

**HEALTH, MEDICAL EDUCATION & FAMILY WELFARE
ANNUAL PLAN – 2010 - 2011**

INTRODUCTION

The Government of Jharkhand is committed to providing quality health care services to all sections of society; particularly to those who are living in remote and difficult area. As per the Population Policy, the State is fully committed to achieve replacement level fertility and thereafter population stabilization by promoting informed choice, widening the contraceptive choices available, empowering communities and women involving all stakeholders from the Private, Public, NGO, Organized and Co-operative sectors and encouraging use of modern contraceptive particularly spacing methods. The ultimate goal is to deliver the health care facility to the last village, the last household and the last person in the State. Apart from this, National Rural Health Mission's objectives are to be achieved. The objective of the Eleventh Plan 2007-2012 lies in the objective of NRHM. As such, the main thrust is given to the strengthening of Primary Health Care units. These are proposed to be strengthened and upgraded as per Indian Public Health Standard (IPHS) norms in order to make them viable to deliver the maximum benefit to the rural area.

Health Indicator

The comparative health indicators in 2001 and at present stand as below:-

| Sl. No. | Health Indicators | Status on 2001 | Present status |
|---------|--|----------------|--------------------------------------|
| 1 | Decadal Growth of Population | 26.3 | 23.1 |
| 2 | Infant Mortality Rate | 72 | 46/1000 live birth (SRS-09) |
| 3 | Maternal Mortality Rate | 540 | 312/100000 live birth (SRS-April 09) |
| 4 | Safe Delivery (%) | - | 28.7 |
| 5 | Institutional Delivery (%) | - | 19 |
| 6 | Crude Birth Rate | - | 25.8 (SRS-09) |
| 7 | Crude Death Rate | - | 7.9 |
| 8 | Total Fertility Rate (%) | - | 3.31 |
| 9 | Couple Protection Rate | - | 36 |
| 10 | Complete ANC Check up | - | 38 |
| 11 | Full Immunization | - | 51.90% |
| 12 | Rate of Blindness | 1.49% | 1.40% |
| 13 | Leprosy Prevalence Rate (in 10000) Source: SLO, Jharkhand | 1.36 | 1.22 |
| 14 | T.B. | | |
| | (i) A. Case Detection Rate | 54 per 100000 | 133 (out of 142/per |

| | | | |
|----|--|---------------|-------------------------------------|
| | | | lakh/per qrt.) |
| | (ii) Case Detection Rate New Sputum Smear Positive T.B. Case | 18 per 100000 | 58 (out of 52/per lakh/per qrt.) |
| | Source: State RNTCP Office Jharkhand, Ranchi Report Upto Sept. 2009 | | |
| 15 | Malaria | | |
| | Slide Falciparum Rate [SFR] | 7.31 | 2.58 |
| | Slide Positivity Ratio [SPR] | 15.42 | 6.94 |
| | Plasmodium Falciparum [pf]% | 47.41% | 37.10% |
| | Source: State Malaria Office Jharkhand, Ranchi Report Upto Nov. 2009 | | |

Source: DLHS RCH-3 & UNICEF

2. STATE SHARE TO CSS

National Rural Health Mission [85:15]

The basic objective of the NRHM is to provide accessible, affordable and accountable health care in rural areas. Its primary focus is on making the public health system fully functional as per Indian Public Health Standards (IPHS) at all levels.

3. STATE PLAN SCHEMES

Continuing Scheme

Primary Health Care

3.1 Health Sub-Centres

As per the norms, there should be 7088 Health Sub Centers. At present there are 3958 Sub-centers functioning in the state. Out of these 1732 are functioning in the government buildings, 1956 in the rented buildings and 270 in the rent-free buildings. However, most of these sub-centers are in dilapidated condition and do not have the residences for ANMs. So far 408 Health Sub-Centre buildings have been sanctioned and are in various stages of construction.

3.2 Primary Health Centres

As against the requirement of 1126 PHCs, there are 330 Additional PHCs in the State, which are to be converted into PHCs. However, these 330 APHCs do not have the requisite building infrastructure. So far 172 PHC buildings have been sanctioned and are in various stages of construction. There is also a need to construct a labour room in each PHC. Apart from this, Dispensaries at the Secretariat, High Court and Rajbhawan Secretariat do not have their own building.

3.3 Community Health Centres

The CHCs are to be made functional at every blockhead quarter. There are 235 block headquarters in the State. However, the block headquarters where District Hospitals or Sub-divisional Hospitals or Referral Hospitals are located need not be provided with a CHC. Thus now CHCs are to be created only in 168 blockhead quarters. So far 149 CHC buildings have been sanctioned and are in various stages of construction.

3.4 Renovation and Repair of Referral Hospitals

The 32 Referral Hospitals also need to be upgraded /renovated to provide the services being offered by CHCs.

Secondary Health Care

3.5 Upgradation of 500 bedded Sadar Hospital at Ranchi

A five hundred bedded hospital building is being constructed in the premises of Sadar Hospital, Ranchi at an estimated cost of Rs. 13117.00 Lakhs. Work is in progress. It is proposed to continue this scheme during FY. 2010-11.

3.6 Construction of Sadar Hospital buildings at District Headquarters

Construction of 100 bedded expandable to 300 bedded hospital building at an estimated cost of Rs. 600.00 lakh each is in progress at Dumka, Godda, Pakur, Jamtara, Deoghar, Dhanbad, Bokaro, Chatra, Koderma, Simdega, Garhwa, Jamshedpur, Ramgarh and Khunti. These buildings will be completed in 2010-11. Besides this, 100 bed Sadar Hospital Buildings already completed at Giridih, Hazaribagh, Palamu, Latehar, Saraikela-Kharsawan, Sahebganj, Chaibasa, Lohardaga and Gumla will be upgraded to 200 beds.

3.7 Building Construction of Sub-divisional Hospital

Construction of 50 bed sub divisional hospital buildings is going on at Barhi (Hazaribagh), Bermo (Bokaro), Bundu (Ranchi), Husainabad and Chotanagpur (Palamu), Nagaruntari (Garhwa), Madhupur (Deoghar), Rajmahal (Sahebganj), Ghatshila (East Singhbhum), Chakardharpur (West Singhbhum), Chandil (Saraikela) at an estimated cost of Rs. 407.00 lakh each.

3.8 Construction of Regional Diagnostic Center at 4 Divisional Headquarters

Construction of 100 bed (Expandable to 300 beds) Regional Hospital buildings with ICCU and Diagnostic Centre at Hazaribagh, Dumka, Daltonganj and Chaibasa is going on.

3.9 Construction of Civil Surgeon' Office and residential accommodation in Sadar and Sub-divisional Hospital

Provision of admissible residential accommodation for Doctors and Paramedical staff in the Hospital premises is essential to ensure that they stay at the place of their posting so that health services to the people can be made available to the people even in emergent situation.

Medical Education & Research

3.10 Grant-in-aid to RIMS for development

Rajendra Institute of Medical Sciences (RIMS), an autonomous organization having the teaching capacity of 90 students in MBBS along with PG teaching in some disciplines has an indoor Hospital of 991 Beds. This premiere institute needs to be upgraded to meet the stringent MCI norms. There is an urgent need to increase the intake capacity of MBBS course. Plus some super specialty units also need to be set up.

3.11 Development of Patliputra Medical College and attached Hospital, Dhanbad

Patliputra Medical College and Hospital, Dhanbad has an intake of 50 MBBS students with an attached 500 bed hospital. This institute needs to be upgraded to meet the stringent MCI norms. There is an urgent need to increase the intake capacity of MBBS course. Medical care facilities need to be upgraded in terms of bed capacity teaching aide, equipments etc. Tele-medicine facilities also need to be developed.

3.12 Development of MGM Medical College & attached Hospital, Jamshedpur

Mahatma Gandhi Medical College and Hospital, Jamshedpur has an intake of 50 MBBS students with an attached 500 bed hospital. This institute needs to be upgraded to meet the stringent MCI norms. There is an urgent need to increase the intake capacity of MBBS course. Medical care facilities need to be upgraded in terms of bed capacity, teaching aides, equipments etc. Tele-medicine facilities also need to be developed.

3.13 Grant-in-aid to RINPAS

RINPAS is the lone mental care institute in the State having the teaching facility of diploma in Psychiatry. The running and upkeep of this institute is being regularly monitored by the National Human Rights Commission.

3.14 Establishment of Para-Medical Institutes

Presently, there is only one Diploma Pharmacy Institute in the State. The State therefore does not have ample facilities of Para Medical Course in Government Sector. Para Medical Staff are an integral part of medical care. With a view to create opportunities for the aspiring candidates and to cater to the requirement of trained Para Medical staff, it is proposed to open Para Medical Courses at RIMS and other two Medical Colleges.

3.15 Grant in Aid to Medical College/Institute in Private Sector

The State Government has formulated a policy to encourage participation of private sector in the field of setting up of new medical colleges.

3.16 Establishment of new Medical College at Dumka, Chaibasa and Palamu

Presently there are three government medical colleges in the State. These produce only 190 Medical officers every year. Keeping in view this insufficiency and the

increasing need of doctors, it is proposed to establish three new Government Medical Colleges at Dumka, Chaibasa and Palamu.

3.17 Training including establishment of ANM Schools in 6 Districts

Training is an integral part of Health Care delivery system. NRHM seeks the convergence of all Health Programmes. Hence training modules are to be carried out in a regular scientific & systematized manner. Besides this, Para Medicals such as Nurses (Grade A) receive their stipend under this Head. There are only 10 ANM Schools in the State. Six new ANM Schools are proposed to be taken up in 6 Districts.

3.18 AYUSH

- The Jharkhand Government has sanctioned one Medical College in each stream of AYUSH i.e. Ayurvedic Medical College at Chaibasa, Ayurvedic Pharmacy College at Sahebganj and Gumla, Homeopathy Medical College at Godda and Unani Medical College at Giridih.
- The State Drug Testing Laboratory (DTL)/State
- Enforcement Mechanism for State Licensing Authority also need to be strengthened.
- The State Council of Registration (AYUSH) also needs to be strengthened to cope up with the new thrust that AYUSH is getting.
- There is a proposal to open up new Yoga, Siddha and Panchkarma Centers.

Control of Diseases

3.19 Communicable diseases

Establishment cost of some of the TB units is borne under this head. These are ongoing establishments. There is also a need to strengthen the Infectious Diseases Hospital at Ranchi.

3.20 Non-Communicable Diseases

Establishment cost of Malaria and Leprosy Control Programme of Tribal Sub Plan area is borne under this head. These establishments are likely to continue for implementation and supervision of these programmes during the FY. 2010-11.

3.21 Purchase of Machine, equipments and Furniture's for different hospitals

For the procurement of Medicines, equipment and other necessary gadgets which are essential to provide quality medical care at the level from Health Sub Center to Sadar Hospitals.

OTHER PROGRAMMES

3.22 Medical Assistance to BPL Patients

This is an ongoing scheme under which a maximum financial assistance of Rs 1.50 lac is provided to those patients who are below poverty line and find it difficult to afford expensive treatment for diseases like cancer, heart ailments and kidney transplant etc.

3.23 Assistance to State Institute of Public Health

(A) The State Institute of Public Health would conduct Training Programmes for all Medical Professionals of Public and Private Sector. The necessary infrastructure is to be created by the State Government. However, the recurring cost of the Institute will be borne out of the training fee received from the trainees. It is proposed to continue this scheme during 2010-11.

(B) It is also proposed for construction of Hostel building in the State Institute of Public Health

3.24 Establishment of Trauma Centres and Mobile Health Clinics or Health Units (on National Highways)

Establishment of Trauma Centers on National Highways is essential to provide immediate and emergent medical care to accident victims. As such adequate infrastructure is to be built up in-terms of space, OTS, personnel's and all necessary gadgets. Similarly mobile health clinics can deliver the preventive & curative treatment in rural areas. These are supplementary schemes proposed to be continued in XI th Plan period.

3.25 Soft Loan to Super Speciality Hospital in Private Sectors

The Government of Jharkhand has notified an incentive Health Policy to provide for the establishment of Super Speciality Hospital in Private Sectors.

3.26 Tobacco Control Programme

In order to implement the provisions of the Act promulgated to ban smoking at public places.

New Schemes

3.27 Mobile Medical Units (MMU) at CHC level

The Community Health Centers are supposed to deliver the specialized indoor treatment facilities in the rural areas. But people from remote and far off areas cannot reach these CHCs due to poor connectivity. As a result it becomes even the more essential to reach out to their door step. This can be achieved to some extent by making the facility of Mobile Medical Unit available at each CHC. It is therefore proposed to provide one MMU at every CHC. NRHM fund from Government of India would be used as additionally for this scheme as per the PIP.

4. TRIBAL SUB PLAN

A sum of **Rs. 18265.00** lakhs has been earmarked for Tribal Sub Plan out of total proposed outlay of **Rs. 38500.00** lakhs during Annual Plan 2010-11.

5. SPECIAL COMPONENT SUB PLAN

A sum of **Rs. 3886.00** lakhs has been earmarked for Special Component Sub Plan out of total proposed outlay of **Rs. 38500.00** lakhs during Annual Plan 2010-11.

6. **OUTLAY PROPOSED FOR VARIOUS SCHEMES (Health & Family Welfare)**

| Sl. No. | Type of Scheme | Annual Plan 2010-11 | | | |
|-----------|--|---------------------|-------------|--------------|-------------|
| | | (Rs. in lakh) | | | |
| | | Proposed Outlay | Flow to TSP | Flow to SCSP | Flow to OSP |
| A. | State Share to CSS | | | | |
| | Medical and Public Health | | | | |
| | (Primary Health Centre) | | | | |
| 1 | State Share to NRHM [85 : 15] | 6000.00 | 0.00 | 0.00 | 6000.00 |
| B. | State Plan Schemes | | | | |
| | Continuing Scheme | | | | |
| | Medical and Public Health | | | | |
| | I Primary Health Care | | | | |
| 1 | Establishment of New Health Sub Centres | 2800.00 | 1300.00 | 500.00 | 1000.00 |
| 2 | Establishment of Primary Health Centres /Labour Room | 2700.00 | 1400.00 | 300.00 | 1000.00 |
| 3 | Establishment of Community Health Centres | 4500.00 | 2000.00 | 1000.00 | 1500.00 |
| 4 | Renovation and Repair of Referral Hospitals | 50.00 | 25.00 | 5.00 | 20.00 |
| | II Secondary Health Care | | | | |
| 5 | Up-gradation of Ranchi Sadar Hospital into 500 Bed Hospital | 4000.00 | 4000.00 | 0.00 | 0.00 |
| 6 | Building construction of Sadar Hospitals | 1000.00 | 500.00 | 200.00 | 300.00 |
| 7 | Building construction of Sub-divisional Hospitals | 1500.00 | 750.00 | 250.00 | 500.00 |
| 8 | Upgraded in to 300 bedded from 100 bedded of Regional Hospital (with ICCU and Diagnostic Center)-Hazaribagh, Dumka, Daltonganj, Chaibasa | 800.00 | 400.00 | 0.00 | 400.00 |
| 9 | Construction of Civil Surgeon Office with Residential building at Sadar and Sub-divisional level (B, C and D type) | 2000.00 | 1000.00 | 400.00 | 600.00 |
| | Medical Education and Research | | | | |
| 10 | Grant-in-aid to Rajendra Institute of Medical Sciences for Development | 1500.00 | 1500.00 | 0.00 | 0.00 |
| 11 | Development of Patliputra Medical Collage and Hospital | 1000.00 | 0.00 | 0.00 | 1000.00 |
| 12 | Development of MGM Medical | 1000.00 | 1000.00 | 0.00 | 0.00 |

| | | | | | |
|----|---|---------|---------|--------|---------|
| 13 | College and Hospital RINPAS, Grant-in-aid | 500.00 | 500.00 | 0.00 | 0.00 |
| 14 | Establishment and Development of Para Medical Institutes | 60.00 | 60.00 | 0.00 | 0.00 |
| 15 | Grant-in-aid to Medical Colleges/Institute (With Pharmacy) in Private Sector | 40.00 | 0.00 | 0.00 | 40.00 |
| 16 | New Medical College at Santhal Paragana, Chaibasa and Palamau | 150.00 | 100.00 | 50.00 | 0.00 |
| 17 | Training including Establishment of ANM Schools in 6 district AYUSH | 600.00 | 250.00 | 12.00 | 338.00 |
| 18 | Development of Medical Colleges of AYUSH (Establishment Expenses/ construction of Medical College buildings) | 300.00 | 150.00 | 0.00 | 150.00 |
| 19 | State Drug Testing Laboratory (DTL) | 24.00 | 24.00 | 0.00 | 0.00 |
| 20 | State Enforcement Mechanism for State Licensing Authority | 9.00 | 9.00 | 0.00 | 0.00 |
| 21 | State Council of Registration (AYUSH) | 45.00 | 45.00 | 0.00 | 0.00 |
| 22 | Opening of Yoga, Siddha & Panchkarma Centers Control of Diseases | 28.00 | 14.00 | 0.00 | 14.00 |
| 23 | Communicable Diseases (T.B.) Establishment cost and Development of Infection Disease Hospital at Ranchi | 150.00 | 150.00 | 0.00 | 0.00 |
| 24 | Non Communicable Diseases (Malaria/ Leprosy) | 1500.00 | 1388.00 | 0.00 | 112.00 |
| 25 | Purchase of Machine equipments and Furniture's for Different Hospitals Other Programme | 3069.00 | 1500.00 | 569.00 | 1000.00 |
| 26 | Medical Assistance to BPL People | 2000.00 | 0.00 | 500.00 | 1500.00 |
| 27 | Assistance to Institute of Public Health | 50.00 | 0.00 | 0.00 | 50.00 |
| 28 | Construction of Hostel Building in Institute of Public Health | 50.00 | 0.00 | 0.00 | 50.00 |
| 29 | Establishment of Trauma Centers and Mobile Health Clinic (on National Highway) | 400.00 | 0.00 | 0.00 | 400.00 |
| 30 | Assistance to Super Specialty Hospitals in Private Sector | 150.00 | 0.00 | 0.00 | 150.00 |

| | | | | | |
|--------------------|---|-----------------|-----------------|----------------|-----------------|
| 31 | Tobacco Control Programme New Schemes | 25.00 | 0.00 | 0.00 | 25.00 |
| 32 | Establishment of Mobile Medical Units in all Community Health Centres | 500.00 | 200.00 | 100.00 | 200.00 |
| Grand Total | | 38500.00 | 18265.00 | 3886.00 | 16349.00 |

SUMMARY (Health & Family Welfare)

| Sl. No. | Type of Scheme | Annual Plan 2010-11 (Rs. in lakh) | | | |
|--------------------|-------------------------------------|--------------------------------------|-----------------|----------------|-----------------|
| | | Proposed Outlay | Flow to TSP | Flow to SCSP | Flow to OSP |
| A. | Earmarked | -- | -- | -- | -- |
| B. | State Share (CSS/CS) | 6000.00 | 0.00 | 0.00 | 6000.00 |
| C. | State Plan Schemes | | | | |
| | i. Continuing Schemes | 32000.00 | 18065.00 | 3786.00 | 10149.00 |
| | ii. New Schemes | 500.00 | 200.00 | 100.00 | 200.00 |
| D. | EAP (if any) | -- | -- | -- | -- |
| E. | Other (13 th Fin. Comm.) | -- | -- | -- | -- |
| Grand Total | | 38500.00 | 18265.00 | 3886.00 | 16349.00 |