

Training & Training Institutions

9.1 INTRODUCTION

ASHAs continue to be the fulcrum of the community processes programme and have been instrumental in improving various health indicators over these past years. The ASHA programme has evolved significantly in the past few years. This has been possible due to sustained commitment to support the ASHAs by creating dedicated support structures, regular training mechanism, provision of drugs and equipment kits and introduction of range of monetary and non-monetary benefits.

With a concerted effort to shift from selective primary healthcare to Comprehensive Primary Health Care (CPHC), through establishment of “Health and Wellness Centres” (HWCs), as highlighted in the National Health Policy, 2017, ASHAs are being viewed as the key member of the primary healthcare team to facilitate access and delivery of the expanded package of services at the community level.

Since the last annual report, many important developments have been made with regard to the community processes interventions. These include-

a. **Health and Wellness Centres under Ayushman Bharat**

Ayushman Bharat (AB) is an attempt to move from sectoral and segmented approach of health service delivery to a comprehensive range of healthcare services. Ayushman Bharat aims to holistically address health (covering prevention, promotion and ambulatory care) at primary, secondary and

tertiary level by adopting a continuum of care approach. The first component pertains to creation of 1,50,000 Health and Wellness Centres which will bring healthcare closer to the homes of the people. These centres will provide Comprehensive Primary Health Care (CPHC), by expanding the services from existing RCH and communicable diseases services to include services related to Non-Communicable diseases (NCDs), Mental Health, ENT, Ophthalmology, Oral health, Geriatric and Palliative healthcare and Trauma care.

The first Health and Wellness Centre was inaugurated on 14th April, 2018 and till 31st March, 2019, about 17000 Health and Wellness Centres have been operationalised. As a part of Health and Wellness Centres, ASHAs are being trained on NCDs to undertake the tasks of population enumeration, community-based assessment, mobilizing individuals over 30 years for NCD screening (Hypertension, Diabetes, Oral cancer, Breast Cancer, Cervical Cancer) and follow up of diagnosed patients for treatment adherence, supporting patient support groups undertaking health promotion to enable life style modification.

b. **Home Based Care for Young Child (HBYC)-** Under the POSHAN Abhiyaan (PM’s overarching scheme for holistic nutrition), the HBYC programme was launched with release of Operational Guidelines on HBYC in April, 2018 to expand community-based care of infants

beyond 42nd day after birth. As part of HBYC initiative, five additional home visits are to be made by ASHAs after the 42nd day of child birth- at 3 months, 6 months, 9 months, 12 months and 15 months.

- c. **New/revised incentives for ASHAs** - In the year 2018-19, several new incentives for ASHAs were introduced. In addition to revision of routine and recurring incentives in the ASHA Benefit Package, Social Security Benefits (life insurance, accident insurance and pension) have also been extended to eligible ASHAs and ASHA Facilitators.

9.2 ASHA SELECTION

The ASHAs are in place in 35 States and UTs (all States and UTs, except Goa). A total of 10.33 lakhs ASHAs work under NHM, including both urban and rural areas.

Under NRHM, there are 9,71,089 ASHAs in 33 states and UTs (except Goa, Delhi and Puducherry) and under NUHM, 62,005 ASHAs in 32 States and UTs (except Tamil Nadu, Goa, Chandigarh and Lakshadweep). In both rural and urban areas, the number of selected ASHAs has increased over the past one year across many States.

Table 1- Status of ASHAs under NRHM and NUHM

Status of ASHAs In-Position under NHM				
Sl. No.	States/UTs	No. of ASHAs (Rural)	No. of ASHAs (Urban)	Total No. of ASHAs
1	Bihar	88264	521	88785
2	Chhattisgarh	66713	3295	70008
3	Himachal Pradesh*	32342	28	32370
4	Jammu & Kashmir	11853	82	11935
5	Jharkhand	40964	326	41290
6	Madhya Pradesh	71656	3799	75455
7	Odisha	45274	1449	46723
8	Rajasthan	59425	4245	63670
9	Uttar Pradesh	155213	5744	160957
10	Uttarakhand	11651	561	12212
11	Arunachal Pradesh	3838	42	3880
12	Assam	30920	1336	32256
13	Manipur	4009	81	4090
14	Meghalaya	6516	180	6696
15	Mizoram	1091	79	1170
16	Nagaland	1917	75	1992

Status of ASHAs In-Position under NHM				
Sl. No.	States/UTs	No. of ASHAs (Rural)	No. of ASHAs (Urban)	Total No. of ASHAs
17	Sikkim	641	15	656
18	Tripura	7590	454	8044
19	Andhra Pradesh	39009	3200	42209
20	Goa	0	0	0
21	Gujarat	39594	4009	43603
22	Haryana	17483	2506	19989
23	Karnataka	37853	2951	40804
24	Kerala	28115	1927	30042
25	Maharashtra	60759	8576	69335
26	Punjab	18956	2479	21435
27	Tamil Nadu	3905	0	3905
28	Talengana	29257	3112	32369
29	West Bengal	55174	4926	60100
30	A & N Islands	412	10	422
31	Chandigarh	14	0	14
32	D & N Haveli	475	60	535
33	Daman & Diu	96	14	110
34	Delhi	0	5725	5725
35	Lakshadweep	110	0	110
36	Puducherry	0	198	198
	Total	971089	62005	1033094

Note * Including Link worker
Source: MIS (as on December, 2018)

9.3 ASHA TRAINING

ASHA trainings in module six and seven have shown an increase in all rounds of training under NRHM. States like Chhattisgarh, Odisha and Uttarakhand continue to perform well in all four

rounds. Rajasthan and Uttar Pradesh have shown good progress in training of ASHAs in Round-3. States like Gujarat, Karnataka, Maharashtra and Jammu and Kashmir have shown an increase in ASHAs being trained in Round-4 since the last year.

Table 2 - Status of ASHA Training under NRHM

Status of ASHAs Trained & Drug Kits* under NRHM											
Sl. No.	States/UTs	Mod.1	Mod.2	Mod.3	Mod.4	Mod.5	6 th and 7 th module				ASHAs Drug Kits
							Round 1	Round 2	Round 3	Round 4	
1	Bihar	68592	52859	52859	52859	78336	78336	67981	55994	8721	83624
2	Chhattisgarh	61378	62113	63579	63702	63505	66169	66169	66169	66169	66220
3	Himachal Pradesh*	7782	7782	7782	7782	7782	7539	7529	7474	7473	7622
4	Jammu & Kashmir	11809	11809	11809	11809	11809	11718	11730	11552	11116	9500
5	Jharkhand	40115	40115	40115	40115	40964	37045	37271	37190	36257	39380
6	Madhya Pradesh	49789	48379	47915	46685	62382	64268	63838	62243	45945	63576
7	Odisha	44857	44857	44857	44857	44857	46091	46300	46302	44680	45274
8	Rajasthan	40310	40310	33811	33797	35437	45612	43542	40262	32951	46751
9	Uttar Pradesh	135191	129150	129150	129150	129150	143106	138505	127703	1296	149709
10	Uttarakhand	10420	10420	10420	10420	8978	10420	10420	10420	10824	10329
11	Arunachal Pradesh	3682	3683	3567	3632	3643	3669	3472	3472	3032	3496
12	Assam	28618	28585	28544	28497	28422	30619	30619	30619	30920	30619
13	Manipur	3878	3878	3878	3878	3878	3878	3878	3878	3878	3878
14	Meghalaya	6258	6258	6258	6258	5588	5891	5873	5710	5413	6429
15	Mizoram	1012	1012	1012	1012	1012	1012	1012	1012	1012	1012
16	Nagaland	1507	1570	1538	1588	1690	1576	1570	1624	1593	1887
17	Sikkim	641	641	641	641	641	641	641	641	641	641
18	Tripura	7367	7367	7367	7367	7367	7276	7276	7188	3975	7302
19	Andhra Pradesh	33769	33769	33769	33769	33769	36410	35270	29106	21568	38175
20	Goa	0	0	0	0	0	0	0	0	0	0
21	Gujarat	29283	28723	28361	28174	27587	37740	36387	35705	34945	36717
22	Haryana	20385	19944	19944	19944	17767	18983	18482	17502	17152	17394
23	Karnataka	39168	39168	39168	39168	39168	41928	41928	41928	41928	37000
24	Kerala	33209	31712	30709	29913	29045	25972	4326	9939	1420	25972
25	Maharashtra	58771	58299	57842	56717	52247	59414	59020	58662	57354	59310
26	Punjab	16375	16375	16375	16375	16403	17018	17018	17018	17018	17264
27	Tamil Nadu	2650	2650	2650	2650	2650	3960	4109	3795	3606	3242
28	Talengna	28019	28019	28019	28019	28019	24497	22149	27045	0	23820
29	West Bengal	42211	41163	40165	39163	37577	52779	51971	50273	44589	94444

Status of ASHAs Trained & Drug Kits* under NRHM											
Sl. No.	States/UTs	Mod.1	Mod.2	Mod.3	Mod.4	Mod.5	6 th and 7 th module				ASHAs Drug Kits
							Round 1	Round 2	Round 3	Round 4	
30	A & N Islands	412	412	412	412	412	412	412	412	412	412
31	Chandigarh	14	14	14	14	14	0	0	0	0	0
32	D & N Haveli	241	241	241	241	241	241	0	0	0	135
33	Daman & Diu	86	86	86	86	86	55	55	55	0	39
34	Delhi	0	0	0	0	0	0	0	0	0	0
35	Lakshadweep	105	105	105	105	105	105	105	105	105	110
36	Puducherry	0	0	0	0	0	0	0	0	0	0
	Total	827904	801468	792962	788799	820531	884380	838858	810998	555993	931283

SOURCE: MIS (as on December, 2018)

Under NUHM, there has been substantial increase in the number of ASHAs trained in the induction module. States of Chhattisgarh, Rajasthan, Uttar Pradesh, Madhya Pradesh and Orissa have progressed well in the induction trainings while Bihar and Jharkhand have selected more ASHAs over the last one year but are yet to train them. In the North Eastern States, Induction training has been completed for almost 100 per cent of the

urban ASHAs.

Regarding training in all four rounds of Module 6 and 7, States like Chhattisgarh, Madhya Pradesh, Odisha, Rajasthan and North Eastern states have progressed well vis-à-vis States like Bihar, Jharkhand, Uttarakhand, Uttar Pradesh, Arunachal Pradesh & Sikkim which are yet to start the training for their urban ASHAs in Module 6 & 7.

Table 3 - Status of ASHA Training under NUHM

Sl. No.	State	Induction Module		Round 1 of Module 6&7		Round 2 of Module 6&7		Round 3 of Module 6&7		Round 4 of Module 6&7	
		No.	%	No.	%	No.	%	No.	%	No.	%
1	Bihar	308	59	0	0	0	0	0	0	0	0
2	Chhattisgarh	3700	98	3682	98	3682	98	3682	98	3682	98
3	Jharkhand	204	52	0	0	0	0	0	0	0	0
4	Madhya Pradesh	3324	84	2704	68	2360	59	1560	39	720	18
5	Odisha	1403	97	1366	94	1366	94	1366	94	1146	79
6	Uttarakhand	50	5.6	0	0	0	0	0	0	0	0
7	Uttar Pradesh	5109	84	0	0	0	0	0	0	0	0
8	Rajasthan	4098	100	3962	97	3764	92	3342	82	2843	69
9	Arunachal Pradesh	40	100	0	0	0	0	0	0	0	0
10	Assam	1289	100	1289	100	1289	100	0	0	0	0

Sl. No.	State	Induction Module		Round 1 of Module 6&7		Round 2 of Module 6&7		Round 3 of Module 6&7		Round 4 of Module 6&7	
		No.	%	No.	%	No.	%	No.	%	No.	%
11	Manipur	81	100	10	12	0	0	0	0	0	0
12	Meghalaya	170	100	169	99	0	0	0	0	0	0
13	Mizoram	79	100	0	0	0	0	0	0	0	0
14	Nagaland	41	56	41	56	0	0	0	0	0	0
15	Sikkim	25	74	0	0	0	0	0	0	0	0
16	Tripura	502	100	502	100	502	100	502	100	502	100
17	Andhra Pradesh	3353	100	1236	37	0	0	0	0	0	0
18	Delhi	5719	100	5719	100	5719	100	4941	86	0	0
19	Gujarat	3915	96	3790	93	3790	93	3790	93	3790	93
20	Haryana	2463	101	2438	99	2346	95	2346	95	2033	83
21	Himachal Pradesh	0	0	0	0	0	0	0	0	0	0
22	Jammu & Kashmir	63	77	0	0	0	0	0	0	0	0
23	Karnataka	2791	100	1600	57	1219	44	707	25	698	25
24	Kerala	1977	100	1977	100	1977	100	1977	100	1977	100
25	Maharashtra	4282	51	2839	34	1722	21	1218	15	697	8
26	Punjab	2312	93	2312	93	2312	93	2312	93	2312	93
27	Telangana	2769	84	2769	84	2769	84	2769	84	0	0
28	West Bengal	3999	8	0	0	0	0	0	0	0	0
29	Daman and Diu	7	58	7	58	0	0	0	0	0	0
30	Dadar and Nagar Haveli	58	91	54	84	0	0	0	0	0	0
32	Puducherry	0	0	0	0	0	0	0	0	0	0
	Total All India	54131	85.5	38466	60.7	34817	55	30512	48.21	20400	32.2

(Source- ASHA Update - July, 2018)

In addition, with regard to the Universal Screening of common NCDs, activities like population enumeration, filling of CBAC, screening of individuals over 30 years of age, referral and follow-up to ensure treatment compliance is being undertaken by ASHAs. ASHAs have undergone a 5-days training in the NCD module prepared for ASHAs. Under the programme, not only ASHAs but MPW (female), Medical Officers and staff nurses on different aspects of NCDs like prevention, screening, and control of common NCDs have also been trained. Around

163910 ASHAs have been trained in the module on common Non-Communicable Diseases under identified centres.

9.4 ASHA INCENTIVES

Several new/revised incentives were introduced during the past one year.

These include:

- Home-Based Care for Young Child (HBYC) – ASHAs receive incentive for undertaking

additional 5 home-visits at 3rd month, 6th month, 9th month, 12th month and 15th month- Rs.50 per visit- Rs. 250 per child.

- Kala Azar elimination (under National Vector Borne Disease Control Programme)- ASHAs will be given incentive for referring suspected cases of Kala Azar and ensuring complete treatment of the same (Rs. 500/per notified case).
- Incentives for maintaining data validation and collection of additional information for enrollment of households in Pradhan Mantri Jan Arogya Yojana under Ayushman Bharat (Rs. 5/form/family).
- Immunization –(i) Complete immunization per child up-to two years age- Revised from Rs, 50 to Rs. 75 per child; and (ii) DPT Booster at 5-6 years of age- Rs. 50 per child.
- ASHA incentives under HWCs- Incentives for new service packages as part of CPHC roll out under HWCs include provision of Rs. 1000/ASHA/per month which will be introduced in an incremental manner linked with activities added at Health and Wellness Centres as the programme evolves.
- In addition to increase in ASHA incentives, the supervisory visit charges for ASHA Facilitators was increased from Rs. 250 per visit to Rs. 300 per visit.

In the year 2018, the ASHA benefit package was introduced acknowledging significant contribution and commitment of ASHAs. The package included-

- Revision of routine and recurring incentives amount from Rs. 1000 pm to Rs. 2000 pm.
- Extending benefits of Life insurance, accident insurance and pension to eligible ASHAs and ASHA Facilitators by enrolling eligible ASHAs and ASHA Facilitators are –
 - (i) Pradhan Mantri Jeevan Jyoti Beema Yojana with a benefit Rs. 2 Lakh in case of death of the insured.

- (ii) Pradhan Mantri Suraksha Beema Yojana with a benefit of Rs.2 lakh for accidental death or permanent disability; and Rs. 1 lakh for partial disability.
- (iii) Pradhan Mantri Shram Yogi Maan Dhan with pension benefit of Rs. 3000/- p.m. after age of 60 years. (50% contribution of premium by GOI and 50% by beneficiary).

9.5 ASHA CERTIFICATION

ASHA Certification programme launched in 2014 by Ministry of Health and Family Welfare (MOHFW) with National Health Systems Resource Centre (NHSRC) and the National Institute of Open Schooling (NIOS) is being currently implemented in 23 States and one UT namely-Arunachal Pradesh, Assam, Chhattisgarh, Dadar and Nagar Haveli, Delhi, Gujarat, Haryana, Himachal Pradesh, Jammu and Kashmir, Jharkhand, Karnataka, Madhya Pradesh, Maharashtra, Manipur, Meghalaya, Mizoram, Nagaland, Punjab, Odisha, Sikkim, Telangana, Tripura, Uttarakhand and West Bengal.

The progress made during last one year is as follows –

- State trainers - 21 State trainers from Mizoram, Manipur, Meghalaya and Nagaland have been certified and additional 24 State trainers from Telangana, JK, Delhi, MP, Jharkhand, Mizoram and Haryana underwent 6-days refresher training in November, 2018 and the result stands awaited.
- District trainers - 158 district trainers from Karnataka, Jharkhand, Madhya Pradesh and Maharashtra were certified in May, 2018 and result of district trainers who were evaluated in November, 2018 from Maharashtra, Odisha, Tripura, Karnataka and Uttarakhand (evaluated in September, 2018) is awaited by NIOS.

- State training sites - 4 State Training sites, one each in Manipur, Meghalaya, Mizoram and Nagaland have been accredited by NIOS.
- District training sites - 72 district training sites across 8 States were accredited and result is awaited for about 12 district training sites- Tripura, Nagaland, MP and Karnataka.
- ASHAs and ASHA Facilitators – In addition to 2219 ASHAs who were certified after January, 2018 NIOS examination, 3998 were certified in July 2018 examination. Thus, a total of 6212 ASHAs have been certified till date. Subsequently, about 10960 ASHAs across 15 States have appeared for the third examination held in January, 2019.

9.6 VILLAGE HEALTH SANITATION AND NUTRITION COMMITTEE (VHSNC) and MAHILA AROGAYA SAMITI (MAS)

VHSNC and MAS are platforms that ensure community participation to support implementation, monitoring and action-based planning for healthcare activities in rural and urban areas respectively.

As per MIS, as on December, 2018, 5,40,643 VHSNCs have been constituted and 5,18,855 have operational bank accounts. Over last one year, some progress is noted in formation of MAS, as the number of MAS formed has increased to 79692.

Status of VHSNC Constituted under NHM

Sl.No.	State	VHSNCs
1	Bihar	8406
2	Chhattisgarh	19180
3	Himachal Pradesh	7765
4	Jammu & Kashmir	6741
5	Jharkhand	30012
6	Madhya Pradesh	49567
7	Orissa	46016

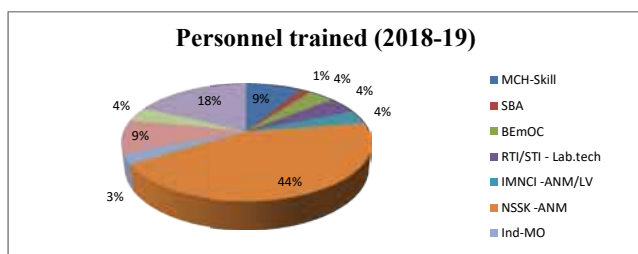
Sl.No.	State	VHSNCs
8	Rajasthan	43440
9	Uttar Pradesh	60523
10	Uttarakhand	15296
11	Arunachal Pradesh	3772
12	Assam	27673
13	Manipur	3878
14	Meghalaya	6249
15	Mizoram	830
16	Nagaland	1346
17	Sikkim	641
18	Tripura	1038
19	Andhra Pradesh	12940
20	Goa	247
21	Gujarat	17639
22	Haryana	6049
23	Karnataka	26087
24	Kerala	19692
25	Maharashtra	39893
26	Punjab	12956
27	Tamil Nadu	15015
28	Telangana	10426
29	West Bengal	46853
30	A&N Island	275
31	Chandigarh	0
32	D&N Haveli	61
33	Daman & Diu	28
34	Delhi	0
35	Lakshadweep	9
36	Puducherry	100
All India		540643

Source: NHM-MIS report (as on Dec, 2018)

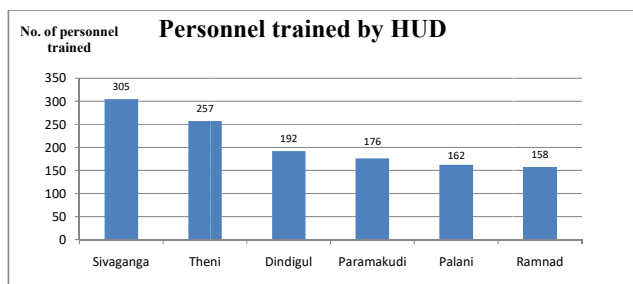
9.7 GANDHIGRAM INSTITUTE OF RURAL HEALTH AND FAMILY WELFARE TRUST (GIRHFWT), TAMIL NADU

Established in 1964, the Health and Family Welfare Training Centre at GIRHFWT is one of 47 Health & Family Welfare Training Centres (HFWTs) in the country. It trains Health and allied manpower working in PHCs. During 2018-19, a total of 1185 personnel were trained as per Comprehensive Training Plan (CTP) and 260 personnel were trained as per Interim Plan.

a) Training wise personnel Trained



b) Health Unit wise Training Performance



c) Cleaning and Greening Campaign

The Institute conducted cleaning and greening campaign from 15th September to 2nd October, 2018.



9.7.1 Central Training Institute - Department of Health Promotion and Education(Affiliation with the Tamil Nadu Dr. M. G. R. Medical University, Chennai)

The 55th batch of PGDHPE Course for the year 2018-19, has started from November, 2018, which will end by October, 2019. Totally nine students got admitted during this academic year 2018-19.

9.7.2 Central Training Institute (Central Unit – Management Wing)

The Central Unit of Gandhigram has been established to provide guidance to the teaching faculties of the Regional Family Planning Training Centres and the Central Family planning units functioning in the four southern States. The Institute conducted one batch of Survey Methodology & Data Analysis training for NGO personnel on 28.8.2018 with 18 participants. The objective of the training was to familiarize with Survey conduction and computerized data analysis.



Institute has also conducted one batch of training on Project Proposal Writing for NGOs on 20 & 21 Dec. 2018 and 13 NGO personnel attended this training. The objective of this training was to enhance the skills of the participants in project proposal writing.

9.7.3 Central Training Institute (Central Unit – Communication & Media Wing)

The Media division of the Institute has been involved in organizing communication and Media

related trainings to various categories of Health personnel. During the year, 42 Health Visitors were trained and also 1665 Nursing students from various Nursing colleges from Southern States were trained in preparation of IEC materials.

Other activities

- Preparation of financial proposal for the project funded by Nutritional International on promotion of Iodized salt.
- Management of the production of IEC materials.
- Supply of IEC materials for Community extension education activities.
- Content development for flash cards.
- Annual report editing work.
- Discussion with the Project co-ordinator of Indian Institute of Human Settlement regarding the training on Faecal Sludge Management.
- Media support service for training, research and service activities of the institute.

9.7.4 Regional Health Teachers' Training Institute (RHTTI)

The Institute is also engaged in upgrading the capabilities of ANMs, staff nurses and students of nursing colleges through the Regional Health Teachers Training Institute (RHTTI). During the year 2018-19, first batch of 27 candidates has already completed the Health Visitor course and second batch of 15 students is undergoing the course.

Short term Training on Community Health Nursing

Short term training on Community Health Nursing was conducted and 836 nursing students from various colleges of southern region of the country were trained.

9.8 NATIONAL INSTITUTE OF HEALTH AND FAMILY WELFARE

The National Institute of Health and Family Welfare (NIHFW), an autonomous organization, under the Ministry of Health and Family Welfare, acts as an 'Apex Technical Institute' for the promotion of health and family welfare programmes in the country. The Institute addresses a wide range of issues on public health through its eleven departments which are multi-disciplinary in nature.

9.8.1 Educational Activities

➤ Post-Graduate Education

- **M.D. (Community Health Administration)**

With 10 seats, this three-year duration Post-Graduate Degree Course (MD in Community Health Administration) is affiliated to the University of Delhi and recognized by the Medical Council of India (MCI) has been continuing since 1969. This year (2018-19), eight students have taken admission in this course.

- **Diploma in Health Administration**

This two-year duration Post-Graduate Diploma in Health Administration is also affiliated to the University of Delhi and is recognized by MCI and has an in-take capacity of six students a year. This year (2018-19), only one student has taken admission in this course.

- **Post-Graduate Diploma in Public Health Management(PGDPHM)**

Started by the Institute in 2008 in collaboration with Public Health Foundation of India, and supported by the MoHFW; this one-year duration course has 30 seats for national

candidates and 10 for international candidates. The objective of the course is to sharpen the skills of Public Health Managers working at various levels. This year (2018-19), 12 national students and 8 international students have taken admission in this course.

➤ **Distance Learning Courses**

- Diploma in Health and Family Welfare Management
- Diploma in Hospital Management
- Diploma in Health Promotion
- Diploma in Health Communication
- Diploma in Applied Epidemiology
- Diploma in Public Health Nutrition

Around 400 students pursue these courses every year.

- **Ph.D. Programme:** Presently, four students are pursuing their Doctoral work at the institution who are registered in different universities of the country.
- **Summer Training:** Thirteen students were enrolled and completed their summer training programme in the Institute during the year 2018-2019.

9.8.2 Training Activities

In order to enhance the capacity of health personnel across the country, every year the Institute organizes about 50-55 short duration courses on various specialized areas in public health and family welfare. The activities and the courses run by the Institute are very successful in meeting the public health requirement and to enhance the capacity of district and state level health functionaries. In year 2018-19, a total of 1105 health personnel have been trained in forty six courses and six workshops.

9.8.3 Research and Evaluation

Research programmes of the Institute basically deal with operational research, applied research and evaluation of various health programmes across the country. Some research studies focus on reproductive health. Currently, seven research studies are ongoing.

9.8.4 Other Important activities:

- **Foundation Training Programme for newly recruited CHS Medical Officers:** The NIHFW has been conducting the Foundation Training Programme for newly recruited CHS Medical Officers of 8 weeks' duration since 2017. So far, three batches of CHS doctors have undergone this training. This year seventy nine Medical Officers had undergone this training.
- **Monitoring of the trainings under NHM:** This Institute is also Nodal Institute for monitoring of trainings under NHM/RCH-II and engaged in the coordination and monitoring of all the training under NHM with the support of 22 Collaborating Training Institutions (CTIs) in various parts of the country.
- **National Health Portal:** The National Health Portal (NHP) was planned to be developed by the Ministry of Health and Family Welfare. Subsequently, the MoHFW established the Centre for Health Informatics (CHI) as a Secretariat for managing the activities of the National Health Portal at the National Institute of Health and Family Welfare (NIHFW) in year 2011. The NHP serves as a single point of access for authenticated health information for citizens, students, healthcare professionals and researchers. The NHP was launched in November, 2014. Health and Wellness Centres has started operationalization for strengthening existing 1,50,000 Sub-centres and Primary Health Centres under Ayushman

Bharat scheme with the help of robust MIS and Dashboard prepared by CHI for effective implementation of project at various levels. 'MeraAspataal' (My Hospital) an IT based feedback system for collecting information on patients' level of satisfaction i.e., Short Message Service (SMS), Outbound Dialling (OBD), Web Portal, and Mobile Application. The new initiative has under taken on CPHC-NCD Program- as part of Ayushman Bharat. It is population based Non-Communicable Diseases (NCD) screening and management Application with the support of partners-Dell and Tata trusts. As a part of Digital India Initiative, touch screen based Health Information Kiosks were installed for providing quality and up to date health related information to all the citizens.

- **The National Cold Chain Vaccine Management Resource Centre (NCCVMRC):** The NCCVMRC has been set up at The NIHF on 9th March, 2015 with the objective of building capacity of all the district level cold-chain technicians involved in Universal Immunization Programme (UIP) to undertake repair and maintenance of approximately 84293 Cold-Chain Equipment in about 28414 Cold-Chain Points in the country. In addition, MoHFW has set up the secretariat for technical specification for cold-chain equipment and effective vaccine management at NCCVMRC. NCCVMRC has launched a National Cold-Chain Management Information System (NCCMIS) which is operational across all States and UTs of India to provide real time information on all cold-chain equipment along with real time temperature monitoring of selected bulk vaccine stores. In addition to that the Centre has completed the review and update of NCCMIS in 29 States across the country.
- **The National Technical Advisory Group on Immunization (NTAGI):** The NTAGI

Secretariat was established in 2013, to provide techno-managerial support to NTAGI and STSC and its working groups. In April, 2016, it was decided that the NTAGI Secretariat would be completely supported by the Government of India and a proposal to establish the NTAGI Secretariat at the National Institute of Health and Family Welfare (NIHF) was approved and its Secretariat resumed its functioning since May, 2017. The NTAGI Secretariat is responsible for organizing two NTAGI and four STSC meetings in a year. During 2018-2019, 3 meetings of Vaccine Preventable Disease Surveillance and Research and Capacity Building Working Groups, 2 meetings of Leprosy Working Group, 2 meetings of Japanese Encephalitis Working Group, 4 STSC meetings and 1 NTAGI Meeting have been facilitated by NTAGI Secretariat.

- **Public Health System Capacity Building Initiative (PHSCBI):** The NIHF in collaboration with Centers for Disease Control and Prevention (CDC), Atlanta, USA, has initiated capacity building of health personnel in India for improving the skills of health care providers in early recognition, investigation and effective management of public health problems. Three batches of Rapid Response Team Training of Trainers (RRT-TOT) were conducted at NIHF, New Delhi from 10th-14th Sept, 2018, 24th-28th Sept, 2018 and 11th-15th March, 2019.
- The NIHF had been identified as lead institution for the Asia Regional Network for South-South Cooperation for Partners in Population and Development (PPD) to achieve ICPD & MDGs through communication amongst partners.
- **Skill Up-gradation Initiative through DAKSH Project:** The main function of Skill Lab is to handhold and guide the States/

UTs in creating skills labs as well as to train the State trainers. The skill lab training covers training requirements of ANMs, Staff Nurses, Medical Officers and Obstetricians. Nine batches of para-medics from seven states have undergone this training during 2018-19, a total of eighty five personnel were trained.

➤ **Mother and Child Tracking Facilitation Centre (MCTFC):** Mother and Child Tracking Facilitation Centre have been functioning at the NIHFW since 29th April, 2014. Mother and Child Tracking Facilitation Centre were envisaged to support MCTS in improving its data quality.

➤ From time to time, the NIHFW is entrusted by the MoHFW and DGHS to carry out the evaluation and training activities on the issues of National Health Programmes. Some of the important activities are mentioned hereunder:

- i. External Evaluation of Public Health Care Facilities (Tertiary Care Hospitals/Institutions) under Kayakalp Scheme (2018-19).
- ii. Evaluation of Public Health Measures at Point of Entry for International Travelers.
- iii. Evaluation and Third Party verification of the Santushti strategy of Jansankhya Sthirta Kosh (JSK) in the State of Rajasthan.
- iv. A Case Study of Viable District Health Care Service Delivery System in Four States: Tamil Nadu, Gujarat, Uttar Pradesh and Assam.
- v. Monitoring Evaluation Studies for Immunisation, i.e. Coverage Evaluation Survey (CES).
- vi. Capacity Building for Public Health

Emergencies Management (CBPHEM) Project to conduct 84 courses to train around 5000 Medical Superintendents/ Directors/CMOs/ District Health Officers across country till March, 2020.

vii. Occupational and Environmental Health Training of Trainers and to standardise curriculum and roll out the training modules.

➤ *Green Initiatives: Several new eco-friendly/ energy saving initiatives have been taken by the Institute which include solar power generation (179 KVA capacity per month), rooftop rain water harvesting, banning the use of plastic in the campus, phasing out of conventional lights by LED and procurement of star-rated electrical and electronic appliances. These initiatives have also led to savings to Government exchequer.*

9.9 FAMILY WELFARE TRAINING & RESEARCH CENTRE, MUMBAI

The Family Welfare Training & Research Centre (FWTRC), Mumbai established on 26th June 1957 as first Family Planning Training Centre under the Union Ministry of Health & Family Welfare is a Central Training Institute involved in conducting in-service trainings on National Health Mission & various National Health Programmes and for Medical and key Public Health Issues and challenges for Doctors & Allied Health Professionals from all over the country. The second campus of FWTRC is under construction at New Panvel, Navi Mumbai for expanding the Centre's activities and to develop better infrastructure for enhancing the quality and quantity of training to make it an institute of Public Health excellence.

The Institute conducts two academic courses viz. Diploma in Health Promotion Education (DHPE) and Post-Graduate Diploma in Community Health Care (PGDCHC) for para-medical workers and the courses are affiliated to the International Institute

for Population Sciences (IIPS), Mumbai. 32nd batch of the DPHE comprising 22 trainees from the States of Maharashtra, Odisha, Andhra Pradesh, Telangana, Madhya Pradesh and Nagaland commenced since June, 2018 and will complete the course in May, 2019. 9th batch of PGDCHC programme commenced from June, 2018 and will complete the course in May, 2019.

The Institute has also undertaken following Skill Development Training Programmes: -

- i. Sanitary inspector – 12 months duration
- ii. Diabetes Educator -3 months duration
- iii. Home Health Aide -4 months duration
- iv. General Duty Assistant -4 months duration
- v. First responder – 4 days

The Institute is involved in community-based research work in the field of Health & Family Welfare, Population Science, HIV/AIDS etc. in rural and urban areas. Training programmes, workshops and seminars are conducted for the medical and para-medical personnel from the Governmental and Non-governmental Organizations. FWTRC, Mumbai is one of the four authorized Yellow Fever Vaccination Centre in Mumbai identified by Directorate General of Health Services, MoHFW to give vaccine for yellow fever to facilitate international travellers visiting to yellow fever endemic countries. The Centre also accepts the international students sponsored by WHO for the formal training programmes.

The Institute caters to RMNCH+A services through its clinic and certain outpatient services are offered to patients free of cost.