

CHAPTER-II

FINANCIAL OUTLAYS & OUTCOME BUDGET 2013-14

Table 1 gives a summary statement of plan and non-plan allocation in respect of Department of Health and Family Welfare grouping it under the flagship programme NHM and Schemes/Programmes outside NHM.

Tables 2 & 3 highlight the objectives/outcomes, quantifiable deliverables and out lay for 2013-14 under NHM and Non- NHM (Health) respectively. It touches on the critical organizational structure and infrastructure that have been created/ strengthened for preparing the ground to enable the Mission to move towards its objective of accountable and affordable health and more effective healthcare delivery. Wherever possible, a one-to-one correspondence has been attempted between financial and outcome budget as the outcomes cut across different schemes. In respect of the disease control programmes covered under the Mission, the relationship between financial outlay and physical targets has been indicated.

OUTCOME BUDGET 2013-14 FOR DEPARTMENT OF HEALTH AND FAMILY WELFARE- Table 1

(Rs. in crore)

Name of Scheme	Approved Outlay		
	Department of Health and Family Welfare		
	Plan	Non-Plan	Total
National Health Mission & Family Welfare	20999	105	21104
Non- NHM (Health)	8166	4008	12174
Total	29165	4113	33278

**OUTCOME BUDGET 2013-14 (SCHEME WISE OBJECTIVES /OUTCOMES/ QUANTIFIABLE DELIVERABLES
UNDER NATIONAL HEALTH MISSION (NHM) & FAMILY WELFARE)**

Table 2

Sl. No.	Name of Scheme	Approved Outlay (2013-14) (Rs. in crores)			Objectives/Outcomes	Quantifiable Deliverables/ Projected Outcomes(2013-14)
		Plan	Non-Plan	Total		
	<u>NHM & FW SCHEMES</u>					
I	NHM - CENTRALLY SPONSORED SCHEME					
A.	NRHM - RCH FLEXIBLE POOL					
1	RCH Flexible Pool** (The main objective of Reproductive Child Health Programme is to bring down the 3 critical indicators: Maternal Mortality Ratio, Infant Mortality Rate (IMR) and Total Fertility Rate (TFR) as per the target fixed in 12 th Five Year Plan).	5347.01	0.00	5347.01	Percentage of Institutional deliveries against reported deliveries Janani Suraksha Yojana(JSY) Operationalizing Special Newborn Care Units (SNSUs) Operationalizing Newborn Stabilization Units (NBSUs) Operationalizing Newborn Care Corners Establishment of Nutritional Rehabilitation Centers (NRCs) Dedicated School Health Programme Teams Distribution of contraceptives through ASHA	75% Home Deliveries-7.89 lakhs beneficiaries, Institutional Deliveries-124.44 lakhs beneficiaries At least one per District At all FRUs(as per PIP proposal) At all delivery points At least one per high burden Districts (as per PIP proposal) 5824 Teams (one team per Block) 4923.18 lakhs pieces of Condoms, 288.99 lakhs cycles of Oral Contraceptives Pills(OCPs), 68.22 lakhs Emergency Contraceptives Pills(ECPs)
2	Mission Flexible Pool	5764.00	0.00	5764.00	Mission Flexi Pool seeks to strengthen the institutional structure and provide an effective link between the community and health care facilities at the grass root level. Selection and training of Accredited Social Health Activists (ASHA) acting as a link is critical. Focus will be on augmentation of Human Resources by encouraging States to engage health personnel including doctors, nurses and paramedics strengthening health infrastructure by providing support to the States for new construction/ upgradation/ renovation of healthcare facilities; strengthening First Referral Units and operationalisation of more 24x7 Facilities,	

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					decentralized planning through Village Health Sanitation and Nutrition Committees and Rogi Kalyan Samitis, preparation of District Health Action Plan with convergence from all health related sectors, provisioning for health service delivery especially in un-served and underserved areas through Medical Mobile Units; providing financial assistance to States for selection and training of Accredited Social Health Activists (ASHAs) who act as a link between community and healthcare facilities; establishing Emergency Transport and Patient Transport System.	
3	Routine Immunization	800.00	0.00	800.00	Increase in access coverage and quality of routine immunization programme and reduction in morbidity and mortality rate due to seven vaccine preventable diseases (VPDs). Full Immunization Coverage to be increased to 70%.	Routine Immunization of Children against six Vaccine Preventable Diseases (VPDs) and reduction in Morbidity and Mortality rate due to VPDs. Vaccination against Hepatitis-B in select states & districts. Vaccination against Japanese Encephalitis in select endemic Districts.
4	Pulse Polio Immunization	805.00	0.00	805.00	To eradicate Polio-virus	Polio drops will be administered to approx. 172 million children during each National Immunization Round (NID) and 86 million children per Sub National Immunization Round (SNID) respectively.
5	National Iodine Deficiency Disorder Control Programme (IDDP)	50.00	0.00	50.00	To control and prevent iodine deficiency disorders in the country.	Production and distribution of iodized salt 60 lakh MT. Training to District health functionaries. Procurement and supply of salt testing kit by the States/ UTs for endemic districts i.e 640.
6	Strengthening of District Hospitals for providing advanced secondary care	1.00	0.00	1.00	District hospitals to be strengthened so that they can provide advanced level of secondary care by increasing specialty areas / beds, developing dedicated maternity wings, and strengthening laboratory and diagnostic services.	

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	<u>NHM & FW SCHEMES</u>					
7	Providing free generic medicines in all public health institutions in the country	1.00	0.00	1.00	Providing free generic medicines in all public health institutions/facilities in the country, with a view to reduce out of pocket expenditure in health care. This provision would not only meet the social objective of providing care to the poor and the vulnerable but would also bring in efficiency gains by bulk procurement of drugs.	
B	NATIONAL URBAN HEALTH MISSION-FLEXIBLE POOL	1.00	0.00	1.00	To address health needs of urban population of the country, with focus on slums (listed and unlisted) population and other disadvantaged vulnerable sections. Scheme to be launched after obtaining necessary approvals.	
C	FLEXIBLE POOL FOR COMMUNICABLE DISEASES***					
1.	National Vector Borne Disease Control Programme (Vector Borne Disease Control Programme is an umbrella programme with an integrated approach for containment of malaria, lymphatic Filariasis, Japanese Encephalitis, Dengue, Kala-azar, Chikungunya).	572.00	8.41	580.41	<u>Malaria</u> ABER over 10% and API 1.2 or less	ABER > 10% of target population under surveillance (ii) Coverage of high risk population with LLIN in identified states supported under World Bank and Global Fund assistance (iii) 80% coverage of the targeted population under Indoor Residual Spray (IRS).
					<u>Elimination of Lymphatic Filariasis</u> 80% coverage of targeted population	Mass Drug Administration (MDA) with anti-filaria tablets in 20 endemic States having about 600 million population. Initiating process of validation in phased manner for the districts reportedly achieving elimination (microfilaria rate less than 1%).
					<u>Kala-azar</u> 90% of treatment compliance of Kala-azar cases detected	(i) At least two rounds of door to door search undertaken in each of the endemic districts. (ii) Making available anti Kala-azar drugs in all block level PHCs & district hospitals.(iii) 80% coverage of targeted population with DDT 50%
					<u>Japanese Encephalitis (JE)</u> 85% coverage of eligible children with J.E. Immunization in targeted districts	Availability of fogging equipment and insecticides in all endemic zones. Trained teams available at CHCs and District Hospitals in endemic areas for time case management.

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					<u>Dengue/ Chikungunya</u> 90% of identified sentinel surveillance hospitals maintaining line listing of cases	(i) Regular entomological surveillance in endemic areas for vector species (Aedes aegypti). (ii) Regular fever surveillance in endemic areas to detect an unusual trend. (iii) Adequate infrastructure for management of Dengue cases in district hospitals in endemic areas.
2.	National T.B Control Programme	710.15	0.00	710.15	To achieve a cure rate of 88% of new smear positive cases and detection of at least 77% of such cases to sustain coverage of entire population.	New Sputum positive case detection: 780000 and 2550000 MDR-TB Patients with Cure rate > 87%
3	National Leprosy Eradication Programme	51.00	0.00	51.00	To reduce leprosy burden in the country. Provide quality leprosy services through General Health care	To achieve elimination of leprosy as a public health problem in all States and districts by March 2017. Reduce Annual New Case Detection Ratio to <1 per 100,000 populations at national level by 2017
4	Integrated Disease Surveillance Programme	63.00	0.00	63.00	To strengthen /maintain a decentralized laboratory based IT - enabled disease surveillance system for epidemic prone diseases to monitor disease trends and to detect and response to outbreaks in early rising phase through trained Rapid Response Teams. To establish a functional mechanism for intersectoral coordination to tackle the Zoonotic diseases.	> 95% districts will report weekly data on epidemic prone disease through portal Outbreaks will be investigated and responded to by sending clinical samples to the laboratories in more 70% of the outbreaks A network of 115 medical college labs will be established and linked to the districts to support diagnosis of epidemic prone diseases, especially during outbreaks. 125 district public health labs will be strengthened for diagnosis/testing of epidemic prone diseases.

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	<u>NHM & FW SCHEMES</u>					
D	FLEXIBLE POOL FOR NON-COMMUNICABLE DISEASES, INJURY & TRAUMA #					
1	National Programme for Control of Blindness	230.00	0.00	230.00	Reduction of prevalence of blindness to 0.3% by 2020 by providing comprehensive eye care services and development of eye care infrastructure and training of manpower.	Target for Cataract Surgeries: 70 lakh Target for other eye diseases: 0.60 lakh cases No. spectacles to be provided to school children-8 lakh Target for Eye Donation:50000 Strengthening/development of Eye care infrastructure & training of manpower
2	National Mental Health Programme	200.00	0.00	200.00	To ensure availability of minimum mental health care for all in the foreseeable future, particularly the most vulnerable and under privileged section of the population. To promote community participation in developing mental health services, and to stimulate efforts towards self-help in the country.	Support to NGO/CBOs : 40 Continuation of support to existing DMHPs : 123 Initiation of new DMHPs: 35 Monitoring, Implementation, technical support, HMIS, IEC activities
3	National Programme for Health Care for Elderly	50.00	0.00	50.00	The basic aim of the NPHCE programme is to provide separate and specialized comprehensive health care to the senior citizens at various level of state health care delivery system including outreach services. Preventive & promotive care, management of illness, health manpower development for geriatric services	Continuation of Geriatric unit at the 100 existing district hospitals and expansion Continuation of Sub- District level activities at CHCs, PHC and Sub-Centres in the 100 existing Districts and expansion.
4	National programme for prevention & control of Deafness	45.00	0.00	45.00	Prevention and Control of Deafness through Early detection and management of deafness and causes leading to it. Strengthening of Health Care	Expansion of the programme to new Districts in addition to existing 203 Districts

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	<u>NHM & FW SCHEMES</u>					
					delivery system to deliver the hearing/ear care services.	
5	National Tobacco Control Programme	20.00	0.00	20.00	Progressive reduction of Tobacco consumption To target non-user for not taking up the habit and motivating the user to quit. to create awareness amongst the masses about the harmful effects.	Up scaling of the National Tobacco Control Programme to cover all the states and 150 new districts. Setting up 100 new tobacco cessation centers with central support in different Medical /RCC'S Dental Colleges across the country.
6	National Oral Health Programme	10.00	0.00	10.00	Upgradation of 50 District Hospitals by strengthening of Dental clinics, Contractual appointments of health professional and imparting training for management of Oro- Dental Disease at cost 10.20 crore. Generating public awareness about Oro- Dental Disease through various IEC activities, organizing training of trainers etc. at central level are proposed at a cost 4.59 crore.	
7	Assistance to States for capacity Building (Burns)	0.00	0.00	0.00	To reduce incidence, mortality, morbidity and disability due to Burn Injuries. To improve the awareness among the general masses and vulnerable groups especially the women, children, industrial and hazardous occupational workers. To establish adequate infrastructural facility and network for Behavior change communication, burn management and rehabilitation interventions.	Release of funds to 15 Medical Colleges & 3 District Hospitals for construction, procurement of equipments and also recurring grant for manpower to already 7 existing centres covered under pilot programme. Training of Surgeons/Medical Officers of Medical Colleges selected as 'State Training Centres' Training of Surgeons/Medical Officers and para medical staff of 15 Medical Colleges & 3 District hospitals
8	National programme for Prevention and control of Cancer, Diabetes, Cardiovascular Diseases and stroke	300.00	0.00	300.00	Prevent and control common NCDs through behavior and life style changes, Provide early diagnosis and management of common NCDs, Build capacity at various levels of	Screening for common cancers is envisaged Outreach services are envisaged Chemotherapy Centres at district hospitals would be established / strengthened at 25% districts.

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	(NPCDCS)				health care facilities for prevention, diagnosis and treatment of common NCDs. Train human resource within the public health setup viz doctors, paramedics and nursing staff to cope with the increasing burden of NCDs, and Establish and develop capacity for palliative & rehabilitative care.	Registry programmes are proposed for NCDs Periodic NCD risk factor survey Hub and spoke model is proposed for providing comprehensive care, where hub would be the tertiary care hospital/ Medical College and spokes would be the districts.
9	Other New Initiatives under Non-Communicable Diseases	5.00	0.00	5.00	To address non-communicable diseases like Sicklecellanemia, Hemophilia, Thalassemia, Chronic Kidney Disease, Autism and Developmental Disabilities.	
E	INFRASTRUCTURE MAINTENANCE	4928.00	17.88	4945.88	Under this scheme, assistance would also be given under the National Health Mission for Infrastructure Maintenance to States through Treasury route. Schemes under this head are: i. Salary support to one ANM per sub-center and to LHVs in Sub-Centres, ii. Salary support to State and District F.W. Bureau/Urban Family Welfare Centres/Health Posts iii. Support to Training Schools and stipend to trainees.	
II	FAMILY WELFARE-CENTRAL SECTOR					
1	Social Marketing Area Projects	0.40	0.00	0.40	To provide Condoms for specific area for distribution to eligible couples through Social Marketing network of the Social Marketing Organizations (SMOs) under Social Marketing Area Project.	
2	Social Marketing of Contraceptives	125.00	0.00	125.00	To make available Condoms & Oral pills to the eligible couples through Social Marketing network of the Social Marketing Organization (SMOs) for increased coverage of eligible couples under contraception.	The requirements were projected for procurement & Supply of 900 M.Pcs. of condoms & 800 lakh cycles of oral pills to eligible couples through SMOs (ii) payment of promotional incentive to SMOs for sale of Condoms & OCPs, re-imburement of packing material cost and also promotional & product subsidy of Saheli / Novex weekly OCPs & Condoms.

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	<u>NHM & FW SCHEMES</u>					
3	Funding to Institutions including training Institutions	74.07	61.59	135.66	Under the above head, funding will be provided to institutions such as Population Research centres, CDRI, Lucknow, NIHFW, New Delhi, IIPS Mumbai and National Commission on Population (NCP) for meeting their activities. Also, funds will be released to training institutions such as Family welfare training and research centre, Mumbai, Rural health training centre Najafgarh etc.	
4	International Co-operation	3.00	0.00	3.00	It includes provision for membership of International Organizations.	
5	FW Linked Health Insurance Plan	3.00	0.00	3.00	This Scheme is to provide compensation for death/medical complications after sterilization operation. It also provides compensation for failure of sterilization operation. Moreover, it provides indemnity to doctors/health facilities providing professional services for conducting sterilization operation.	
6	Free distribution of contraceptives	113.65	0.00	113.65	To provide Condoms, Oral Pills, IUDs, Tubal Ring and Emergency Contraceptive Pills to the States/UTs for distribution to eligible couples free of cost through sub-Centres, hospitals and other Health care Institutions of the states for increased coverage of eligible couples under contraception.	The requirements have been projected by the Programme Division for Supply of 547.02 M.Pcs. of condoms, 361.24 lakh cycles of Oral Pills, 87.68 lakh pieces of IUDs, 32.43 lakh pairs of Tubal Rings & 76 lakh packs of ECPs to states for distribution and use in health care institutions, 2,22,18,600 lakh pregnancy test kits to sub-centres.
7	Procurement of Supplies & Materials	60.00	0.00	60.00	Towards procurement of drugs, equipments and other consumables for sub centres, PHCs and FRUs for providing maternal and child health care and rendering quality services. In addition includes drug A and B Kits to be given to the ASHA under NRHM.	
8	IEC (Information, Education and Communication)	230.00	7.85	237.85	IEC activity to disseminate healthcare information for encouraging health-seeking behaviour through multimedia tools). Introduce Behaviour Change Communication at the grass root level.	
9	Area Projects	10.02	0.00	10.02	Financial assistance through domestic support and international agencies in selected States/ Districts having weak infrastructure and lack of quality services to facilitate realization of Millennium Development Goals relating to reduction of IMR/MMR and TFR by adopting a performance based funding mechanism.	
10	Forward Linkages to NRHM	110.00	0.00	110.00	Financial support initiative to State hospitals/institutions in Northeast states outside NRHM	

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	<u>NHM & FW SCHEMES</u>					
11	Strengthening National Programme Management of the NRHM	100.00	0.00	100.00	Strengthening National Programme Management of NRHM/NHM	
12	National Drug De-Addiction Control Programme	23.00	0.00	23.00	Treatment services including preventive health and after care to drug de-addiction.	
13	Other Central Sector Activities	193.70	9.27	202.97	Other Central Sector activities on family welfare include funds for research projects under family welfare activities, assistance to Gandhigram Institute, Indian Medical Association, Expenditure at HQs/Research & Study/ Training for RCH activities, strengthening activities of regional offices of Health and Family Welfare, Govt. of India, Information technology, assistance to NGOs and funding for strengthening Management Information System (MIS). The objective of MIS is to evolve an appropriate Management Information and Evaluation System under NRHM - MIS Performance, Triangulation of data and conduct of National Surveys i.e., National Family Health Survey, District Level (DLHS) Household Survey, Annual Health Survey (AHS) etc. with ongoing expansion and improvement in quality of information on HMIS portal.	
	GRAND TOTAL	20999.00	105.00	21104.00		

* for domestic + external component; ** RCH and Mission flexi pool and other related schemes merged into one; *** Infectious diseases merged into one flexi pool; # for 12th Five year plan and for annual plan 2013-14 the Outlay has been bifurcated- Tertiary care is reflected under the Health sheet while the flexi pool component is reflected under 'Flexipool for non-communicable diseases' in the NHM & Family Welfare sheet.

OUTCOME BUDGET 2013-14 (SCHEME WISE OBJECTIVES /OUTCOMES/ QUANTIFIABLE DELIVERABLES UNDER HEALTH)

Table 3

Sl. No.	Name of Schemes/Programmes	Approved Outlay (2013-14) (Rs. in crores)			Objectives/Outcomes	Quantifiable Deliverables/ Projected Outcomes (2013-14)
		Plan	Non-Plan	Total		
HEALTH SCHEMES						
A	CENTRAL SECTOR SCHEMES					
1	Oversight Committee	350.00	0.00	350.00	To implement 27% reservation for OBCs, a time bound action plan has been chalked out covering medical, non-medical and nursing courses. Task Forces will be set up in the identified institutions for monitoring and implementing all activities relating to expansion of infrastructure, filling up vacancies and enhancing the number of seats.	
2	Strengthening of Institutes for Control of Communicable Diseases	250.46	76.05	326.51	Funding of public institutions for control of communicable diseases is considered under this category. The list includes funding for NCDC, Delhi (for programmes), National Tuberculosis Institute, Bangalore, vaccine institutes such as B.C.G. Vaccine Laboratory, Guindy, Chennai, Pasteur Institute of India, Conoor, Integrated Vaccine Complex, Chengalpattu & Medi Park, Lala Ram Sarup Institute of T.B. and Allied Diseases, Mehrauli, Delhi, Central Leprosy Training & Research Institute Chengalpattu (Tamil Nadu) and Regional Institutes of Training Research & Treatment under Leprosy Control Programme.	
3	Strengthening of Hospitals & Dispensaries	518.90	1888.64	2407.54	Strengthening of Government hospitals and dispensaries are covered under this broad category. The list inter alia includes funding for CGHS, Central Institute of Psychiatry, Ranchi, All India Institute of Physical Medicine & Rehabilitation, Mumbai, Dr. R.M.L. Hospital & PGIMER, New Delhi, All India Institute of Speech & Hearing, Mysore etc.	
4	Strengthening of Institutions for Medical Education, Training & Research	475.90	189.00	664.9	Strengthening of Institutions for Medical Education, Training & Research are covered under this broad category. The list inter alia includes funding for AIIM & PH, Kolkata, Serologist & Chemical Examiner, Kolkata, Indira Gandhi Institute of Health & Medical Sciences for NE Region, Shillong, NIMHANS, Bangalore, Kasturba Health Society, Wardha, VP Chest Institute, Delhi, National Board of Examinations, New Delhi, NAMS, New Delhi etc. Also, funding is given for training under Development of Nursing services, Strengthening of RAK college of Nursing and Lady Reading Nursing college, Delhi. Funds are given for strengthening activities under Medical council of India, Indian Nursing Council	
5	System Strengthening including Emergency Medical Relief/Disaster	384.15	81.85	466.00	Under this broad category, funding for System Strengthening including Emergency Medical Relief/Disaster Management are taken up. The activities include funds for Emergency Medical Relief with sub-schemes such as	

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	HEALTH SCHEMES					
	Management				Health Sector Disaster Preparedness and Management and Emergency Medical Relief (including Avian Flu). The main objective of EMR is to investigate any suspected cases/outbreaks among human population and to create minimum infrastructure to manage any outbreak amongst human beings. Other major activities under the category includes Strengthening and up gradation Central Drug Standard & Control Organization (CDSCO), Food Safety & Standards Authority of India, National Pharmacovigilance Programme, Indian Pharmacopoeia Commission, Central Research Institute, Kasauli, National Institute of Biological, Noida and activities under Port Authority. Also, funds are provided for strengthening health education, intelligence and accounts.	
6	National Centre for Disease Control	100.00	0.00	100.00	Funds for upgradation of NCDC, New Delhi. The activities of NCDC have been expanded to evolve an integrated approach for early warning signals and surveillance of diseases of major public health importance. Pivotal role in disease investigation, surveillance and disease control activities. Assists central and state health authorities during public health emergencies, epidemics and outbreaks.	
7	National Advisory Board For Standards (Clinical Establishments-CEA)	2.50	0.00	2.50	To provide for the registration and regulation of clinical establishments, to prescribe minimum standards of facilities and services. CEA 2010 was enacted by the Parliament to create an enabling environment to achieve the objectives its objectives. State model Rules were circulated to all States.	
8	Redevelopment of Hospitals / Institutions	1783.00	1544.50	3327.50	Under this broad category, funds for Redevelopment of Hospitals / Institutions are taken up. The list includes expansion and strengthening of All India Institute of Medical Sciences & its Allied Departments, New Delhi (including NCI AIIMS Jhajhar), P.G.I.M.E.R., Chandigarh, J.I.P.M.E.R., Puducherry, Lady Harding Medical College & Smt. S.K. Hospital, New Delhi, Kalawati Saran Children's Hospital, New Delhi, RIMS, Imphal, Manipur, LGBRIMH, Tezpur, Assam, RIPANS, Aizwal, Mizoram and Safdarjung Hospital & VMCC College, New Delhi	
9	Pradhan Mantri Swasthya Suraksha Yojana	1975.00	0.00	1975.00	Creation of capacity in medical education, research and clinical care, in the underserved areas of the Country Building up to trained medical manpower capacities in deficient states and mitigate regional imbalances in the provision of	1. Admission to 1 st year of MBBS course, of 50 students in each of the 6 new AIIMS being set up at Jodhpur, Bhopal, Bhubaneswar, Patna, Raipur, Rishikesh has taken place and classes are in progress. For the 2 nd batch of MBBS, 100

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	<u>HEALTH SCHEMES</u>				<p>secondary and tertiary healthcare.</p> <p>The PMSSY (Phase I) - To set up 6 new AIIMS like institutions and up gradation of 13 medical college institutions to the level of AIIMS.</p> <p>The Phase II has setting up of 2 AIIMS like institutions and upgradation of 6 medical college institutions to the level of AIIMS</p>	<p>students are proposed to be admitted in each of the 6 new AIIMS. Admission of 60 students in B.Sc Nursing in each of the 6 new AIIMS is planned this year. Construction is still going on, in part of Medical College Complex and Hospitals at each of the six sites. Residential Complexes in the 6 AIIMS except Bhubaneswar are nearing completion.</p> <p>2. The land identified by Government of West Bengal for proposed AIIMS at Raiganj, Uttar Dinajpur is yet to be allotted by the State Govt. For the proposed AIIMS at Rae Bareli, Uttar Pradesh, the State Government has identified land, which is yet to be transferred to the Ministry. Advance steps for setting up of AIIMS, Rae Bareli are being taken.</p> <p>3. Upgradation of Govt. Medical College in Frist Phase of PMSSY: The work of Bangalore MC, Trivandrum MC, Salem MC, NIMS Hyderabad, SGPGIMS Lucknow, Jammu MC, Srinagar MC, IMS Varanasi to be completed and at other location is still going on.</p> <p>Upgradation of Govt. Medical College in second phase of PMSSY: The work is in progress at all locations except GMC Madurai whose site has been recently finalized by the State Government.: The work in the process and started.</p>

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	HEALTH SCHEMES					
10	Strengthening of existing branches & establishment of 27 branches of NCDC	32.00	0.00	32.00	Strengthening of existing branches/ establishment of 27 new branches of NCDC for better coordination with states for control of communicable diseases	
11	Strengthening intersectoral coordination of prevention and control of Zoonotic diseases	2.00	0.00	2.00	Strengthening inter-sectoral coordination and control of selected Zoonotic Diseases.	Priority
12	Viral hepatitis	2.00	0.00	2.00	Surveillance of Viral hepatitis in various geographical locations in India by NCDC	
13	Anti-Micro.Resistance	2.00	0.00	2.00	Containment of Anti-microbial resistance Programme by NCDC	
14	Health Insurance (CGEIPS)	50.00	0.00	50.00	Introduction of new health insurance schemes for central government employees and pensioners (CGEIPS)	
15	Emergency Medical Services	14.20	0.00	14.20	pre-hospital services and strengthening of emergency department integrated with a GIS/GPS	Evolve EMS policy: techno legal, regulations, rules, standards, guidelines and financing norms. Set up Institutional mechanism for EMS at National/ State/ Districts and strengthen administrative units of the departments.
16	Central Procurement Agency	0.01	0.00	0.01		
B	CENTRALLY SPONSORED PROGRAMMES					
1	Cancer Control				National Cancer Control Programme merged with National programme for prevention and control of Cancer, Diabetes, CVD and strokes to bring convergence with other non-communicable diseases.	
	(i) National Cancer Control Programme CNCI Kolkatta (including Construction of Second Campus)	50.00	17.00	67.00	Financial support for CNCI including construction of its second campus Provide early diagnosis and management of common NCDs.	

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	HEALTH SCHEMES					
	(ii) National Tobacco Control Programme**	50.00	0.00	50.00	Setting up 100 new tobacco cessation centers with central support in different Medical /RCC'S Dental Colleges across the country. Initiating the process of setting-up of QUITLINE. Initiate the process of setting-up of the tobacco product testing labs through procurement of equipments. Initiate the process of conducting the 'Health Cost Study due to tobacco use'.	
2	National Mental Health Programme**	150.00	0.00	150.00	To ensure availability of minimum mental health care for all in the foreseeable future, particularly the most vulnerable and under privileged section of the population. To encourage application of mental health knowledge in general care and social development. To promote community participation in developing mental health services, and to stimulate efforts towards self-help in the country.	Continuation of support to Centres of Excellence : 11 Upgradation of Central Govt. Institutes into Neuro Sciences Health Care Facilities : 2 Establishment of new Centres of Excellence : 2 Continuation of support to PG Departments in Mental Health Specialties : 27 Establishment of PG Departments in Mental Health Specialties : 25 Support to SMHA : 35 Support to MHRC and state boards
3	Assistance to State for Capacity Building (Trauma Care and Burn injury)**	86.50	0.00	86.50	Trauma care: To reduce incidence mortality, morbidity and disability due to road traffic accidents. Creation of trained manpower for designated trauma centre and To establish adequate infrastructural facilities and networking for trauma centres. The activities planned for 2013-14 include survey, identification & signing MOU of 27 new institutions, Sensitization of personnel of 116 trauma centres, release of funds for old Trauma Centres for equipment, manpower & other components and to initiate establishment of Injury Surveillance centre & identification of state resource trauma centers. Prevention of Burn Injury: To reduce incidence, mortality, morbidity and disability due to Burn Injuries and to improve the awareness among the general masses and vulnerable groups. The activities planned for 2013-14 include Review of 3 medical colleges and 6 District Hospitals already covered under Pilot Programme to monitor progress. Release of funds to 15 Medical Colleges & 3 District Hospitals for construction, procurement of equipments and also recurring grant for manpower to already 7 existing	

Sl. No.	Name of Schemes/Programmes	Approved Outlay (2013-14) (Rs. in crores)			Objectives/Outcomes	Quantifiable Deliverables/ Projected Outcomes (2013-14)
		Plan	Non-Plan	Total		
	HEALTH SCHEMES					
					centres covered under pilot programme	
4	National Programme for Prevention and Control of Cancer ,Diabetes, Cardiovascular Diseases and Stroke**	365.00	0.00	365.00	Prevent and control common NCDs through behavior and life style changes, Provide early diagnosis and management of common NCDs, Build capacity at various levels of health care facilities for prevention, diagnosis and treatment of common NCDs. Train human resource within the public health setup viz doctors, paramedics and nursing staff to cope with the increasing burden of NCDs, and Establish and develop capacity for palliative & rehabilitative care.	Hub and spoke model is proposed for providing comprehensive care, where hub would be the tertiary care hospital/ Medical College and spokes would be the districts.
5	National Program Health Care for the Elderly**	100.00	0.00	100.00	Preventive and promotive care, management of illness, health manpower development for geriatric services, medical rehabilitation & therapeutic intervention and IEC are some of the strategies envisaged in the NPHCE. Set up a National Institute of Ageing (NIA) to create and expand health manpower for old age care and to promote high quality research in the fields of Geriatrics and Gerontology to provide evidence base for active and healthy ageing.	Continuation of existing Regional Geriatric Centres and further expansion of new Geriatric Centres in the selected Medical Colleges. Set up two National Institute of Ageing at MMC, Chennai and AIIMS, New Delhi
6	National Programme for Control of Blindness**	60.00	0.00	60.00	Reduction of prevalence of blindness to 0.3% by 2020 by providing comprehensive eye care services and development of eye care infrastructure and training of manpower..	Target for Cataract Surgeries: 70 lakh, Target for other eye diseases: 0.60 lakh cases, Number of spectacles to be provided to school children: 8 lakh, Target for Eye Donation: 50000, Strengthening/ development of Eye care infrastructure & training of manpower

Sl. No.	Name of Schemes/Programmes	Approved Outlay (2013-14) (Rs. in crores)			Objectives/Outcomes	Quantifiable Deliverables/ Projected Outcomes (2013-14)
		Plan	Non-Plan	Total		
	HEALTH SCHEMES					
7	Pilot Projects (initiated in 11th plan)					
	(i) Sports Medicine	10.00	0.00	10.00	Provide specialized treatment to all Sports Injuries and Joint Disorder under one roof and strengthening sports injury centre at SJH, Delhi with the state of art equipment for prompt treatment & early recovery from Sports Injuries and Modern OT complex.	
	(ii) Deafness **	5.00	0.00	5.00	Prevention and control of deafness through early detection, management of deafness and causes leading to it. Expansion of the programme to new districts, in addition to the existing 203 districts India.	
	(iii) Leptospirosis Control	0.50	0.00	0.50	To reduce morbidity and mortality due to Leptospirosis in India. In the 12 th plan, a project on control of Leptospirosis is proposed. The strategy would be implemented in all the endemic states of the country.	
	(iv) Control of Human Rabies	2.00	0.00	2.00	The objective is to prevent human deaths due to rabies and reduction in the transmission of disease in animals. In the 12 th plan, National rabies control programme is proposed. The human component would be rolled throughout the country and the nodal agency would be NCDC, whereas the animal component would be implemented by Animal welfare board of India in 30 cities in phased manner.	
	(v) Medical Rehabilitation	5.00	0.00	5.00	To provide need based Medical Rehabilitation Services including provision of Prosthetic & Orthotic appliances for persons with neuro-musculo-skeletal (locomotors) disorders.	
	(vi) Organ Transplant	12.50	0.00	12.50	To organize a system of organ procurement & distribution for deserving cases for transplantation, promote deceased organ donation, train required manpower, establish new transplant facilities & strengthen existing units, protect vulnerable poor from organ trafficking and monitor organ transplant services and bring about policy and programme corrections/ changes whenever needed.	
	(vii) Oral Health **	5.73	0.00	5.73	Improvement in determinants of oral health. Reduce morbidity of oral diseases up to primary and secondary level. Strengthening of existing healthcare delivery system at primary and secondary level. Integrate oral health promotion and preventive services with general healthcare system and other system and other sectors that influence oral health; namely School Health	Upgradation of 50 District Hospitals by strengthening of Dental clinics, Contractual appointments of health professional and imparting training for management of Oro- Dental Disease at cost 10.20 crore. Generating public awareness about Oro- Dental Disease through various IEC activities, organizing training of trainers etc. at central level are proposed at a cost 4.59 crore.

Sl. No.	Name of Schemes/Programmes	Approved Outlay (2013-14) (Rs. in crores)			Objectives/Outcomes	Quantifiable Deliverables/ Projected Outcomes (2013-14)
		Plan	Non-Plan	Total		
	HEALTH SCHEMES					
					Programme, Tobacco Control Programme, NPCDCS, Fluorosis etc..	
	(viii) Fluorosis	10.00	0.00	10.00	The objective is to prevent and control of Fluorosis in the country. During 2013-14 the programme is proposed to be extended in 26 new fluoride endemic districts (@ Rs. 40 lakh per Districts) and programme is being continued in 100 fluoride endemic districts covered in 11th plan & 1st yr of 12 th plan.	
8	E-Health including Telemedicine	5.00	0.00	5.00	Expand the reach and quality of healthcare services on a pilot basis in underserved areas through connectivity of Medical colleges and District and Sub-district hospitals.	
9	Human Resources for Health*				Human resource is the most critical variable for the effective provision of health care to the population. To ensure integration of activities for strengthening human resources, the following schemes have been identified for expansion during 12 th plan.	
	(i) Upgradation and Strengthening of Nursing Services(ANM/ GNM schools)	200.00	0.00	200.00	Meet the gap in nursing, pharmacy and para-medical services and develop required human resources for health to improve delivery of quality healthcare.	The scheme has been proposed for XIIth Five Year Plan under Strengthening/ Upgradation of Nursing Services. In order to improve the quality of Nursing Education, Nursing Services, Nursing Research and Nursing Information System.
	(ii) Strengthening and Upgradation of Pharmacy Schools/ Colleges	5.00	0.00	5.00	Providing financial assistance in the form of one time grant-in-aid for Strengthening/Up gradation of pharmacy institutions and for conducting continuing education programme for faculty in pharmacy institutions and practicing pharmacists.	It is proposed to consider 10-15 institutions for release of one time grant in aid for up-gradation from diploma to degree courses in pharmacy under the scheme after a final decision on continuation of this scheme in 12 th plan is taken.
	(iii) Strengthening/ Creation of Paramedical Institutions (RIPS/NIPS)	200.00	0.00	200.00	To augment the supply skilled paramedical manpower and promote Paramedical training through standardization of such education/ courses across the country. This Capacity Building Scheme will also lead to reduction in regional imbalances in availability of paramedics, introduction of courses in New/Cutting Edge Disciplines, augmentation of Capacity for planning, Monitoring, Evaluation etc., provision of quality assured services through in-services training, action, research onsite supports etc.	

Sl. No.	Name of Schemes/Programmes	Approved Outlay (2013-14) (Rs. in crores)			Objectives/Outcomes	Quantifiable Deliverables/ Projected Outcomes (2013-14)
		Plan	Non-Plan	Total		
	HEALTH SCHEMES					
	(iv) District Hospitals- Upgradation of State Government Medical Colleges (PG seats)	260.00	0.00	260.00	To provide financial assistance to the State Government Medical Colleges to upgrade the facilities for starting new Post Graduate (PG) disciplines and increasing PG seats	Release of funds to Govt. medical colleges for upgradation of infrastructure, equipment and faculty to increase the postgraduate seats in the country.
	(v) Upgradation of State Government Medical Colleges (UG seats)	300.00	0.00	300.00	The objective is to provide financial assistance to the state Government medical colleges to upgrade their infrastructural facilities to increase their intake capacity of MBBS thereby increasing the total undergraduate seats in the Government Sector in the country.	
	(vi) Establishing New medical colleges (upgrading district hospitals)	140.00	0.00	140.00	The objective is to provide financial assistance to the state Governments for establishment of new Government medical colleges attached with existing District/ referral Hospital in underserved Districts in the country. Funds would be released for creation of infrastructure and purchase of equipments only.	
	(vii) Setting up of State institutions of paramedical sciences in States and Setting up of college of paramedical education	20.00	0.00	20.00	The objective is to provide financial assistance for setting up of State Institutions of paramedical sciences in States and Setting up of college of paramedical education	
	(viii) Setting up of college of pharmacy in Govt. Medical Colleges	26.65	0.00	26.65	The objective is to provide financial assistance for setting up of college of pharmacy in existing Medical Colleges.	
10	Strengthening of State drug regulatory system	100.00	0.00	100.00	Strengthening of State drug regulatory system and their infrastructure, both physical and human resources.	
11	Strengthening of State food regulatory system	55.00	0.00	55.00	Strengthening of State food regulatory system and their infrastructure, both physical and human resources.	
	Other Health Schemes	0.00	210.96	210.96	Secretariat-social science, discretionary grant, Dte.GHS, National Medical Library, Dental Council of India, Pharmacy Council of India, Meningitis vaccine for Huj pilgrims, Rastrya Arogya Nidhi, CHEB, New Delhi TB Centre, Strengthening of HMIS, Award prizes in Hindi, Indian Red Cross Society, St. Johns Ambulance, Medical Store Org., International Cooperation etc.	
	GRAND TOTAL	8166.00	4008.00	12174.00		

*Schemes have been merged; **for 12th Five year plan and for annual plan 2013-14 the Outlay has been bifurcated- Tertiary care is reflected under the Health sheet while the flexi pool component is reflected under 'Flexi pool for non-communicable diseases' in the NHM & Family Welfare sheet.