

Schemes of Government of Rajasthan in Health

State Institute of Health & Family Welfare,

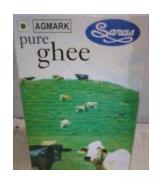
Jaipur





Kalewa Yojana

- Funded by NRHM
- Implemented by DWCD
- Free warm and nutritious food
- At CHC level
- For 2 days to women who had delivered at CHC
- Food cooked by Self help groups
- Proposed to be extended to PHC level





Deshi Ghee Scheme

- 100% State Govt. sponsored scheme
- Implemented in all the districts from 01.03.2009
- 5 liter Desi Ghee
- Applicable
 - First delivery at govt. institution
- Includes
 - > BPL
 - Identified families of Sahriya and Kathodi tribes under State BPL Antyodaya Anna Yojana



Benefits

- Promoting ID
- Fulfill energy requirements of lactating mothers
- Fulfill Vitamin A requirements of newborn through mother
- Major provisions
 - Coupon of ghee (indicating dairy booth number) given at the time of discharge along with JSY cheque
 - 24 hours stay at HF must after delivery

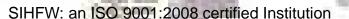


- Essential to produce
 - BPL card, ANC card verified by doctor (urban)/ ANM (rural) for first delivery
- 5 liter Saras Desi Ghee provided within 1 month
- Different packing with 'Janani Swasthya Protsahan Yojana' marked as a token of gift
- In absence of dairy booth provided through milk collection centers
- Reimbursement done to related dairy by Department of Health



Yashoda

- A paid performance linked voluntary support worker placed under NIPI at Health Facilities
- Support to nursing staff
- Intervention started in 3 NIPI Districts Aug 2008
- Up-scaled in all Districts in July 2009





- Objective
 - Provide special care and support to mother and newborn
- Provides counseling during antenatal and postnatal period
 - Care of mother and newborn
 - Immunization, breastfeeding and family welfare







- Effort of PCPNDT Cell to implement PCPNDT Act in the state
 - > assistance from UNFPA
- To curb falling sex ratio
- Focus on health related facilities and health care providers
- Brand Ambassador for Save the Girl Child Krishna Poonia



- Online complaint
 - www.hamaribeti.nic.in from 17.07.2010
 - Ease the procedure of registering a complaint
 - facility of keeping anonymity.
- Information about the complaint reach related districts and in turn facilitate quick action
- Details available on state as well as district for general information on complaints and its status.



PCPNDT Act: Mukhbir Yojana

- Information regarding sex selection
 - > Provision of reward of Rs. 50,000/-
- information about unregistered sonography machine
 - > Reward of Rs. 25,000/-



Mukhya Mantri Balika Sambal Yojana



Started - 1st April, 2007 to promote girl child and providing economic support to her.

Eligibility-

Any couple undergoing sterilization operation after one or two female child (no male child)

Objectives

- Govt.'s effort in contributing towards overall development and education of girl child
- Motivating parents to curb child marriage
- Restrain falling sex ratio and population growth



Nature of scheme

- ➤ Rs. 10,000/- bond under CCP scheme of UTI Mutual Fund for each girl child
- ➤ Bond matures at the age of 18 years
- Certificate regarding no male child and total number of children to be submitted

Age of girl child	Period of bond	Estimated amount after maturity
0 years	18 years	76990/-
1 year	17 years	68660/-
2 year	16 years	61304/-
3 year	15 years	54736/-
4 year	14 years	48871/-
5 year	13 years	43635/-



Pregnancy, Child Tracking & Health Services Management System

- Unique e-governance project implemented on Dec. 15, 2009
- Online software used as an effective planning & management tool by Medical, Health & Family Welfare department, Govt. of Rajasthan.
- Maintains online data of more than 13000 government health institutions in the state

Award in National E-governance Sector given to PCTS



- The System facilitates:
 - Online tracking of ANC, PNC and immunization
 - Promoting ID
 - Facilitating control of IMR and MMR
 - Identification of eligible couple
 - Monitoring regional and district-wise sex ratio
 - Better management of health institutions
 - Identification of drop outs
 - Monitoring of health services
 - Institution-wise, block-wise and JSY progress report



PCTS: Components

Health Facility details:

- Information of all health institutions-SC, PHC, CHC, DH etc.
- Name of ANM, MOIC, In-charge CHC, DH etc. with contact numbers & date of posting at institution.
- Area & population served by any institution.
- Village wise name and mobile numbers of ASHAs



Monthly Reporting of progress:

- > Form 6 to 9 from sub center to state.
- State and district monthly progress report
- Block-wise monitoring and evaluation progress report
- Evaluation Report card, progress report and monthly appraisal card generation for each health institution
- Generation of service indicators reports
- Graphical & tabular analysis of progress



Line listing:

- Registration of pregnant women by ANM or ASHA
- Online tracking of all pregnant women & children
- Tracking of all services
- Listing of left out & drop outs
- Due list of ANC, delivery & immunization
- ANM work plan



PCTS Plus

- Next phase of PCTS
- Tracking of all eligible couples besides others included in PCTS
- All PHCs to be provided with computer, internet
 & printer
- Entry of MCH tracking
 - Responsibility of-Accountant/HMIS Officer & ASHA supervisor



Outcomes:

- Decentralization of work load of block
- ➤ Timely reporting of data
- ➤ Up-dation of services at PHC level
- Quarterly workshop/trainings
- Monthly review meeting of districts at state level
 - Improving data & its quality



Swasthya Sandesh Sewa

- Also called SMS Alert Service
- Started on June 7, 2011
- Information given to ANM through SMS on her mobile
 - Regarding due services to the beneficiary





Dati Sumangla Scheme

- Launched: 10 Nov., 2010 in Pali
- Main features related to girl child
 - First child after two yrs of marriage –
 Kisan Vikas Patra of Rs. 2100/- for girl child
 Rs. 1000/- cash to Mother
 - ➤ After 3 yrs second girl child

 Kisan Vikas Patra of Rs. 5100/- for girl child

 —Rs. 1000/- cash to Mother



Swasthya Mitra Yojna

- Educating adolescents on health issues
- Middle and Secondary schools IEC material as charts, flip books, health education books etc.
- 2 selected children give health related messages after prayer
 - Provision of Rs. 50 each child
- Supportive activities slogan writing, rallies etc.

Janani Express

Launched: 2 Oct., 2012

Main features:



- >To promote the Janani Suraksha Yojana
- >To promote institutional deliveries
- ➤ To provide round-the-clock free transportation
- >To reducing the maternal mortality ratio



- Free transportation facility for pregnant women to health centers for delivery
- Available in emergencies in the pre & post-delivery periods
- Service at those PHCs where there are no ambulances
- > Toll free number-104- for Janani Express service





Family Planning Schemes

- Availability of
 - Permanent methods sterilization (male and female)
 - Temporary methods
 - * IUD
 - Oral pills
 - ❖ I-pills
 - Condoms
 - Availability ensured at health facilities and with AWW, JMC and ASHA



Janmangal Program

- Started in 1992 for population stabilization and decreasing IMR and MMR
- Community program
 - To promote use and meet the unmet need of spacing methods
- Objective
 - Making contraceptives available in rural areas
 - Supporting RCH services

SiHW

Benefits

- Appropriate gap between birth of two children
- Preventing early pregnancy
- Decreasing imbalance in sex ratio
- Promoting communication between couples regarding family planning
- Selection of Janmangal Couple
 - Selected by female health worker and finalized at PHC level
 - 200-2000 population 1 JMC
 - 2000 population plus 2 JMC
 - Rs. 200/- given to each JMC after meeting



Jyoti Scheme

- Launched on April 1, 2011
- Applicable for females with no male child & 1-2 female child & have undergone sterilization
- Give preference in health services, education and employment
- Objective
 - > Promote
 - Females as role model for small families
 - Girl child





- Eligibility: 22 32 years
- Benefits
 - > Felicitation at national and local functions
 - Help in education
 - Free health facilities in govt. hospitals
 - Participation in activities related to development in social sector
 - Learning visits in different states
 - Preference in selection as ASHA/AWW

Eligible females can apply to Dy. CM&HO (FW) with Bonafide, Sterilization certificate and photo ID



Parivar Kalyan Beema Yojana

- In case of death or any complication due to sterilization operation
 - Death in hospital or within 7 days of discharge Rs. 2,00,000/-
 - Payment of Rs. 50,000/- through RMRS immediately given later taken from insurance company
 - Death within 8 30 days Rs. 50,000/-



- ➤ Failure of operation Rs. 30,000/-
- Complications within 60 days of operation actual expenditure with upper limit of Rs. 25,000/-
- Indemnity insurance per doctor/ institute (not more than 4 in a year) Rs. 2,00,000/-



District Schemes - Sterilization

- Initiative Jhunjhunu and Pali
- Nano cars offered on lottery basis to people who get sterilized
 - ➤ Other include cash and mobiles
- Other schemes
 - > After birth of one girl child



Schemes for Institutes -Sterilization

- NGO & Private health facilities registered in motivational/ promotional scheme paid for
 - ➤ Male sterilization Rs. 1300/- per case
 - Female sterilization Rs. 1350/- per case
 - IUD insertion Rs. 75/- per case
 - No user charges from the case
 - No operation fee



- Benefit to motivator
 - For male sterilization 200/-
 - ➤ For female sterilization 150/-
- In case of death or complications payment given as per the insurance policy



Scheme for Institutes - Population Stabilization

- Population Policy of the state
- Yearly awards for efforts in population stabilization to
 - Registered NGOs/ private health facilities
 - Govt. health facilities institutes

Awards - State Level



S. No.	Detail of awards	Amount (in lakhs)
1	Best performing districts	
	First district	30.00
	Second district	20.00
	Third district	10.00
2	Best performing Panchayat Samitis	
**********	First Panchayat Samiti	10.00
	Second Panchayat Samiti	8.00
100	Third Panchayat Samiti	6.00
3	Best performing Gram Panchyat	30 PT 12-30 10 PT
***	First Gram Panchayat	5.00
	Second Gram Panchayat	3.00
	Third Gram Panchayat	2.00
4	Best performing govt. health facility	2.00



Awards - District Level

S. No.	Detail of awards	Amount (in lakhs)
1	Best performing Panchayat Samiti in each district	4.00
2	Best performing govt. health facility in each district	1.00
3	Best performing Gram Panchayat in each Panchayat Samiti	1.00



Awards - NGO/Pvt. HF

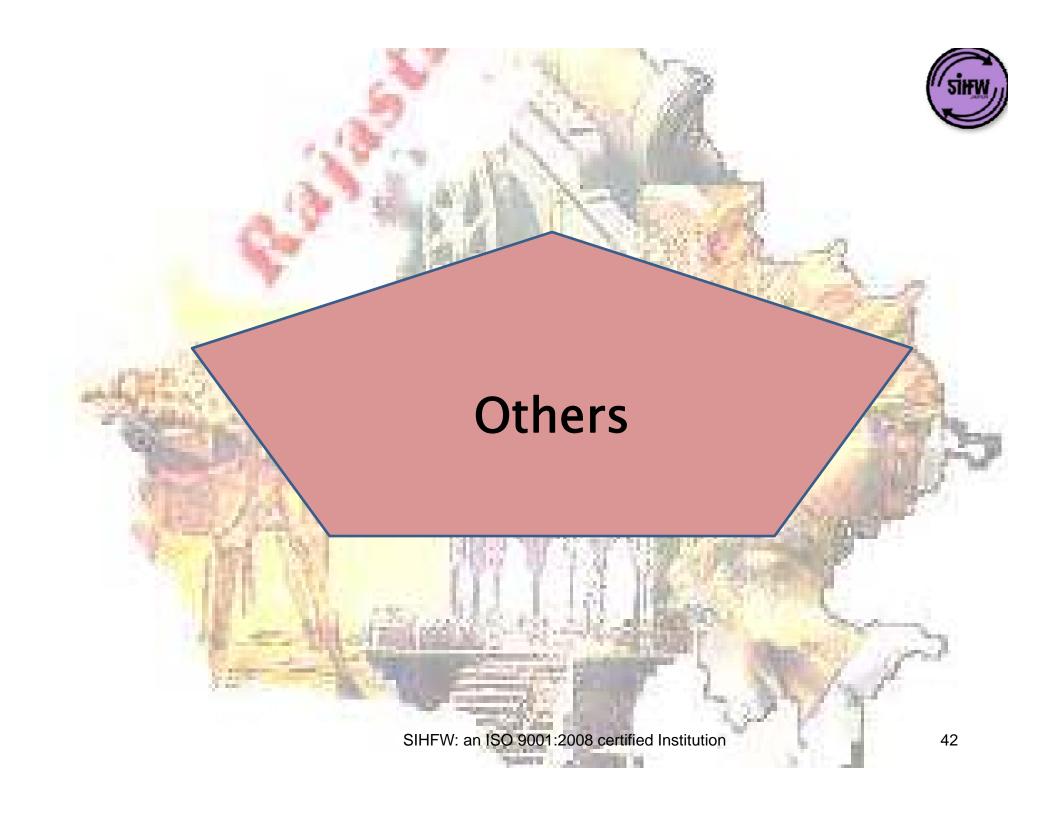
S. No.	Detail of awards	Amount (in lakhs)
1	Institute performing 1000 + sterilization cases and 100 IUD insertion	2.00
2	Institute performing 500-999 sterilization cases and 100 IUD insertion	1.00

Only those institutes are included who have 80% achievement in sterilization, IUD insertion, 3 ANC checkups, ID and Full immunization activities



JSK Santusti Yojna

- Provide private sector gynaecologists & vasectomy surgeons an opportunity to conduct operations in PPP mode under the scheme already announced by MOHFW, Government of India in September 2007.
- Allows the accredited facility to receive an advance of Rs.15,000/- as a start up
- On completion of 100 cases, within 60 90 days, the private facility gets Rs. 1, 50,000/-after adjusting the advances received.







- Started on Oct 2, 2011
- Objective
 - Qualitative medical services at low cost
 - Reduce cost in treatment
- RMSCL established to purchase drugs
- Essential medicines made available free of cost to patients
- Free of cost Surgicals- Needles, Disposable syringes, IVA Blood Transfusion Set, Sutures etc



- Drug distribution centers as per timings of OPD and 24 hrs for IPD
- Beneficiaries:
 - OPD patients
 - > IPD patients
 - Those included as beneficiaries of MMJRK

Mukhya Mantri Jeevan Rakhsha Kosh (MMJRK)



- Started from Jan.1 2009
- Addressing health care needs of the poor
- Provisions
 - > Free medicines, investigations, artificial organs
 - Free treatment facility (indoor and outdoor) in all Governmental Health Institutions
 - > No upper limit for expenditure in treatment
 - > If required, free referral & free treatment at AIMS, N. Delhi & PGMER Institute, Chandigarh



- > Advance to RMRS for treatment of BPL
- > Online Monitoring- Software by NIC
- Beneficiaries:
 - State BPL Families
 - > Astha card holders
 - People living with HIV/AIDS
 - Selected widows, elderly & handicapped pensioners



- Beneficiary families of "Antyodaya Scheme" from Baran district.
- Elderly benficiaries of "Annpurna Scheme"
- Beneficiaries of "Navjeevan Scheme" from Jodhpur district
- Recently added Thalessimia and Hemophilia patients



Mukhya Mantri Sahayta Kosh

• Beneficiaries :

Annual Income upto 24,000/-, Not included in BPL list

Treatment aid for severe diseases:

- 40 % of Treatment Expenditure
- ➤ In One Valve Replacement -Max 30,000 /-
- By pass surgery or Two Valve Replacement– Max 50,000/-
- Kidney transplantation-Max 50,000/-
- Cancer treatment-Max 50,000/-



108 ambulance services

- Started in 2008 as Dhanwantari Ambulance Scheme
- 24x7 emergency service
- Toll Free number accessible from landline or mobile
- Emergency help will reach you in an average of 18 minutes
- Free of cost
- Handle medical, police and fire emergencies

Total 484 108 ambulances were deployed DM&HS

		"' 51HW
Medical Emergencies	Police Emergencies	Fire Emergencies
Serious Injuries	Robbery / Theft / Burglary	Burns
Cardiac arrests	Street Fights	Fire breakouts
Stroke	Property Conflicts	Industrial fire hazards
Respiratory	Self - inflicted injuries / Attempted suicides	
Diabetics	Theft	
Maternal/Neonatal/Pediat ric	Fighting	
Epilepsy	Public Nuisance	
Unconsciousness	Missing	ALCOHOLD BY
Animal bites	Kidnappings	
High Fever	Traffic Problems (Traffic Jams or Rallies, raasta rokos etc)	The same of the sa
Infections	Forceful actions, riots etc	7097/7



104 Medical Advice Services

- Started in 2011
- 24x7 toll free services
- Centralized call center
- Presently services given through HMRI, Hyderabad
- SMS for
 - When and how to take drugs
 - Primary and local remedies
- Availability of
 - >Trained counselors, doctors, paramedicals
- Use of Hindi, Rajasthani and English language



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- Services include
 - Medical advice on basis of Triage
 - Counseling services HIV, FP, Suicide, chronic diseases, cancer etc.
 - Information directory for tracking health services providers/institutions
 - Complaint registration about person/institution
 - First aid information
 - Health and symptoms checker (initial assessment, flu advice, pregnancy related information etc)
 - Any other health related services



Swasthya Chetna Yatra

- Mobile health units fabricated as 'raths' and taken around the district
- Wide publicity of schedule and services proposed – various media channels
- Camps organized at Gram Panchayat HQ village
- Evening puppet shows, street plays, folk shows and films in local language screened
- Distribution of free medicines
- Beneficiaries: Children, Women and Elderly



Objectives

- >Awareness amongst masses on
 - various ongoing health schemes
 - population stabilization
 - ♦ HIV/AIDS
 - save the girl child
 - ❖seasonal diseases
 - right age of marriage
- Organize free health check-up camps
- >Increase ID
- Identify malnourished children start remedial treatment
- ➤ Increase no. of beneficiaries on MCHN day



Benefits:

- > Free medical check up
- Diagnosis & Treatment on the spot at special camps & PHC
- Cases of Chronic illness referred to District or State capital's Hospital for free treatment
- Vaccination of children
- Consultancy over teen age issues
- Health tests for school children
- Free distribution of Vitamin & Micro-nutrition pills





Tele-medicine Project

- Use of telecommunications technologies that provide and support health care when distance is more.
- Started in Feb 2005
- Network has been set up by Gov in collaboration with ISRO





Objective

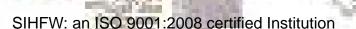
- Latest and modernized medical services to public
- Started in 6 medical colleges and 26 DH
- Main server SMS Medical College
- 38 sites 6 special sites and 32 patient sites



Mobile Surgical Unit

- Established in 1956 in three divisions Jaipur, Jodhpur and Udaipur.
- Extended in all divisions since 2007-08
- Aim:-

To provide free medical and health services to the poor masses at their doorstep in remote area of Rajasthan Specially in desert and tribal area.





 All facilities like admission, investigations, surgery, post operative care and proper follow up are provided at single camp.



Operations related to Eye, ENT,
 Ortho, Gyne, Appendicitis,
 Thyroid, Hernia, Dental etc





Highlights:

- Medical services are provided at the door-step of the poor masses.
- > treatment is completely free of charge.
- Absence of waiting period for the patient & convenient for patients to return their home earlier.
- Participation of the philanthropists and local people.
- Low Infection rate & Mortality rate



- Functioning
- Five days prior-
 - Tentage, operative equipments, beds, generators and other relevant materials are transported.
- One day before
 - Pitching of camp, electrical fittings, arrangements for indoor and outdoor patient coverage



The first two days

- O.P.Ds. of general surgery, Ophthalmology, Gynecology, E.N.T Orthopedics etc.
- Screening for operative procedure
- Medical OPD Investigations and free medicines.
- Admission of respective patients in speciality-wise tents.
- Pre-anesthetic checkup for operation.



Next three or four days

- > Operative procedures in operation theaters
- Continuation of Paediatric, Dental, Medicine and T.B OPDs.

The Post-operative stay

- Depending from 5 to 8 days.
- Post-operative check up usually at the gap of 2-3 weeks.

Follow-up check up

By operating surgeons with their nursing staff at the camp site.



The Camp is closed on 7th or 8th day

- After the last major operation is performed in the theatre.
- Full procedure takes about 12 to 14 days.
- Equipment along with other articles are shifted to other fixed campsite and same procedure is carried out till the end of final camp approximately in the month of May.

Only unit of Medical Health Dept which provides free service to the patients including stay, investigations, operation, food etc.

Rajiv Gandhi MMU



- Mobile health services in
 - > Tribal
 - > Desert
 - Far off/ inaccessible areas
 - > Specially to cater poor, women and children
- Each MMU consists of 2 Vehicles
 - 1 Mobility of medical team
 - ➤ 1 Medical investigation
 - All medical equipments (X-ray machine, ECG etc.)
 - Provides medicines
- Team: Doctor, Nurse, Lab. Technician, X-Ray Technician, Pharmacist, Driver and Helper





- Support from NGOs
- Free health facilities provided through camps on monthly basis in specified rural areas
- Services provided
 - MCH services
 - First aid and prevention of infection
 - Family welfare services
 - Adolescent services
 - > RCH services
 - Emergency services in drought, flood, epidemic, accidents and other natural calamities

