facilities units are functioning in the State. Till date 151 Doctor, Nurse and Pharmacists have been trained. All the trauma patients received in Govt. institutions up to DHH are already made free.
- Free (Cash less) treatment in 11 nos. of private hospitals for first 48 hours for Trauma Victims has already been approved under FTTF scheme.

- High- End Instruments like Anatomy table and others Equipments have already been procured for 7 Govt. Medical Colleges of the state alongwith AHPGIC, Cuttack in accordance with the requirements of the patients & Medical Students. High-end mannequins for skill labs are under the process of procurement.
- During last 5 years (2017-18 to 2021-22 up to November, 2021), Rs. 347.86 Cr has been sanctioned in favor of 65,053Nos. of beneficiaries from OSTF till date. 17 numbers of Institutions outside states are empanelled under OSTFS.
- Free Cancer Drugs are being distributed in AHPGIC, Cuttack under NIRAMAYA Scheme.
- 53 Nos. of Junior Resident, 45 Nos. of Senior Resident,36 nos. of Tutor &67 Nos. of Assistant Professor, 01 No. of Associate Professor & 01 No. of Professor in different discipline have been appointed in different Medical College & Hospitals of the state during 2021-22 (upto 31st December 2021)
- Multi Disciplinary Research Unit is functioning in 3 (Three) Govt. Medical Colleges of the State and for PRM MCH, Baripadais under process.
- During the academic session 2021-22 (upto December-2021) 08 Nos. of Physiotherapy Institutions (New)& 04 Nos. of Pharmacy institutions have been given permission to start the course.
- During the academic session 2019-20to 2021-22 (up to December 2021), 37 Nos. of Allied Medical Science Institutions have been given permission to start the courses.
- In principle, it has been decided to upgrade the SCB MCH, Cuttack to AIIMS PLUS institution for which the land acquisition has already been started.

Chapter 8

State Institute of Health & Family Welfare

SIH&FW is the apex training institution of the state with mandate to train in-service doctors, paramedics and responsible for creating awareness as to create awareness on all the programme & Schemes made by Government for the welfare of the people of Odisha. The below mentioned communication & training activities were conducted by the Directorate in the year 2021-22 (Jan’).

Communication Activity by SIH&FW (O): CoE, SIH&FW planned, designed & implemented communication activities for all most all programmes of Department of Health & Family Welfare, Odisha. It also Provide implementation guideline for execution of different communication activities at District & Block Level. SIH&FW, (O) utilise the fund provided through NHM PIP, State Budget & other specific fund allotted by the Department to create awareness across the state by utilising different available platforms such as Social Media, Mass media, Outdoor (Mid) Media platforms.

Covid-19 Awareness: Prototypes of advertisement materials through News Papers & other social media platforms platform along with video & audio spots/jingles have been prepared and shared with I & PR department to create state wide awareness through mass media platforms. Different IEC materials are also shared with districts to create awareness by out-door display of poster, hoarding, standee, banner, etc on Covid 19. All available mid-media platforms are extensively utilized to create awareness regarding Covid-19 as well as to share the view point and appeal of the State government to contain the spread of Covid-19 across the State. Bulk SMS were shared through BSNL, A/V materials displayed in department LED display boards to create awareness among public inside hospital premises, COV7D-19 A/V materials are developed posted regularly in department Social Media Platforms, Virtual Press Meet programmes related to COVID-19 Prevention & Management has been organized and hosted in Social Media Platforms through I & PR Department, Odisha for general awareness of public.

Observation of Designated Days: In line with awareness activities on Covid-19, other has been the major focus during the last year & continuing till date, however the other public health awareness activities were also given due importance & observed across the state, maintaining Covid appropriate behaviour in all most all health units across the State.

All most 40 designated health Days such as World Health Day on 7th April, National Safe Motherhood Day on 11th April 2021, AB-HWC Day on 14th April 21, World Immunisation Week from 24th to 30th April 2021, World Malaria Day on 25th April, National Dengue Day observed on 16th May, World Hypertension Day observed on 17th May, Awareness on SUMAN & PMSMA, World No Tobacco Day on 31st May, World Blood Donors Day (WBD) on 14th June 2021, World Population mobilization & stabilization Fortnight Campaign from 24th June to 10th July, World Population Day on 11th July, The World Hepatitis Day on 28th July, World Breast Feeding Week from 1st to 7th August, National Deworming Day from 10th to 23rd August, Eye Donation Fortnight 25th Aug to 8th Sep’, International Day of Clean Air for Blue Sky on 7th September, International Safe Abortion Day on 28th September 2021, World Rabies Day on 28th Sep’, World Heart Day on 29th Sept’ International Day for Elderly care on 1st of October, National Voluntary Blood Donation Day on 1st October, World sight day on 21st October, World Stroke day on 29th October were observed, SAANS Campaign, 12th Nov’2021, Special Immunization Drive: SID 2021 from 15th Nov’ to 14th Dec’21 (131 low performing Blocks of 26 Districts), World Diabetes Day 14th November 2021, 15th Nov’ to 21st Nov’, Universal Health Coverage Day on 12th Dec’21. National Girl child day on 24th Jan’22 & World Anti Leprosy Day on 30th Jan’2022 was observed across state to WHC level. During observation district & below level meetings following the covid-19 norm were organised, banners, posters & standees were displayed as well as awareness messages were written on swathya kantha.

Mass Media Activities: Advertisements through different News Papers, DD & Local Television Channels, All India Radio, FM Channels are carried out at state level in coordination with I&PR department Government of Odisha. From April 2021 to Jan'2022 about 1033 numbers of news paper advertisements has been published as well as more than fourteen thousand of Audio/ Video spots, TV scrolling messages, Messages through FM radios, AIR & community Radio were disseminated among the people of Odisha to aware them & to promote adoption of healthy behaviour.

Design & development of Contents: Development of Brochure & Leaflet, prototypes of Covid-19 an all other important health days being observed in specific dates, Campaign materials, booklet, IPC brochures for FLWs working in H&FW department & SHG Groups have been developed and shared with districts for utilization of same as and when required.

Annual Training Activity Report (Jan'22)

Providing training to the workforce under Department of Health & Family welfare is the primary responsibility of the training wing functioning under the DSIH&FW, Odisha. Starting from preparation of appropriate training modules in coordination with resource persons to send communication & follow up to districts for nomination of participants for different trainings, monitoring & supportive supervision of different training and TMIS activities are being conducted by this wing. In addition to that handholding support in HR update and facility correction in TMIS portal at block level is also provided. This year State Training Calendar representing month wise state training load was prepared and submitted to NIHFW and other stake holders.

Modalities & criteria for One Year PGDPHM course of MBBS doctors working under state Govt. for the year 2020-21 has been finalised through a virtual meeting chaired by Special Secretary and after counselling 19 number of MOs were selected and enrolled for the course at IIPH(B). Technical support provided to all BDMs, DDMs and State personnel to conduct all types of training through TMIS. Regular follow up to all districts as well as state training nodal officials for submission of quarterly/annual training achievement report in order to compile the same at state level and submit the report to GoI are some of the usual activity being carried out by this wing. In the yare of 2021-22 (Apr'21 to till 31st Jan') the following training activities were carried out by the DSIH&FW, Odisha.

- 12 batches of refresher training of medical and paramedical staff for non critical Covid-19 management and its challenging situation have been completed in which total of 2507 nos.of. AYUSH Medical Officers and Pharmacists participated from all over the state through virtual mode.
- 4 batches of refresher training on TMIS for all BDMs and Data handlers were completed through virtual mode.
- Two batches of 30 days induction training for newly appointed MBBS doctors for the FY-2021-22 were completed in which 43 nos of medical officers were trained.
- Consultative Advisory Committee meeting was conducted under the chairmanship of Director, SIHFW on 23.09.21 on "Human Resource for Health"-Strategy formation and formulation of action plan.
- Seven batches of 2 days orientation training on TMIS for Block Data Managers were completed at NABM, Bhubaneswar.
- One batch of 3 days patient safety training was completed in joint collaboration with PHFI, New Delhi.
- Two batches of ToT on laparoscopic training completed.
- Three batches of 5 days refresher training for MPHw (M) were completed at different Health and family welfare training centres and medical colleges in which 84 no of participants were trained.

CHAPTER 9

Directorate of AYUSH

Government of Odisha have recognized Ayurveda, Unani & Homoeopathy systems of medicine and these systems have the heritage of community acceptance, gained popularity & continue to cater Health Care Services to a larger population in the State.

ACHIEVEMENTS :

- 742 nos. of AYUSH Assistants have been appointed in Govt. Ayurveda and Homoeopathic dispensaries of the State being selected through Odisha Staff Selection Commission (OSSC), Bhubaneswar.
- Induction training for above newly recruited Ayush Assistants completed during current year.
- 21 numbers of Ayurveda stream lectures have been posted in Government Ayurveda colleges of the State being selected through OPSC.
- 36 numbers of the Homoeopathic stream lectures have been selected through OPSC; they will be inducted into the job soon.
- 148 numbers of AMOs (Ayurveda Medical Officer) & 116 numbers of HMOs (Homoeopathic Medical Officer) have been selected through OPSC ; they will be inducted into the job soon.
- 100 numbers of Ayush Health & Wellness Centre in the State are made functional out of NAM during this current year .
- Yoga instructors have been given part-time engagement in AHWCs .They are imparting Yoga training to the local population.
- Orientation training programme of 32 female Yoga Instructors are completed.
- Further , 150 numbers of Ayush Dispensaries have been identified for up gradation to AYUSH Health & Wellness Centre (AHWC) by the support of National Ayush Mission.



50 Bedded Integrated AYUSH Hospital at Dhenkanal

- Ayush Doctors (AMO& HMO) have been deployed to work under the administrative control of CDM & PHO of all districts for management of COVID -19 during 2nd wave & present 3rd wave of the pandemic.
- Guidelines for accreditation of Yoga & Naturopathy educational institutions and registration of Yoga & Naturopathy practitioner are prepared during this year.
- Essential Homeopathic drugs are procured through OSMCL & distributed to GHD/Ayush co-located units.
- Establishment of 50 bedded integrated AYUSH Hospital at Dhenkanal.

AYUSH Education:

Quality education is provided in 03 (three) Government Ayurvedic Colleges and 04 (four) Homoeopathic Medical Colleges of the State.

Ayurveda Educational Institutions

Sl. No	Name of the Institute	Nos. of Indoor Bed Strengths	Admission capacity		Service rendered
			UG	PG	
1	Gopabandhu Ayurveda Mahavidyalaya, Puri	150	75	19	Hospitals have been providing general & specialized treatments of Ayurveda through OPDs & IPDs
2	Government Ayurveda College, Bolangir	150	75	10	
3	KavirajAnantaTripathy Sharma Ayurveda College, Ankushpur, Berhampur, Ganjam	100	75	0	
4	Total	250	225	29	

Homoeopathy Education Institutions

Sl. No.	Name of the Institute	Nos. of Indoor Bed Strengths	Admission capacity		Service rendered
			UG	PG	
1	Dr. Abhina Chandra Homoeopathy Medical College & Hospital, Bhubaneswar	50	63	4	Hospitals have been providing general & specialized treatments of Homoeopathy to the patients in OPDs & IPDs
2	BijuPattanaik Homoeopathy Medical College & Hospital, Berhampur	25	31	0	
3	Odisha Medical College of Homoeopathy & Research Sambalpur	25	31	0	
4	Utkalmani Homoeopathic Medical College & Hospital, Rourkela	25	31	0	
	Total	125	156	4	

AYUSH Healthcare Facilities

- Government Ayurveda Hospitals – 5

- Government Homoeopathic Hospitals – 4
- Government Ayurveda Dispensary – 620
- Government Homoeopathy Dispensary – 562
- Government Unani Dispensary – 9

Total Numbers of Dispensaries – **1191**.

- Sanction Strengths of AMO (Ayurveda Medical Officer)- **690**
- Sanction Strengths of HMO (Homoeopathic Medical Officer) –**595**
- Sanction Strengths of UMO (Unani Medical Officer) – **9**.

Total numbers of Doctors sanction strength – **1294**

Government AYUSH Pharmacies:

The State Government have established 02 (two) Ayurvedic and 01 (one) Homoeopathic Pharmacies to manufacture and free distribution of Ayurvedic and Homoeopathic medicines in Govt. AYUSH Hospitals and Dispensaries of the State.

- Govt. Ayurvedic Pharmacy, Bolangir
- Govt. Ayurvedic Pharmacy attached to Govt. Ayurvedic Hospital, Bhubaneswar
- Homoeopathic Pharmacy of Dr. A.C.H.M.C & Hospital, Bhubaneswar

Medicinal Plants Garden:

Government have established medicinal plants garden one at Harisankar in the District of Bolangir and another at Sirsa in the District of Mayurbhanj for cultivation of raw plant drugs in manufacture of Ayurvedic Medicines in Govt. Ayurvedic Pharmacy. Besides, herbal gardens have been established in 03 Govt. Ayurveda and 04 Homoeopathy Medical Colleges of the State for demonstration and research purpose of the students and teachers of the colleges.

Drug Testing Laboratory:

The Government have established one State Drug Testing and Research Laboratory (ISM) in Bhubaneswar for test /analysis of Ayurveda & Unani drugs. Besides, one Drug Testing Laboratory for test/analysis of Homoeopathy Drugs is going to be set up in the campus of Dr. A.C.H.M.C & Hospital, Bhubaneswar duly funded under National AYUSH Mission.

Mainstreaming of AYUSH under NHM

Institution wise sanction of Contractual Ayush Doctor

- CHC – 314
- PHC (N) – 1162
- For Unani Stream- DHH -3, CHC-3 , PHC –3

Services rendered by Ayush Doctors during COVID-19

Ayush Medical officer are rendering Clinical & Public Health Services to the community in PHC/CHC /HWCs. They also play managerial role in certain PHC where allopathic doctor position is vacant. During the 2nd & 3rd phase COVID-19 Pandemic their services are most commended.

Training of Ayush Doctors

Various types of training programme are being imparted to AYUSH Medical officers to upgrade their knowledge & skill during 2021-22.

- 6 days Induction training of AMO/HMO at State level
- 6 days Clinical Skill Development Training for Ayush Doctors working in Co-located units under NHM.
- Under Management Development Program, Ayush official Visited Shillong to gain knowledge & expertise.



(Meet(Meeting between Director AYUSH, Odisha and Director Health Services (MI) Meghalaya in presence of officials of both the States)

CHAPTER 10**DIRECTORATE OF NURSING, ODISHA**

- Orientation training for management of 2nd wave of Covid -19 has been organised by the Director of Nursing, Odisha in 15 batches and 10015 Participants including Nursing Officers/ Facilitators & Students have undergone the above Training.
- 12 (Twelve) Continuous Nursing Education (CNE) Programme organized by the Govt. Nursing Institutions for the Nursing Personnel and students have been completed.
- Successfully completed 3 (three) batches of 6 weeks training programme organised by SNC Berhampur for the faculties of the Govt. Nursing institutions which covered 40(forty) participants.
- Successfully completed 35 batches of 6 days DAKSH training organised by the Comprehensive skill lab for the Nursing officers of the State having 500 participants.
- Successfully completed 1 batches of 3 months certificate course on Nursing Management meritorious and Leadership with 30 participants.
- 9 meritorious students of ANM, GNM, Basic B.Sc., P.B.B.Sc. & M.Sc. Nursing course have been rewarded in virtual mode.
- 8 Govt. Nursing Schools at Cuttack / Berhampur/ Burla / Dhenkanal / Kandhamal / Kalahandi / Sundargarh/ Nabarangpur upgraded to B.Sc. Nursing Colleges with total annual intake capacity of 750 students in B.Sc. Nursing course and admission in these Nursing College has been started from the current academic session i.e. 2021-22.
- Comprehensive proposal submitted to Govt. for establishment of 10 more nursing colleges in the districts of Angul , Balangir , Balasore , Jajpur, Jharsuguda, Keonjhar, Koraput, Mayurbhanj, Puri and Kendrapara.
- 15 (fifteen) New PB Diploma in Nursing courses of 1 year duration are introduced in the 3 Govt. Nursing Colleges at Berhampur, Cuttack, Burla and admission started from the current academic session.
- 1560 Nursing Officers have already undergone the CPCH training programme in 1st batch and 1680 nursing officers are currently undergoing training.
- Re-orientation training are given to 4683 Nos. of Community Health Officers on management of 3rd wave of Covid-19 to CHOs
- Re-orientation training on management of 3rd wave of Covid-19 to the Faculties of the all Nursing Institutions.
- Total 32 participants are being taught by PGI Chandigarh in 3 months VIRTUAL certificate course on Competency Based Nursing Education & Core Competencies of Nursing Educator of Nursing Faculties from all Govt. Nursing INSTITUTIONS.

- State Midwifery Training Institute(SMTI) at College of Nursing, SCB MCH, Cuttack is under process and will be functionalised at an early date to train Staff Nurses now Nurse Practitioner midwives and the selection of participants for 1st batch of NPM training is already completed.
- Recruitment of Nursing Officers against 6432 newly created posts in 30 districts and Medical College Hospitals is completed and posted in the respective districts / Medical College Hospitals accordingly.
- 85(Eighty Five) Nursing Officers have been promoted to the Post of Asst. Nursing Supdt., 16(Sixteen) Asst. Nursing Supdt., have been promoted to the Post of Deputy Nursing Supdt. & 6(six) Deputy Nursing Supdt. have also been promoted to the Post of Nursing Supdt.
- Revised Provisional Gradation list of Tutor and Principal Tutor as on 01.01.2021 have been prepared and submitted to Govt. for final approval so that the higher post i.e Principal Tutor and Deputy Director of Nursing (Clinical) as well as (Education) shall be filled up by Govt. from the amongst eligible Nursing Personnel.

CHAPTER 11

ODISHA STATE MEDICAL CORPORATION

The “Odisha State Medical Corporation Ltd.” (OSMCL) has been established under the companies Act. 1956 as a wholly owned Government of Odisha undertaking vide Government Resolution No. 8844-Sch-I-Med.-264/2013 (Pt.), dtd. 26th June, 2013.

Odisha Medical Corporation Limited (OSMCL) is the Nodal Agency of the Department of Health & Family Welfare, Government of Odisha for procurement of (a) Drugs, Surgical & Medical Consumables, (b) Equipment, Instrument & Furniture (EIF) Service.

Objectives :

The key objectives of OSMCL include timely procurement of quality medicines for “Niramaya” – free medicine distribution scheme, medical consumables, surgical, equipments, instruments, furniture etc. through fair, transparent and competitive bidding process.

- Timely procurement of quality medicines, surgical and EIF (Equipment Instrument and Furniture) centrally adhering to a fair, transparent and competitive tendering process.
- Manage central drug warehouses to ensure smooth flow of supply to health facilities through a centralised online inventory management system.
- Monitor drug distribution counter to be set up across health facilities centrally and track prescription practices and disease pattern.
- Procurement and maintenance of medical equipment across health facilities.
- Management of Central Drug Warehouses at district level to ensure smooth supply to health facilities.
- Management of logistics up to block/CHC level.
- Provide equipment management support at periphery and tertiary health institutions.
- Provide integrated IT system for Inventory Management.

1. DRUGS & SURGICAL DIVISION –

Procurement & distribution of drugs & consumables as per the recommendation of the State Drug Management Committee (SDMC) :

- (a) The procurement & distribution activities of EDL items (Essential Drug List) & programme items comprising of general items, surgical items, anti-cancer items, programme items and other items from Non-Essential Drug List as per the recommendation of State Drug Management Committee.
- (b) **Sufficient number of counter** : 532 computerised Drug Distribution Centres (DDCs) have been established across the facilities up to CHC level to distribute medicines at OPD counter.
- (c) **Sufficient number of drug warehouses** : In addition to 39 District Drug Warehouses, efforts are on to operationalise block level Drug warehouses for distribution up to PHC level from block drug warehouses.
- (d) **Supply of drugs to the warehouses in time** : 50 numbers of dedicated GPS enabled transport vehicles are engaged for doorstep delivery of drugs up to PHC level.
- (e) **Management of stock out positions** : The stock out position is analysed at regular interval for replenishing the stock by reallocation from Central Drug Store or other Drug Warehouses and plan for local procurement at institutional level. An ordering plan is being followed for availability of sufficient quantity of drugs and avoids stock out.

2. KHUSI PROGRAMME –

Menstrual hygiene and the awareness regarding use of sanitary napkins among the adolescent girls is one of the important areas under preventive health management initiative. In a bid to better the health of adolescence girls and to ensure reproductive health of women the programme of “KHUSI” will bring major breakthrough. The expansion of the Menstrual Hygiene Scheme “KHUSI” to cover all girl students of class 6th to 12th by way of supply of free beltless sanitary napkins is a flagship scheme of Government of Odisha and involves large scale expenditure. The schools covered include all Government / Government aided schools under S & ME Department, schools under SS & EPD Department, ST & SC Development & MBC related schools and central schools.

Basing upon the requirement given by the concerned Deptt. in the year 2019-20, 27,36,77,246 pieces of Sanitary Napkins were procured through OSMCL open tender and distributed to all the beneficiaries.

For the financial year 2020-21, tender has been finalised floated in GeM and work orders issued for procurements of 36,49,03,056 pieces of Sanitary Napkins. The suppliers have supplied 9,12,25,764 pieces of Sanitary Napkins (per Quarter) on quarterly basis which were distributed to all the beneficiaries. For this scheme, a total expenditure amounting to Rs.92.19 Crores has already been made till 31.01.2022.

For the financial year 2021-22, tender has been finalised for supply of quantity 18,24,51,528 through GeM.

3. EQUIPMENT DIVISION –

- *OSMCL is the central agency for procurement of Medical Equipments, Instruments & Furniture (EIF)s required across all the health facilities in Odisha .*
- *The division procures EIF as per indents approved by the State Equipment Management Committee (SEMC).*

Tenders already finalised/Supplied:

1. **CT Scan Machine in PPP Mode :**

Tender for Provision of 16 Slice CT SCAN Service in PPP mode at 18 nos. of District Headquarter Hospitals has been finalized and the CT Scan machines shall be installed shortly.

2. **Liquid Medical Oxygen Plant :**

Operationalisation of Liquid Medical Oxygen (LMO) Storage unit at MKCG MCH Berhampur.

Tender has been finalized and Work Order has already been issued to the concerned agency for setting up of Liquid Medical Oxygen (LMO) storage unit for 15 consignee locations, out of which LMO vessel has already been installed at Capital Hospital, Bhubaneswar.

3. **Supply of ECMO machine :**

Supply of 6 Nos. of ECMO machine with additional EIFs namely Fiber Optic Bronchoscope, ACT Machine, Dual Chamber Pace Maker, ECG Machine & ABG Machine required for smooth functioning of ECMO unit at SCBMCH, Cuttack.

4. **Supply of Equipment for Establishment of Shree Jagannath Medical College & Hospital, Puri**

Procurement & Supply of required EIFs for LOP (Letter of Permission) requirement Shree Jagannath Medical College & Hospital, Puri

4. **Supply of Equipment for establishment of Fixed Vision Centre & Mobile Vision Centre under SUNETRA programme**

Contracts have been issued for 06 nos. of items (Auto Refractometer, Slit Lamp, Digital LED Vision Chart, Revolving Stool, Fundus Camera & Ophthalmoscope) for 220 Nos. of Fixed Vision Centres & 9 Nos. of Mobile Vision Centres under SUNETRA programme.

6. **Tender for Radiotherapy Equipment for AHPGIC, Cuttack:** Work Orders have been issued for supply of high end Radiotherapy Equipments (High & Low Energy LINAC & Brachytherapy) for AHPGIC, Cuttack. The Brachytherapy machine has already been supplied at AHPGIC, Cuttack.
7. **Tender for provision of PET CT Scan in PPP Mode at AHPGIC, Cuttack:**
Tender for Provision of PET CT SCAN Service in PPP mode at AHPGIC, Cuttack has been finalized and the PET CT Scan machine shall be installed shortly.

Ongoing Tenders:

1. Tender for Mobile Blood Collection Vans & Vaccine Van :
Tenders have been floated for 5 Nos. of Mobile Blood Collection Vans and 10 Nos. of Vaccine Vans and evaluation is under process.
2. Equipment for establishment of Cardiac Care Hospital, Jharsuguda:
Tenders have been floated for EIFs required for Cardiac Care Hospital, Jharsuguda and evaluation is under process.
3. CT Scan Machine in PPP Mode for ESI Hospital, Bhubaneswar:
Tender has been floated for Provision of 128 Slice CT SCAN Service in PPP Mode at ESI Hospital, Bhubaneswar.
4. Tender for supply of Fully Automatic Biochemistry Analyser on reagent Rental basis:
Tender has been floated for supply of Fully Automatic Biochemistry Analyser on reagent Rental basis.

Achievements & new initiatives

Total Value of Procurement done towards EIFs for FY 2020 – 21 is Rs. 554.57 Crs. (Approximately) and for FY 2021-22 (till Jan-2022) is Rs. 300 Crs. (Approximately)

Centralised Bio-medical Equipment Maintenance Programme.

To strengthen the public health system in the State with a vision to minimise the downtime of the biomedical equipments available in the hospitals especially in remote locations, the centralised Biomedical Equipment Maintenance Program has been rolled out across the state with effect from 01.01.2020 through M/s Kirloskar Technologies Pvt. Ltd., as the third party service provider for all the Government Health care delivery institutions down to the level of PHC under the H & FW Dept. (O) supported by 24x7 call centre. Agreement has been signed with the service provider, M/s Kirloskar Technologies Pvt. Ltd. on dtd. 29.12.2020.

MANEGEMENT OF PANDEMIC COVID-19

Odisha State Medical Corporation has procured all required Equipment, Instrument and furniture for establishment of dedicated COVID Hospitals and COVID Care centre across the state. OSMCL is also supplying all the required testing kits alongwith VTMs (Viral Transport Media) for carrying out uninterrupted testing during COVID-19 pandemic.

Further, a number. of BSL 2+ Laboratories (Biosafety Level 2 plus laboratory) have been set up at designated District Headquarter Hospitals for conducting the COVID -19 tests at the district level.

4. QUALITY ASSURANCE DIVISION –

(A) QUANTITATIVE REPORT : (For the period of 1st Apr-2021 to 31st Dec-2021)

Various batches of Drugs and Surgical items received by Quality Assurance cell are being sent to 20 no. of different empanelled laboratories for test and analysis through online mode and details of report received for the period of 1st Apr-2021 to 31st December 2021 are given below:

	No. of items	No. of Batches
Received	461	4649
Sent for testing	361	3426
Report received	351	3192

(B) ACHIEVEMENTS :

- a) New SOP is implemented for sending samples to Empanelled Laboratories through Randomisation of District Warehouses in a Standby Randomisation Application.
- b) In the Covid-19 Pandemic situation, Covid drugs and related items (i.e. Inj. Remdesivir, Tab. Favipiravir, Tab. Cefixime, Tab. Azithromycin, Cap. Amoxicillin, Tab. Cefadroxil, Susp. Azithromycin, Tab. Chloroquine, Tab. Hydroxychloroquine, Tab. Paracetamol, Syp. Paracetamol, Tab. Cetirizine, Tab. Norfloxacin, ORS, Bleaching Powder, PPE Coveralls, N95 Facemask, Triple Layer Facemask, Operation Gloves, Hand Sanitizer, Goggles & Faceshields) were being tested on a priority basis and released.

5. IT CELL -

e-Niramaya Software :

- **Real time monitoring of all aspects of the scheme, to avoid dislocation in indenting, procurement, Quality assurance, payment & distribution:** The “e-Niramaya” software was launched on 01.04.17 for managing the entire drugs supply chain and distribution process. The e-Niramaya Software has been designed to streamline free drugs distribution from Warehouse to Health facilities. The system would have robust disaster recovery link with State Data Center, OCAC.
- AAP i.e. Annual Demand for the current financial year 2020-21 has been obtained from the down below facilities like PHCs, UPHCs, CHCs, SDHs, DHHs, and consolidated at DWHs level via e-Niramaya software. This will help to generate demand pattern over a period of time.
- The online training on “e-Niramaya” software has been completed by OSMCL to all PHCs and PHCs (I/Cs). Training manual and concerned module process flow recording have also been provided to all the trainees.
- Regular online monitoring of DDC.
In view of the integration of e-Niramaya software with OeHMIS software and Central Dashboard of DVDMS.

(A) Drug Vaccine Distribution Management System (DVDMS):

DVDMS (Drugs and Vaccine Distribution Management System) is a software platform to automate various activities of Directorate General Medical Health, Govt. Of Odisha. It comprises of Drug and Vaccine Supply Chain Management that deals with Purchase Order, Inventory Management & Distribution of various drugs etc. Also it helps for managing receipt, Issue, Quality Control, vaccines and other health sector goods that are supplied to States under various disease control programmes. Odisha has 2nd position in the rank of central dashboard of DVDMS.

(b) Odisha e-Hospital Management Information System(OeHMIS):

Drug distribution at DDC level with respect to Prescriptions has been integrated with OeHMIS for issue of medicines to patients i.e. there is a bridge/interface in between e-Niramaya & OeHMS software. The development for integration of OeHMIS with e-Niramaya web-application has been completed & implemented in Capital Hospital SCB-MCH on pilot basis. This enables DDC counters to facilitate drug distribution (issue of

medicines) as well as clinical records of patients as per the prescription prescribed by the doctors of the concerned hospitals.

(C) KHUSI software :

The “KHUSI” Web based software was inaugurated on 29.12.2020 in order to manage the storage, free distribution and supply chain of Sanitary Napkins to girl students under Govt. of Odisha flagship programme “KHUSI”. The system would have robust disaster recovery link with National Data Center, NIC.

(D) OSWAS software:

In line with 5T initiative, Odisha State Medical Corporation updated with “OSWAS” office automation software. It is a cloud ready with web responsive design recovery link with OCAC, State Data Center and National Data Center. It would have features like 24×7 secure accesses, notification and real time executive dash board. The software has principal applications like correspondence management, file management, file processing, record room, internal messaging, dash board, leave management, MIS reports.

(E) KAVACH Authentication:

For security purpose the two factor authentication (i.e "KAVACH" authentication APP) has already been installed at head quarter level in every division, at District-DWH level, at DHH and MCH level by OSMCL.

(F) e- Upkaran Software:

The OSMCL has implemented its own customised IT solution called “e-Upkaran” for supply chain management, inventory management, maintenance of medical equipment, instruments, furniture in required quantities for the Government health facilities including state Medical Colleges, 30 District Headquarter Hospitals (DHHs), Secondary Healthcare Institutions, Community Health Centres (CHC) and Primary Health Centres (PHC) for a transparent and efficient procurement process.

CHAPTER 12 DIRECTORATE OF DRUGS CONTROL

Online - License Management System has been made functional w.e.f. 17.12.2018 in order to provide services to the citizens in a transparent manner for issuance of Drug Licences in a time bound manner. Similarly Pharmacist Information Management System has also been developed for Registration & Renewal of Registration Certificates of Pharmacists & in this system dual engagement of pharmacists are being checked.

Govt. have pleased to restructure Drugs Control Administration vide Notification No. 17866 dated 23.06.2022. Due to restructuring, the total no of ranges has gone up from 40 ranges to 57 ranges. Further, due to restructuring number of Asst. Drugs Controller have been increased from 04 to 22. Asst. Drugs Controllers has been vested with powers of Ex-Officio Drugs Inspector. Earlier the Drugs Inspectors used to send 301 no of samples every month for test and analysis. Due to restructuring and expansion, the collection of samples is likely to go up to 471 no, which will be more effective to ensure availability of quality drugs.

To augment such hike in sampling by field officers, steps are also being taken to double the sample testing capacity in Testing Laboratories in coming days which is possible due to functionalisation in coming days of another Drugs Testing Laboratories at Sambalpur. This Drug Testing Laboratory at Sambalpur is being built with grant in aid fund under Central Sponsored Scheme (Strengthening of State Drugs Regulatory System). Once functional, this laboratory will be in a position to test additional 3000 samples (Approx.). The construction work is likely to be completed shortly. This will go a long way in ensuring availability of safer Drugs to the public. In the coming days efforts will be made to facilitate testing of more samples sent by public (within the facilities as possible) in testing laboratories as and when adequate man power and equipments are in place. This will build more confidence in public on the Health care system of the State.

- Permanent office buildings have been constructed at 03 places and construction is under progress at 04 mores places.
- To ensure quality testing of Cosmetics, a Central Drug Testing & Cosmetic Testing Laboratory at Gothapatna, Bhubaneswar under Centrally Sponsored Plan Scheme is being constructed and the same is nearing completions for which land has been provided by the State Govt.
- A society has been registered named as 'Price Monitoring Resource Unit (P.M.R.U)' in the State of Odisha vide registration No. 77/1820/800067 of 2018-19 to monitor the price of drug formulations including medical devices as notified by NPPA, New Delhi and detection of violation of the provision of D.P.C.O 2013. Reports are being sent to NPPA on activity of the cell regularly.
- All Drug Inspectors have been notified to exercise power under the Drugs (Price Control) order 2013. Accordingly, 193 numbers of drug price cases have been verified and Cases have been detected for overcharging by

manufactures during the inspection and reported to Chairman, NPPA, New Delhi for necessary action against the erring firms.

- All Drugs Inspectors of the state have been notified as Medical Device Officers as per Govt. notification No. 1902/H dt. 21.01.2019 and the Joint Drugs Controller (Q.C), Odisha has been delegated with power as Licensing Authority for Medical Devices of Class-A and Class-B.
- Govt. have been placed to notify Drugs Inspectors and Asst. Drugs Controllers for enforcement under Drugs Magic Remedies (Objectionable Advertisement) Act, 1954 vide Notification No. 1669 Dt. 27.01.2022 which shall act as a deterrent for misleading advertisement in respect of Allopathic & Homoeopathic Drugs.

- **Licence Status in the State of Odisha:**

(i) No. of sale licences:	Approx.30000	
(ii) No. of drug formulation manufacturers:	21	
(iii) No. of medical device manufacturers:	18	
(iv) No. of vaccine manufacturers:	1	
(v) No. of hand sanitizer manufacturers:	16	
(vi) No. of medicinal oxygen manufacturers:	36	
(vii) No. of basic drug manufacturers:	1	
(viii) No. of Bleaching Powder manufacturers:	4	
(ix) No. of disinfectant manufacturers:	2	
(x) No. of Homoeopathic Medicine manufacturers:	5	
(xi) No. of cosmetics manufacturers:	8	
(xii) No. of Approved Laboratory for carrying out tests on drugs / raw materials:	1	
(xiii) No. of Blood Centres:	86 (Govt.:57,Pvt.:23,PSUs:6)	
(xiv) Blood Component Separation Units:	19 (Govt.:6,Pvt.:12,PSUs:1)	
(xv) Plasmapheresis Units:	11 (Govt.:6,Pvt.:4,PSUs:1)	
(xvi) Blood Storage Centres:	Valid:	17
	Renewal not applied:	46
	With defects and deficiencies:	05
	Inspection pending:	<u>09</u>

CHAPTER 13

Orissa State AIDS Control Society (OSACS)

13.1 Background

HIV Epidemic in Odisha: Odisha is regarded as a low prevalent but highly vulnerable state. Factors like out-migration, poverty, sex-work and homosexual activity among men make the state vulnerable for HIV. There is a consistent high volume out-migration to the cities like Surat, Mumbai, Ahmedabad, Delhi, Bangalore, Chennai, Visakhapatnam in search of livelihood in younger age.

It is estimated in 2019 that around 23.5 lakhs people living with HIV/AIDS in India out of that 0.49 lakhs people are infected in Odisha.

Epidemiologically districts have been categorized as High, Moderate, Low & Very Low according to HIV estimation 2019

District Priority	No. of districts	Name of Districts	PLHIV Size as per estimation
High	2	Ganjam, Cuttack	$\geq 5,000$
Moderate	4	Angul, Baleswar, Khordha, Nabarangapur	$2,500 \leq 5,000$
Low	11	Balangir, Bargarh, Bhadrak, Jajapur, Kalahandi, Koraput, Mayurbhanj, Puri, Rayagada, Sambalpur, Sundargarh	$1,000 \leq 2,500$
Very Low	13	Rest of the districts	$< 1,000$

In the state **54,644** clients have been detected HIV positive in different Integrated Counseling & Testing centers (ICTC) as on December, 2021. Out of these detected cases **33,999** are male and **20,645** are female. The reported number of deaths is 9786.

13.2 Objective and Strategy

National AIDS Control Programme Phase IV (2012-2017) is in place.

- Objective 1: Reduce new infection by 50% (2007 Baseline of NACP-III)
- Objectives2: Comprehensive care, support and treatment to all persons living with HIV/AIDS
- **NACP-IV Extension (2017-20)**
 - Committed to make concrete progress towards “End of AIDS by 2030”
 - Test and Treat: Viral Load Monitoring
 - HIV/AIDS Act
 - Prison interventions

The broad strategies for prevention, testing and treatment

13.3 Major Activities

PREVENTION

- Increased coverage for improved testing and care linkages
- Systematic evidence generation to reach 'at risk' population like STI and TB Clients, Pregnant Women, Youth and General Populations
- Retain Key Population (Female Sex Worker/Man having Sex with Men /Intravenous Drug Users/Migrants (Destination & Transit) / Truckers with adequate and appropriate services

TESTING

- Geo-prioritise differential approach
- Use graded approach to increase HIV testing
- Pilot and scale up newer modalities of testing (e.g. Community Based Testing, Self Testing, etc.)
- Active use of IEC to increase demand for HIV testing

CARE, SUPPORT & TREATMENT

- Accelerate uptake of Anti-retroviral therapy (ART)
- Improve ART retention by engaging community /NGOs / private sector.
- Ensure supportive environment for achieving universal access to ART
- Address comorbidities of HIV infection to lower mortality and morbidity

HIV specific Services in Odisha April 2020 to March 2021:

1. HIV testing services scaled up to the VHND level including 232 stands alone and all Health Wellness Centres declared as facility integrated ICTC.
 2. Designated Microscopic Centres (DMC) of NTEP facilitated to screening of the HIV in the state, 98% of the notified TB cases screened last year.
 3. 7.7 lakhs pregnant women counselled & tested for HIV annually after consent and detecting 210- 225 positives, appropriate pre-post ANC care provided.
 4. 7.6 lakhs of general clients including High risk group (Female Sex worker, Man having Sex with Men, Transgender, Injecting Drug User, Migrant, Trucker) were availed counseling& testing services
 5. Test & Treat policy was introduced in the state since 2017, 98% detected positives are registered in Anti-Retroviral Therapy (ART) care, receiving free treatment.
-
- Counselling Session to HRGs**
6. TB-HIV is a collaborative program since NACP III (2007) running successfully in the state, 600- 800 Co-infected patients detected annually and treated as per the protocol of NTEP & ART.
 7. 55% of registered PLHIVs treated through IPT, as a preventive therapy for TB.
 8. 3.94 lakhs of blood units were collected in the blood banks of Odisha and 78% were voluntary collection in comparison to 74% in the year 2019.
 9. 48 NGOs are working in the state covering High Risk Group population through their Targeted Intervention Projects. Total population covered 12359 FSW, 3133 MSM, 3072 IDU, 3155 TG, 22432 truckers, 108329 destination migrants were covered during the year.
 10. The HIV intervention in 55 Prison implemented in by OSACS with the permission from Home Dept., Govt. of Odisha, Screening 15938 inmates and detected 57 positives.

11. 21 Employer Led Model partners (major industries like JSPL, OCL, Tata Refractories LTD, Paradip Port etc except NALCO & SAIL) have carried out different activities for prevention of HIV/AIDS to ensure a health & productive workforce in their industries.
12. 2.17 lakhs patients were treated for STI RTI in the 40 designated STI RTI Centres and color-coded drug kits were given to the patients for treatment.
13. Link workers scheme is going on in the vulnerable villages in 6 districts. The High-risk people from the rural area are identified with the help of key persons and linked all HIV services.
14. 41973 PLHIV enrolled for MBPY social security pension scheme.
15. Dry ration was distributed to PLHIVs through ART Center by mobilizing from different donor agencies.
16. Final State draft Rules for carrying out the provisions of “HIV and AIDS (Prevention & Control) Act. 2017” was redrafted under the Chairmanship of PD, OSACS.



Sand ART on World AIDS Day

Information Education and Communication (IEC):

1. For visual impaired people for the first time in India books on Basics of HIV prepared in Braille script and developed video on Sign language for Deaf & Dumb.
2. Implementation HIV ACT in the state.
3. Two-day long HIV screening and awareness camp was organized at Paradip port, where 1153 port workers know their HIV status and sensitized.
4. HIV/AIDS awareness program are being telecasted through Doordarshan Kendra & private TV and awareness message broadcasted through All India Radio and FM broadcasters.
5. Hoarding installed in different health facilities & Railway stations. During Car festival, Puri hoardings on HIV/AIDS awareness erected in different crowded areas. Stall was inaugurated in Pallishree mela to spread the HIV message. 3 City bus was branded with Message of HIV services
6. HIV services message tableaux was participated in state level republic day parade.
7. Awareness message published through print media during different events in form of advertisements.
8. Folk programs were undergone through Song and Drama division by different folk forms in rural areas of Odisha.
9. Branding of HIV/AIDS message in OSRTC bus and bus tickets to spread awareness.
10. 25.5 lakh awareness messages were sent to BSNL consumers.
11. World AIDS Day, National Youth Day and International youth day observed in State level as well as in the 30 districts and colleges by Red Ribbon Club very year.



HIV message with pottery ART

CHAPTER 14

ACHARYA HARIHAR POST GRADUATE INSTITUTE OF CANCER

The year 2021 will go down in the history as the most difficult time of the century for the whole mankind. AHPGIC was on a continuous & rapid path of growth on fast forward mode before the onset of Corona pandemic. But the pace got slowed down in 2021 and still continuing at a lesser pace even now due to the second and third wave. As a cancer hospital we were under double whammy. Cancer treatment is a different ball game altogether. There is nothing called routine, that can be deferred. All patients are to be treated as an emergency or like semi- emergency; that compounded our responsibilities and we were acutely conscious of this fact. As a first step, to reduce the congestion & footfall in the Institute, the district cancer care centres were activated and stocked with adequate anti cancer medicines for far flung patients. They were regularly monitored through our telemedicine services. All patients required treatment in our centre were screened as per the IPC protocols. With these measures, subsequent events were relatively smooth, even during the second and third wave , without grossly compromising the optimum patient care

1. Hon'ble Chief Minister dedicated both CT & MRI services on PPP mode on 14th July 2021
2. Construction of G + 6 building is complete
3. Civil construction for chiller, underground water storage tank is under construction
4. Roof of new sets of LINAC bunkers have been casted
5. Process of procurement for two LINAC machines is completed
6. PET-CT services on PPP mode is finalised. Agreement has been signed with the service provider
7. One Oxygen plant from PM Care Fund has been installed
8. A department of pulmonary medicine created
9. Clinical training for B.Sc. Nursing/Post Basic Nursing/M.Sc. Nursing students available
10. Social workers-cum-counsellors of different NGOs have been deployed for patient assistance
11. Enhancement of bed strength to 500 has been proposed
12. Six months special training courses in different departments are available for post PG doctors to strengthen human resource in the field of oncology
13. The M.Sc. Medical Physics course of NISER has been started in partnership of AHPGIC
14. This year six batches of O&G specialists (150) and three batches of medical officers (76) have attended hands-on training on Pap smear Screening and Palliative Care in the institute



15. MOU with Bagchi-Karunashraya has been signed for home based palliative care free of cost
16. New bye-law has been come into force with all statutory compliance
17. New advanced Brachytherapy has been started

Sl No.	Particulars	Year 2021
1.	Total No. of OPD registration:	1,09,785
2.	Total No. of Admission:	21,545
3.	Total No. of Pathological Investigation:	4,86,640
4.	Total No. of Radiological Investigation:	17,369
5.	Total No. of OT Procedure:	2,155
6.	Total No. of Chemotherapy Cycle:	29,660
7.	Total No. of Radiotherapy Treatment:	4,161
8.	Total No. of COVID 19 Test (RAT):	36,321
9.	Total No. of CT Scan Test (PPP mode):	10,866
10.	Total No. of MRI Test (PPP mode):	3,536

CHAPTER 15

Strengthening of Blood Services in the State

- Blood Centres: **Director Blood Safety Supports 55 Govt Blood Banks, one Central Red Cross Blood Bank, 29 Pvt blood Banks and 42 no of functional Blood storage units in the state of Odisha.**
- Blood Component Separation Units: **11 Nos of Govt Blood Component Separation Units are functioning, 3 Nos of BCSUs are yet to establish, 13 No. of Pvt Blood Component Separation Units are functioning in the state.**
- Achievement of Blood Donation Movement:

Total Blood Collection from different sources for the year 2021 is given below;

Year	Total Blood collection in Units	Blood Collection from Voluntary sources in units	Blood Collection from Exchange sources in units	Voluntary percentage	Source
2021 (Jan-Dec)	430722	309792	120930	72%	E-Blood Bank/E-rakhtkosh

- **Provision of NAT tested Blood:**

There is a provision to supply NAT tested blood at 11 Blood Centres (SCB MCH, Cuttack, CRCBB, Cuttack, MKCG MCH, Berhampur, VIMSAR Burla, Capital Hospital, Bhubaneswar, BMC Hospital, Bhubaneswar, DHH Bolangir, SLNMCH Koraput, SDH Jeypore, DHH Balasore and DHH Baripada.

- **e-Blood Banking:** e-blood banking is operational in 72 Blood Banks (55 Govt, 1 Red Cross Blood Banks and 16 Private Blood Banks) in the

State. NHM has supported for positioning of 71 HR at all Govt. Blood Banks through an outsourcing agency.



- **Sickle Cell Project in Odisha:**

Sickle cell project is being implemented at 12 Districts i.e., Angul, Bolangir, Sambalpur, Bargarh, Sonapur, Nuapada, Kalahandi, Kandhamal, Sundargarh, Jharsuguda, Deogarh and Boudh for control of sickle and Thalassemia disorder under supervision of VIMSAR burla as the Nodal center under NHM Budget. Each year the school camps are being organized for screening to identify the carriers of Sickle cell trait, β Thalassemia, Haemoglobin variants at school especially class 8 students and above. This year due to COVID pandemic it was not possible in the 556 residential schools till date.

- **Free Blood transfusion (service charge exempted):**

Govt. is providing free blood (service charges exempted) to all categories patients getting treated at Govt. facilities w.e.f. 1st

Feb-2019. NHM is providing Rs. 400 per unit blood issued to all the patients treated at Govt. facilities and approximately 4,44,000 units of free blood was issued during the year 2021.



- Transport cost assistance for blood disorder patients:**
 There is provision from state budget for transport cost assistance @ 500/- per person /per month to the blood disorder patients i.e. Sickle Cell Major, Thalassemia Major and Hemophilia requiring medical attention w.e.f 1st March 2018 from state budget. Till now 20,078 patients have been registered and consequently benefitted from the scheme.
- Mobile Blood Collection Vans:**
 Mobile Blood Collection vans are functional at 9 major blood banks situated at SCB MCH, cuttack, MKCG MCH, Berhampur, VIMSAR, Burla, DHH Koraput, DHH Bolangir, DHH Balasore, DHH Baripada, DHH Bargarh and RGH, Rourkela etc. The HR and recurrent costs are borne from NHM budget. In 2021, the total Voluntary Blood Collected at the Nine Blood Centres is 1,15,468 units.
- IEC and BCC**
Activities:
 In the 2021-22, there is 70% expenditure towards various IEC and BCC activities of the Directorate Blood Safety.
- Central Procurement of Blood Bags, kits and reagents:**
 60,000 nos of leucofilters have been provided for 4240 nos of thalassemia patients at the various 56 Blood centres of the state.

Special Programme Under Blood Cell
(Control of Sickle Cell and Thalassemia Programme)

Govt. of Odisha has signed an MoU with CMC Vellore for implementation of programme i.e. “Control of Sickle Cell and Thalassemia Diseases in the State of Odisha” in Collaboration. This programme is functional at 6 Districts of Odisha i.e. Balasore, Koraput, Sambalpur, Cuttack, Bargarh and Jharsuguda. The cell counter sites are functional at the 6 Districts and it will be extended to other 9 Districts such as Sundergarh, Mayurbhanj, Bhadrak, Puri, Angul, Kandhamal, Rayagada, Nabarangpur and Malkangiri in the FY 2022-23 as the Procurement of cell counter in the said districts is in process. The Aim of the Project is to increase access to testing, counselling and pre-natal diagnosis along with counselling and screening of individuals and couples.

Achievement: Total sample Tested:14782, total HPLC Positive: 2191, Total ANC sample tested-14551 (2142 HPLC Positive), Total Spouse-231 (49 HPLC positive)

CHAPTER 16

Biju Swasthya KalyanYojana (BSKY) has been launched as a path breaking program to provide universal health coverage, with emphasis on the health protection of vulnerable families and women. BSKY scheme has two components as below:

Component-1 (Cashless Health Care in State Government hospitals)

State Government will bear the full cost of all health services delivered to all patients (irrespective of income, status or residence) in all State Government health care facilities starting from Sub Centre level to District Head Quarters and Government Medical College Hospital level.

Component-2 (Cashless Health care in empanelled private hospitals)

State Government will bear the cost of healthcare provided in empanelled private hospitals within and outside Odisha to all BSKY Smart Health Card/ NFSA/ SFSS card holder families in the State, for an annual health coverage of Rs. 5 lakh per family and additional Rs.5 lakh for the women members of the family after exhaustion of the initial limit.

Under Component-2, 96.5lakh families covering more than 3.5 Crore beneficiaries of the population of Odisha are covered from 01.09.2021.

Achievement: Achievement under BSKY from 01.01.2021 to 31.12.2021.

Component-I (In Govt. Hospitals)	
Number of OPD cases	Number of IPD cases
53420730	2931977

Component-II (In Private Empanelled Hospitals)	
Number of claims raised	Amount of Claim raised
1,25,595	Rs. 224,87,16,121

GRIEVANCE & PATIENT FEEDBACK UNDER BSKY

For addressing the public grievance, a dedicated 24 X 7 BSKY call center (DIAL 104) is in place. Based on the requirement, the call center executives facilitate the beneficiary. If needed, they provide the contact details of the respective District Coordinator and SwasthyaMitra for better facilitation.

- 104 Call Centre:** Any person can raise any query or complaint regarding BSKY Scheme at toll free number 104 which is available 24 X 7.

2. BSKY beneficiaries can also contact E & IT Department Toll Free Number-155369 for any BSKY Smart Health Card related issues.
3. **Mo Sarkar Feedback system:** The State Government takes direct feedback from the beneficiary patients regarding quality of treatment, behavior of the service providers, any out-of-pocket expenditure by the beneficiaries etc. Citizens can also register their contact number for feedback/ grievance through Mo Sarkar Call center no.14545.

16.2 ODISHA STATE TREATMENT FUND SOCIETY

Odisha State Treatment Fund (OSTF) has been a source of great respite to poor patients belonging to BPL category, low income group with annual income up to Rs.50, 000/- in rural areas & Rs. 60,000/- in urban areas (For Cancer, Heart and Kidney diseases, the annual income ceiling is Rs. 3 Lakhs), Antodaya Anna Yojana, referred cases from registered Mental Asylum/Destitute Home/ Orphanage and unknown accident victims in the State for treatment of serious diseases and disorders. From 01.09.2021 Ration card or BSKY card has been used as eligibility document instead of BPL card/Income Certificate etc. OSTF has been providing cashless treatment to above category patients through 17 empanelled private super specialty hospitals outside the State, 07 at **Vishakhapatnam, Andhra Pradesh**, 04 hospitals in **Raipur, Chhattisgarh** and 6 hospitals in **Surat, Gujarat**.

Further, CDM& PHOs of Western districts like Nuapada, Kalahandi and Bolangir can now refer patients from those areas for treatment directly to private empanelled hospitals at Raipur, and Southern districts like Rayagada, Koraput, Malkanagiri and Nawarangpur can refer patients from those areas for treatment directly to private empanelled hospitals at Vishakhapatnam. In emergency cases like cardiac arrest, road accident etc, a patient may get treatment in the empanelled private hospitals directly on emergency basis without being referred.

In the year 2021-22 (as on February 15th ' 2022) **2325** no's of beneficiaries have availed free treatment in empanelled Private hospitals under OSTF amount to Rs. **19.89** Crore. Beneficiaries can avail free treatment in all Government hospitals irrespective of any categories under BSKY.

Further, under OSTF eligible beneficiaries can also get the free treatment by producing estimate from the concerned hospitals outside the State especially in the hospitals of National repute. In the current financial year as on 15.02.2022, 11 patients have received free treatment in hospitals of National repute outside the State.

CHAPTER 17

Directorate of Health Intelligence and Vital Statistics

The Directorate of Health Intelligence & Vital Statistics, Odisha has been functioning as an independent Directorate since the year 2017. The Director of HI & VS, is also designated as the Chief Registrar, Birth & Death, Odisha. He has the responsibility of co-ordinating and monitoring the works of all the registrars, birth & death across the state.

➤ Status about the registration units

The Birth & Death Registration work in the state is being carried out through 314 rural registration units and 116 urban registration units. 100% reporting had been witnessed for the 430 registration units in the state for 2021.

➤ Human Resources status

The Directorate had to deal with a severe scarcity of manpower to undertake the birth and death registration work in the urban & rural registration units. Out of the 393 position of Vital Statistics Clerks Sanctioned in the state, only 106 are in position. 287 positions of VS clerks which is about 70% of the total sanctioned positions is lying vacant. Out of the 38 positions of Statistical Assistants, 29 are lying vacant. Out of the 13 positions of Statistical investigator positions in the state 9 are lying vacant.

The year 2021 has been a year in which the Directorate initiated some important steps for strengthening of the civil registration system in the state. Some of the measures initiated in the year 2021 are as follows

- I) The registration of birth and death in the rural registration units of Odisha was started in the new online app of birthdeath.odisha.gov.in.
- II) This new online app enabled the doorstep delivery of registration services for the citizens. A citizen can apply for the birth/death certificate online and download it sitting at his home.
- III) 95 new Vital Statistics Clerks joined at the different rural and urban registration units of Odisha after vacation of stay of high court persisting over a period of 4 years.
- IV) Virtual induction training of all the newly joined VS clerks was conducted by the Directorate of HI & VS.
- V) 17 District Level Co-ordination Committee (DLCC) were constituted which basically look after the co-ordination between the different departments which are connected to the registration of birth & death registration.
- VI) The Interdepartmental Co-ordination Committee meeting for the year 2021 was conducted under the chairmanship of the Additional Chief Secretary to Government, Department of Health & FW, Odisha
- VII) Orientation of all the CDM & PHOs, DPHOs, District Medical Officer(MS)-Superintendent, SI/SA/VS clerk was conducted on Medical Certificate of Cause of Death.(MCCD)
- VIII) The letter and guidelines regarding the Medical Certificate of Cause of Death (MCCD) for domiciliary deaths was issued by the department of Health & FW, Odisha to all districts. This is enabling the MCCD for the majority (75%) of the deaths for which MCCD was not being prepared.
- IX) Two new registration units of Capital hospital and AIIMS, Bhubaneswar have been created in Bhubaneswar in order to reduce the pressure on the single registration unit of BMC.

- X) The OBDRS online portal has enabled the citizens to pay the fees and fines online without going to treasury, as the IFMS portal and OBDRS has been linked.
- XI) The AADHAR Linked Birth Registration (ALBR) work has made a substantial progress in the state. For all births which are registered in the OBDRS portal, the AADHAR card is generated in the name of mother which will be latter transferred in the name of the child after 5 years.
- XII) For generating awareness about the birth and death registration among the people, the Directorate of HI & VS has developed a short video which is being circulated through whats app to the different sections of the population. The SIH & FW,Odisha has also circulated the video to all the DHH, where it will be displayed in the LED screens meant for communication of health messages.

Trend of Key Indicators: Odisha vs.India (Source: NFHS Survey Report)

