

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

**LOK SABHA
UNSTARRED QUESTION NO. 4039
TO BE ANSWERED ON 10TH AUGUST, 2018**

ELIMINATION OF TUBERCULOSIS

**4039. SHRI KALIKESH N. SINGH DEO:
SHRI ANIL SHIROLE:
SHRI GEORGE BAKER:**

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

- (a) the number of Tuberculosis Centres operational across the country, State/UT-wise including West Bengal;
- (b) the status of review Committees established by the States following a letter from the Prime Minister in December 2017 to monitor tuberculosis elimination;
- (c) the details of plans to ensure delivery of cash incentives of Rs. 500 per month to the remaining 92.5 per cent of notified tuberculosis patients who haven't yet received the same;
- (d) whether the Government plans to include districts such as Bolangir in Odisha in the public-private Joint Effort for the Elimination of Tuberculosis (JEET) programmes, if so, the details thereof along with the reasons/criteria for not selecting districts;
- (e) the Government's plan to ensure drug availability, geographic accessibility, human resource availability, time-bound responses and supply-chain management under the JEET programme; and
- (f) the Government's plans to ensure standardized care for the remaining non-JEET districts of the country?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI ASHWINI KUMAR CHOUBEY)**

- (a): The details of the number of Tuberculosis Centres operational across the country, State / UT-wise including West Bengal are enclosed at Annexure.
- (b): After the Prime Minister's letter to Chief Minister on TB, several State/UTs have intensified monitoring and review of the progress on tuberculosis elimination. The review aims at tracking progress on key priority and new initiatives undertaken by Revised National Tuberculosis Control Programme (RNTCP) like daily regimen, universal drug susceptibility testing, active TB case finding in vulnerable groups and cross reference between HIV and TB control services.

State/UTs are conducting review of the programme under the Chairmanship of Health Minister or Secretary Health at the State level. Similarly, the programme is reviewed by the District Collector / Magistrate at the district level. The State level reviews are conducted quarterly, and the District level reviews are conducted monthly.

The Central Government is also regularly monitoring the State Governments on implementation of the Revised National Tuberculosis Control Programme (RNTCP).

(c): Nikshay Poshan Yojana (NPY) for providing financial incentive of Rs 500/- per month for nutritional support is being delivered since 1st April, 2018 through a DBT mechanism by linking of NIKSHAY portal with Public Financial Management System (PFMS). The scheme has been onboard in DBT portal.

Guidelines have been developed and issued to all States/UTs. Through NIKSHAY a beneficiary wise list is generated and the same is duly submitted to PFMS after validation by the competent authorities at the district level. For demand generation, the districts are popularising the scheme using local measures. The private sector is being sensitized through district level branches of professional bodies like the Indian Medical Association (IMA) and Indian Association of Paediatrics (IAP)

- Directives have been issued to all State/UTs to expedite implementation of the scheme and regular review and monitoring of the State/UTs is being undertaken by the Central Government.

(d): Reaching to TB patients in private sector has been one of the key priorities in the National Strategic Plan (2017-25) for elimination of TB in India. To this effect, JEET project aims to set-up structures to strengthen existing systems to extend quality of TB care to TB patients seeking care in private sector. To have maximum impact within the resources available, the project activities are planned for a limited duration (Jan 2018 to March 2021) and in selected 33 cities & 358 districts of the country where at the time of selection, higher number of private sector notifications were reported to the RNTCP through NIKSHAY.

In the remaining districts, wherein there is a significant presence of private sector, including Bolangir district, the above project provides for technical support through Public Private Mix Coordinators specifically to support private sector engagement.

(e): Adequate drugs have been procured by the programme to account for all patients including private sector patients in the country. For any patient in public or private sector including those under JEET project once diagnosed/notified are eligible to avail programme drugs. The supply chain management for programme is being extended through a software i.e. Nikshay Aushadhi to supply drugs to the private doctors/chemists for storage and distribution.

(f): Standardized care in private sector is one key element of private sector engagement strategy. First step is to obtain notifications from private sector. Private doctors in all districts are continually being approached for notifying TB cases. Once adequate data on private doctors treating TB patients is obtained then these are the ones being targeted with IEC, CMEs, workshops and notifications to adhere to the Standards of TB Care in India (STCI). Following STCI improves diagnostic and treatment practices of private sector including treatment adherence support, follow up, Contact Tracing, Chemoprophylaxis & social support systems to their patients.

Complete follow up helps to track treatment outcomes of different patients treated by practitioners.

Also a Memorandum of Understanding (MOU) has been signed with Indian Medical Association (IMA) for nationwide sensitization of the private practitioners on standard TB care and RNTCP. The national level workshop for State level coordinators of IMA was recently held in Mumbai. About 1000 Continuing Medical Education programmes are planned, which would sensitize 50000 private providers and 10000 additional providers are estimated to be registered in Nikshay, following this activity.

Also, under programme strict enforcement of provisions of Schedule H1 in coordination with State/District Drug Controllers is being initiated. The details of patient and doctor prescribing Anti TB drugs are being recorded and registered in Nikshay portal. This surveillance data is used as intelligence to understand treatment practices and accordingly identify those needing further training/guidance. Public Health Actions as appropriate are being provided to all patients seeking care in private sector.

S. No	State	Number of PHIs*	No. of PHIs which also have Designated Microscopy Centres (DMCs) *
1.	Andaman & Nicobar	34	17
2.	Andhra Pradesh	1723	630
3.	Arunachal Pradesh	179	32
4.	Assam	1315	373
5.	Bihar	868	726
6.	Chandigarh	41	18
7.	Chhattisgarh	1043	840
8.	Dadra & Nagar Haveli	13	9
9.	Daman & Diu	8	4
10.	Delhi	284	192
11.	Goa	41	21
12.	Gujarat	2384	1327
13.	Haryana	673	277
14.	Himachal Pradesh	710	202
15.	Jammu & Kashmir	537	199
16.	Jharkhand	421	328
17.	Karnataka	3150	715
18.	Kerala	1414	554
19.	Lakshadweep	10	9
20.	Madhya Pradesh	1639	891
21.	Maharashtra	3209	1472
22.	Manipur	118	55
23.	Meghalaya	224	82
24.	Mizoram	120	60
25.	Nagaland	151	43
26.	Odisha	1719	572
27.	Puducherry	64	30
28.	Punjab	2028	276
29.	Rajasthan	3098	2202
30.	Sikkim	43	37
31.	Tamil Nadu	2515	823
32.	Telangana	915	398
33.	Tripura	125	54
34.	Uttar Pradesh	3841	1963
35.	Uttarakhand	471	153
36.	West Bengal	1890	952
TOTAL		37018	16536