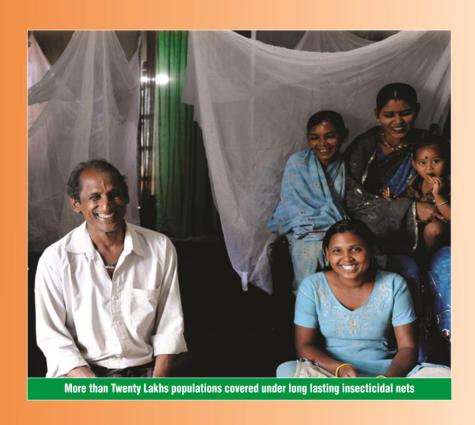
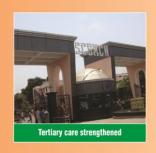
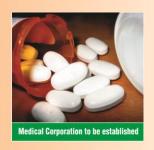


Outcome Budget 2013-14









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EXECUTIVE SUMMARY

I. An Overview

The Department of Health and Family Welfare (DHFW) is responsible for providing affordable and quality health care services to the people of Odisha, especially to the disadvantaged and underserved groups in backward and tribal districts. The department also provides family welfare services aimed at population stabilization and deals with all public health matters including drug control. DHFW functions through Secretariat, seven Directorates¹, Directorate of Acharya Harihara Regional Cancer Centre, PD OSACS and Drugs Controller Administration. The department is headed by Principal Secretary.

The health budget comprises of (a) on budget provisions which are routed through treasury system and (b) extra-budget provisions wherein central funding support flows directly to the implementing agencies.

The on-budget allocations are mainly contained in Demand for Grants Nos. 12.

The extra budget provision represents Government of India (GoI) funding under National Rural Health Mission (NRHM), main part (75%) of which is transferred directly to the Odisha State Health and Family Welfare Society (OSHFWS).

This document presents Outcome Budget 2013-14 for DHFW covering Demand for Grants Nos. 12. The outcome budget will provide an overview of the objectives, financial outlays, quantifiable deliverables, projected outcomes, and scheme implementation process (implementing agency/funds flow) and timeline. The outcome budget is expected to be available for public information and scrutiny and thereby strengthen public participation in the delivery of health care and family welfare services at the grass root level.

The structure of presentation of the Outcome Budget 2013-14 is summarised below:

Chapter I: This chapter presents an overview of health vision, policy, institutional set up along with Organogram, brief description of major schemes that are under implementation, and funds flow mechanism.

Chapter II: This chapter contains in tabular form Outcome Budget 2013-14 in the prescribed format.

Chapter III: The recent policy and reform initiatives taken by DHFW are summarised in this chapter.

Chapter IV: Past performance of 2012-13 up to December'2012 with respect to the budgetary allocation is summarised in this chapter.

Chapter V: To put Outcome Budget 2013-14 into a proper perspective, financial review of outlay over the period from 2011-12 to 2013-14 is provided in this chapter.

Chapter VI: This chapter highlights separately, outlay under SC-SP and TSP or the year 2013-14.

¹These Directorates are: Directorate of Health Services; Directorate of Family Welfare; Directorate of Medical Education, Training & Research; Directorate of Indian Systems of Medicine and Homeopathy; NRHM Mission Directorate; and State Institute of Health & Family Welfare, Director Public Health.

II. Programme Implementation, Monitoring, and Evaluation

DHFW functions through Secretariat, seven Directorates², Director Acharya Harihara Regional Cancer Centre, PD OSACS and Drugs Controller Administration. The department is headed by a Principal Secretary. The health care and family welfare schemes are implemented and monitored by the respective Directorates.

At the district level, Chief District Medical Officer (CDMO) is in overall charge of providing health care services, while Sub Divisional Medical Officer (SDMO) is responsible for functioning of Sub-Divisional Hospital (SDH), Medical Officers (MOs) are in charge of Community Health Centers (CHCs) and Primary Health Centers (PHCs).

All schemes under National Rural Health Mission (NRHM) are implemented and closely monitored by the Mission Directorate. State Programme Management Unit provides technical support to the State Health Mission. The Mission Directorate is the Secretariat to the Mission. The Directorate comprises Programme Managers and a group of specialists in the areas of social development, human resource development, Economics, BCC, M&E, Public Private Partnerships, Accounts/financial analysis etc.

The district health societies operate through the Zilla Swasthya Samities (ZSSs) and the District Programme Management Units (DPMUs). The Block Programme Management Units (BPMUs) are responsible for preparation of block and village level plans, monitoring and implementation of government programmes, training of ASHA, inter-sector co-ordination, and developing public private partnerships for health care service.

Rogi Kalyan Samities (RKSs) have been formed to undertake management of the health institutions up to PHC level through community participation. At present, RKSs are operational at 32 District Hospitals (DHs) and 377 CHCs.

Under NRHM's mandate of decentralized planning, Gaon Kalyan Samities (GKS) are being constituted in the State. Formed at the revenue village level, GKS is envisaged as a community level platform designed to facilitate health and sanitation related activities in particular and development programmes of the village in general. There are now 45,380 functional GKS in the state.

In general, programme monitoring and evaluation mechanism includes:

- Regular Fixed Day Review Meeting, at different levels:
 - Monthly fixed day meetings at all levels
 - o Monthly district level review by Collector
 - o RDC level review by Revenue Divisional Commissioners
 - o Quarterly CDMO conference chaired by the Health Minister, GoO
 - Video conference with district Collectors by Chief Secretary

²These Directorates are: Directorate of Health Services; Directorate of Family Welfare; Directorate of Medical Education, Training & Research; Directorate of Indian Systems of Medicine and Homeopathy; NRHM Mission Directorate; and State Institute of Health & Family Welfare and Director of Public Health.

- Monitoring of Schemes through IT enabled services:
 - Mission Connect A 'Closed User Group (CUG)' connecting of all frontline health service providers established
 - o Review through Video Conferencing
 - Web based MCH Centre monitoring system
 - Web based PIP Monitoring system
 - Web based HRMIS
 - o GIS in Public Health
 - o Biometric Attendance system
 - o MHU tracking through GPS
- 3rd Party Intervention Monitoring Plan (Zonal& District level): This is a new initiative introduced under M&E interventions with representatives from GoO, NGOs, development partners, civil society partners and individual consultants. The M&E composite group would be engaged to monitor overall planning and progress of zone wise districts comprising of ten districts. This will help to know about the overall district performance and expenditure trend along with their issues so that those aspects could be addressed at higher level.
- Web based Hospital Management Information System (HMIS): The following steps are being taken under this mechanism
 - Facility based data capturing
 - Training/ orientation to all block level reporting personnel as well as Health Worker Female
 - o Installation of dedicated HMIS Server for quick data retrieval
 - Facility-wise Infrastructure Data Capturing (e.g. Building, Basic Amenities, Deliverable services & HR)
 - Setting up of HMIS based feedback mechanism
- Mother and Child Tracking System (MCTS): For tracking of the various Maternal and Child Health (MCH) schemes and evaluation of the benefits derived, a MCTS system is being implemented.

III. Public Information System

Important policy documents, plans, reports are available in the website of the Department for public scrutiny. These include *inter alia Odisha Health Policy and Perspective Plan*.

- Mission Statement and NRHM-Programme Implementation Plan(PIP)
- Odisha Drug Policy
- Annual Budget
- Annual Activity Reports
- Outcome Budget

Besides, DHFW is open to Right To Information Act.

CHAPTER-I: INTRODUCTION

1.1 Health Sector Vision and Policy

The Government of Odisha (GoO) articulated its Vision 2010 for Health in February 2001, which was revised in February 2003 to incorporate Odisha State Integrated Health Policy. According to Vision 2010 and health policy there under, the health mission of the state is "to facilitate improvement in the health status of the people of Odisha with their participation, by making healthcare available in a socially equitable, accessible and affordable manner within a reasonable time frame, creating partnerships between the public, voluntary and private health sector and across other developmental sectors".

GoO has also prepared a comprehensive sector-wide Odisha Health Sector Plan (OHSP) 2007-15 to achieve health vision and policy. OHSP includes several strategies for strengthening the health system of the state.

1.2 Health Care System and Organizational Structure

In Odisha, public health care services are provided by the Department of Health and Family Welfare (DHFW) under the Ministry of Health and Family Welfare. DHFW functions through Secretariat, seven Directorates, Director Acharya Harihara Regional Cancer Centre, PD OSACS and Drugs Controller Administration. The department is headed by a Commissioner-cum-Secretary. Exhibit 1.1 shows the Organogram of the department.

At the district level, Chief District Medical Officer (CDMO) is in overall charge of providing health care services, while Sub Divisional Medical Officer (SDMO) is responsible for functioning of Sub-Divisional Hospital (SDH), Medical Officers (MOs) are in charge of Community Health Centers (CHCs) and Primary Health Centers (PHCs).

Like in other states, there exist a state health society called Odisha State Health and Family Welfare Society (OSHFWS) and district level health societies known as Zilla Swasthya Samities (ZSSs) for implementing various vertical programmes such as Reproductive and Child Health (RCH), tuberculosis, leprosy, malaria and blindness. Under National Rural Health Mission (NRHM), all the societies for individual vertical programmes are merged with the respective ZSS in all the districts.

State Programme Management Support Unit (SPMSU) acts as the secretariat to the State Health Mission and OSHFWS. Headed by a Mission Director, SPMSU provides technical support to the State Health Mission through its pool of skilled professionals for RCH and other National Disease Control Programmes.

The district health societies operate through the Zilla Swasthya Samities (ZSSs) and the District Programme Management Units (DPMUs). The Block Programme Management Units (BPMUs) are responsible for preparation of block and village level plans, monitoring and implementation of

Government programmes, training of ASHA, inter-sector co-ordination, and developing public private partnerships for health care service.

Rogi Kalyan Samities (RKSs) have been formed to undertake management of the health institutions up to PHC level through community participation. At present, RKSs are operational at 32 District Hospitals (DHs) and 377 CHCs.

Under NRHM's mandate of decentralized planning, Gaon Kalyan Samities (GKS) are being constituted in the State. Formed at the revenue village level, GKS is envisaged as a community level platform designed to facilitate health and sanitation related activities in particular and development programmes of the village in general. There are now 45,380 functional GKS in the state.

The AIDS control programme is implemented by Odisha State AIDS Control Society (OSACS). Currently National AIDS Control Programme (NACP) - Phase III (2007 – 2014), is in progress.

Minister-H&FW Spl. Secretary **Principal Secretary** Addl. Secretaries Jt. Secretaries Dy. Secretaries **Under Secretaries** Director DPH DHS **DFW** MD-**SIHFW** DCA PD-**DMET** -Ayush **OSACS NRHM** Addl. Addl. JD-Technical Superintende Dy. Dy. Dy JD- Finance nts of 3 MCH, Direct Direct Drug Direct Direct HRD SVPPGIP, Manager Contr ors/Jt. ors/Jt. ors ors Nursing SPM/SFM oller Direct Direct colleges CDMO/CMO SDMO **DPMU** Inspect Drug Inspectors ors ADMO-ADMO-ADMO-Health FW Medical PH Officer **BPMU**

Exhibit 1.1: Organogram of Department of Health and Family Welfare (DoH&FW)

DSMO, DTO

MOIC-CHC

1.3 Health Facility and Human Resource

As shown in Table 1.1, Odisha has got fairly large network of health facilities. There are now 3 state owned and 3 private medical colleges (having total intake capacity of 400 MBBS and 250 BDS); 32 districts headquarter hospitals; 27 sub-divisional hospitals; 377 community health centers; and 79 other hospitals. The state also has 8 Ayurveda hospitals (5 state owned and 3 private colleges) and 6 Homeopathic hospitals (4 state owned colleges and 2 private colleges). At the grass root level, health care services are delivered through 1226 primary health care centers; 6,688 sub-centers; 560 Homeopathic dispensaries; 619 Ayurvedic dispensaries; and 9 Unani dispensaries.

Table 1.1: Health facilities in the state

Health Facility	Number
Medical College and Hospitals	3
District Hospitals (30 districts + Capital Hospital, BBSR & R.G.H, RKL)	32
Sub-Divisional Hospitals	27
Community Health Centers	377
Other Hospitals	79
Infectious Disease Hospitals	5
Training Centers	5
Primary Health Centers (N) & others	1,226
Sub-Centers	6,688
A.N.M. Training Schools	16
G.N.M. Training School	8
M.P.H.W.(Male) Training School	3
Ayurvedic Hospitals	2
Ayurvedic College & Hospitals	3
Ayurvedic Dispensaries	619
Homoeopathic College & Hospitals	4
Homoeopathic Dispensaries	560
Unani Dispensaries	9
Medical College – Private	3

At present, there are 39 ANM schools (16 state owned schools)), 30 GNM schools (5 state owned schools), 13 B.Sc. (N) colleges (only one government college), one Post Basic B.Sc. (N) college (state owned), and one M.Sc. (N) college (state owned). The government has proposal to expand nursing institutions and strengthen existing nursing schools and colleges and the central government has agreed in principle to provide funding support.

Like in other states, the state is faced with shortage of medical and paramedical staff. Against sanctioned post of 29,789, posts of 6,314 (21%) still lying vacant. There exist vacant posts for 415 doctors, 857 staff nurses, 193 pharmacists, 604 lab technicians, and 120 radiographers. Table 1.2 shows the detailed manpower position.

Table 1.2: Human resource position

Designation	Sanctioned	In-place	Vacant
Doctor	4,362	3,947	415
Pharmacist	2,144	1,951	193
Staff Nurse	3,522	2,665	857
Lab Technician (Path)	1,638	1,034	604
Multi-Purpose Health Worker - Male	5,727	3,685	2,042
Multi-Purpose Health Worker - Female	9,237	8,258	979
Radiographer	235	115	120
Multi-Purpose Health Supervisor - Male	1,599	683	916
Multi-Purpose Health Supervisor - Female/ Lady Health	1,128	954	174
Visitor	1,128	334	174
Ophthalmic Assistant	197	183	14
Total	29,789	23,475	6,314

1.4 Health and Nutrition Status

Odisha has made considerable progress over the decades in reducing Total Fertility Rate (TFR) and Crude Birth Rate (CBR). NFHS-3 shows that TFR in Odisha at 2.4 births per woman is slightly lower than all India average of 2.7 births per woman in India. Similarly, crude birth rate at 20.5 per 1000 population (SRS 2011)) is less than the country average of 22.1 per 1000 population. The low values of CBR and TFR indicate that Odisha is approaching towards the replacement level.

Leaving aside low CBR/TFR, Odisha lags far behind the country in terms of Infant Mortality Rate (IMR) and Maternal Mortality Rate (MMR). Though IMR has been falling rapidly over the years, the state's IMR at 61 per 1000 live births (SRS 2011) continues to be the second highest in India after Madhya Pradesh which has IMR of 62 per 1000 live births. The state's MMR at 258 per 100,000 live births (SRS 2007-2009) has improved from 303 per 100,000 live births (SRS 2004-2006) but it is still way above the national average of 212 per 100,000 live births.

Odisha also has a high prevalence of malnutrition among children and women. According to NFHS-3 data, 45 percent of children under five year are stunted (too short for their age indicating chronic malnutrition) while 20 percent are wasted (too thin for their height indicating acute malnutrition). Taking into account both chronic and acute malnutrition, 40 percent of children under five year are underweight. Among adult women, 41 percent suffer from malnutrition.

Anemia is another major health problem in the state. NFHS-3 data shows that almost two-third (65 percent) of children in 6-59 months age group are anemic. Among women, 61 percent have anemia. NFHS-3 further reveals that 69 percent of pregnant women and 65 percent of women who are breastfeeding are anemic. As per the UNICEF Coverage Evaluation Survey 2009, the percentage of women who availed a full ANC care package (comprising 3 ANC checkups, 1 TT injection and 100+ IFA tables) was as low as 37.5%.

Malaria is the foremost public health problem of Odisha. Odisha contributes maximum to the malaria burden of the nation. In 2007, nearly 22 percent of malaria cases and 20 percent of malaria deaths were reported from Odisha. Though most of the districts show Falciparum malaria, the problem is severe in southern and western districts with a predominant tribal population.

1.5 Schemes and Activities

The Department of Health and Family Welfare executes several schemes to ensure adequate health care services to the people of Odisha. While implementing these schemes, steps are being taken to cater to the health needs of the people in the rural areas, particularly in the tribal and backward regions of the State. This section provides a brief description of the key schemes currently under implementation by DHFW.

1.5.1 State Plan

Odisha Health Sector Plan under DFID Assistance

Department for International Development, United Kingdom has been providing financial and technical assistance for reducing health and nutrition status of the rural people of Odisha. New initiatives and investment in critical areas like sickle cell, telemedicine, trauma care, etc. are undertaken under the scheme. An amount of ₹4000 lakh has been proposed in the BE for 2013-14.

Odisha State Medical Corporation

Department of Health and Family Welfare is in the process of establishing a medical corporation to look into the function of procurement and distribution of drugs and supplies for all the health institutions and maintenance of medical equipment across the state. Along with the corporation a proposal of setting up of on-line Drug Dispensing Counters across public health facilities in Odisha is under process to increase access to free medicines. A provision of ₹500 lakh has been made in 2013-14BE.

National programme for health care of the Elderly (NPHCE)

Government of India has started the scheme for providing free health care services to senior citizens (above age 60) at community level to district level health institutions. Ten districts −Bolangir, Koraput, Malkangiri, Nabrangpur, Nuapada and other five districts of the state are covered under the scheme during 2013-14. The state and central share of this scheme is 20:80. An amount of ₹ 300 lakh has been proposed in the BE for 2013-14.

National programme for prevention of control of Diabetes Cardiovascular Diseases and Strokes (NPCDS)

It is a program run by Government of India for health promotion, prevention of risk factor, early diagnosis and management of non communicable diseases like Diabetes, Cancer, Cardiac diseases etc. at community level to district level health institutions. Ten districts -

Bolangir, Koraput, Malkangiri, Nabrangpur, Nuapada and other 5 districts are covered under the scheme during 2013-14. The state and central share of this scheme is 20:80. An amount of ₹1127.66 lakh has been proposed in the BE for 2013-14.

Establishment of Regional Institute of Paramedics (RIPS)

A regional institute of paramedics will be established at Bhubaneswar for creating more numbers of paramedics in the state. The GoI and State share of this scheme is 75:25 and an amount of ₹400 lakh has been proposed in the BE for 2013-14.

Tertiary Cancer Centre

This is a Government of India scheme where one Tertiary Cancer Centre will be established under NPCDS scheme in each medical college in the state for prevention of Cancer through early detection and treatment. The state and central share of this scheme is 20:80. An amount of ₹100 lakh has been proposed in the BE for 2013-14.



Mo Mashari

As a measure of prevention & control of malaria in the high burden districts of the state Govt. has launched a new scheme under the name "Mo Mashari" under state plan. Under the Scheme Long Lasting Insecticide Nets (LLIN) are being provided to pregnant women and boarders of Tribal hostels. An amount of ₹1000.00 lakh has been proposed in the BE for 2013-14.

Biju Gramina Swasthya Sibira (BGSS)

The scheme has been introduced w.e.f August 2011. Under this scheme health camp will be organised in inaccessible areas to provide health service to the people living in the remote areas. An amount of ₹294.00 lakh is proposed for this scheme during 2013-14.





Odisha Emergency Medical Ambulance Service (OEMAS)

OEMAS shall provide pre-hospital care and transportation service across the State for all kind of medical emergency arising due to accident, fire, natural calamity, pregnancy, or otherwise where immediate medical attention is required. Fifteen districts namely Sundargarh, Sambalpur, Anugul, Dhenkanal,

Keonjhar, Mayurbhanj, Balasore, Bhadrak, Jajpur, Cuttack, Puri, Khurda,

Ganjam, Raygada and Koraput are proposed to be covered under the scheme during 2013-14. The scheme has been launched for Khurda district by honorable Chief Minister on 5th March 2013. Launching of OEMAS in all the fifteen districts is scheduled to be completed by end of April 2013. For balance 15 districts, process has been started for selection of the agency.

The Project will be implemented in two phases on the basis of implementation feasibility, equity and need. There shall be a total of 420 ambulances under the scheme. The ratio of ambulances of one per lakh of population has been kept as per the standard of World Health Organisation (WHO). The budget provision for 2013-14 is ₹ 1,000.

Swasthya Sanjog – Mobile Health Unit

Mobile Health Units, the vehicles equipped with medicines, doctors for providing services at the doorsteps of the people at far-flung areas are engaged and renamed as Swasthya Sanjog. An amount of ₹1338.1 lakh has been proposed in the BE for 2013-14.

Renal Transport Unit

In order to provide super specialty health service, a kidney transplant unit will be established in MCH, Berhampur for which provision has been made to the extent of ₹ 150 lakhs in 2013-14 BE.

ANM and GNM School

₹500 lakh has been provided in the Budget Estimate for the year 2013-14 for the infrastructure development of the ANM and GNM schools towards 25% share of the state.

Bone Marrow Transplant Unit

In order to provide super specialty health service, a bone marrow transplant unit will be established in MCH, Cuttack for which provision has been made to the extent of ₹250 lakhs in 2013-14 BE

Up gradation of Medical colleges for new PG course

Government of Odisha has decided to increase the Post Graduate seats in three premier Allopathy medical colleges for which budget provision of ₹1991.50 lakh has been made in the financial year 2013-14.

Construction of H&FW department

Repairs, renovation, new construction, procurement and installation of equipment at various health institutions for providing improved health care to the people of Odisha. ICU, Cathlab, SNCU, staff quarters etc. will be constructed. An amount of ₹ 111,94.78 lakh has been proposed in the BE for 2013-14.

Health Management Information System

Department is in the process of development and implementation of a robust software for making available to management key information relating to HR, Disease burden, health service delivery etc. for better control and decision making process. A provision of ₹ 1000 lakh has been made in 2013-14 BE.

Thirteenth Finance Commission (TFC) Grants

The scheme is meant for the civil construction of buildings for 316 sub centers, 16 PHC (N) and 25 nos of staff quarters of Ayush Staffs. An amount of ₹ 8750 lakh has been proposed in the BE for 2013-14.

1.5.2 Central Plan

Provision of materials under National Malaria Eradication Programme (NMEP)

Procurement and distribution of Long Lasting Insecticide Nets (LLIN) for prevention and control of malaria in high burden districts for which budget provision is ₹ 30 crore for the year 2013-14.

Continuance of district Family Welfare Bureau and continuance of rural Family Welfare Centre in tribal and non-tribal areas

Provision of salary and other administrative expenses for the staffs working at district and sub district level for the implementation of family welfare programs of the government. The budget outlay for 2013-14 for both programs is ₹193.72 Crores.

Purchase and distribution of Contraceptives

Procurement and distribution of contraceptives amongst the target group for birth control with a view to stabilise the population of the state. The budget provision for the scheme is ₹15 crore for the year 2013-14.

1.5.3 Non-Plan

Medicines

Budget provision of more than ₹ 202 Crores has been made for the year 2013-14 as against ₹104 Crores in the year 2012-13 and ₹50 Crores in the year 2011-12 for reducing the burden of out of



pocket expenses on account of purchase of medicines by the patients visiting public health institutions across the state.

Diet

Budget provision of more than ₹2237.91 lakh has been made for the year 2013-14 for providing nutritious foods to the in patients in the public health institution of the state.

Odisha Treatment Fund

A provision of ₹1000 Lakh has been made in

the year 2013-14BE for providing free medical treatment to poor patients up to Rupees 3 lakh in each case.

1.5.4 National Rural Health Mission (NRHM)

The National Rural Health Mission (NRHM) has been in operation since June 2005 in Odisha to provide accessible, affordable and accountable quality health services to the poorest households in the remotest rural regions. Broad objectives of the NRHM in Odisha are as follows:

- Reduction in maternal and child mortality.
- Universal access to affordable and quality health care services.
- Prevention & control of communicable & non-communicable diseases.
- Access to integrated comprehensive primary health care.
- Population stabilization.
- Promotion of healthy life styles

Major activities undertaken under NRHM briefed below.

Organisation of Village Health Nutrition Day (VHND)

VHND popularly known as Mamata Divas in Odisha is a service platform to interact with the community for strengthening the entire gamut of RCH services. This is a singular and potent platform for interaction with the communities and for understanding their expectations. For implementation, Fridays are designated day for VHND and in case of a sub Centre having more than four Anganwadi Centers; the subsequent Tuesday is observed as VHND in addition to the Fridays. The budget outlay (draft) for 2013-14 for organising 722016 numbers of VHND session is ₹ 5115.43 lakh.





Janani Surakshya Yojana (JSY)

The scheme is aimed to reduce out of pocket expenses of pregnant women on account of delivery. Cash assistance of ₹1400/- and ₹1000/- per institutional birth is given in rural and urban areas respectively. The budget outlay for 2013-14 (draft PIP) is ₹12114.81 lakh.

Janani Express (JE)

There are 434 nos of vehicle running on PPP mode to cater to the need of transporting pregnant women to health facilities for institutional birth.

Janani Sishu Surakshya Karyakram (JSSK)

With an objective to restrict the maternal and infant mortality in the state of Odisha, coupled with intentions to provide best health care services to both the target groups, the JSSK programme was launched in the middle of the last quarter, 2011. This new scheme 'Janani Sishu Surakshya Karyakram' supplements the cash assistance given to pregnant women under Janani Suraksha Yojana and is aimed at mitigating the burden of out of pocket expenses incurred. The budget outlay for 2013-14 (draft PIP) for JSSK is ₹6580.19 lakh.

Support to Pustikar Diwas

Pustikar Diwas programme is organised in 15th of every month in each block CHC to effectively combat the problems of malnutrition in the state for children of 0-6 years. It is a convergence programme where the staffs of both Health & W.C.D. Department take part. The malnourished child is examined by the Pediatric Specialist/ Medical Officers; some mandatory tests is advised to know the degree and cause of malnutrition, appropriate treatment is given as per the guideline, nutritional counseling is also given to the parents, some financial support is given for transport and drug; severely malnourished children are identified and referred to higher institutions for better treatment. The budget provision for 2013-14

(draft PIP) is ₹265.05 lakh.

Nutrition Rehabilitation Centre (NRC) running cost

The scheme is meant for defraying the operational expenses for maintaining 44 nos NRC Centre for treating severely malnourished children (SAM) in the state. (Budget outlay for 2013-14 (draft PIP) is ₹593.67 lakh.)



Family planning

Various activities including NSV camps, female sterilisation camps, training to doctors and paramedics are undertaken for reducing the total fertility rate (TFR). Budget outlay for 2013-14 (draft PIP) is ₹3088.30 lakh.

School health program

Screening of school children, counseling on health and nutrition to the school children in general schools and residential tribal schools in Odisha.

Urban RCH

Provision is made for operational expenses of 40 urban slum projects, which provide OPD, Referral and Outreach Services that are imparted in partnership with the NGOs or private organizations in the slum and vulnerable population in urban areas.

Maternity Waiting Home (MWH) will work like a platform for the expectant mothers to come before hand for impending deliveries. MWH would be established mid way between village and the health institution. Engagement of 189 HW (M) and 87 HW(F) is planned for outreach activities at a budget outlay of ₹687.51 lakhs as per NRHM draft PIP 2013-14.

Training

Capacity building of medical and paramedics on various areas are undertaken for improved service delivery in public health institutions

Compensation for female sterilisation

The scheme is intended to compensate the wage loss and support for nutritious food for female opts for sterilisation in public health facility.

Rastriya Bal Swasthya Karyakram (RBSK)

It is a new initiated aimed at screening of all children from 0 to 18 years old for 4 Ds (Defects at birth, Childhood diseases, Deficiencies, Developmental delays and disabilities) and providing free treatment to sick children including surgery at tertiary level. Budget provision of ₹6785.61 lakhs has been made in 2013-14 (Draft PIP).



ASHA

ASHAs (Accredited Social Health Activist) as trained community health volunteers complement the work of ANM/AWWs in the field and act as an interface between the community and public health system. They receive a performance-based compensation for promoting health related activities. 40845 ASHAs are in position in the state (by December, 2011) against the total target of 41102 in rural areas. (Budget outlay for 2013-14 (draft PIP) is ₹12051 lakh)

Untied Fund

Untied Funds are given to Rogi Kalyan Samities of 6688 sub centers and 1742 health institutions in the state at the rate of ₹10,000/- per sub center, ₹5 lakh per DHH, ₹2.5 lakh per CHC/SDH, ₹1.75 lakh per PHC to meet the low cost urgent requirement. Provision of ₹4158.9 lakh has been made in draft PIP of 2013-14.

Untied fund to 45380 GKS at the rate of ₹10,000/- per annum is planned for 2013-14 (draft PIP) for capacity building and monitoring.





IEC/BCC

With an objective of spending up to ₹5/- per head a budget of ₹2258.29 lakh has been made for IEC/BCC activities in order to create awareness among the people of Odisha on 11 thematic focus areas of maternal, child health family planning etc.

Free and assured referral transportation services

For strengthening referral transport services through 1307 (421 government owned dedicated ambulance, 420 ambulance under OEMAS and 466 Janani Express) a budget provision of ₹9575.60 lakh has been made in 2013-14 (draft PIP) for GPS tracking, managing centralised call center.

Diagnostics services

One of the initiatives planned for the ensuing financial year by NRHM is to make available free diagnostic services up to sub center level by outsourcing, multiskilling and infrastructure strengthening. A provision of ₹ 1155.98 lakh has been made in 2013-14 (draft PIP)

Non-Clinical service provision at hospitals:

Draft PIP for 2013-14 emphasizes on strengthening non-clinical service provision in the facilities (in 144 major health facilities) in five core areas of housekeeping and cleanliness, hospital linen and laundry, security, health desk and biomedical waste management. A provision is made for ₹1903.82 lakh.

Free Drugs

A provision of ₹13193.55 lakh has been made in the draft PIP for the year 2013-14 towards procurement and distribution of drugs and supplies including malaria drugs.

Swasthy Sebika Niyukti Yojana

Full and partial scholarship schemes for GNM education in 67 Indian Nursing Council accredited private institutions meant for SC/ST students is proposed to address shortfall in the position of Staff Nurse. A provision of ₹153.75 lakh is made in 2013-14 (draft PIP).

Strengthening of Vital statistics

A provision of ₹218.65 lakh is made in the draft PIP for the year 2013-14 for installing necessary computers for online registration and digitised certificate and incentive for ASHA.

Training



New construction/renovation

medical and paramedical staffs.

Under this scheme new construction of building of

A provision of ₹1561.06 lakh has been made in 2013-14 (draft PIP) towards training of various

health institutions in high focus districts and renovation of old buildings are undertaken. Provisions of ₹3366 lakh and ₹24639 lakh have been made for the construction of sub centers and other health facilities in 2013-14 (draft PIP).



Mainstreaming Ayush

Bringing Ayush into the main stream of medical services by providing medicines, consultation by Ayush doctors in the health institutions is the objective of the government. A provision of ₹₹3002. 65 lakh has been made in 2013-14 (draft PIP).

Mobile Health Unit

The new name of the mobile health unit is "Swasthya Sanjog". Under this scheme Mobile vans are engaged in remote areas for making health service available to the poor people. It was decided to introduce a web-based application for tracking of MHU vehicles through Geographic positioning System (GPS) devices. Currently the system is being piloted in Raygada district. There are 229 numbers of MHU currently in operational, which will be increased to 240. Budget provision of ₹2971.15 lakh is made in 2013-14 (draft PIP).



Immunisation – Revised National TB Control Programme (RNTCP)

RNTCP with Directly Observed Treatment Short Course Chemotherapy (DOTS) strategy implemented in Odisha for detected case tries to combat the issue of TB in the state.

Immunisation – National Vector borne Disease Control Programme (NVBDCP)

NVBDCP is implemented in Odisha with an aim to control Malaria, Filaria, Chuckengunya, Kala Azar, Japanese Encephantilies and Dengue. Most of the described diseases are epidemic prone having seasonal variance. However Malaria & Filaria continues to be a major public health problem in Odisha. Activities like IRS spray, distribution of Long Lasting Insecticide Nets, provision of drugs and massive IEC/BCC activities together



contribute to the broad spectrum of integrated vector control programme

Immunisation – National Programme for Control of Blindness (NPCB)

NPCB was launched in the year 1976 in India with a goal of reducing the prevalence of blindness in India. The key elements of the NPCB are, (i) Cataract Surgery, (ii) Eye Screening at School, and (iii) distribution of spectacles.

Immunisation - National Leprosy Eradication Programme (NLEP)

Training to medical and paramedical staffs, treatment of leprosy patients in medical colleges and selected district headquarter hospitals, distribution of shoes are major activities under the program to combat leprosy in the state.

Integrated Disease Surveillance Programme (IDSP)

IDSP aims at keeping a close surveillance on diseases³ and provides information as well as linkage for prevention & control. The programme also aims at identifying objects, follows secular trends and patterns of disease occurrences & distribution. In particular, the IDSP aims to (a) establish a decentralized district based system of surveillance for communicable and non-communicable diseases so that timely and effective public health actions can be initiated in response to health changes in the urban and rural areas, and (b) integrate existing surveillance activities to avoid duplication and facilitating sharing of information across all disease control programs and other stakeholders so that valid data is available for health decision making in the district, state and national level.

1.6 Funds Flow Mechanism

1.6.1 On-budget funds flow

On-budget funds flow in Odisha is routed through computerised treasury system. The budget allocations to various departments as approved by the State Legislature are loaded into the

³ Following diseases are under regular surveillance on a weekly basis: (i) Vector born: Malaria, Chuckengunya, Dengue & JE, (ii) Water borne: Acute Diarrhoeal disease including Gasteroentitis (Cholera), Typhoid, and Bacillary Dysentery, (iii) Respiratory: Pneumonia, Acute Respiratory Infection /ILI, (iv) Vaccine preventable: Measles, Diphtheria, and Pertussis, (v) Diseases under eradication: Acute Flaccid Paralysis (Polio), (vi) Other Bacterial & Viral: Meningitis, Acute Encephalitis Syndrome, Viral Hepatitis, and Leptospirosis, (vii) Other condition: Pyrexia of unknown origin and Road traffic accidents, (viii) International commitment: Plague, (ix) Unusual syndromes NOT captured above (Specify clinical diagnosis): Meningoencephalitis, Respiratory distress, and Haemorrhagic fever, (x) Bites: Dog Bite and Snake Bite.

Integrated Odisha Treasury Management System (IOTMS). The Controlling Officers (COs) next allocates department's budget to the Drawing and Disbursing Officers (DDO). In case of DHFW, there are seven COs and CDMOs/MOs who are designated as DDOs at the district/block level. DDO wise budget details are again loaded into IOTMS and then transmitted to the respective treasuries and sub-treasuries through IOTMS network.

The disbursement of plan and Non-plan budget for the Department is done by DDOs through the Treasury or Sub-Treasury offices located in the District or sub-District. Each DDO sends its bills to the concerned Treasury (or Sub-Treasury) for payment. If the bill is within the allocation limit, the DDO receives a cheque from the Treasury against the bill. The DDO can then choose to endorse the cheque for various payments. The DDO can also raise a bill in the name of a third party to which the payment is due and the Treasury issues an account payee cheque in the name of the third party. Thus, IOTMS ensures that the expenditures under no circumstances can exceed the budget provision.

The system for reporting actual spending in DoH&FW is well prescribed. A budget control register is maintained at the office of each DDO. For the schemes, an acquaintance register is maintained for disbursal of money. Every month, the Directorate of Treasuries and Inspections (DTI) send a report to each of the controlling officers detailing the expenditure made by each DDO. The DDO also sends a monthly expenditure report to the controlling officer or an immediate superior for reconciliation.

IOTMS has also been helpful to the Finance Department in cash management as the system provides information on pending bills on any day. Some of the earlier systemic deficiencies such overdrawing of funds, misclassification, non-reconciliation of accounts, etc. have been considerably reduced.

1.6.2 Funds flow under NRHM

Under NRHM, funds from GoI are directly deposited in the bank accounts of the Odisha State Health and Family Welfare Society. The responsibility of operating this account is with the Member Secretary, Governing Body of OSHFWS. The Mission Director, NRHM is responsible for disbursement of funds and its proper accounting with the support of State Finance / State Accounts Manager.

OSHFWS allocates funds to Zilla Swasthya Samities (ZSS) as per their Project Implementation Plans and based on funds' Utilization Certificates. For quick transfer of funds, e-banking facilities are being used in all the districts and in 270 blocks. District Accounts Manager with the support of District Programme Manager is responsible for maintaining accounts and disbursement of funds. A detailed financial management guideline has been issued to all the districts.

Books of accounts are maintained manually at most of the locations and as a result it becomes difficult to compile, consolidate and extract reliable financial data for timely reporting and submission. Under NRHM financial guidelines, the monthly report on finances should include a statement that bank accounts have been reconciled. NRHM has developed a web base accounting software, which will be implemented across the state in district and sub district level w.e.f. 2013-14. This will facilitate financial monitoring and control.

CHAPTER-II: OUTCOME BUDGET 2013-14

The exercise is primarily meant at converting financial outlays into measurable and monitor able outcome. It is a performance measurement tool that helps in better service delivery, decision making, evaluating program performance and results and reducing program effectiveness. The outcome budget is also aimed at changing the outlook of the agencies entrusted with the responsibility of program execution and implementation. The idea is to make the programme implementing agencies more result oriented by shifting the focus from "outlays" to "outcomes".

The scheme wise details wherever necessary of the outcome budget for 2013-14 are indicated in the attached statement.

Table 2.1: Outcome Budget, Department of Health and Family Welfare, 2013-14 – Plan

SI. No.	Name of the Schemes/Programme	Financial Outlay (in TRS)	Broad Objective of the Scheme	Quantifiable/ Deliverable Physical Outputs	Project Outcome	Processes/ Timelines	Remarks/ Risk Factors
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
				STATE PLAN			
1	Odisha Health Sector Development Plan Under DFID Assistance.	40,00,00	Support ongoing and new activities as outlined in Orissa Health Sector Plan (OHSP)	 i) 6 sickle cell unit at districts will be established ii) 4 critical care unit will be established iii) Raking of Central Drug warehouse will be constructed iv) 40 sub centres will be constructed v) High definition unit under O&G department of SCB MCH vi) 4 lakh LLIN to be procured and distributed 	Reduction in malaria prevalence Improved health care services Drug storage and distribution improved	Activities will be implemented by the concerned Directorates. Funds will be released through OSHFWS. (Timeline: 12 months)	OHSP PIP for 2013-14 is under finalisation.
2	NRHM State Share	200,00,00	Provide State share to avail of GoI funding under NRHM	Given separately in Table 2.2	For the year 2013-14: i) Reduction in MMR to 179; ii) Reduction in IMR to 41; iii) Reduction in TFR to 2.2; iv) Neonatal mortality rate to 28	Activities will be implemented by NRHM Mission Directorate. State/ GoI funds will be released to OSHFWS. (Timeline: 12 months)	Draft NRHM PIP (2013-14) yet to be approved by Gol after due revision. Provisional total Outlay for NRHM in 2013- 14 is ₹1684.53 crore, As per DRAFT PIP.
3	MO Masari	10,00,00	Prevention and control of vector borne diseases.	Procurement and distribution of 4,00,000 LLIN for pregnant women	Reduced mortality and morbidity on account of malaria.	Scheme will be implemented by DHS (Timeline: 12 months)	
4	Directorate	2,25,41	Expenses under Ayush directorate	Equipment to be purchased under Ayush and operating cost of the directorate	Improved health care service delivery	Scheme will be implemented by DHS (Timeline: 12 months)	

SI. No.	Name of the Schemes/Programme	Financial Outlay (in TRS)	Broad Objective of the Scheme	Quantifiable/ Deliverable Physical Outputs	Project Outcome	Processes/ Timelines	Remarks/ Risk Factors
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
5	Renal transplant unit	1,50,00	Provide kidney transplant facility in select MCH.	Renal transplant unit in Cuttack SCB MCH will be operational	Reduced death on account of renal failure.	Scheme will be implemented by DMET (Timeline: 12 months)	(e)
6	Upgrading of Medical College Cuttack, for starting new PG course	17,91,50	Up gradation of MCHs for increasing the PG seats	Equipment and instruments will be procured and provision for operating expenses	Increased numbers of PG qualified doctors available in the state	Scheme will be implemented by DMET (Timeline: 12 months)	
7	National Programme for prevention of control of Cancer Diabetes Cardiovascular Diseases and Strokes (NPCDCS)	11,27,66	Control and prevent cancer, diabetes, cardiovascular diseases and strokes	Special health care facility provided for controlling Cancer and Diabetes in 10 districts- Bolangir, Koraput, Malkangiri, Nabrangpur, Nuapada and 5 more districts, which will be decided later.	Reduced diabetes, cancer and cardiac patient in Odisha	Scheme will be implemented by DHS (Timeline: 12 months)	
8	National Programme for health care of Elderly (NPHCE)	3,00,00	Provide special health care to senior citizens	Special health care provided to senior citizens in 10 districts- Bolangir, Koraput, Malkangiri, Nabrangpur, Nuapada and 5 more districts which will be decided later.	Improved health care services for senior citizens in the district	Scheme will be implemented by DHS (Timeline: 12 months)	
9	Education –PG course in MCH under Ayush directorate	41,80	Introducing PG course in Homeopathy in MCH under Ayush	Infrastructure development	Improved access to Homeopathic health care services	Scheme will be implemented by DIM&H. (Timeline: 12 months)	
10	Orientation training of medical and Para medical staffs	10,06	Capacity building of medical staffs	Training of new medical and Para medical staffs- 450 nos	Improved service delivery	Scheme will be implemented by Secretariat (Timeline: 12 months)	
11	ANM and GNM School	5,00,00	Provide training to the front line health service providers	Establishment of Two ANM and one GNM school	Improved access to public health care services	Scheme will be implemented by AHRCC (Timeline: 12 months	
12	Upgrading of Medical College, Burla, for starting new PG course	1,00,00	Up gradation of MCHs for increasing the PG seats	Operational expenses for new PG seats	Increased numbers of PG qualified doctors available in the state	Scheme will be implemented by DMET (Timeline: 12 months)	

SI. No.	Name of the Schemes/Programme	Financial Outlay (in TRS)	Broad Objective of the Scheme	Quantifiable/ Deliverable Physical Outputs	Project Outcome	Processes/ Timelines	Remarks/ Risk Factors
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
13	Multipurpose Training of Doctors and Para medics	50,00	Providing training to medical and Para medical staffs	90 Doctors and 330 paramedics will be trained	Improved service delivery	Scheme will be implemented by DHS (Timeline: 12 months	
14	Up gradation of Medical College Berhampur, for starting new PG course	1,00,00	Up gradation of MCHs for increasing the PG seats	Operational expenses for new PG seats	Increased numbers of PG qualified doctors available in the state	Scheme will be implemented by DMET (Timeline: 12 months)	Provision of Salary and other expenses
15	Drug control Administration – Up gradation of State Drug testing and research Laboratory (Equipment)	5,46,00	Strengthening the capacity of State Drug testing laboratory	Purchase of Equipment and infrastructure development	Efficiency in drug quality control	Scheme will be implemented by DCA(Timeline: 12 months	
16	Gandhi Ashram (Leprosy Home)	1,00,00	Grants to Leprosy home	Grants to be provided	Eradicating Leprosy	Scheme will be implemented by DHS (Timeline: 12 months	Grants for recurring expenses
17	Swasthya Sanjog	13,38,10	Reaching health care services in remote areas through Mobile Health unit	302 Mobile Health Units to be operational	Improved access of medical services in difficult areas	Scheme will be implemented by DHS (Timeline: 12 months	
18	Biju Gramina Swasthya Sibir	2,94,00	Reaching health care services in remote areas through organising health camps in each constituency	Organisation of Health camps in every assembly constituency₹	Improved access of medical services in difficult areas	Scheme will be implemented by DHS (Timeline: 12 months	
19	Tertiary Cancer Centre	1,00,00	Prevention of cancer through early detection and treatment	1 TCC to be established at MKCG, Berhampur	Reduction of death due to cancer in the State	Scheme will be implemented by DMET (Timeline: 12 months	
20	Establishment of Regional Institute of Paramedical Science (RIPS)	4,00,00	Make available more numbers of qualified and trained paramedics in the	Establishment of RIPS	Availability of paramedics for better service delivery	Scheme will be implemented by DMET (Timeline: 36 months	

Outcome Budget 2013-14

SI. No.	Name of the Schemes/Programme	Financial Outlay (in TRS)	Broad Objective of the Scheme	Quantifiable/ Deliverable Physical Outputs	Project Outcome	Processes/ Timelines	Remarks/ Risk Factors
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
		(-)	state		(-)	,	(-,
21	Mainstreaming of AYUSH under NRHM-Ayurvedic	8,52	Ayurvedic health care in Allopathy health institutions	Operational expenses for separate Ayurvedic wing	Availability of increased Ayurvedic medical service	Scheme will be implemented by DIMH (Timeline: 12 months	Provision of Salary and other expenses
22	Mainstreaming of AYUSH under NRHM- Homeopathy	3,77	Homeopathic health care in Allopathy health institutions	Operational expenses for separate Homeopathy wing	Availability of increased Homeopathy medical service	Scheme will be implemented by DIMH(Timeline: 12 months	Provision of Salary and other expenses
23	Mainstreaming of AYUSH under NRHM-Unani	18	Unani health care in Allopathy health institutions	Operational expenses for separate Unani wing	Availability of increased Unani medical service	Scheme will be implemented by DIMH (Timeline: 12 months	Provision of Salary and other expenses
24	Odisha State Medical Corporation	5,00,00	Procurement, storage and distribution of Drugs and maintenance of Equipment.	Establishment of Drug corporation and operationalisation	Improved drug procurement and distribution to reach the beneficiaries in time	Scheme will be implemented by DMET (Timeline: 12 months	
25	Payment of state decreatal dues and legal dues	7,00	Meeting statutory obligation	Not quantifiable	Statutory dues paid	Scheme will be implemented by DHFW (Timeline: 12 months)	Depends on the claim for the dues
26	HMIS	10,00,00	Development of software for hospital automation	All the health facilities of 30 districts will be covered	Quick decision making through availability of management information	Scheme will be implemented by DHFW (Timeline: 12 months)	
27	Renovation work	9,50,03	To maintain the buildings of the health facilities in good condition	Major and minor repairs of buildings under the department	Health service delivery improved	Scheme will be implemented by DHFW (Timeline: 12 months)	Different types of building to be repaired
28	Bone marrow transplant unit	2,50,00	Treatment of diseases involving bone marrow transplant	One unit will be established in MCH, Cuttack	Access to superspeciality health care in the state.	Scheme will be implemented by DHFW (Timeline: 12 months)	

SI.	Name of the	Financial	Broad Objective of	Quantifiable/ Deliverable Physical	Project Outcome	Processes/ Timelines	Remarks/ Risk
No.	Schemes/Programme	Outlay (in TRS)	the Scheme	Outputs			Factors
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
29	13 th Finance Award for up gradation of health infrastructure	87,50,00	Construction of health facilities and residence of health personnel	Construction of new building for 1207 sub center, CHC, PHC and MCHs	Health service delivery improved	Scheme will be implemented by DHFW (Timeline: 12 months)	
30	Construction of building of H&FW department	117,44,78	Construction of health facilities and residence of health personnel	Construction of new building for sub center, CHC, PHC and MCHs, staff quarters	Health service delivery improved	Scheme will be implemented by DHFW (Timeline: 12 months)	List of buildings to be constructed/re novated yet to be finalised
31	Emergency Medical Ambulance Service	1	Pre-hospitalisation care and transportation	420 Ambulance service (ALS and BLS) operational in 30 districts	Reduction of death due to road accident and other critical health conditions	Scheme will be implemented by DHFW (Timeline: 12 months)	
32	HQ , token provisions and State share of CSP	1,11,18					
	TOTAL STATE PLAN	555,00,00					
				CENTRAL PLAN			
1	National Goiter control programme	10,00	Provide support for continuation of the scheme	Awareness campaign continued	Reduced prevalence of Goiter	Scheme will be implemented by DHS (Timeline: 12 months)	Only salary and contingency expenses
2	National TB control programme	2,00,00	Provide support for continuation of the scheme	50,000 no's of positive case detection	Reduced TB prevalence and death on account of TB	Scheme will be implemented by DHS (Timeline: 12 months)	
3	Cost of Material under NMEP	30,00,00	Provide support for continuation of the scheme	10 lakh LLIN will be procured and distributed	Reduced malaria prevalence	Scheme will be implemented by DHS (Timeline: 12 months)	
4	State Family Welfare Bureau	1,36,92	Provide support for continuation of the scheme	State Family Welfare Bureau operational	Continued supervision of family welfare services	Scheme will be implemented by DFW (Timeline: 12 months)	Salary and office expenses
5	Continuance of dist. F.W. Bureau in non tribal	3,60,04	Provide support for continuation of the	District Family Welfare Bureau in non tribal areas operational	Continued supervision of family welfare	Scheme will be implemented by DFW	Salary and office expenses

Outcome Budget 2013-14

SI. No.	Name of the Schemes/Programme	Financial Outlay (in TRS)	Broad Objective of the Scheme	Quantifiable/ Deliverable Physical Outputs	Project Outcome	Processes/ Timelines	Remarks/ Risk Factors
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
(±)	areas	(5)	scheme in non tribal areas	(0)	services in non tribal areas	(Timeline: 12 months)	(6)
6	Continuance of dist. F.W. Bureau in Tribal area	2,00,43	Provide support for continuation of the scheme in tribal areas	District Family Welfare Bureau in tribal areas operational	Continued supervision of family welfare services in tribal areas	Scheme will be implemented by DFW (Timeline: 12 months)	Salary and office expenses
7	Regional H & F.W. Training Centers at Cuttack an Sambalpur	1,02,47	Provide support for continuation of the scheme	Two regional H&FW Training Centers operational	Availability of trained paramedical staff	Scheme will be implemented by DFW (Timeline: 12 months)	Salary and office expenses
8	Training of Nurses, Mid Wives & LHVs in non tribal areas	4,53,34	Provision for Salaries and other expenses for training centers	Salaries and other expenses paid	Availability of trained paramedical staff in non tribal areas	Scheme will be implemented by DFW (Timeline: 12 months)	Provision of salaries and other expenses
9	Continuance of training of Nurses, Mid Wives & LHVs in tribal area	1,86,63	Provision for Salaries and other expenses for training centers	Salaries and other expenses paid	Availability of trained paramedical staff in tribal areas	Scheme will be implemented by DFW (Timeline: 12 months)	to run the 17 training institutes
10	Continuance of Health Workers (M) training	75,29	Provision for Salaries and other expenses for 3 training centers	Salaries and other expenses paid	Availability of trained paramedical staff	Scheme will be implemented by DFW (Timeline: 12 months)	Provision of salaries and other expenses to run the 3 training institutes
11	Continuance of rural FW Sub-centers in non tribal areas	113,61,01	Support functioning of RFWs in non tribal areas	3805 RFWs in non tribal areas operational	Continued health and family welfare services in non tribal areas	Scheme will be implemented by DFW (Timeline: 12 months)	
12	Continuance of rural FW Sub-centers in tribal areas	74,51,00	Support functioning of RFWs in non tribal areas	2571 RFWs in tribal areas operational	Continued health and family welfare services in tribal areas	Scheme will be implemented by DFW (Timeline: 12 months)	
13	Continuance of 2Urban FW Centers at Rourkela (Non-Tribal)	84,02	Support functioning of UFWs in non tribal areas	2 UFWCs operational at Rourkela	Continued health and family welfare services	Scheme will be implemented by DFW (Timeline: 12 months)	

SI. No.	Name of the Schemes/Programme	Financial Outlay (in TRS)	Broad Objective of the Scheme	Quantifiable/ Deliverable Physical Outputs	Project Outcome	Processes/ Timelines	Remarks/ Risk Factors
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
14	Continuance of 3Urban FW Centers and 2 voluntary organisation (Non-Tribal)	8,91	Support functioning of UFWs in tribal areas	5 UFWCs operational at Cuttack, Bhubaneswar, Sambalpur and Berhampur	Continued health and family welfare services	Scheme will be implemented by DFW (Timeline: 12 months)	
15	Continuance of Urban Revamping scheme at Bhubaneswar and Cuttack	1,53,72	Provide health care, immunization and other FW services to the slum population	2 Urban Revamping Slum units operational	Improved heal status of urban slum population	Scheme will be implemented by DFW (Timeline: 12 months)	
16	Continuance of Urban Revamping scheme at Rourkela	1,17,95	Provide health care, immunization and other FW services to the slum population	1 Urban Revamping Slum units operational	Improved heal status of urban slum population	Scheme will be implemented by DFW (Timeline: 12 months)	
17	Purchase and distribution of contraceptives	15,00,00	Population stabilisation	Procurement and distribution of contraceptives	Stabilise Population growth	Scheme will be implemented by DFW 18(Timeline: 12 months)	
18	Continuance of FW cell in the Department	20,00	Provide support for continuation of the scheme	FW cell operational	Continued supervision of family welfare services	Scheme will be implemented by DFW (Timeline: 12 months)	
19	Directorate - Strengthening of enforcement mechanism of State drug controller (ISM), Odisha	7,34	Strengthen enforcement of drugs control mechanism	Drugs testing lab (ISM) operational	Improved quality assurance of medicine supply	Scheme will be implemented by DIM&H (Timeline: 12 months)	
20	Medical Education Homeo-Strengthening of Homeo pharmacy of Dr.ACHMC, Bhubaneswar	1,10,00	Strengthen Homeo pharmacy of Dr.ACHMC	Essential Equipment will be procured	Improved Homeopathy health care services	Scheme will be implemented by DIM&H (Timeline: 12 months)	
21	Medical education Ayurvedic -Introduction of PG Course at Govt. Ayurvedic College, Bolangir	62,99	Introduce PG course in Ayurvedic	4 teaching Depts. to be up-graded and PG Course will be launched	Increase availability of PG Ayurvedic doctors	Scheme will be implemented by DIM&H (Timeline: 12 months)	

SI.	Name of the	Financial	Broad Objective of	Quantifiable/ Deliverable Physical	Project Outcome	Processes/ Timelines	Remarks/ Risk
No.	Schemes/Programme	Outlay (in TRS)	the Scheme	Outputs			Factors
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
22	Hospital and Dispensaries -Medicines- Ayurvedic in non tribal areas	6,81	Supply of Ayurvedic drugs free of cost to patients in non tribal areas	Ayurvedic medicines will be procured and distributed	Improved Ayurvedic health care services in non tribal areas	Scheme will be implemented by DIM&H (Timeline: 12 months)	
23	Hospital and Dispensaries -Medicines- Ayurvedic in tribal areas	89	Supply of Ayurvedic drugs free of cost to patients in tribal areas	Ayurvedic medicines will be procured and distributed	Improved Ayurvedic health care services in tribal areas	Scheme will be implemented by DIM&H (Timeline: 12 months)	
24	Hospital and Dispensaries - Supply of essential drugs to Homoeopathic dispensaries in non tribal areas	3,26	Supply of homeopathic Drugs free of cost to patients in non tribal areas	Homeopathy medicines will be procured and distributed	Improved Homeopathy health care services in tribal areas	Scheme will be implemented by DIM&H (Timeline: 12 months)	
25	Continuance of post under SIHFW	47,47	Provide support for continuation of the scheme	SIHFW operational	Continued training of health personnel	Scheme will be implemented by SIHFW (Timeline: 12 months)	
26	Continuance of District FW bureau in NT districts under SIHFW	2,12,98	Provide support for continuation of the scheme	District FW bureau in NT districts operational	Continued supervision of family welfare services	Scheme will be implemented by SIHFW (Timeline: 12 months)	
27	Continuance of District FW bureau in Tribal districts under SIHFW	94,84	Provide support for continuation of the scheme	District FW bureau in Tribal districts operational	Continued supervision of family welfare services	Scheme will be implemented by SIHFW (Timeline: 12 months)	
28	Continuance of training Centre of SIHFW	2,61	Provide support for continuation of the scheme	Training Centre of SIHFW operational	Continued training of health personnel	Scheme will be implemented by SIHFW (Timeline: 12 months)	
29	Token provision	4					
	TOTAL CENTRAL PLAN	259,70,96					
	CENTRALLY SPONSORED PLAN						
1	FILARIA Control Programme (State: Central - 50:50)	1,24,00	Prevention and control of vector borne diseases	Supply of Filaria medicines to 5 lakh population	Reduced morbidity on account of Filaria	Scheme will be implemented by DHS (Timeline: 12 months)	Provision for salaries and other recurring

SI. No.	Name of the Schemes/Programme	Financial Outlay (in TRS)	Broad Objective of the Scheme	Quantifiable/ Deliverable Physical Outputs	Project Outcome	Processes/ Timelines	Remarks/ Risk Factors
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
(±)	(2)	(3)	(4)	(3)	(0)	(7)	expenses
2	National Malaria Eradication Programme (State: Central - 50:50)	58,00	Provide State share to avail of Gol funding	Supply of medicines and salary provision for the officials	Reduced morbidity on account of Malaria	Scheme will be implemented by DHS (Timeline: 12 months)	Provision for salaries and other recurring expenses
3	Training of Para Medical Staff (State: Central - 50:50)	20,12	Provide State share to avail of Gol funding	Training plans developed and implemented	Increased availability of trained paramedics	Scheme will be implemented by DHS (Timeline: 12 months)	Provision for salaries and other recurring expenses
TOTAL CENTRALLY SPONSORED PLAN (including Central and State Plan components)		2,02,12					

2.2: Outcome Budget, National Rural Health Mission, 2013-14

SI.	Name of the	Financial	Broad Objective of the Scheme	Quantifiable/ Deliverable	Project Outcome	Processes/	Remarks/Risk
No.	Schemes/ Programme	Outlay (in TRS)		Physical Outputs		Timelines	Factors
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
			Reproductiv	ve and Child Health (RCH)			
1	2 nd ANM	13,88,42	Efficient service delivery in populated areas	1411 nos of ANM to be posted	Improved institutional birth in difficult area thereby reducing MMR and IMR	2013-14	
2	Uniforms to ANMs	79,42	Build confidence of ANMs and enhance their sense of duty as part of the cadre.	Uniforms for all 6688 ANMs	Improved institutional birth in difficult area thereby reducing MMR and IMR	2013-14	
3	Monthly mobility support to ANMs	2,85,91	Financial support to ANM for moving from one place to other for better service delivery	5 visits per month by every ANM	Improved institutional birth in difficult area thereby reducing MMR and IMR	2013-14	
4	Untied fund	6,68,80	Funds provided to meet the low cost urgent requirement	6688 Sub centers, 1710 health institutions and 45660 GKS will be covered	Continue access to health care	2013-14	
5	JSSK	65,80,19	Envisaging cashless deliveries at 711 public health institutions	763395 referral cases served	Improved institutional birth in difficult area thereby reducing MMR and IMR	2013-14	

SI.	Name of the	Financial	Broad Objective of the Scheme	Quantifiable/ Deliverable	Project Outcome	Processes/	Remarks/Risk	
No.	Schemes/ Programme	Outlay (in TRS)		Physical Outputs		Timelines	Factors	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	
6	JSY	121,14,81	Incentivising women coming to health institutions for delivery	782174 nos of institutional deliveries	Improved institutional birth in difficult area thereby reducing MMR and IMR	2013-14		
7	Facility based New borne care	15,27,42	Ensuring proper new born care	31 24/12 beded child ICU, 50 4 beded child ICU, 856 NBCC	Improved care for new borns thereby reducing IMR	2013-14		
8	Nutritional Rehabilitation Centre	5,93,67	Establishment of Short stay home for SAM child for their proper treatment and care	44 nos of NRC to be established	Reducing death on account of malnutrition among children under 5	2013-14		
9	Support for Pustikar Divas	2,65,05	Effectively combating the problems of malnutrition through treatment and counseling	Malnourished children treated and counseled	Reducing death on account of malnutrition among children under 5	2013-14		
10	Village Health & Nutrition Day	51,15,43	Providing a platform to interface with the community for strengthening the entire gamut of RCH services	Detection of ailment and early treatment of patients at village level	Improving the RCH service deliveries at remote locations thereby reducing the IMR and MMR	2013-14		
11	Family Planning	30,88,30	Health camp for promoting sterilisation and spacing method	Compensation for sterilisation paid Training conducted	Stabilising population	2013-14		
12	PCNDT	91,91	Controlling female foeticide	PCNDT cell in 14 districts functional	Improved sex ratio of the state	2013-14		
13	Urban RCH	6,87,51	Improving RCH service in urban areas	120 cell across the state	Improved RCH services in urban areas	2013-14		
14	Rastriya Bal Swasthya Karyakram (RBSK)	67,85,61	Diagnosis of children from 0-18 years for any ailment for early treatment	Children screened for early treatment	Reducing child mortality and morbidity	2013-14		
15	HR and other expenses	1,28,55	Other expenses for continuance of programmes			2013-14		
То	Total Reproductive and Child Health 394,01,00							
				RHM Initiative				
1	ASHA	120,51,00	Bring improvement in MCH by intervention of ASHA	43530 ASHAs will be provided training, kit, uniform, diary, torch, umbrella, and water bottle.	Access to health care at remote locations improved	2013-14		

SI. No.	Name of the Schemes/ Programme	Financial Outlay (in TRS)	Broad Objective of the Scheme	Quantifiable/ Deliverable Physical Outputs	Project Outcome	Processes/ Timelines	Remarks/Risk Factors
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
2	Untied Fund	97,54,50	Funds provided to meet the low cost urgent requirement	6688 Sub centers, 1710 health institutions and 45380 GKS will be covered	Continue access to health care	2013-14	
3	IEC/BCC NRHM	22,58,29	Creating awareness of health and hygiene.	Operational expenses for IEC/BCC activities	Improved awareness amongst the people	2013-14	
4	Mobile Health Unit (including recurring expenditure)	37,35,47	Provide support to run mobile health unit	240 nos MHU operational	Continued access to health care at remote locations	2013-14	
5	Referral Transport	95,75,60	Operationalising Odisha Emergency Medical Ambulance Services-	420 Nos and 466 Janani Express procured	Improved access to health care	2013-14	
6	Free Drugs	131,93,55	Making drugs available free of cost to reduce out of pocket expenses	Drugs to be procured and distributed	Reducing out of pocket cost on medicine by people availing services from public health facilities	2013-14	
7	Diagnostic services	11,55,98	Ensure availability of diagnostics up to Sub centre level	Diagnostic centers operational	Improved health service delivery	2013-14	
8	Non clinical service provision at hospitals	19,03,82	Strengthening non-clinical service provision in the facilities in five core areas housekeeping and cleanliness, linen and laundry, security, help desk and biomedical waste management.	145 major health institutions to be covered	Improving non-clinical service in health institution	2013-14	
9	Swasthya Sevika Nijukti Yojana	1,53,75	Providing incentive to GNM students	67 INC accredited institutions covered	Financial support to meritorious students	2013-14	
10	Strengthening State Drug Management Unit and State Equipment Maintenance Cell	4,73,24	Operationalising SDMU	Provision for HR cost	Improved health service delivery	2013-14	
11	Strengthening Vital statistics	2,18,65	Recording vital statistics relating to death, birth and ailment	Provision for recurring expenses	Improved health service delivery	2013-14	
12	Sickle cell project	1,71,72	Treatment of sickle cell	Operating expenses of sickle cell unit	Improved health service delivery	2013-14	

SI.	Name of the	Financial	Broad Objective of the Scheme	Quantifiable/ Deliverable	Project Outcome	Processes/	Remarks/Risk
No.	Schemes/ Programme	Outlay (in TRS)		Physical Outputs		Timelines	Factors
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
13	Telemedicine	3,99,24	Providing medical services to people at far flung areas using technology	1 lakh clients will be benefited	Improved health service delivery	2013-14	
14	Strengthening Training Institutes	29,11,61	Additional HR and equipment for training institutes for delivering efficient training to medical and Para medical staffs	Construction, HR and Equipment for training institutes	Capacity building of medical and para medical staffs	2013-14	
15	District Untied fund	40,00,00	Financial support to district facilities for meeting key expenses	District specific expenses to be incurred	Improved health service delivery	2013-14	
16	Ayush	30,02,65	Promoting Ayush in the treatment of disease	Medicines, alternative health services provided	Improved health service delivery	2013-14	
17	Other expenditure	2,90,52	Operational expenses	Existing schemes continued	Access to health care	2013-14	
18	Sub-center Strengthening	33,66,00	Construction of sub center building across the state for better service delivery	204 sub centers to be constructed	Improved institutional birth in difficult area thereby reducing MMR and IMR	2013-14	Sub-center Strengtheni ng
19	Other construction activities	246,39,41	Development of health infrastructure.	22 drug ware house, 41 staff quarters,77 containment area, 8 DHH, MCH wings at 37 DHH/SDH/CHC, 14 vaccine store and repair works	Improved health service delivery	2013-14	
T	otal NRHM Initiative	932,55,00					
				Immunisation			
1	Immunisation	28,90,00	Provide immunisation to all children	90% children will be fully	Improved immunity of children	2013-14	
2	IPPI	6,08,00	on different counts	immunised			
	Total Immunisation	34,98,00					
	Disease Control Programme						
1	National TB Control Programme (RNTCP)	31,63,00	Maintain the detection rate at 70 % and cure rate at 85 %	Continued support to 35 TB cells	Prevalence of TB reduced	2013-14	
2	National Leprosy Eradication Programme (NLEP)	4,93,00	Reduce the chain of transmission of leprosy and disability due to leprosy	Continued support to 31 Leprosy cells	Prevalence of Leprosy reduced	2013-14	

SI. No.	Name of the Schemes/ Programme	Financial Outlay (in TRS)	Broad Objective of the Scheme	Quantifiable/ Deliverable Physical Outputs	Project Outcome	Processes/ Timelines	Remarks/Risk Factors
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
3	National Disease Surveillance Programme (IDSP)	4,82,00	Meet the urgent requirement to fight against any outbreak of disease	Continued support to 35 IDSP cells	Prevalence of death on account of epidemics reduced	2013-14	
4	National Programme for Control of Blindness (NPCB)	11,16,00	Reduce blindness through early detection and treatment	Continued support to 31 NPCB cells	Prevalence of blindness reduced	2013-14	
5	National Vector Borne Disease Control Programme (NVBDCP)	55,00,00	Control the diseases caused by mosquitoes	Continued support to the 35 NVBDCP cells	Prevalence of malaria reduced	2013-14	
6	National Iodine Deficiency Disorder Control Programme (IDD)	38,00	Control the diseases caused by iodine deficiency	Continued support to one IDD cell	Prevalence of iodine deficiency reduced	2013-14	
Т	Total Disease Control 107,92,00 Programme						
G	RAND TOTAL (State: Central –25:75)	1469,46,00					

Table 2.3: Outcome Budget, Department of Health and Family Welfare, 2012-13 – Non Plan

SI. No.	Name of the Schemes/ Programme	Proposed financial Outlay (in TRS)	Broad Objective of the Scheme	Quantifiable/Deliverable Physical Outputs	Project Outcome	Processes/ Timelines	Remarks/ Risk Factors
		Non-salary (Deliverable Output)					
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1	Medicines	202,55,50	Provide medicines free of cost to patients	Medicines will be procured and distributed	Improved health care services	Scheme will be implemented by DHS (Timeline: 12 months)	
2	Diet	18,95,91	Provide diets to indoor patients	Diets will be provided at enhanced rates ₹ 50 per general in-patient and ₹60/- per TB/Cancer in-	Improved health care services	Scheme will be implemented by DHS/DMET (Timeline: 12 months)	

SI. No.	Name of the Schemes/ Programme	Proposed financial Outlay (in TRS) Non-salary	Broad Objective of the Scheme	Quantifiable/Deliverable Physical Outputs	Project Outcome	Processes/ Timelines	Remarks/ Risk Factors
		(Deliverable Output)					
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
				patient.			
3	Bedding, clothing and	1,56,08	Provide bed/clothing/linen for	Beds/cloths/linen will be	Improved In-	Scheme will be implemented	
	Linen		indoor patients	procured and supplied	patient services	by DHS (Timeline: 12 months)	
4	Grants to spinal cord	80,30	Support to spinal cord injury for	Grants will be provided	Improved health	Scheme will be implemented	
	injury centre		ongoing activities		care services	by DHS (Timeline: 12 months)	
5	Biomedical Waste	2,56,34	Effective management of	Biomedical Waste	Improved	Scheme will be implemented	
	Management	2,30,34	biomedical waste of health	Management Unit will be	sanitation in	by DHS (Timeline: 12 months)	
	Wanagement		institutions	operational	health institutions	by Bris (Timeline: 12 months)	
6	Grants to blood	5,50	Financial Support to blood	Grants will be paid	Improved health	Scheme will be implemented	Grants
	transfusion council	3,30	transfusion council.	Grants will be paid	care services	by DHS (Timeline: 12 months)	Granes
	transrasion council		transrasion coariem		care services		
7	Grants to AHRCC,	9,37,00	Contribute to support activities	Grants will be paid	Improved health	Scheme will be implemented	Grants
	Cuttack		AHRCC, Cuttack		care services	by DHS (Timeline: 12 months)	
8	Grants to AHRCC,	67,00	Contribute to infrastructure	Grants will be paid	Improved health	Scheme will be implemented	Grants
	Cuttack for equipment		development of AHRCC, Cuttack		care services	by DHS (Timeline: 12 months)	
9	Equipment for hospitals	35,75	Purchase of medical Equipment	Equipment will be	Improved health	Scheme will be implemented	Planning will
				procured and used.	care Service	by DHS (Timeline: 12 months)	be done by
							individual
							directorate
10	Grants to State Branch	87,10	Financial Support to IRCS for its	Grants will be paid	Improved health	Scheme will be implemented	Grants
	of IRCS		ongoing activities.		care services	by DHS (Timeline: 12 months)	
11	Grants to mental health	11,00	Financial Support to mental health	Grants will be paid	Improved health	Scheme will be implemented	Grants
	authority		authority for its ongoing activities.		care services	by DHS (Timeline: 12 months)	
12	Odisha State Treatment	10,00,00	Improving the system of	Establishment of Drug	Reducing out of	Scheme will be implemented	
	Fund Society		procurement and distribution of	corporation	pocket expenses	by DHS (Timeline: 12 months)	
			drugs in the state		of patients		
13	Other Salary and office	1128,58,33					
	expenses schemes						
	TOTAL Non Plan	1376,45,81					

Table 2.4: Outcome Budget, DoH&FW, 2013-14 – Abstract

Plan:

Name of the Schemes/ Programme	Financial Outlay (in TRS)	Quantifiable/ Deliverable Physical Outputs
1	2	3
STATE PLAN		
Odisha Health Sector Development		 i) 6 sickle cell unit at districts will be established ii) 4 critical care unit will be established iii) Raking of Central Drug warehouse will be
Plan Under DFID Assistance.	40,00,00	constructed iv) 40 sub centres will be constructed v) High definition unit under O&G department of SCB MCH vi) 4 lakh LLIN to be procured and distributed
NRHM State Share	200,00,00	Given separately in Table 2.2
MO Masari	10,00,00	Procurement and distribution of 4,00,000 LLIN for pregnant women
Directorate	2,25,41	Equipment to be purchased under Ayush and operating cost of the directorate
Renal transplant unit	1,50,00	Renal transplant unit in Cuttack SCB MCH will be operational
Upgrading of Medical College Cuttack, for starting new PG course	17,91,50	Equipment and instruments will be procured and provision for operating expenses
National Programme for prevention of control of Cancer Diabetes Cardiovascular Diseases and Strokes (NPCDCS)	11,27,66	Special health care facility provided for controlling Cancer and Diabetes in 10 districts-Bolangir, Koraput, Malkangiri, Nabrangpur, Nuapada and 5 more districts, which will be decided later.
National Programme for health care of Elderly (NPHCE)	3,00,00	Special health care provided to senior citizens in 10 districts- Bolangir, Koraput, Malkangiri, Nabrangpur, Nuapada and 5 more districts which will be decided later.
Education –PG course in MCH under Ayush directorate	41,80	Infrastructure development
Orientation training of medical and Para medical staffs	10,06	Training of new medical and Para medical staffs- 450 nos
ANM and GNM School	5,00,00	Establishment of Two ANM and one GNM school
Upgrading of Medical College, Burla, for starting new PG course	1,00,00	Operational expenses for new PG seats
Multipurpose Training of Doctors and Para medics	50,00	90 Doctors and 330 paramedics will be trained
Up gradation of Medical College Berhampur, for starting new PG course	1,00,00	Operational expenses for new PG seats
Drug control Administration – Up gradation of State Drug testing and research Laboratory (Equipment)	5,46,00	Purchase of Equipment and infrastructure development
Gandhi Ashram (Leprosy Home)	1,00,00	Grants to be provided
Swasthya Sanjog	13,38,10	302 Mobile Health Units to be operational
Biju Gramina Swasthya Sibir	2,94,00	Organisation of Health camps in every assembly constituency₹
Tertiary Cancer Centre	1,00,00	1 TCC to be established at MKCG, Berhampur

Name of the Schemes/ Programme	Financial Outlay (in TRS)	Quantifiable/ Deliverable Physical Outputs
1	2	3
Establishment of Regional Institute of Paramedical Science (RIPS)	4,00,00	Establishment of RIPS
Mainstreaming of AYUSH under NRHM-Ayurvedic	8,52	Operational expenses for separate Ayurvedic wing
Mainstreaming of AYUSH under NRHM-Homeopathy	3,77	Operational expenses for separate Homeopathy wing
Mainstreaming of AYUSH under NRHM-Unani	18	Operational expenses for separate Unani wing
Odisha State Medical Corporation	5,00,00	Establishment of Drug corporation and operationalisation
Payment of state decreatal dues and legal dues	7,00	Not quantifiable
HMIS	10,00,00	All the health facilities of 30 districts will be covered
Renovation work	9,50,03	Major and minor repairs of buildings under the department
Bone marrow transplant unit	2,50,00	One unit will be established in MCH, Cuttack
13 th Finance Award for up gradation of health infrastructure	87,50,00	Construction of new building for 1207 sub center, CHC, PHC and MCHs
Construction of building of H&FW department	117,44,78	Construction of new building for sub center, CHC, PHC and MCHs, staff quarters
Emergency Medical Ambulance Service	1	420 Ambulance service (ALS and BLS) operational in 30 districts
HQ , token provisions and State share of CSP	1,11,18	
TOTAL STATE PLAN	555,00,00	
CENTRAL PLAN		
National Goiter control programme	10,00	Awareness campaign continued
National TB control programme	2,00,00	50,000 no's of positive case detection
Cost of Material under NMEP	30,00,00	10 lakh LLIN will be procured and distributed
State Family Welfare Bureau		
•	1,36,92	State Family Welfare Bureau operational
Continuance of dist. F.W. Bureau in non tribal areas	1,36,92 3,60,04	State Family Welfare Bureau operational District Family Welfare Bureau in non tribal areas operational
non tribal areas Continuance of dist. F.W. Bureau in		District Family Welfare Bureau in non tribal areas operational District Family Welfare Bureau in tribal areas
non tribal areas	3,60,04	District Family Welfare Bureau in non tribal areas operational District Family Welfare Bureau in tribal areas operational Two regional H&FW Training Centers
non tribal areas Continuance of dist. F.W. Bureau in Tribal area Regional H & F.W. Training Centers at	3,60,04 2,00,43	District Family Welfare Bureau in non tribal areas operational District Family Welfare Bureau in tribal areas operational
non tribal areas Continuance of dist. F.W. Bureau in Tribal area Regional H & F.W. Training Centers at Cuttack an Sambalpur Training of Nurses, Mid Wives & LHVs	3,60,04 2,00,43 1,02,47	District Family Welfare Bureau in non tribal areas operational District Family Welfare Bureau in tribal areas operational Two regional H&FW Training Centers operational
non tribal areas Continuance of dist. F.W. Bureau in Tribal area Regional H & F.W. Training Centers at Cuttack an Sambalpur Training of Nurses, Mid Wives & LHVs in non tribal areas Continuance of training of Nurses, Mid	3,60,04 2,00,43 1,02,47 4,53,34	District Family Welfare Bureau in non tribal areas operational District Family Welfare Bureau in tribal areas operational Two regional H&FW Training Centers operational Salaries and other expenses paid
non tribal areas Continuance of dist. F.W. Bureau in Tribal area Regional H & F.W. Training Centers at Cuttack an Sambalpur Training of Nurses, Mid Wives & LHVs in non tribal areas Continuance of training of Nurses, Mid Wives & LHVs in tribal area Continuance of Health Workers (M)	3,60,04 2,00,43 1,02,47 4,53,34 1,86,63	District Family Welfare Bureau in non tribal areas operational District Family Welfare Bureau in tribal areas operational Two regional H&FW Training Centers operational Salaries and other expenses paid Salaries and other expenses paid
non tribal areas Continuance of dist. F.W. Bureau in Tribal area Regional H & F.W. Training Centers at Cuttack an Sambalpur Training of Nurses, Mid Wives & LHVs in non tribal areas Continuance of training of Nurses, Mid Wives & LHVs in tribal area Continuance of Health Workers (M) training Continuance of rural FW Sub-centers	3,60,04 2,00,43 1,02,47 4,53,34 1,86,63 75,29	District Family Welfare Bureau in non tribal areas operational District Family Welfare Bureau in tribal areas operational Two regional H&FW Training Centers operational Salaries and other expenses paid Salaries and other expenses paid Salaries and other expenses paid
non tribal areas Continuance of dist. F.W. Bureau in Tribal area Regional H & F.W. Training Centers at Cuttack an Sambalpur Training of Nurses, Mid Wives & LHVs in non tribal areas Continuance of training of Nurses, Mid Wives & LHVs in tribal area Continuance of Health Workers (M) training Continuance of rural FW Sub-centers in non tribal areas Continuance of rural FW Sub-centers	3,60,04 2,00,43 1,02,47 4,53,34 1,86,63 75,29 113,61,01	District Family Welfare Bureau in non tribal areas operational District Family Welfare Bureau in tribal areas operational Two regional H&FW Training Centers operational Salaries and other expenses paid Salaries and other expenses paid Salaries and other expenses paid 3805 RFWs in non tribal areas operational

Name of the Schemes/ Programme	Financial Outlay (in TRS)	Quantifiable/ Deliverable Physical Outputs		
1	2	3		
Tribal)				
Continuance of Urban Revamping	4.52.72	2 Hele on Bourney in a Characteristic or a section of		
scheme at Bhubaneswar and Cuttack	1,53,72	2 Urban Revamping Slum units operational		
Continuance of Urban Revamping	1,17,95	1 Urban Revamping Slum units operational		
scheme at Rourkela	1,17,93	1 Orban Revamping Signi units operational		
Purchase and distribution of	15,00,00	Procurement and distribution of contraceptives		
contraceptives	13,00,00	Trocurement and distribution of contraceptives		
Continuance of FW cell in the	20,00	FW cell operational		
Department		The contest of the co		
Directorate - Strengthening of				
enforcement mechanism of State drug	7,34	Drugs testing lab (ISM) operational		
controller (ISM), Odisha				
Medical Education Homeo- Strengthening of Homeo pharmacy of	1,10,00	Essential Equipment will be procured		
Dr.ACHMC, Bhubaneswar	1,10,00	Essential Equipment will be procured		
Medical education Ayurvedic -				
Introduction of PG Course at Govt.	62,99	4 teaching Depts. to be up-graded and PG		
Ayurvedic College, Bolangir	02,33	Course will be launched		
Hospital and Dispensaries-Medicines -		Ayurvedic medicines will be procured and		
Ayurvedic in non tribal areas	6,81	distributed		
Hospital and Dispensaries -Medicines-	00	Ayurvedic medicines will be procured and		
Ayurvedic in tribal areas	89	distributed		
Hospital and Dispensaries - Supply of		Homeopathy medicines will be procured and		
essential drugs to Homoeopathic	3,26	distributed		
dispensaries in non tribal areas		distributed		
Continuance of post under SIHFW	47,47	SIHFW operational		
Continuance of District FW bureau in	2,12,98	District FW bureau in NT districts operational		
NT districts under SIHFW	2,12,30			
Continuance of District FW bureau in	94,84	District FW bureau in Tribal districts		
Tribal districts under SIHFW	3 1,0 1	operational		
Continuance of training Centre of	2,61	Training Centre of SIHFW operational		
SIHFW		'		
Token provision	4			
TOTAL CENTRAL PLAN	259,70,96			
CENTRALLY SPONSORED PLAN				
FILARIA Control Programme (State:	1,24,00	Supply of Filaria medicines to 5 lakh population		
Central - 50:50)	-,- 1,00			
National Malaria Eradication	58,00	Supply of medicines and salary provision for		
Programme (State: Central - 50:50)	,	the officials		
Training of Para Medical Staff (State:	20,12	Training plans developed and implemented		
Central - 50:50) TOTAL CENTRALLY SPONSORED PLAN		·		
(including Central and State Plan	2,02,12			
components)	2,02,12			
components)				

NRHM:

Name of the Schemes/ Programme	Financial Outlay (in TRS)	Quantifiable/ Deliverable Physical Outputs
Reproductive and Child Health (RCH)		
2 nd ANM	13,88,42	1411 nos of ANM to be posted
Uniforms to ANMs	79,42	Uniforms for all 6688 ANMs
Monthly mobility support to ANMs	2,85,91	5 visits per month by every ANM

Name of the Schemes/ Programme	Financial Outlay (in TRS)	Quantifiable/ Deliverable Physical Outputs
Untied fund	6,68,80	6688 Sub centers, 1710 health institutions and 45660 GKS will be covered
JSSK	65,80,19	763395 referral cases served
JSY	121,14,81	782174 nos of institutional deliveries
Facility based New borne care	15,27,42	31 24/12 beded child ICU, 50 4 beded child ICU, 856 NBCC
Nutritional Rehabilitation Centre	5,93,67	44 nos of NRC to be established
Support for Pustikar Divas	2,65,05	Malnourished children treated and counseled
Village Health & Nutrition Day	51,15,43	Detection of ailment and early treatment of patients at village level
Family Planning	30,88,30	Compensation for sterilisation paid Training conducted
PCNDT	91,91	PCNDT cell in 14 districts functional
Urban RCH	6,87,51	120 cell across the state
Rastriya Bal Swasthya Karyakram (RBSK)	67,85,61	Children screened for early treatment
HR and other expenses	1,28,55	
Total Reproductive and Child Health	394,01,00	
NRHM Initiative		
ASHA	120,51,00	43530 ASHAs will be provided training, kit, uniform, diary, torch, umbrella, and water bottle.
Untied Fund	97,54,50	6688 Sub centers, 1710 health institutions and 45380 GKS will be covered
IEC/BCC NRHM	22,58,29	Operational expenses for IEC/BCC activities
Mobile Health Unit (including recurring expenditure)	37,35,47	240 nos MHU operational
Referral Transport	95,75,60	420 Nos and 466 Janani Express procured
Free Drugs	131,93,55	Drugs to be procured and distributed
Diagnostic services	11,55,98	Diagnostic centers operational
Non clinical service provision at hospitals	19,03,82	145 major health institutions to be covered
Swasthya Sevika Nijukti Yojana	1,53,75	67 INC accredited institutions covered
Strengthening State Drug Management Unit and State Equipment Maintenance Cell	4,73,24	Provision for HR cost
Strengthening Vital statistics	2,18,65	Provision for recurring expenses
Sickle cell project	1,71,72	Operating expenses of sickle cell unit
Telemedicine	3,99,24	1 lakh clients will be benefited
Strengthening Training Institutes	29,11,61	Construction, HR and Equipment for training institutes
District Untied fund	40,00,00	District specific expenses to be incurred
Ayush	30,02,65	Medicines, alternative health services provided
Other expenditure	2,90,52	Existing schemes continued
Sub-center Strengthening	33,66,00	204 sub centers to be constructed
Other construction activities	246,39,41	22 drug ware house, 41 staff quarters,77 containment area, 8 DHH, MCH wings at 37 DHH/SDH/CHC, 14 vaccine store and repair works
Total NRHM Initiative	932,55,00	

Name of the Schemes/ Programme	Financial Outlay (in TRS)	Quantifiable/ Deliverable Physical Outputs
Immunisation		
Immunisation	28,90,00	OOO/ shildren will be fully increased
IPPI	6,08,00	90% children will be fully immunised
Total Immunisation	34,98,00	
Disease Control Programme		
National TB Control Programme (RNTCP)	31,63,00	Continued support to 35 TB cells
National Leprosy Eradication Programme (NLEP)	4,93,00	Continued support to 31 Leprosy cells
National Disease Surveillance Programme (IDSP)	4,82,00	Continued support to 35 IDSP cells
National Programme for Control of Blindness (NPCB)	11,16,00	Continued support to 31 NPCB cells
National Vector Borne Disease Control Programme (NVBDCP)	55,00,00	Continued support to the 35 NVBDCP cells
National Iodine Deficiency Disorder Control Programme (IDD)	38,00	Continued support to one IDD cell
Total Disease Control Programme	107,92,00	
GRAND TOTAL (State: Central – 25:75)	1469,46,00	

Non-Plan:

Name of the	Proposed financial Outlay (in TRS)	Output Sights / Deliverable Dhysical Outputs
Schemes/Programme	Non-salary (Deliverable Output)	Quantifiable/Deliverable Physical Outputs
Medicines	202,55,50	Medicines will be procured and distributed
		Diets will be provided at enhanced rates Rs
Diet	18,95,91	50 per general in-patient and ₹ 60/- per
		TB/Cancer in-patient.
Bedding, clothing and Linen	1,56,08	Beds/cloths/linen will be procured and supplied
Grants to spinal cord injury centre	80,30	Grants will be provided
Biomedical Waste Management	2,56,34	Biomedical Waste Management Unit will be operational
Grants to blood transfusion council	5,50	Grants will be paid
Grants to AHRCC, Cuttack	9,37,00	Grants will be paid
Grants to AHRCC, Cuttack for equipment	67,00	Grants will be paid
Equipment for hospitals	35,75	Equipment will be procured and used.
Grants to State Branch of IRCS	87,10	Grants will be paid
Grants to mental health authority	11,00	Grants will be paid
Odisha State Treatment Fund Society	10,00,00	Establishment of Drug corporation
Other Salary and office expenses schemes	1128,58,33	
Total of Non-Plan excluding Salary and other expenses	1376,45,81	

CHAPTER-III: REFORM MEASURES AND POLICY INITIATIVES

This section provides short narratives of various policy measures and initiatives taken by the DoH&FW in recent times.

3.1 Medicines

State Government has decided to make medicines available to the patients free of cost at public health institutions. As a steps towards achieving the goal, budget provision of over ₹202 crore has been made on medicines under Non-plan during 2013-14 as against that of ₹104 crore and ₹50 crore in 2012-13BE and 2011-12BE respectively.

3.2 Mo Mashari

As a measure of prevention & control of malaria in the high burden districts of the state Govt. has launched a new scheme under the name "Mo Mashari" under state plan. Under the Scheme Long Lasting Insecticide Nets (LLIN) are being provided to pregnant women and boarders of Tribal hostels. An amount of ₹1000.00 lakh has been proposed in the BE for 2013-14.

3.3 Odisha State Medical Services Corporation

The Department is in the process of establishing a corporation for smooth and economical procurement and rational distribution of drugs and supplies, maintenance of medical Equipment across the state. A budget provision of ₹500 lakh has been made in 2013-14 BE.

3.4 Health Management Information System

Development of a software for capturing key data of the department on a real time basis with relation to HR, patients and disease burden per health facility, availability and use of medicines and other resources. ₹1000 lakh has been provided in 2013-14 BE.

3.5 Bone Marrow Transplant Unit

A bone marrow transplant unit will be established in SCB medical College hospital. This unit will provide super-specialty services of bone marrow transplantation for the successful treatment of blood disorder diseases. Provision of ₹250 lakh has been made in the ensuing budget for the year 2013-14.

3.6 Orissa Emergency Medical Ambulance Service (OEMAS)

OEMAS shall provide pre-hospital care and transportation service across the State for all kind of medical emergency arising due to accident, fire, natural calamity, pregnancy, or otherwise where

immediate medical attention is required. In the first phase, fifteen districts along the trauma corridor where incidence of medical emergency is high shall be covered. In case of medical emergency this service can be availed by anyone using a toll free unique number "108". The ambulances shall reach the site within 20 minutes in case of urban, 25 minutes in case of semi-urban and 35 minutes in case of rural area. To ensure quick and efficient service minimum one ambulances shall be provided per one lakh population and these ambulances shall be equipped with life support equipment, medicines and trained medical technicians for inside ambulance care and treatment.

3.7 Addressing Severe Acute Malnutrition among children through Facility Based Approach

For the management of Severe Acute Malnutrition, facility based care will be provided by establishing a network of Nutrition Rehabilitation Centers, across all districts. NRCs will cater to the load of SAM children with complications and provide medical treatment and feeding care to the children. At present 17 NRCs are functional; to take care of the burden of severe and acute malnutrition in various blocks of the state; altogether 66 NRCs will be established across the state.

3.8 Odisha State Treatment Fund (OSTF)

The fund has been created for supporting BPL patient up to a maximum of ₹3 lakh each. Provision of ₹10 crore has been made in 2013-14 BE which is expected to be benefited by more than 500 patients.

3.9 Strengthening Vital Statistics

Vital statistics cells in all the districts are proposed to be strengthened by installing computer systems and incentiving ASHA in capturing data relating to birth and death and issuing digital certificates.

3.10 Establishment of 261 Sector Microscopy Centre

It is proposed to establish 261 sector Microscopy Centre in the hard to reach Malaria endemic sector headquarters with API> 10 for reducing the time lag in diagnostic and ensuring prompt treatment.

3.11 Full and partial scholarship under Swastya Sevika Yojana

Full scholarship in KBK+ region and partial scholarship in non-KBK districts is proposed for GNM students in INC accredited private institutions to address shortfall in staff nurses in the state.

3.12 NRHM Incentive Schemes for Paramedics

As a stretagy to incentivise performing paramedics for retention by provision of ₹1000/- - in V3 and ₹2000/- for V-4 areas PIP has been made in 2013-14(draft).

CHAPTER-IV: REVIEW OF PAST PERFORMNACES

Table 4.1: Physical and Financial Review 2012-13

Name of the Schemes/Programs	Physical Target for 2012-13	Physical Achievement in 2012- 13(up to Dec 2012)	Financial Target for 2012-13 (in TRS)	Financial Achievement in 2012-13 (up to Dec 2012) (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
1. State Plan					
DFID Assistance Orissa Health Sector Plan	 i) 6 sickle cell unit will be established ii) 4 Critical care unit will be established iii) Central Drug ware house will be constructed iv) 48 sub centre will be constructed v) 1 lakh LLINwill be procured and distributed 	 i) 6 sickle cell unit operational ii) Establishment of 2 Critical care unit initiated iii) Construction of Central Drug ware house is in progress iv) Construction of 48 sub centre is in progress v) 1 lakh LLIN procured and distributed 	62,59,00	45,00,00	
NRHM State Share	Given separately in Table 2.2	Given separately in Table 2.2	120,00,00	90,00,00	
Multipurpose training of Doctors and paramedics	60 doctors and 400 Para medics will be trained and other training will be conducted	90 doctors and 330 Para medics trained	1,00,00	50,00	
Gandhi Ashram (Leprosy home)	Grants to be provided	Grants not released	1,00,00	0	
Swasthya Sanjog	302 Mobile health units to be operational	302 Mobile health units are operational	3,53,00	3,53,00	
Biju Gramina Swasthya Sibir	Organisation of 147 health camps – one in each constituencies	Not initiated	3,00,00	0	
Tertiary Cancer Centre	One TCC to be established at MKCG Berhampur	Not initiated	2,00,00	0	Administrative approval yet to be obtained
Establishment of RIPS	RIPS established	Not initiated	5,00,00	0	Administrative approval yet to be obtained
Mainstreaming Ayush - Ayurvedic	Operational expenses for separate wing	Not initiated	2,63,74	0	Yet to be initiated

Name of the Schemes/Programs	Physical Target for 2012-13	Physical Achievement in 2012- 13(up to Dec 2012)	Financial Target for 2012-13 (in TRS)	Financial Achievement in 2012-13 (up to Dec 2012) (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
Mainstreaming Ayush - Homeopathy	Operational expenses for separate wing	Not initiated	2,08,52	0	Yet to be initiated
Mainstreaming Ayush -Unani	Operational expenses for separate wing	Not initiated	5,02	0	Yet to be initiated
MO Mashari	Distribution of 1.6 lakh mosquito nets in KBK districts	1.6 lakh mosquito nets procured and distributed.	4,00,00	4,00,00	
Emergency Medical Ambulance services	280 Ambulance procured and operationalised	Not initiated	6,22,50	0	Administrative approval is in process
Renal transplant unit	Renal transplant unit established	Initiated	1,00,00	8,52	Proposal yet to be finalized
Strengthening and up gradation of govt. MCH	Equipment and instruments will be procured	Not initiated	4,06,00	0	Proposal yet to be finalized
National Programme for prevention of control of Cancer Diabetes Cardiovascular Diseases and Strokes (NPCDCS)	Special health care facility to be provided for controlling Cancer and Diabetes in 5 districts	Special health care facility provided for controlling Cancer and Diabetes in 5 districts i.e. Nuapada, Nabarangpur, Koraput, Malkangiri and Balangir	2,91,00	1,16,40	
National Programme for health care of Elderly (NPHCE)	Special health care to be provided to senior citizens in selected health institutions of five district	Special health care provided to senior citizens in selected health institutions of five districts i.e. Nuapada, Nabarangpur, Koraput, Malkangiri and Balangir	2,60,00	1,04,00	
Establishment of AIIMS at Sijua	AIIMS will be established	In the process	25,00	0	Work is in progress
Strengthening of Homoeopathy hospitals attached to 2 Homoeopathy College at Berhampur & Rourkela	2 homeopathy hospitals up-graded	Not initiated	20,00	0	Posts are yet to be created
Construction of building of H&FW department	Construction of buildings	Construction work is in progress	67,18,03	12,54,68	Work is in progress

Name of the Schemes/Programs	Physical Target for 2012-13	Physical Achievement in 2012- 13(up to Dec 2012)	Financial Target for 2012-13 (in TRS)	Financial Achievement in 2012-13 (up to Dec 2012) (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
Construction of building -TFC	Construction of building of MCHs, staff quarters, sub centers and PHC(N)	Construction work in progress	87,50,00	45,24,19	Work is in progress
Continuance of post of Deputy Secretary for Health and FW department	Post of Dy. Secretary for DH&FW continued	Recurring expenses incurred	21,00	10,69	Actual expenditure
Effluent Treatment Plant at SCB Cuttack	Effluent treatment plant operational	Not initiated	50,00	0	Proposal is yet to be finalized
ANM and GNM School	Two ANM and one GNM schools established and functional	Initiated	6,22,72	16,82	Tender process is underway
Public health laboratory- purchase of Equipment and instruments	Equipment and instrument to be procured	Not initiated	1,80,40	0	Funds not received
Purchase of Equipment for Drugs testing and research laboratories	Equipment procured and installed	Not initiated	50,00	0	Funds not received
Payment of state decretal dues	Meeting statutory obligation		7,00		No claim received
Token provision and headquarter expenses			1,53,07		
TOTAL State Plan			389,66,00	203,38,30	
II. Central Plan					
National Goiter control programme	Awareness campaign continued		10,00		Funds not received
National TB control programme	Anti TB drugs provided		2,00,00		Proposal not finalized
Cost of Material under NMEP	10 lakh LLIN procured and distributed		30,00,00		Yet to be Supplied by Gol
State Family Welfare Bureau	State Family Welfare Bureau operational	State Family Welfare Bureau operational	1,31,77	72,83	

Name of the Schemes/Programs	Physical Target for 2012-13	Physical Achievement in 2012- 13(up to Dec 2012)	Financial Target for 2012-13 (in TRS)	Financial Achievement in 2012-13 (up to Dec 2012) (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
Continuance of dist. F.W. Bureau in non tribal areas	District Family Welfare Bureau in non tribal areas operational	District Family Welfare Bureau in non tribal areas operational	3,63,09	3,28,80	
Continuance of dist. F.W. Bureau	District Family Welfare Bureau in tribal areas operational	District Family Welfare Bureau in tribal areas operational	1,97,26		
Regional H & F.W. Training Centers	Two regional H&FW Training Centers operational	Two regional H&FW Training Centers operational	86,91	57,41	
Training of Nurses, Mid Wives & LHVs in non tribal areas	Provision of salary and other expenses for 12 training centers in non tribal areas	Salary and other expenses for 11 Nursing training center and 1 LHV training centers in non tribal areas paid	3,98,34	3,19,00	
Continuance of training of Nurses, Mid Wives & LHVs in tribal areas	Provision of salary and other expenses for training centers in tribal areas	Salary and other expenses for 5 Nursing training center in non tribal areas paid	1,96,56		
Continuance of Health Workers (M) training	Provision of salary and other expenses for 3 training centers	Salary and other expenses for 3 HW (M) training centers paid	64,47	46,49	
Continuance of rural FW Sub- centers in non tribal areas	3805 RFWs in non tribal areas operational	3805 RFWs in non tribal areas operational	112,35,55	66,26,54	
Continuance of rural FW Sub- centers in non tribal areas	2571 RFWs in tribal areas operational	2571 RFWs in tribal areas operational	78,65,55	41,36,07	
Continuance of 1Urban FW Centers at Rourkela (Tribal)	1 UFWCs operational	1 UFWCs operational	7,94	1,65	
Continuance of 3Urban FW Centers and 3 voluntary organizations (Non Tribal)	5 UFWCs operational	5 UFWCs operational at Cuttack, Bhubaneswar, Sambalpur and Berhampur	87,44	41,55	
Continuance of Urban Revamping scheme at Bhubaneswar and Cuttack	2 Urban Revamping Slum units operational	2 Urban Revamping Slum units operational	1,34,36	94,20	
Continuance of Urban Revamping scheme at Rourkela	1 Urban Revamping Slum units operational	1 Urban Revamping Slum units operational	97,50	70,15	

Name of the Schemes/Programs	Physical Target for 2012-13	Physical Achievement in 2012- 13(up to Dec 2012)	Financial Target for 2012-13 (in TRS)	Financial Achievement in 2012-13 (up to Dec 2012) (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
Purchase and distribution of contraceptives	Procurement and distribution of contraceptives (287 lakh condoms, 30 lakh cycles of oral Pill, 2.11 lakh pieces of Copper T.)	Procurement and distribution of contraceptives (63.72 lakh condoms, 21.28 lakh cycles of oral Pill, 2.29 lakh pieces of Copper T.)	15,00,00	Supplied by Gol	Actual receipt for GoI in kinds
Continuance of FW cell in the Department	FW cell operational	FW cell operational	20,00		
Strengthening of DTL (ISM), Bhubaneswar	Drugs testing lab operational	Drugs testing lab operational	6,88	4,54	
Strengthening of enforcement mechanism of State drug controller (ISM), Odisha	Drugs testing lab (ISM) operational	Drugs testing lab (ISM) operational	7,33		
Strengthening of Homeo pharmacy of Dr. ACHMC, Bhubaneswar	Essential equipment procured	Not initiated	1,10,00	0	Delay in tendering process by OSIC
Introduction of PG Course at Govt. Ayurvedic College, Bolangir	4 teaching Depts. Up-graded and PG Course launched	Not initiated	62,99	0	Permission of Government is awaited
Strengthening of Ayurvedic pharmacy, Bhubaneswar	Provide equipment	Not initiated	96	0	Process is under-way
Re-orientation training of Ayurvedic personnel	Ayurvedic doctors trained through refresher courses	Not initiated	43	0	Process is under-way
Re-orientation training of Homoeopathy personnel	Homeopath doctors trained through refresher courses	Not initiated	80	0	Process is under-way
Supply of essential drugs to Ayurvedic dispensaries in non- tribal areas	Ayurvedic medicines procured and distributed	Ayurvedic medicines procured and distributed	6,81	8,61	Balance will be spent in coming months of the year
Supply of essential drugs to Ayurvedic dispensaries in tribal areas	Ayurvedic medicines procured and distributed	Ayurvedic medicines procured and distributed	89		

Name of the Schemes/Programs	Physical Target for 2012-13	Physical Achievement in 2012- 13(up to Dec 2012)	Financial Target for 2012-13 (in TRS)	Financial Achievement in 2012-13 (up to Dec 2012) (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target				
Supply of essential drugs to Homoeopathic dispensaries in non tribal areas	Homeopathy medicines procured and distributed	Homeopathy medicines procured and distributed	3,26						
Continuance of post under SIHFW	SIHFW operational	SIHFW operational	53,81	1,34,23					
Continuance of District FW bureau in NT districts	District FW bureau in NT districts operational	District FW bureau in NT districts operational	1,85,03						
Continuance of District FW bureau in Tribal districts	District FW bureau in Tribal districts operational	District FW bureau in Tribal districts operational	87,31						
Continuance of training center of SIHFW	Training centre of SIHFW operational	Training centre of SIHFW operational	2,36						
Token provisions			4						
Total Central Plan			261,05,64	119,42,07					
III. Centrally Sponsored Plan									
FILARIA Control Programme (State: Central - 50:50)	Continuance of program	Not initiated	1,24,00		Materials not received from GoI				
National Malaria Eradication Programme (State: Central - 50:50)	Continuance of program	Not initiated	58,00		Materials not received from Gol				
Training of Para Medical Staff (State: Central - 50:50)	400 paramedics trained	330 paramedics trained	18,00	11,54					
Total of Centrally Sponsored Pla	an		2,00,00	11,54					
IV. National Rural Health Mission	on (NRHM)								
	A. Reproductive and Child Health (RCH)								
		(i) Maternal Health							
Referral Transport	434 Janani express operational	414 Janani express operational	126932	50683					
VHND	346934 session targeted	325478 Session conducted	57790	24029					
Janani Surakshya Yojana (JSY)	734854 beneficiary targeted	426173 beneficiaries benefited	1102359	729018					

Name of the Schemes/Programs	Physical Target for 2012-13	Physical Achievement in 2012- 13(up to Dec 2012)	Financial Target for 2012-13 (in TRS)	Financial Achievement in 2012-13 (up to Dec 2012) (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
JSSK	670000 units of drugs, consumables, diagnostics, 12600 nos blood transfusion, 45000 units of diet, and 538302 numbers of first free referral transport, 53830 2 nd free referral targeted.	460467 units of drugs and consumables, 243235 diagnostics, 12600 nos blood transfusion, 295330 units of diet, 11902 units of blood transfusion provided	504435	98439	
Others	Existing schemes continued	Existing schemes continued	11464	2119	
		(ii) Child Health			
Care of sick children and severe malnutrition	44 NRC to be operational	17 NRC is operational	59116	19693	
Others	Existing schemes continued	Existing schemes continued	63240	17365	
		(iii) Family Planning			
Family Planning	Compensation for 170532 cases sterilisation targeted	96086 cases of sterilisation made	175172	86363	
		(iv) Adolescent Health and Gen	der		
School Health Program	59010 schools targeted	53848 programs conducted	64428	20248	
Others	Existing schemes continued	Existing schemes continued	31529	8373	
Urban RCH	Continuance of 31 existing urban health centers and 9 new health centers	Existing schemes continued	42696	17764	
Tribal RCH	Recurring cost of 22 maternity waiting home	Existing schemes continued	24740	6779	
PNDT activities	Operational expenses for conducting 13 seminar, 2workshop and training	Existing schemes continued	2265	519	
Infrastructure and HR	Remuneration of 1754 addl. ANM, 2315 SN, staffs of 30 SNCU, 44 NRC and others	Remuneration of 1077 addl. ANM, 1084 SN, staffs of 22 SNCU, 17 NRC and others paid	377292	188708	

Name of the Schemes/Programs	Physical Target for 2012-13	Physical Achievement in 2012- 13(up to Dec 2012)	Financial Target for 2012-13 (in TRS)	Financial Achievement in 2012-13 (up to Dec 2012) (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
Training	Conducting 6888 IMNCI training programmes, 1761 SAB training programs and others	2368 IMNCI training programmes, 788 SAB training programs and others training conducted	175911	39710	
Programme/NRHM management cost	Remuneration and administrative expenses of SPMU and DPMU	Existing schemes continued	436967	276266	
Vulnerable groups	Recurring cost of 14 existing and 23 new projects	Existing schemes continued	8070	1283	
		B. NRHM Initiative			
ASHA	43530 uniform, diary; 1771 batch field training; 26118 ASHA meeting; 76740 cases incentive and other expenses	Incentive to 36214 ASHAs, induction training of 42570 ASHAs, thematic training to 42627 ASHA achieved	371046	120954	
Untied Fund	45470 GKS, 6688 Sub centers, 377 CHC, 26 SDH, 79 other hospitals and 1228 PHC (N) covered	Untied fund provided	417766	233099	
Hospital Strengthening (Infrastructure)	575 institutions covered		2137657	287065	
Annual Maintenance Grant	26 SDH, 377 CHC, 1307 PHC(N)/OH and 128 SC will be covered	AMC released	71652	28213	
New Construction / Renovation & Setting up	152 SC and others	Construction is in progress	79203	10525	
Corpus Grants to HMS/RKS	Grants received by 435 nos RKS and other recurring expenses for 5483 beds	Grants provided	169270	120169	
District Action Plan	314 blocks and one at state level	Existing schemes continued	2070	1088	
Mainstreaming of AYUSH	Remuneration of 1487 Ayush doctors, medicines and others	Existing schemes continued	188954	142321	
IEC/BCC NRHM	Multiple IEC/BCC activities	Existing schemes continued	121796	47834	

Name of the Schemes/Programs	Physical Target for 2012-13	Physical Achievement in 2012- 13(up to Dec 2012)	Financial Target for 2012-13 (in TRS)	Financial Achievement in 2012-13 (up to Dec 2012) (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
Referral transport)	Recurring cost of 422 Ambulance	Existing schemes continued	79167	1427	
PPP/NGO	Management of 38 PHC new by NGO and grand in aid to 182 field NGO	Management of 39 PHC new by NGO and grand in aid to 182 field NGO	85897	34380	
Innovations	Operational cost of 240 MHU and others	Existing schemes continued	256521	157637	
Planning, implementation, monitoring	Operational expenses	Existing schemes continued	168161	52934	
Procurement- equipment	Equipment purchased	Equipment purchased	64235	15143	
Procurement- drugs and supplies	Drugs and supplies purchased	Existing schemes continued	258432	79415	
Regional drug warehouses	Existing schemes continued	Existing schemes continued	29777	14513	
New initiatives/strategies	Scholarship to 1325 SC/ST students, hardship allowance to 2317 paramedics and 29 SNCU doctors	Existing schemes continued	70833	20830	
State Level health resources centre	Operational cost	Operational costs of existing schemes	5338	3640	
Support Services	Operational expenses	Existing schemes continued	106709	7956	
		C. Imr	nunisation		
Immunisation	90% children fully immunized	85% children fully immunised	350708	81546	
IPPI					
		D. Disease Co	ontrol Programme		
National TB Control Programme (RNTCP)	Continued support to 35 TB cell	Continued support to 35 TB cell	145895	91285	
National Leprosy Eradication Programme (NLEP)	Continued support to 31 Leprosy cell	Continued support to 31 Leprosy cell	32916	7567	
National Disease Surveillance Programme (IDSP)	Continued support to 35 IDSP cell	Continued support to 35 IDSP cell	30976	8456	

Name of the Schemes/Programs	Physical Target for 2012-13	Physical Achievement in 2012- 13(up to Dec 2012)	Financial Target for 2012-13 (in TRS)	Financial Achievement in 2012-13 (up to Dec 2012) (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
National Programme for Control of Blindness (NPCB)	Continued support to 31 NPCB cell	Continued support to 31 NPCB cell	85349	62039	
National Vector Borne Disease Control Programme (NVBDCP)	Continued support to 35 NVBDCP cell	Continued support to 35 NVBDCP cell	179242	117930	
Other salary and other expenses					
TOTAL National Rural Health M	ission		8782034	3339864	
		V. 1	lon-Plan		
Medicines	Medicines procured and distributed	Medicines procured and distributed Partly	104,55,51	30,14,19	
Diet	Diets provided at enhanced rates with effect from 1 April 2011	Diets provided at enhanced rates	23,34,66	11,78,37	
Bedding, clothing and Linen	Beds/clothes/linen procured and supplied	Beds/cloths/linen procured and supplied	1,58,10	30	
Grants to spinal cord injury center	Support for ongoing activities	Grants provided	80,30	40,15	
Biomedical Waste Management	36 Biomedical Waste Management Unit operationalized	36 Biomedical Waste Management Unit operationalised	1,31,07	68,88	
Grant to AHRCC Cuttack	Grants will be provided	Grants provided	9,10,00	3,64,00	
Grants to AHRCC, Cuttack for equipment	Grants paid	Grants not paid	12,00	0	
Equipment for hospitals	Equipment procured and used.	Equipment procured and used.	41,07	7,32	
Grants to State Branch of IRCS	Grants paid	Grants not paid	20,00	0	
Grants to State Branch of IRCS	Grants not released	Grants paid	87,10	0	
Grants to mental health authority	Grants not released	Grants paid	11,00	0	

Name of the Schemes/Programs	Physical Target for 2012-13	Physical Achievement in 2012- 13(up to Dec 2012)	Financial Target for 2012-13 (in TRS)	Financial Achievement in 2012-13 (up to Dec 2012) (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
Prevention & control of visual impairment & Trachoma control under NPCB	2.48 lakh nos. of cataract surgery; eye screening of 4.5 lakh school students; and 1100 nos. of eye donations	78,925, nos of cataract surgery conducted, 3,50,572 nos of school students undergone eye screening and 402 nos of eye donation received	3,00,00	1,89,24	
Total of Non-Plan excluding Sala	Total of Non-Plan excluding Salary and other expenses			48,62,45	

Table 4.2: Physical and Financial Review - 2011-12

Name of the Schemes/Programs	Physical Target for 2011-12	Physical Achievement in 2011-12	Financial Target for 2011-12 (in TRS)	Financial Achievement in 2011-12 (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
1. State Plan					
DFID Assistance Orissa Health Sector Plan	 i) Essential medicines worth Rupees 12.5 crore procured, ii) Critical Care Services in 9 DHHs functional, iii) 50,000,LLIN distributed, iv) 50 Sub Centers in KBK region constructed, and v) Infrastructure developed in 3 Medical	 i) Essential medicines procured, Construction of Critical care unit is in the process of establishment, ii) 50,000 LLIN distributed, iii) 50 Sub Centers in KBK district are being constructed, iv) Infrastructure development in three MCH is in progress 	80,00,00	79,99,99	
NRHM State Share	Given separately	Given separately	74,00,00	100,00,00	
Grants to State Indian Red Cross Society (IRCS)	Grants to be provided	Grants provided	61,00	61,00	
Grants to Blood Transfusion Council	Grants to be provided	Grants provided	5,00	5,00	
Payment of state decretal dues and legal dues	Decretal/legal dues paid	Not spent	7,00	0	There was no claim
Grants to state Mental Health Authority	Grants to be provided	Grants provided	10,00	35,00	

Name of the Schemes/Programs	Physical Target for 2011-12	Physical Achievement in 2011-12	Financial Target for 2011-12 (in TRS)	Financial Achievement in 2011-12 (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
Grants to Spinal Injury Centre	Grants to be provided	Grants provided	73,00	73,00	
Equipment & instruments for AHRCC (Cuttack)	Grants to be provided	Grants provided	50,00	50	
Grants to St. John Ambulance	Grants to be provided	Grants provided	5,00	500	
Prevention & control of visual impairment & Trachoma control under NPCB	2 lakh nos. of cataract surgery; eye screening of 4.5 lakh school students; and 1000 nos. of eye donations	1.07,975, nos of cataract surgery conducted, 3,88,703 nos of school students undergone eye screening and 573 nos of eye donation received	3,00,00	2,51,88	
MO Masari	Distribution of 1,00,000 mosquito nets in KBK districts	1,00,000 mosquito nets procured and distributed	3,00,00	3,00,00	
Emergency Health services	Ambulance procured and operationalised	Ambulance procured	4,50,00	4,50,00	
Renal transplant unit	Renal transplant unit established	Process for establishment of renal transplant unit initiated	1,00,00	57,35	Expenditure cannot be made due to not filling of sanctioned posts
Strengthening & up gradation of state Govt. Medical Colleges	3 medical colleges up-graded	Process of up gradation of 3 MCH initiated	3,08,17	1,84,66	Non receipt of plan estimate from Principals of Colleges
National Programme for prevention of control of Cancer Diabetes Cardiovascular Diseases and Strokes (NPCDCS)	Special health care facility provided for controlling Cancer and Diabetes in 4 nos CHC and 95 nos sub centers in Nuapada district	Special health care facility provided for controlling Cancer and Diabetes in 4 nos CHC and 95 nos sub centers in Nuapada district	28,72	28,72	
National Programme for health care of Elderly (NPHCE)	Special health care provided to senior citizens in selected health institutions of one district	Special health care provided to senior citizens in selected health institutions of one district	21,71	21,71	
State Health Transport Organisation.	13 units of SHTO operational	13 units of SHTO operational	60,95	59,03	
Strengthening of Homoeopathy hospitals attached to 2 Homoeopathy College at Berhampur & Rourkela	2 homeopathy hospitals up-graded by creation of new posts	Not initiated	10,00		Posts yet to be created/sanctioned

Name of the Schemes/Programs	Physical Target for 2011-12	Physical Achievement in 2011-12	Financial Target for 2011-12 (in TRS)	Financial Achievement in 2011-12 (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
Provision for functioning of DTL (ISM), Bhubaneswar	Drugs testing lab operational	Drugs testing lab operational	3,00	2,83	
Opening of new Inspectorates of Ayurvedic & new Inspectorates of Homoeopathy	Opening of 19 new Inspectorates of Ayurvedic & 21 new Inspectorates of Homoeopathy	Not initiated	50,00		Posts are yet to be created
Up gradation of 4 Govt. Ayurvedic hospitals	4 Govt. Ayurvedic hospitals up-graded	4 Govt. Ayurvedic hospitals upgraded	38,02	38,02	
Up gradation of 4 Gov. Homoeopathic hospitals	4 Govt. Homeopathy hospitals up-graded	4 Govt. Homeopathy hospitals upgraded	38,02	38,01	
Establishment of Ayurvedic clinics in 615 PHCs(New)	Ayurvedic clinics in 615 PHC operationalised	Ayurvedic clinics in 615 PHC operationalised	1,19,93	1,19,93	
Establishment of Homoeopathic clinics in 547 PHCs(New)	Homeopathy clinics in 547 PHC operationalised	Homeopathy clinics in 547 PHC operationalised	1,06,67	1,06,67	
Supply of essential drugs to Ayurvedic dispensaries	Ayurvedic medicines procured and distributed	Ayurvedic medicines procured and distributed	5,76	5,75	
Continuance of post of Dy secretary for Health and FW department	Post of Dy. Secretary for DH&FW continued	Post of Dy. Secretary for DH&FW continued	21,00	12,22	
Effluent Treatment Plant at MKCG MCH Berhampur	Effluent treatment plant operational	Not initiated	45,00		Proposal not received from the Dean of the College
Effluent Treatment Plant at SVPPGIP Cuttack	Effluent treatment plant operational	Initiated	55,00	2,98	Work is in progress and will be completed next year
ANM and GNM School	Two ANM and one GNM schools established and functional	Two ANM and one GNM schools are in the process of establishment	3,33,00	1,00,00	Tendering process is underway
Purchase of equipment for Drugs testing AIDS testing and food testing laboratories	Equipment procured and installed	Not initiated	10,00		Proposal not received
Token provision			9		

Name of the Schemes/Programs	Physical Target for 2011-12	Physical Achievement in 2011-12	Financial Target for 2011-12 (in TRS)	Financial Achievement in 2011-12 (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
Actual expenditure against				98,50	
other programs included in RE					
TOTAL State Plan without sta	te share of CSP components		180,16,04	200,57,75	
II. Central Plan					
National Goiter control programme	Awareness campaign continued	Awareness campaign continued	16,08	6,40	Amount could not be spent due to late receipt
National TB control programme	Anti TB drugs provided	Anti TB drugs provided	2,00,00	0	Medicines not provided by Gol
Cost of Material under NMEP	10 lakh LLIN received and distributed	19 lakh LLIN received and distributed	30,00,00		Supplied by Gol
State Family Welfare Bureau	State Family Welfare Bureau operational	State Family Welfare Bureau operational	1,28,63	1,22,58	Non filling of sanctioned posts
Continuance of dist. F.W. Bureau in non tribal areas	District Family Welfare Bureau in non tribal areas operational	District Family Welfare Bureau in non tribal areas operational	3,53,00	4,55,60	Non filling of sanctioned posts
Continuance of dist. F.W. Bureau	District Family Welfare Bureau in tribal areas operational	District Family Welfare Bureau in tribal areas operational	1,91,80		
Regional H & F.W. Training Centers	Two regional H&FW Training Centers operational	Two regional H&FW Training Centers operational	84,43	71,47	Non filling of sanctioned posts/ transfer of staffs
Training of Nurses, Mid Wives & LHVs in non tribal areas	Provision of salary and other expenses for 12 training centers in non tribal areas	Salary and other expenses for 11 Nursing training center and 1 LHV training centers in non tribal areas paid	3,88,17	3,09,03	
Continuance of training of Nurses, Mid Wives & LHVs	Provision of salary and other expenses for training centers in tribal areas	Salary and other expenses for 5 Nursing training center in non tribal areas paid	1,91,66	1,42,64	
Continuance of Health Workers (M) training	Provision of salary and other expenses for 3 training centers	Salary and other expenses for 3 HW (M) training centers paid	62,63	56,72	
Continuance of rural FW Subcenters in non tribal areas	3805 RFWs in non tribal areas operational	3805 RFWs in non tribal areas operational	109,21,00	92,73,71	Non filling of sanctioned posts

Name of the Schemes/Programs	Physical Target for 2011-12	Physical Achievement in 2011-12	Financial Target for 2011-12 (in TRS)	Financial Achievement in 2011-12 (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
Continuance of rural FW Subcenters in tribal areas	2571 RFWs in tribal areas operational	2571 RFWs in tribal areas operational	76,47,00	57,05,91	Non filling of sanctioned posts
Continuance of 1Urban FW Centers at Rourkela (Tribal)	1 UFWCs operational	1 UFWCs operational	28,81	11,80	Non filling of sanctioned posts
Continuance of 3Urban FW Centers and 3 voluntary organizations (Non-Tribal)	5 UFWCs operational	5 UFWCs operational at Cuttack, Bhubaneswar, Sambalpur and Berhampur	86,02	67,99	Non filling of sanctioned posts
Continuance of Urban Revamping scheme at Bhubaneswar and Cuttack	2 Urban Revamping Slum units operational	2 Urban Revamping Slum units operational	1,43,11	1,33,77	Non filling of sanctioned posts
Continuance of Urban Revamping scheme at Rourkela	1 Urban Revamping Slum units operational	1 Urban Revamping Slum units operational	82,79	89,38	
Purchase and distribution of contraceptives	Procurement and distribution of contraceptives (309 lakh condoms, 20 lakh cycles of oral pill, 2.14 lakh pieces of copper T)	Procurement and distribution of contraceptives (86.1 lakh condoms, 25.47 lakh cycles of oral pill, 2.13 lakh pieces of copper T)	18,00,00	7,99,87	Less supplied by Gol
Continuance of FW cell in the Department	FW cell operational	FW cell operational	20,00	8,82	
Strengthening of Homeo pharmacy of Dr. ACHMC, Bhubaneswar	Essential equipment procured	Essential equipment to be procured	1,16,03	0	Tender process is yet to be completed
Introduction of PG Course at Govt. Ayurvedic College, Bolangir	4 teaching Depts. up-graded and PG Course launched	4 teaching Depts. up-graded and PG Course launched	62,99	0	New Posts are et to be created
Directorate	Salary and other expenses paid	Salary and other expenses paid	15,18	3,28	Posts not created
Re-orientation training of Ayurvedic personnel	Ayurvedic doctors trained through refresher courses	Ayurvedic doctors trained through refresher courses	43	43	
Re-orientation training of Homoeopathy personnel	Homeopath doctors trained through refresher courses	Homeopath doctors trained through refresher courses	80	12	Delay in the process
Supply of essential drugs to Ayurvedic dispensaries in non	Ayurvedic medicines procured and distributed	Ayurvedic medicines procured and distributed	1,23	32	Delay in the process

Name of the Schemes/Programs	Physical Target for 2011-12	Physical Achievement in 2011-12	Financial Target for 2011-12 (in TRS)	Financial Achievement in 2011-12 (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
tribal areas					
Supply of essential drugs to Ayurvedic dispensaries in tribal areas	Ayurvedic medicines procured and distributed	Ayurvedic medicines procured and distributed	89	3	Delay in the process
Supply of essential drugs to Homoeopathic dispensaries in non tribal areas	Homeopathy medicines procured and distributed	Homeopathy medicines procured and distributed	3,26	0	Allotment of funds not received
Continuance of post under SIHFW	SIHFW operational	SIHFW operational	59,46	26,84	
Continuance of District FW bureau in NT districts	District FW bureau in NT districts operational	District FW bureau in NT districts operational	1,57,19	1,40,34	
Continuance of District FW bureau in Tribal districts	District FW bureau in Tribal districts operational	District FW bureau in Tribal districts operational	85,16	55,07	
Continuance of training center of SIHFW	Training center of SIHFW operational	Training center of SIHFW operational	2,99	9	
Token provision			4		
Total Central Plan			258,50,78	174,82,21	
III. Centrally Sponsored Plan				-	
FILARIA Control Programme (State: Central - 50:50)	Continuance of the scheme	Continuance of the scheme	12,400	48,86	Non receipt of materials from GoI
National Malaria Eradication Programme (State: Central - 50:50)	Continuance of the scheme	Continuance of the scheme	5,800	0	Non receipt of materials from Gol
Training of Para Medical Staff (State: Central - 50:50)	Paramedics to be trained	Paramedics trained	1,800	6,54	
Total of Centrally Sponsored Pla	n	2,00,00	55,40		

Name of the Schemes/Programs	Physical Target for 2011-12	Physical Achievement in 2011-12	Financial Target for 2011-12 (in TRS)	Financial Achievement in 2011-12 (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target						
IV. National Rural Health Mission	. National Rural Health Mission (NRHM)										
	A. Reproductive and Child Health (RCH)										
		(i) Maternal Health									
Organisation of VHND session	5,06,668 session targeted	4,24,418 nos session held	5,05,67	6,36,16	Poor intersectoral convergence						
Janani express	380 nos Janani express operational	380 nos. JE are in operation	8,40,04	4,72,77	Expenditure based on actual uses						
Janani Surakshya Yojana (JSY)	691668 beneficiary targeted	6,34,466 beneficiary benefited	108,31,25	111,22,82							
Others	Existing schemes continued	Existing schemes continued	1,11,70	2,54,44							
	(ii) Child Health										
Support to Pustikar Diwas	145800 children covered	74,851 children covered	3,20,10	97,68	Expenditure based on actual uses						
NRC running cost	11 nos NRC operational	5 nos NRC operational	32,64	12,30	Delay in the process of administrative approval						
Others	Existing schemes continued	Existing schemes continued	90,95	34,04							
Family Planning	1.55 lakh female sterilized, .21 lakh male sterilized and 1.59 lakh IUD inserted	1.42 lakh female sterilized, 3,207 male sterilized and 1.43 lakh IUD inserted	16,78,12	15,03,34	Expenditure based on actual numbers of beneficiaries						
	(iv) Adolescent Health and Gender										
Bi-annual Kishori Mela at VHND session in 18 high focus districts	40,607 meet in 18 district conducted	29,005 meet in 18 district organised	1,17,88	12,88	Delay in arranging the meet						
School Health Program	59 lakh school children screened	45.12 lakh children screened	7,88,69	5,72,37	Actual numbers of beneficiaries are less						
Sanitary pad purchase, store, distribution in Ganjam district	Sanitary pad prepared through SHG and distributed through ASHA in Ganjam district	Not initiated	25,00	0	Poor intersectoral convergence						
Other programs under ARSH	Recurring expenses	Recurring expenses incurred	7,00	88,88							

Name of the Schemes/Programs	Physical Target for 2011-12	Physical Achievement in 2011-12	Financial Target for 2011-12 (in TRS)	Financial Achievement in 2011-12 (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
Urban RCH	31 urban health centers operational	31 urban health centers operational	2,88,77	2,24,53	Delay in filling the vacancy
Tribal RCH	36 MWH established in difficult blocks. Quarterly Health Camps at 46 difficult blocks	22 MWH established in difficult blocks	1,61,54	1,04,46	Delay in filling the vacancy
Infrastructure and Human Resource	Remuneration and incentives for contractual staffs paid	Remuneration and incentives for contractual staffs paid	42,54,07	27,40,36	Delay in filling the vacancy
Training	3022 staffs trained on SBA, 8660 staffs, trained on IMNCI, 398 staffs trained on SNCU, 1395 staffs trained on NSSK. And others	1456 staffs trained in SBA, 8,736 staffs trained in IMNCI, 128 staffs trained in SNCU, 1200 trained in NSSK and others	16,40,38	11,50,25	Delay in the process in some cases
Programme Management	Existing schemes continued	Existing schemes continued	36,12,63	26,46,29	Delay in filling the vacancy
Vulnerable Groups	26 Centers operationalised	14 Centers operationalised	58,80	28,20	Actual expenses
PNDT services			13,40	80	
TOTAL of RCH			253,78,63	217,02,56	
		B. NRHM Initiative			
ASHA	42658 uniform and 58381 drug kit to ASHA given, ASHA of 18 non-focus districts trained and incentives given		25,20,18	28,94,95	
Untied Fund	46928 GKS, 6688 Sub centers, 1709 health institutions covered	46928 GKS, 6688 Sub centers, 1709 health institutions covered	54,55,87	43,59,48	Based on fund received
Hospital Strengthening (Infrastructure)	4 DHH, 5 SDH, 42 CHC, 41 PHC (N) and 104 SC upgraded to IPHS standard		51,25,44	37,96,85	Delay by the line department
Annual Maintenance Grant	Grants to 5172 health institutions	Grants to 5172 health institutions (42% released)	8,96,50	7,42,58	Based on fund received
New Construction / Renovation & Setting up	22 DHH, 22 SDH, 297 CHC, 187 PHC (N), 115 SC and 4 other Hospitals building constructed	Work in progress	3,78,00	2,30,72	Delay by the line department
Corpus Grants to HMS/RKS	Grants received by 434 nos RKS	Grants received by 434 nos RKS	22,89,80	18,94,72	Based on fund received

Name of the Schemes/Programs	Physical Target for 2011-12	Physical Achievement in 2011-12	Financial Target for 2011-12 (in TRS)	Financial Achievement in 2011-12 (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
District Action Plan	Existing schemes continued	Existing schemes continued	25,50	12,70	
Mainstreaming of AYUSH	Provision of salaries and other expenses of Ayush staffs	Salaries and other expenses of Ayush staffs paid	24,93,24	21,88,34	Delay in filling the vacancy in positions
IEC/BCC NRHM	21 nos mega Swasthya Mela organised	21 nos mega Swasthya Mela organised	8,29,54	8,51,86	
Mobile Health Unit (including recurring expenditure)	240 nos MHU operational	236 nos MHU operational	25,89,28	22,21,39	Demand driven programme
Planning, Implementation & Monitoring	Monitoring and evaluation of the programmes made	Monitoring and evaluation of the programmes made	31,28,15	18,89,47	
Regional drugs warehouse	Salaries and establishment cost paid	Salaries and establishment cost paid	3,38,87	1,82,88	Delay in filling the vacancy in positions
New Initiatives/ Strategic Interventions	Incentives and other charges paid	Incentives and other charges paid	10,90,03	3,21,64	Payment based on performance
Health Insurance Schemes	Existing schemes continued	Existing schemes continued	23,00	0	Payment has been made in the next year
State level Health Resource Centre	Provision for salaries and other expenses	Salaries and other expenses paid	53,39	45,50	Delay in filling the vacancy in positions
Support Services	Provision for salaries and other expenses	Salaries and other expenses paid	2,31,60	53,52	Delay in filling the vacancy in positions
Procurement	Procurement of Drugs, supplies, equipment and drugs	Procurement of Drugs, supplies, equipment and drugs	18,86,09	19,31,16	
PPP	Administrative expenses for managing 21 PHC(N) and 18 sub centers paid	Administrative expenses for managing 21 PHC(N) and 18 sub centers paid	7,38,60	2,46,99	Delay in procurement
Others	Other expenses paid	Other expenses paid	3,92,58	2,28,59	
Total NRHM Initiative 3048566 240,93,34					
		C. Immunisation			
Immunisation	8,42,376 children immunised	6,85,365 children immunised	10,10,10	7,67,08	

Name of the Schemes/Programs	Physical Target for 2011-12	Physical Achievement in 2011-12	Financial Target for 2011-12 (in TRS)	Financial Achievement in 2011-12 (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
IPPI			6,07,99	3,28,56	
Total Immunisation			21,64,44	10,95,64	
		D. Disease Control Programme			
National TB Control Programme (RNTCP)	Continued support to 35 TB cell	Continued support to 35 TB cell	14,47,25	8,69,58	
National Leprosy Eradication Programme (NLEP)	Continued support to 31 Leprosy cell	Continued support to 31 Leprosy cell	1,78,47	1,40,73	
National Disease Surveillance Programme (IDSP)	Continued support to 35 IDSP cell	Continued support to 35 IDSP cell	2,38,84	1,29,99	
National Programme for Control of Blindness (NPCB)	Continued support to 31 NPCB cell	Continued support to 31 NPCB cell	8,04,92	6,81,99	
National Vector Borne Disease Control Programme (NVBDCP)	Continued support to 35 NVBDCP cell	Continued support to 35 NVBDCP cell	18,68,25	13,14,78	
TOTAL National Rural Health Mis	ssion		620,20,11	500,28,62	
V. Non-Plan			-		
Medicines	Medicines procured and distributed	Medicines procured and distributed	50,00,00	49,71,08	
Diet	Diets provided at enhanced rates with effect from 1 April 2011	Diets provided at enhanced rates	15,41,24	13,97,28	Based on actual consumption
Bedding, clothing and Linen	Beds/cloths/linen procured and supplied	Beds/cloths/linen procured and supplied	1,57,70	1,51,79	
Stipend for House surgeons, PG students	Stipend paid	Stipend paid	27,63,37	31,01,27	
Biomedical Waste Management	36 Biomedical Waste Management Unit operationalized	36 Biomedical Waste Management Unit operationalised	1,00,09	59,55	Delay in procurement
Storm water Drainage System in SCB	Grants will be provided	Grants provided	4,16,00	0	Work not initiated
Special grants for repair and renovation of leprosy homes	Grants paid	Grants not paid	1,00,00	0	Grant not provided

Name of the Schemes/Programs	Physical Target for 2011-12	Physical Achievement in 2011-12	Financial Target for 2011-12 (in TRS)	Financial Achievement in 2011-12 (in TRS)	Reasons for shortfall /deviation in achievement from the original and financial target
and hospital run by Hind Kusth					
Nivaran Sangh					
Grants to AHRCC, Cuttack for equipment	Equipment procured and used.	Equipment procured and used.	10,00	10,00	
Grants to AHRCC, Cuttack	Grants paid	Grants Paid	7,00,00	7,00,01	
Infrastructure development grants to AHRCC, Cuttack	Grants paid	Grants not paid	10,00	10,00	
Equipment for Hospitals	Grants not released	Grants paid	33,08	71,57	
Grants to state branch of IRCS	Grants not released	Grants paid	20,00	0	Grants not provided
TOTAL Non-Plan excluding salary	y and other expenses		108,51,48	104,72,55	

CHAPTER-V: FINANCIAL REVIEW

In this Chapter actual expenditure of the financial year 2011-12, budget estimate and revised estimate of 2012-13 and budget estimate of 2013-14 are detailed in table 5.1 and table 5.2 for better assessment of financial assessment of financial performance of the schemes implemented through Health and Family Welfare Department.

Table 5.1: Financial Review, DoH&FW, FY 11-12, FY 12-13, and FY 13-14 (in TRS) – State Plan, Central Plan, Centrally Sponsored Plan, and Non Plan

SI. No.	Name of the schemes	2011-12 Actuals	2012-13BE	2012-13RE	2013-14BE					
State	State Plan									
1	Odisha Health Sector Plan under DFID	799999	625900	625900	400000					
2	NRHM state share	1000000	1200000	2192369	2000000					
3	NFEP- state share		6200	6200	6200					
4	NMEP-State share	652	2900	2900	2900					
5	Orientation training of medical and para-medical staffs	0	900	969	1006					
6	National Program for Health Care of Elderly (NPHCE)	2171	26000	26772	30000					
7	National Program for prevention and Cotrol of Cancer Diabetes Cardiovascular Diseases and Storkes (NPCDCS)	2872	29100	63249	112766					
8	MCH Berhampur-Territory Cancer Centre	0	20000	20000	10000					
9	ANM GNM School	10000	62272	62273	50000					
10	Upgradation of Medical College- Cuttack for new P G course	6833	20200	20200	179150					
11	Upgradation of Medical College-Burla for new P G course	5833	10200	10200	10000					
12	Upgradation of Medical College- Berhampur for new P G course	5800	10200	10200	10000					
13	Regional linstitute of Paramedical Science	0	50000	50000	40000					
14	Mainstreaming Ayush under NRHM- Ayurveda	0	26374	26374	852					
15	Mainstreaming Ayush under NRHM- upgradation of 4 stategovt. Homeo hospital	3801	0	0	0					
16	Mainstreaming ayush- under NRHM- Homeopathy	0	20852	20852	377					
17	Mainstreaming Ayush under NRHM - Unani	0	502	502	18					
18	Mainstreaming Ayush under NRHM- AY-upgradation of 4 stategovt. Ay hospital	3802	0	0	0					

SI. No.	Name of the schemes	2011-12 Actuals	2012-13BE	2012-13RE	2013-14BE
19	State Decretal Dues	0	700	700	700
20	Establishment of AIIMS at Sijua	2500	2500	2500	1
21	Multipurpose training of doctors and para medics	0	10000	10000	5000
22	Public Health Laboratory	0	18040	18040	0
23	HQ drug orgn.	0	5000	5000	54600
24	HFW department	1222	2100	2100	2000
25	Mo mashari	30000	40000	40000	100000
26	Emergency Medical Ambulance Service	0	62250	62250	1
27	Gandhi Ashram	0	10000	10000	10000
28	Swasthya Sanjog	0	35300	45300	133810
29	Biju Gramina Swasthya Sibira	0	30000	30000	29400
30	Odisha State Medical Corporation	0	0	0	50000
31	Renovation work	0	0	0	95003
32	Grants to health institutions	22900	0	0	0
33	Emergency Health service	45000	0	0	0
34	Directorate	283	5300	5381	22541
35	Education-	0	2000	1920	4180
36	Renal Transplant Unit	5735	10000	10000	15000
37	Bone Marrow Transplant Unit	0	0	0	25000
38	Inst. Padriatic-Effluent treatment plant	298	3000	3000	1
39	MCH-MKCG-effluent plant	0	2000	2000	0
40	Prevention and control of Visual Impairement, blindness and trachoma control	25188	0	0	0
41	HMIS	0	0	0	100000
42	Construction of building- HFW	0	119553	119553	1
43	Mainstreaming of Ayush under NRHM- Drugs under Ayurved	575	0	0	0
44	Mainstreaming of Ayush under NRHM-colocation of Ayurvedic clinics	11993	0	0	0
45	Mainstreaming of Ayush under NRHM- development of Ayurvedic Dispensaries	918	0	0	0
46	Mainstreaming of Ayush under NRHM-colocation of Homeo clinics	10667	0	0	0
47	Mainstreaming of Ayush under NRHM- development of state govt homeo dispensaries	817	0	0	0
50	Mainstreaming of Ayush under NRHM- development of state govt. unani dispensaries	13	0	0	0

SI. No.	Name of the schemes	2011-12 Actuals	2012-13BE	2012-13RE	2013-14BE
52	Construction of H&FW department	0	552250	589052	1119478
53	13th FC Award for upgradation of health infrastructure	0	875000	875000	875000
54	Construction of H&FW department	0	0	29237	55000
55	Token provisions		7	7	15
	TOTAL of State Plan	2005775	3896600	5000000	5550000
Centra	al Plan:				
1	TB Control programme	0	20000	20000	20000
2	Directorate	328	1517	1517	734
3	Education: Ayurveda	43	6342	6342	6299
4	Education: Homeopathy	12	11080	11080	11000
5	National Goitre Control Programme	640	1000	1000	1000
6	Hospital and dispensaries-Ayurveda	32	681	681	681
7	Hospital and dispensaries-Homeopathy	0	326	326	326
8	Ayurvedic Hospital and dispensaries	3	89	89	89
9	NMEP-Materials and equipment	0	300000	300000	300000
10	State FW Bureau	12258	13177	13967	13692
11	SIHFW	22234	32851	32851	35790
12	Purchase of Contraceptive	79987	150000	150000	150000
13	Regional H&FW Training Center	7147	8691	9141	10247
14	Training of Nurse, midwife	45167	59490	63062	63997
15	Training and employment of HWM	5672	6447	6957	7529
16	Rural Family Welfare sub center	927371	1123555	1118839	1136101
17	Urban Family Welfare Centre	6799	8744	8744	8402
18	Revamping of Urban Slum	13377	13436	13836	15372
19	Urban Family Welfare Center under urban Family Welfare service	1180	794	794	891
20	Urban FW service- revamping of urban slum	8938	9750	10684	11795
21	District Family Welfare Bureau	45560	56035	56335	56047
22	Rural Family Welfare Sub center-under Rural Family Weflare service	570591	786555	784325	745100
23	H&FW Department	882	2000	2000	2000
24	Token provision	0	4	4	4
	TOTAL of Central Plan	1748221	2612564	2612574	2597096
Centra	ally Sponsored Plan:				
1	NFEP	4886	6200	6200	6200
2	NMEP	0	2900	2900	2900
3	Orientatio training of med para med staffs	654	900	969	1006
	TOTAL of Centrally Sponsored Plan	5540	10000	10069	10106

SI. No.	Name of the schemes	2011-12 Actuals	2012-13BE	2012-13RE	2013-14BE				
		Actuals							
Non-P	Non-Plan								
1	Medicine	497108	1045551	1045551	2025515				
2	Diet	139728	227217	233466	223791				
3	Bed, Clothing and Linen	15179	15510	15810	15618				
4	Equipment	7157	4251	4051	4675				
5	Biomedical Waste management	5955	9098	9098	9254				
6	Odisha Treatment Fund	0	0	100000	100000				
7	Infrastructure dev grants to AHRCC	1000	0	0	0				
8	Grants to IRCs	0	8710	8710	8710				
9	Grants to AHRCC for equipment	1000	6700	6700	6700				
10	Grants to Blood transfusion council	0	550	550	550				
11	Grants to Mental health	0	1100	1100	1100				
12	Grants to spinal injury center	0	8030	8030	8030				
13	Grants to john ambulance	0	550	550					
14	Salary, office expenses etc. and token provisions	8649734	10272579	10447912	11360638				
TOTA	L of Non-Plan	9316861	11599846	11881528	13764581				

Table 5.2: Financial Review, DoH&FW, FY 11-12, FY 12-13, and FY 13-14 (in TRS) – National Rural Health Mission

SI.	Name of the schemes	2011-12	2012-13(PIP)	2013-14 (Draft PIP)
No.		(Actual)		
1	RCH-II	2170257	3265405	3940100
2	Routine Immunisation	76708	289910	289000
3	IPPI	32856	60799	60800
4	NRHM Initiatives	2409334	4691543	9325500
5	IDSP	12999	30976	48200
6	NVBDCP	131478	179242	550000
7	NPCB	68200	85349	111600
8	NLEP	14073	32916	49300
9	RNTCP	86958	145897	316300
10	IDD		9900	3800
11	NTCP		0	
TOTAL	. NRHM	5002862	8791937	14694600

CHAPTER VI: GENDER, SCHDULED CASTE (SC) / SCHDULED TRIBE (ST) BUDGETING

The schemes implemented under this department benefit the community as a whole. However, as per the plan ceiling furnished by P & C Department, during the financial year 2013-14 the provision made for SCSP and TSP (for SC/ST) and specific schemes for women under health sector is summarised below in table 6.1 and the details are given in table 6.2.

Table 6.1: Financial Outlay for Gender and SC/ST Budgeting

FY 2013-14 (in TRS) - Summary

SC/ST Budgeting							
Plan Component	Total Outlay for 2013-14	Scheduled Caste Sub Plan (SCSP)			as Sub Plan SP)		
		Allocation	% in Outlay	Allocation	% in Outlay		
State Plan (SP)	555,00,00	69,77,05	13%	95,78,83	17%		
Central Plan (CP)	259,70,96	-	-	80,60,68	31%		
Centrally Sponsored Plan (CSP)	1,01,06	20,28	20%	20,28	20%		
GRAND TOTAL	815,72,02	69,97,33	9%	176,59,79	22%		

Gender Budgeting							
Non Plan/ Plan Component	Total Outlay for 2013-14	Budget for Women	% of Outlay				
Non-Plan	1376,45,81	116,44,52	8.5				
State Plan	555,00,00	67,66,10	12.2				
Central Plan	259,70,96	184,93,22	71.2				
Total	2191,16,77	369,03,84	16.8				

Table 6.2: SC/ST Budgeting, Department of Health and Family Welfare, Odisha, FY 2013-14 (in TRS)—Detailed Description

Plan	Scheme	Outlay for 2013-14	Scheduled Caste Sub Plan	Tribal Areas Sub Plan
State	Odisha State Medical Corporation	50000		
	DFID grants	400000	60000	80000
	Renovation work	95003		
	Directorate	22541		
	Hospital and dispensaries-Ayurvedic	6		
	Mainstreaming Ayush under NRHM- Ayurveda	852		
	Mainstreaming ayush- under NRHM- Homeopathy	377		
	Mainstreaming Ayush under NRHM - Unani	18		

Plan	Scheme	Outlay for 2013-14	Scheduled Caste Sub Plan	Tribal Areas Sub Plan
	NRHM state share	2000000	319055	424655
	Education-	4180		
	MCH Berhampur-Territory Cancer Centre	10000		
	Renal Transplant Unit	15000		
	ANM GNM School	50000	15000	10000
	Bone Marrow Transplant Unit	25000		
	Regional Institute of Paramedical Science	40000		
	Upgradation of Medical College- Cuttack for new P G course	179150		
	Upgradation of Medical College- Burla for new P G course	10000		
	Upgradation of Medical College- Berhampur for new P G course	10000		
	NFEP	6200	1000	1000
	NMEP	2900	800	800
	Gandhi Ashram	10000		
	NPHCE	30000	4000	6000
	NPCDCS	112766	15122	30200
	HQ drug orgnisation.	54600		
	HMIS	100000		
	Swasthya Sanjog	133810		
	Biju Gramina Swasthya Sibira	29400		
	Mo masari	100000		
	Orientation training of medical and para medical staffs	1006	228	228
	Multipurpose training to medical and para medical staffs	5000		
	HFW department	2000		
	Construction of H&FW department	1119478		
	13th FC Award for upgradation of health infrastructure	875000	282500	405000
	State Decretal Dues	700		
	Construction of H&FW department	55000		
	Token provisions	13		
	TOTAL	5550000	697705	957883
Central	TB Control programme	20000		
	Directorate	734		
	Education: Ayurveda	6299		
	Education: Homeopathy	11000		
	National Goiter Control Programme	1000		

Plan	Scheme	Outlay for 2013-14	Scheduled Caste Sub Plan	Tribal Areas Sub Plan
	Hospital and dispensaries-Ayurveda	681		
	Hospital and dispensaries- Homeopathy	326		
	Ayurvedic Hospital and dispensaries	89		89
	NMEP-Materials and equipment	300000		
	State FW Bureau	13692		
	SIHFW	35790		9484
	Purchase of Contraceptive	150000		
	Regional H&FW Training Center	10247		
	Training of Nurse, midwife	63997		18663
	Training and employment of HWM	7529		
	Rural Family Welfare sub center	1136101		
	Urban Family Welfare Centre	8402		
Revamping of Urban Slum Urban Family Welfare Center under urban Family Welfare service		15372		
		891		891
	Urban FW service- revamping of urban slum			11795
	District Family Welfare Bureau	56047		20043
	Rural Family Welfare Sub center- under Rural Family Welfare service			745100
	H&FW Department	2000		
	Token provision	4		3
	TOTAL	2597096		806068
Centrally Spo	nsored Plan			
CSP	NFEP	6200	1000	1000
	NMEP	2900	800	800
	Orientation training of med para med staffs	1006	228	228
	TOTAL	10106	2028	2028
GRAND TOTAL		8157202	699733	1765979

Gender Budgeting, Department of Health and Family Welfare, Odisha, FY 2013-14 (in TRS)— Detailed Description

Plan/Non-Plan	Name of the Schemes	Amount
	Salary, consolidated pay and Allowance of Staff Nurses under Director of Health Services	810532
Non-Plan	Salary, consolidated pay and allowance of Staff Nurses under Director of Medical Education and Training	353920
	Total	1164452
State share of	ASHA	205415
Women	Janani Express	19080
components	JSY	400198
under RCH and NRHM	Sterilisation, IUD and OP	51917
initiatives	Total	676610
	Rural Family Welfare Sub Canter	1795500
Central Plan	Training of LHV and ANM	53822
	Total	1849322

