

**GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**LOK SABHA
UNSTARRED QUESTION NO. 3092
TO BE ANSWERED ON 5TH JANUARY, 2018**

PUBLIC HEALTH PROGRAMMES/SCHEMES

**3092. DR. RATNA DE (NAG):
SHRI RAJKUMAR SAINI:**

Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) the major programmes/schemes being implemented/proposed to be implemented by the Government for improving the general public health across the country along with the target fixed in this regard for the next two years;
- (b) the fund allocated and utilized under various schemes/programmes along with the achievement therefrom during the last three years and the current year; and
- (c) the various steps undertaken to ensure austerity in the Ministry during the said period?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SMT. ANUPRIYA PATEL)**

(a) & (b): Health is a State subject. However, the Ministry of Health and Family Welfare supports and supplements the efforts of the States through various primary, secondary and tertiary care activities so as to improve the general public health across the country. Under National Health Mission, support is provided to States/UTs for strengthening their health systems. NHM support is available universally to the population availing health services in public health facilities. The budget released and expenditure during the years 2014-15 to 2017-18 is Rs.67023.83 crores and Rs.88959.95 crores respectively. The target fixed for next 2 years are at Annexure I. The achievements in the last three years and current year under NHM are at Annexure II.

Under the Tertiary care programmes, the Ministry is implementing the Rashtriya Varishth Jan Swasthya Yojana (RVJSY), the National Programme for Prevention & Management of Trauma and Burn Injuries (NPPMTBI), the National Mental Health Programme (NMHP), the National Programme for Control of Blindness and Visual Impairment (NPCBVI), the National Programme for Tobacco Control and Drug Addiction Treatment (NPTCDAT) and the National Program for Prevention and control of Cancer, Diabetes, CVDs and Stroke (NPPCDS). The total budget allocation and actual expenditure for these programmes during the years 2014-15 to 2016-17 is Rs.1649.63 crores and Rs.1585.77 crores respectively. The details are at Annexure III.

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The Government is also implementing the Integrated Disease Surveillance Programme (IDSP), the National Programme on Containment of Anti-Microbial Resistance, the National Programme on Prevention and Control of Viral Hepatitis, the National Rabies Control Programme, Programme for prevention and Control of Leptospirosis and Programme for strengthening of Inter-sectoral Coordination for Prevention and Control of Zoonotic Diseases. The total budget allocated/released and actual expenditure for these programmes during the years 2014-15 to 2017-18 is Rs.255.95 crores and Rs.250.99 crores respectively. The target fixed for the next two years for these schemes is at Annexure IV.

(c): Instructions and guidelines issued by the Government from time to time are followed to ensure austerity in the Ministry.

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Annexure I**Target & Dates of National Health Mission (NHM) for Next 2 Years**

Sl. No	Target	Date
1	Reduction of MMR from 167/100000 to 100/100000	31.03.2020
2	Reduce (i) U5MR from 43/1000 to 32/1000; (ii) IMR from 37/1000 to 26/1000 (iii) NMR from 26/1000 to 20/1000	31.03.2020
3	Reduce and sustaine TFR from 2.3 to 2.1 at National & sub-national level	31.03.2020
4	Increase Modern Contraceptive Prevalence Rate by 1.5% annually from current level of 52.1 (Track 20 Estimate) and 47.1 (DLHS-3)	31.03.2020
5	Increase (i) ANC from present 85.2% to 90% . (ii) SBA from present 81.1% to 90%	31.03.2020
6	Full immunization of all new-borns by one year of age from present 87.5% (as per HMIS) to 90%	31.03.2020
7	Achieve and maintain elimination status, in respect of: (i) Leprosy (presently –118 endemic districts) (ii) Kala- Azar (Presently 54 endemic districts) (iii) Lymphatic Filariasis (presently 256 endemic districts) (iv) Malaria (Presently- ABER 10 & API <1)	31.03.2020
8	Reduce/sustain case fatality rate for Dengue at <1% (by 2018 & 2019) and set up one sentinel site hospital (SSH) in each district. Accordingly, number of new SSH in 2018 and 2019 is 15 and 10, respectively	31.03.2020
9	Tuberculosis - Achieve and maintain a treatment success rate of 90% amongst notified drug sensitive TB cases by 2020 (Presently treatment success rate amongst notified drug sensitive TB cases is 75% as per Annual Report 2016)	31.03.2020
10	Blindness - Reduce the prevalence of blindness to 0.3% and the disease burden by one fourth of 1.1% (2007)	31.03.2020
11	To halt premature mortality from cardiovascular diseases, cancer, diabetes or chronic respiratory diseases by 2020. For baseline ICMR India State Level Disease Burden Study regarding premature mortality from four common NCDs for the year 2015. (Available at URL http://icmr.nic.in/publications/India_Health_of_the_Nation's_States_Report_2017.pdf).	31.03.2020
12	Reduce prevalence of current tobacco use by 15% vis-a-vis current level of 28.6% as per the GATS 2- 2016-17	31.03.2020
13	Increase utilization of public health facilities by 22.5% from current levels of 25% (OPD) and 38% (IPD) as per NSSO 71 st Round.	31.03.2020
14	Reduce OOPE by 15% (base NSSO, 71 st Round) vis-a-vis the current OOPE on health 64.2% (NHA 2014-15)	31.03.2020

Annexure-II
(As on 31.03.2015)

S.N.	Parameters			Status
1	ASHA	Total Number of ASHA in position as on (31-03-2015)	High Focus states	578856
			Other Than High Focus states	329062
		Total Number of ASHA selected and trained upto IV module	High Focus states	558295
			Other Than High Focus states	289874
		Number of VHSNCs	Constituted	498079
2	Upgradation of Sub Centres	Number of SCs	Available (RHS 2014)	152326
		Sub Centres which are functional	with two ANMs	53290
3	Upgradation of PHCs	Number of PHCs	Available (RHS 2014)	25020
		PHCs and equivalent where three staff nurses have been positioned		6340
4	Upgradation of CHCs	Number of CHCs	Available (RHS 2014)	5363
		Number of CHCs/SDH & equivalent which have been upgraded to FRU status	as on date (31-03-2015)	2028
5	Upgradation of DHs	Number of DH & equivalent which have been upgraded to FRU status	as on date (31-03-2015)	644

Annexure-II

(As on 31.03.2015)

S.N	Parameters			Status
1	ASHA	Total Number of ASHA in position as on 31-03-2016	High Focus states	604606
			Other Than High Focus states	338180
		Total Number of ASHA selected and trained upto IV module	High Focus states	492878
			Other Than High Focus states	293493
		Number of VHSNCs	Constituted	510416
2	Upgradation of Sub Centres	Number of SCs	Available (RHS 2015)	153655
		Sub Centres which are functional	with two ANMs	53786
3	Upgradation of PHCs	Number of PHCs	Available (RHS 2015)	25308
		PHCs and equivalent where three staff nurses have been positioned		6525
4	Upgradation of CHCs	Number of CHCs	Available (RHS 2015)	5396
		Number of CHCs/SDH & equivalent which have been upgraded to FRU status	as on date (31-03-2016)	2054
5	Upgradation of DHs	Number of DH & equivalent which have been upgraded to FRU status	as on date (31-03-2016)	658

Annexure-II

(As on 31.03.2015)

S.N	Parameters			Status
1	ASHA	Total Number of ASHA in position as on 31-03-2017	High Focus states	633006
			Other Than High Focus states	323107
		Total Number of ASHA selected and trained upto IV module	High Focus states	493729
			Other Than High Focus states	293316
		Number of VHSNCs	Constituted	522290
2	Upgradation of Sub Centres	Number of SCs	Available (RHS 2016)	155069
		Sub Centres which are functional	with two ANMs	53113
3	Upgradation of PHCs	Number of PHCs	Available (RHS 2016)	25354
		PHCs and equivalent where three staff nurses have been positioned		6516
4	Upgradation of CHCs	Number of CHCs	Available (RHS 2016)	5510
		Number of CHCs/SDH & equivalent which have been upgraded to FRU status	as on date (31-03-2017)	2082
5	Upgradation of DHs	Number of DH & equivalent which have been upgraded to FRU status	as on date (31-03-2017)	666

Annexure-II

(As on 31.03.2015)

Sl. No.	Parameters			Status
1	ASHA	Total Number of ASHA in position as on 30-09-2017	High Focus States	641351
			Other Than High Focus States	323586
		Total Number of ASHA selected and trained upto IV module	High Focus States	535033
			Other Than High Focus States	284316
		Number of VHSNCs	Constituted	533082
2	Upgradation of Sub Centres	Number of SCs	Available (RHS 2017)	156231
		Sub Centres which are functional	With two ANMs	52891
3	Upgradation of PHCs	Number of PHCs	Available (RHS 2017)	25650
		PHCs and equivalent where three staff nurses have been positioned		6416
4	Upgradation of CHCs	Number of CHCs	Available (RHS 2017)	5624
		Number of CHCs/SDH & equivalent which have been upgraded to FRU status		As on date (30-09-2017) 2245
5	Upgradation of DHs	Number of DH & equivalent which have been upgraded to FRU status		As on date (30-09-2017) 704

Annexure III

1. The Rashtriya Varishth Jan Swasthya Yojana (RVJSY) is proposed to be continued with its existing activities of supporting establishment of 2 National Centres of Ageing, 20 Regional Geriatric Centres and continuation of Longitudinal Ageing Study in India at a cost of Rs. 330.00 crores over the period 2017-2020.
2. The proposal for National Programme for Prevention & Management of Trauma and Burn Injuries (NPPMTBI) envisages support mainly for continuation of support to the Institutes supported during the previous Plan periods for establishment of Trauma Care Facilities (116 during 11th FYP, 81 during 12th FYP and 4 during the current financial year) along with establishment of new Trauma Care Facilities in 30 Government Hospitals/ Medical Colleges & new Burn Units in 15 Medical Colleges along with establishment of Regional Apex Trauma Centres with a provision of heli-ambulance, incentivizing functional trauma care facilities, develop National Trauma Systems Plan, make provisions for incentives to bystander first responders, research & training activities.
3. The proposal for National Mental Health Programme (NMHP) broadly aims at establishing 6 new Centres of Excellence, 16 new Post Graduate departments and 9 De-addiction centres in addition to the continuation of support to the Institutes supported in the past besides support to the Central and State Mental Health Authorities and IEC activities.
4. The proposal for the National Programme for Control of Blindness and Visual Impairment (NPCBVI) consists primarily of continued support for its existing components of strengthening/ setting up of the 24 Regional Institutes of Ophthalmology (19 existing and 5 proposed) and 33 Government Medical Colleges in a phased manner so that they can be upgraded as Centres of Excellence in the regions. The proposal also envisages intensification of IEC activities, capacity building of manpower, new Management Information System and surveys.
5. The proposal under National Programme for Tobacco Control and Drug Addiction Treatment (NPTCDAT) aims at continuation of existing activities for Tobacco Control including enforcement of tobacco control laws and tobacco surveillance in addition to supporting the Global Knowledge Hub on Smokeless Tobacco, enhancing the capacity of National Tobacco Testing Laboratories etc. It is also proposed to provide support to the three existing and three additional Central Government Institutes to run tertiary level drug dependence treatment centres. Support is also proposed for implementation of the Scheme for providing Out-patient treatment for Drug De-addiction as the “Drug Treatment Clinic (DTC) in 20 Government hospitals.
6. The present proposal under National Program for Prevention and control of Cancer, Diabetes, CVDs and Stroke (NPPCDS) aims at providing continued support to the 12 State Cancer Institute (SCIs) and 13 Tertiary Care Cancer Centres (TCCCs) supported in the previous plan periods across the country in addition to providing support to Institutions/Medical Colleges for establishment of 8 SCIs and 37 TCCCs during the period 2017-2020.

7. The outlay proposed for the major activities in the present note is as under:

(Rs. in crore)

Component	2017-18	2018-19	2019-20	Total
Rashtriya Varishth Jan Swasthya Yojana	86.56	108.2	135.24	330
National Programme for Prevention & Management of Trauma and Burn Injuries	183.61	229.51	286.88	700
National Mental Health Programme	70.81	88.51	110.68	270
National Programme for Control of Blindness and Visual Impairment	68	86	106	260
National Programme for Tobacco Control and Drug Addiction Treatment	65.57	81.97	102.46	250
National Programme for Prevention and control of Cancer, Diabetes, CVDs and Stroke	472.13	590.16	737.71	1800

Deliverables for IDSP	
2018-19	2019-20
77% completeness of 'Syndromic (S)' form in all States and at National Level.	80% completeness of 'Syndromic (S)' form in all States and at National Level.
87% completeness of 'Presumptive (P)' form in all States and at National Level.	90% completeness of 'Presumptive (P)' form in all States and at National Level.
Number of District Public Health Labs (DPHLs) strengthened for diagnosis/testing of epidemic prone diseases -235	Number of District Public Health Labs (DPHLs) strengthened for diagnosis/testing of epidemic prone diseases -300
Deliverables for Programme Anti-Microbial Resistance Containment 2018-19 & 2019-20	
<p>The target fixed in this regard for the next two years are:</p> <ol style="list-style-type: none"> 1. AMR Surveillance: Include additional 5 labs each year in the network over next 2 years. 2. Strengthening Quality assurance in AMR surveillance labs 3. Finalize the detailed Hospital infection prevention and control guidelines and coordinate implementation of these guidelines. 4. Coordinate antibiotic usage studies and implement antimicrobial stewardship activities in health care facilities in the country <p>Operationalize the strategic national action plan on AMR containment which has already been developed</p>	
Deliverables for National Programme for Viral Hepatitis 2018-19 & 2019-20	
<p>The target fixed in this regard for the next two years are:</p> <ol style="list-style-type: none"> 1. Number of regional labs doing enhanced case reporting for hepatitis to be increased to 15. 2. Number of districts reporting on acute hepatitis surveillance to be increased to 40 3. Population based survey to be undertaken for surveillance of chronic hepatitis. 4. Number of tertiary care hospitals undertaking sequel surveillance for chronic hepatitis to be increased to 6. 	
Deliverables for National Rabies Control Programme 2018-19 & 2019-20	
The Human Health and Animal Health components of the programme will be implemented.	
Deliverables for Strengthening of Inter sectoral Coordination for Prevention and Control of Zoonotic Diseases 2018-19 & 2019-20	
Deliverable's 2018-19:	
<ol style="list-style-type: none"> 1. Three Joint orientation workshop (State level) for medical and veterinary professional 2. Preparation of IEC material and IEC campaign's for 2 priority zoonotic diseases. 3. Lab. Strengthening for diagnosis for zoonotic diseases(2 labs) 	
Deliverable's 2019- 20:	
<ol style="list-style-type: none"> 1. Three Joint orientation workshop (State level) for medical and veterinary professional 2. Preparation of IEC material and IEC campaign's for 2 priority zoonotic diseases 3. Lab. Strengthening for diagnosis for zoonotic diseases(2 labs) 	