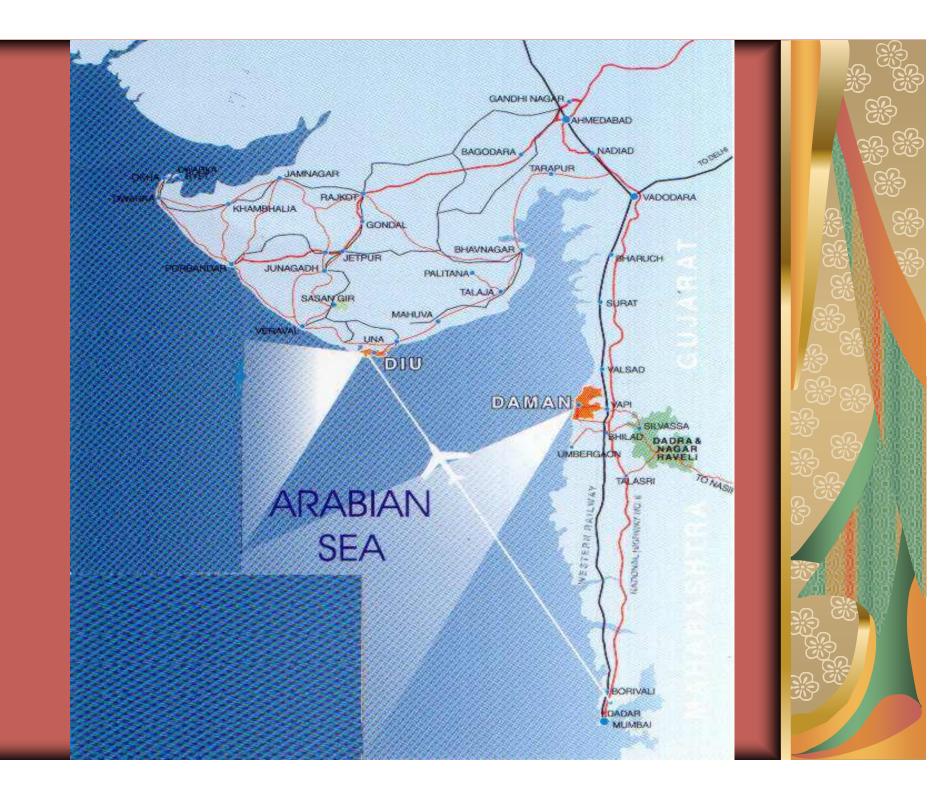
DIRECTORATE OF MEDICAL & HEALTH SERVICES UT OF DAMAN AND DIU

NRHM ACTIVITIES TILL THE YEAR 2008-09

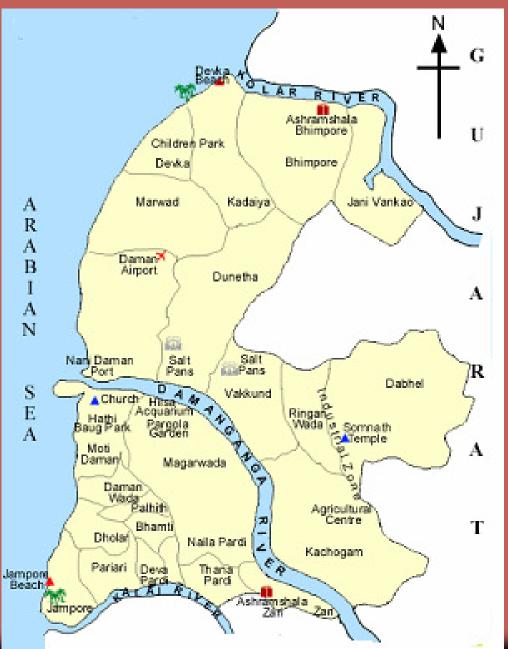








DAMAN DISTRICT

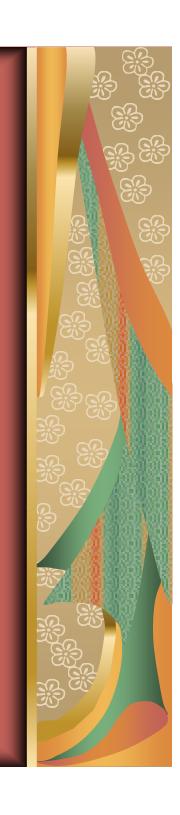


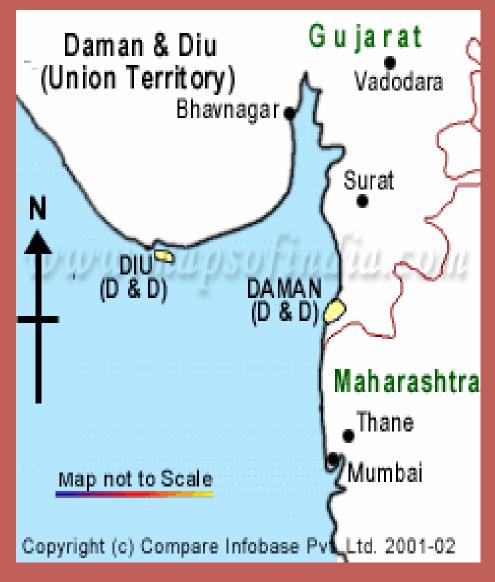
	ES A
Hospital	
СНС	
PHC	2
Sub-Centres	15+4
	(new)
Ayurvedic Unit	****
District Blood	1
Bank	
ICTC	
Bed Strength	⊛172
Doctors	25

DIU DISTRICT



Hospital	1
PHC	1
RMD	2
Sub-Centres	6
Ayurvedic Unit	1
ICTC	1
Bed Strength	70
Doctors	12





Both Daman and D u are situated on the west coast on the Arabian sea. Daman forms a small part of South Gujarat coastal strip. Diu is a tiny island in the Arabian sea near the port of Veraval. E÷

Diu is about 780 Kms. far way from the Daman District.

BASIC FEATURES

CAPITAL	:	DAMAN
NO. OF DISTRICT	:	2
NO. OF TALUKA / TEHSILS	:	2 💦 🕄
NO. OF BLOCKS	:	2 8 8
NO. OF CENSUS VILLAGE	:	23 _梁 影
NO. OF PANCHAYATS	:	14 g
NO. OF MUNICIPALITIES	:	2
NO. OF DISTRICT PANCHAYAT	:	1 3
NO. OF TOWNS	:	2
NO. OF PARLIAMENTARY CONSTITUENCY	:	1

POPULATION PROFILE (2001 census)

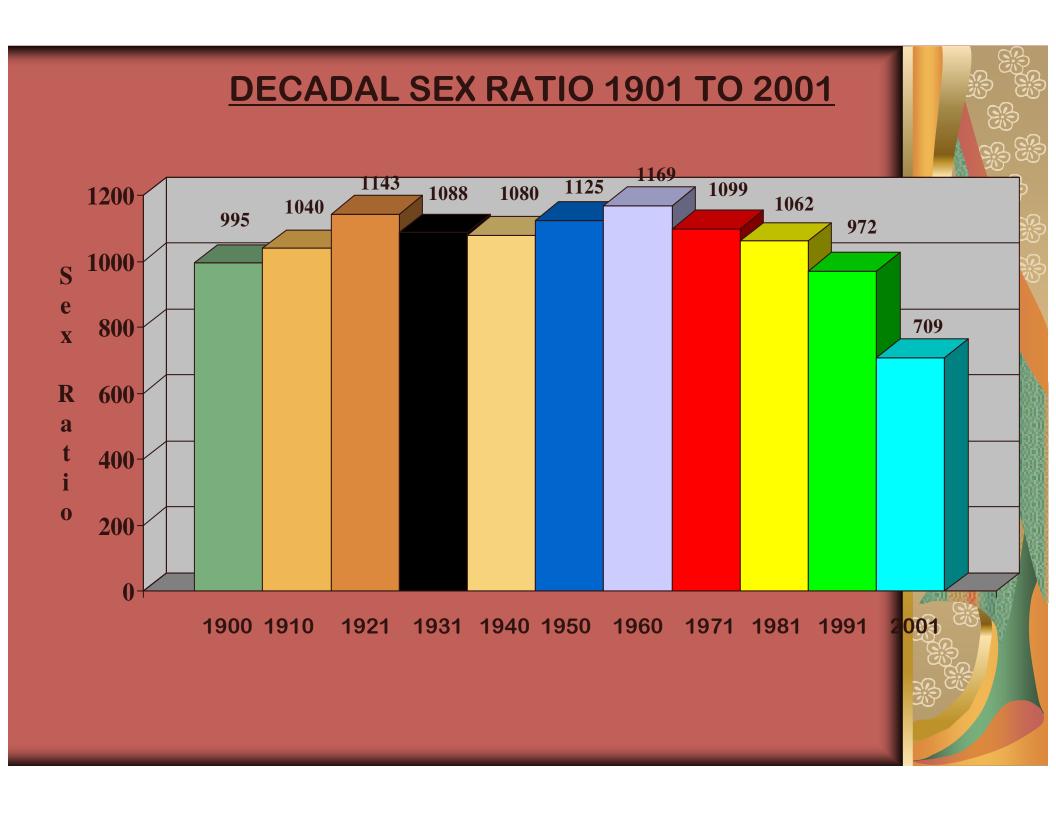
	Daman	Diu	Total
Area (in Sq. Kms.)	72	40	112
Total Population	1,13,949	44,110	1,5 <mark>8,059</mark>
Rural Population	78,206	22,530	1,00,736
Urban Population	35,743	21,580	5 <mark>7</mark> ,323
Males	71,637	20,841	92,478
Females	42,312	23,269	65,581
Population Density	1583	1103	1411
Sex Ratio	591	1117	709
Literacy Rate	83.60	74.14	81.09
SC Population	3,065	1,773	4,838
ST Population	13,881	116	13,997

HEALTH INDICES OF UT A GLANCE

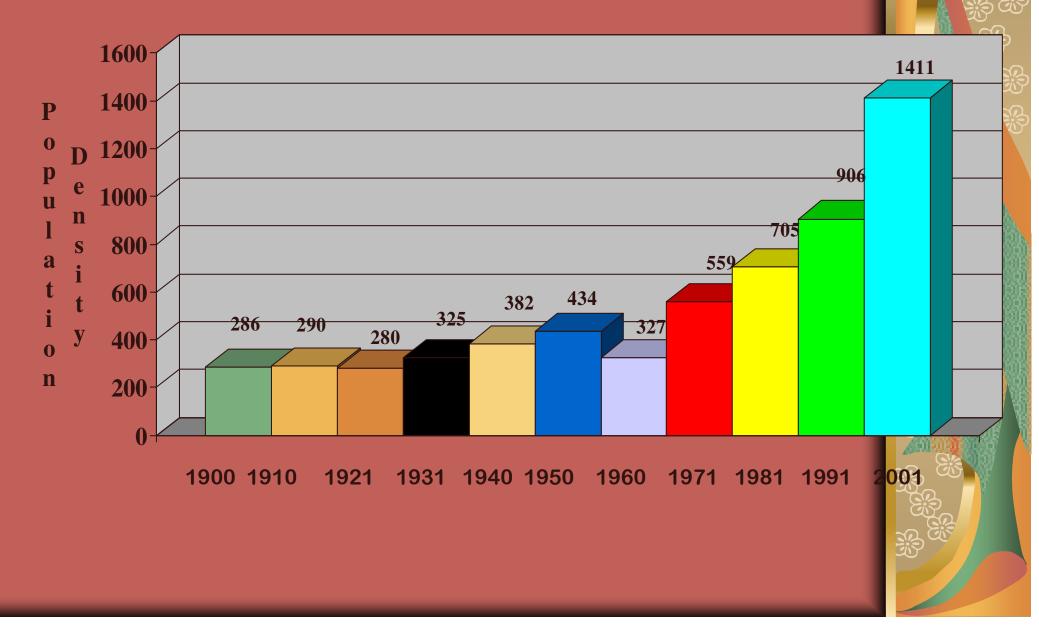
Average Population covered by Sub-Centre	:	7,527
Average Population covered by PHC	:	52,686
Doctor Population ratio	:	1 : 4,391
Nurses Population ratio	:	1 : 4,272
Bed Population ratio	:	1 : 681
Birth Rate	:	21.80
Death Rate	:	8.60
Infant Mortality Rate	:	14.44
Maternal Mortality Rate	:	50.0
Couple Protection Rate	:	54.80
Institutional Delivery	:	87%
Total Fertility Rate	:	2.3

HEALTH MANPOWER (GOVT. SECTOR)

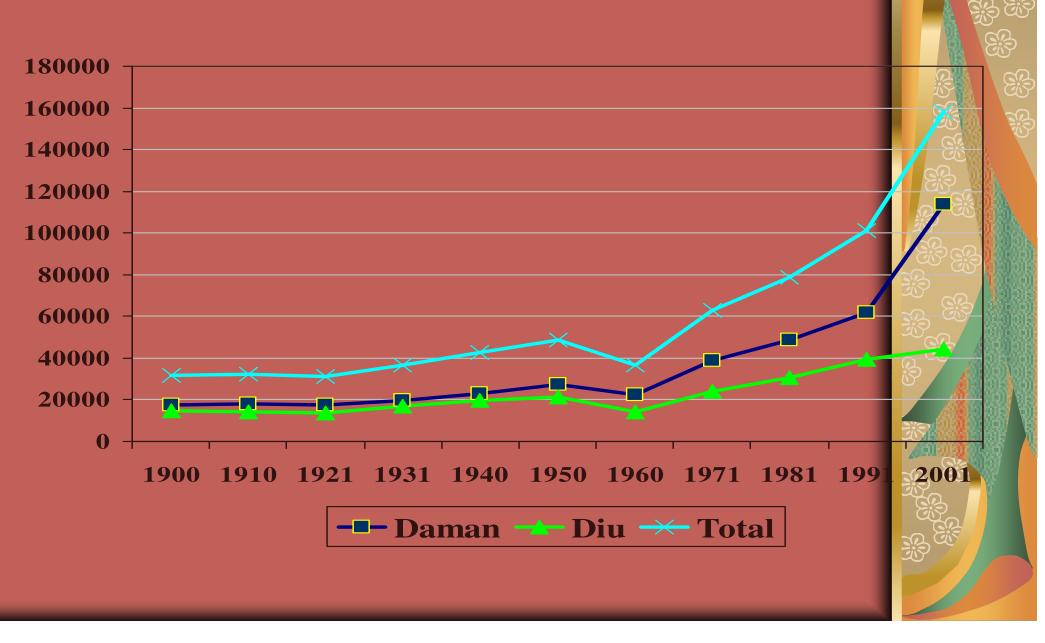
	DAMAN	DIU	TOTAL
DOCTORS	24	12	36
WARD SISTER	2	1	3
STAFF NURSE	31	6	3788
HEALTH WORKERS (F)/ANM	20	8	28
HEALTH WORKERS (M)/BHW	11	6	17 8
EXTENSION EDUCATOR	1	1	2, 8
DRIVER	10	3	138
PHARMACIST / COMPOUNDER	6	3	9
X-RAY TECHNICIAN	5	2	7
LAB. TECHNICIAN / ASSISTANT	6	1	
HEALTH ASSISTANT (F) / LHV	3	1	4 ²⁰
HEALTH ASSISTANT (M) / SI	2	2	40
PARA MEDICAL WORKER (LEP)	5	2	7



DENSITY OF POPULATION 1901 TO 2001



POPULATION TREND



POSITION OF HEALTH INFRASTRUCTURE



Performance of Family Welfare Programme during last two years

FAMILY PLANNING

	2006-2007				2007-2008	
	Target	Achieve- ment	%	Target	Achieve- ment	2%% %
Sterilisation	455	506	111.21	455	459	100.8
IUD	270	272	100.74	260	267	102.6
OP users	370	600	162.16	370	523	141.3
CC Users	1100	1365	124.09	1100	1290	117.2

IMMUNIZATION

	2006-2007		2007-2008					
	Target	Achieve- ment	%	Target	Achieve- ment	%		
BCG	3100	3851	124.23	3200	3564	111.	38 S S S	
DPT	3100	3589	115.77	3200	3356	104.8	3 8 33	
Polio	3100	3589	115.77	3200	3356	104.8	38	Á
Measles	3100	3391	109.39	3200	2955	92.3	4 %	Cite
DT	3100	3886	125.35	3200	3887	121.	17 ^设	

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PERFORMANCE OF PULSE POLIO IMMUNIZATION PROGRAMME

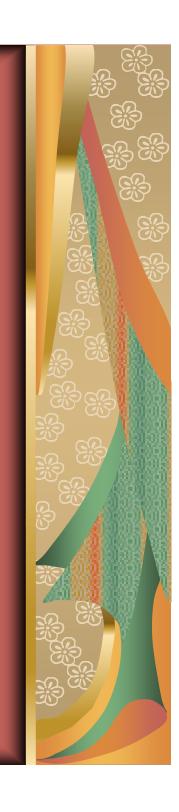
Year / Round	No. of Houses visited	Total Children vaccinated	Total OPV Vials used		
2005-06					
Round –1 (April'05)	49,350	20,547	1130		
Round –2 (May'05)	50,118	20,409	1111		
2006-07					
Jan 2007	56209	22890	1313		
Feb 2007	57720	23343	1312		
2007-08					
Jan 2008	59681	23083	1358		



Performance of National Anti Malaria Programme during last two

years :

	Year - 2006	Year – 2007
Blood Slide Collected	28,897	26452
Blood slide Examined	28,897	26400
Total Positive	140	99
Pf. Cases	19	15
A.P.I.	0.81	0.58
A.B.E.R.	16.80	15.38
S. P. R.%	0.48	0.37
S. F. R %	0.07	0.06
A. F. I %	0.11	0.09
Death Due to Malaria	Nil	Nil



Performance of National Filaria Control Programme during last two years

Sr. No.	Particulars	Year 2006	Year 2007
1	Slides collected	21338	22626
2.	M.F. Carrier	39	29
3.	Disease	24	0
4.	M.F. Rate	0.18	0.13
5.	Disease Rate	0.11	0



Performance of National Programme for Control of Blindness during last two years:

Year	NO. OF CATARACT OPERATION				
	Target	Achievement	% of achievement		
2005-2006	350	364	104.00%		
2006-2007	350	386	110.29%		
2007-2008	600	316	52.66%		



Performance of National Leprosy Eradication Programme:

	2005-06	2006-07	2007-08
New cases detected	3	1	1
Old cases under treatment	4	3	1
Treatment Completed	4	2	0
Under Treatment	3	1	1
Prevalence Rate per 10,000	0.18	0.04	0.04



Performance of Revised National Tuberculosis Control Programme:

	2006	2007
New Smear Positive (NSP)	95	78
New Smear Negative (NSN)	70	74
New Extra Pulmonary (NEP)	40	24
Relapse	13	05
Failure	07	07
Treatment After Defaulter (TAD)	17	28
Others	38	52
Total	280	268

PERFORMANCE OF DISTIRCT BLOOD BANK						
	2006-07	2007-08				
No. of Blood Unit Collected :						
(a) By Replacement	NIL	NIL				
(b) Voluntary donor at Blood Bank	319	425				
(c) Voluntary donation through camps	652	598				
Total Blood Unit Collected	971	1023				
No. of Blood unit supplied	712	959				
No. of Blood unit found reactive						
For Malaria Parasite	01	01	3			
For Hepatitis – B	15	25				
For Hepatitis – C	02	06				
HIV	03	03				
VDRL	01	18	影 ⁽¹⁾			

IMPORTANT ACHIEVEMENTS IN PREVENTION AND CONTROL OF THE DISEASES upto 2007-08:

- Nil cases of Neo-natal Tetanus since last 15 years in UT of Daman & Diu.
- Eliminated Guinea Worm from UT of Daman & Diu.
- No Polio cases reported since last 10 years in UT of Daman & Diu and regular AFP surveillance is also carried out for inclusion of AFP cases.
- Prevalence Rate of Leprosy brought down upto 0.04 per 10,000 populations. The efforts have been appreciated by the Ministry of Health and Family Welfare, New Delhi.
- Special efforts in Tribal areas for treatment and diseases surveillance. No Polio, Leprosy, Guinea worm, Diphtheria, Tetanus in Tribal population of UT of Daman & Diu.
- > 87% Institutional deliveries and nil untrained deliveries resulted Maternal Mortality Rate (MMR) decline upto 50.00(in 1,00,000 live birth).
- 100% coverage of children, pregnant women under Routine Immunization Programme.
- HIV/AIDS awareness level is 93% due to heavy efforts by State AIDS Control Society UT of Daman & Diu as well as NGOs working under SACS.

Progress Under NRHM

- The MOU between U.T. Administrator and GOI has been signed and submitted to Ministry of Health & Family Welfare, GOI
- The State Health Society is Registered and functioning.
- The District Health Societies & District Health Mission for both districts of U.T. of Daman & Diu is Registered and Functioning.
- The Rogi Kalyan Samiti (RKS) by involving Panchayati Raj institution are registered for Govt. Hospital, Marwad, PHC Ghoghla, Diu. Govt. Hospital Diu, & CHC Moti Daman. The constitution of RKS for PHC Kachigam is under process.
- The RKS at sub centre level under the chairmanship of Sarpanch is functioning well in all the 21 Sub centers of this U.T.



The outcome of NRHM upto 2012 and the present achievement by the UT Administration of Daman & Diu upto 2007-08 are as under:

Outcome of NRHM upto 2012	Achievement of Daman & Diu 2006- 07
IMR reduced to 30/1000 live births by 2012	14.44
MMR reduced to 100/100,000 live births by 2012	50
TFR reduced to 2.1 by 2012	2.3
Malaria Mortality Reduction Rate – 60% upto 2012	Nil death since last 10 years
Kala Azar eliminated by 2010	Nil death since last 10 years
Filaria Reduction Rate by 80 % by 2012	Already Reduced upto 60%
Dengue Mortality reduced by 50% by 2012	Nil death since last 3 years
Leprosy Prevalence Rate Reduce from 1.8 per 10,000 in 2005to less than 1 per 10,000 thereafter	0.04
TB DOTS series – maintain 85% cure rate	90% upto 2007

Dikri Development Scheme (DDS) & Matru Samrudhhi Yojana (MSY)

New Scheme in 11th Plan period to "Save the Girl Child" and "Safe Motherhood" in the name of "Dikri Development Scheme" and "Matru Samrudhhi Yojana" are implemented in U.T. of Daman & Diu from 1st April 2007.

Vision /Objectives of the schemes:

- Promote institutional deliveries.
- Reduction in Maternal Mortality and Infant Mortality.
- Save the Girl Child.
- Reduction in Net Reproduction Rate.
- Discourage early marriages.
- Promotion for Registration of Marriages.

Assistance to the mother and girl child as per the following norms:

- Cash assistance of Rs. 5000/- to the mother delivered at Govt. as well as registered private hospitals of UT of Daman & Diu.
- LIC Certificate in the name of Girl Child of Rs. 20,000/- which will be natured when girl child became 18 years of age.

Matru Samrudhhi Yojana (MSY)

Assistance to the mother as per the following norms:

Cash assistance of Rs. 5000/- to the mother delivered at Govt. as well as registered private hospitals of UT of Daman & Diu.

Eligibility:

The scheme is applicable for all segment of society as per following norms:

- Resident of UT of Daman & Diu.
- Marriage Registration Certificate for justifying the marriage taken place at least at the age of 18 year for the Female (mother).
- Institutional Delivery Certificate (at Government as well as registered private hospitals of UT of Daman & Diu).
- Only up to first two live births.

Dikri Development Scheme (DDS)

Assistance to the girl child as per the following norms:

An amount of Rs.20,000/- will be deposited under Profit Plus Scheme of LIC for 18 years in the name of girl child.

Eligibility:

The scheme is applicable for all segment of society as per following norms:

- Resident of UT of Daman & Diu.
- Marriage Registration Certificate for justifying the marriage taken place at least at the age of 18 year for the Female (mother).
- Institutional Delivery Certificate. (at Government as well as registered privates hospitals of UT of Daman & Diu).
- Only up to first two live births.
- An amount of Rs.20,000/- will be deposited under Profit Plus Scheme of LIC for 18 years in the name of girl child.
- The Parent should keep Immunization & Health check-up record of the girl child which require to be produced to the competent authority at the time of maturity of the term deposit.
- If girl child dies within 10 years of age then, NO money will be paid to the lec al parent / guardian. But if the girl child dies after 10 years of age then the maturity amount will be paid to her legal parent / guardian.
- In case of life threatening condition of the girl child the term deposit money can be withdrawn at any time for treatment of girl child with certificate of life threatening condition issued the by Govt. Medical Officer and the same shall be counter signed by the Director, Medical & Health services for Daman district and the Health Officer for Diu district.

INTERVENTIONS AND PROPOSALS UNDER CONSIDERATION FOR IMPLEMENTATION

- Establishment of District Blood Bank in Diu District since Die District is 780 Kms. away from Daman. As per the directives of Supreme Court and NACO, one licensed Blood Bank is necessary in every district.
- Establishment of Blood Component Separation Facility at Blood Bank, Daman for management of the Dengue, Chickungunia and other plate late related diseases.
- Computerization of all health institution in phased manner during 11th Plan period.

NRHM

Communication facilities at Sub-center level under additionalities

Existing Infrastructure, Required & Shortfall (As per 2001 Census)

District	strict Population		Existing		Required		Short fall				5		
		CHC	PHC	SC	RMD	СНС	PHC	SC	CHC	PH	С	SC	Let (
aman	97,003 (General)	1	2	10	-	1	3	20	Nil	1		10	
	16,946 (Tribal)	-	-	5	-	-	1	6	Nil	1			Å
	1,13,949 (Total)	1	2	15	-	1	4	26	Nil	2		第1 影影	
Diu	42,221 (General)	-	1	6	2	1	1	9	1	Nil		23 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
	1,889 (Tribal)	-	-	-	-	-	-	1	-	Nil	લાંગ	£	
	44,110 (Total)	-	1	6	2	1	1	10	1	Nil	الله ت	4	
UT of Daman & Diu	1,58,059	1	3	21	2	2	5	36	1	2		3 15 近	сў К

<u>Note:</u> There is no Urban Health Post/Urban Health Clinic/Urban Health & Family Welfare Centre sanction by Gol in UT of Daman & Diu the esisting Sub-centres, PHCs & CHC is providing primary Health care services to the urban people.

Major Issues

- There is a shortage of man power for which post creation is submitted to Govt. of India, which is pending with Ministry of Health & Family Welfare, New Delhi.
- The Central Medical Seats (MBBS) needs to be increased from 4 seats to 10 seats to overcome the shortage of Doctor.
- Specialist Doctors from out side the UT did not want to serve/stay long time in UT of Daman & Diu due to unavailability of educational and other facilities, so 2 seats of Post Graduate may be sanctioned for UT of Daman & Diu.
- The essential services of Specialist Doctors i.e. Pediatrician, Gynecologist, Orthopedic, Physician are not sanction by Govt. of India in U.T. of Daman & Diu. The U.T. Administration is hiring the specialist from border districts of Gujarat State. There is a need of regular Specialist post in U.T. of Daman & Diu for serving the life of patients.

Financial Performance of Plan, Non Plan and Central Sponsored Secto Health Deptant of U.T. of Daman & Diu During the years 2007-08. 2007 -08 % of utilisation **Expenditure** Allocation Plan Revenue 99.98% 598.28 596.35 Capital 100% 80.00 80.00 Total - Plan 99.72% 678.28 676.35 **Total Non Plan** 99.84% 539.20 538.32 **TOTAL – Plan +** 1217.48 1214.67 99.77% Non Plan **Central Sponsored** 87.56% 167.28 146.47 Scheme Total – Plan + Non 98.29% 1361.14 1384.76 Plan + CSS

Financial Performance of Plan, Non Plan and Central Sponsored Sector in

Deptant of U.T. of Daman & Diu During the years 2008-09 (May 2008)

2008 -09	Allocation	Expenditure	% of utilisation
Plan			
Revenue	449.00	60.55	13.49%
Capital	105.00	13.49	12.8 <mark>5</mark> %
Total - Plan	554.00	74.04	13.3 <mark>6% 2010</mark>
Total Non Plan	534.00	102.57	19.2 <mark>1%</mark>
TOTAL – Plan + Non Plan	1088.00	176.61	16.28%
Central Sponsored Scheme	125.00	14.14	11.18%
Total – Plan + Non Plan + CSS	1213.00	190.75	15.78%

NRHM Activities in the

Current Financial Year 2008-09



Initiatives of Public-private partnership an development activities

Those include -

- Modernization process of hospitals
- Installation and operationalization of new equipments for better patients' care
- Accreditation of Government owned health facilities for the implementation of quality assurance /TQM
- Attempts to implement Indian Public Health Standards through out the referral systems and etc.
- User charges for the patients

Four new Subcentres have opened in 1)Redcross, 2)Dori kadaiya, 3) Dhabel Station, 4)Kewdifolia(Dhabel) Constitution of the Village Health and Sanitation Committee (VHSC) .Out of which 24 are in daman and 4 are in diu. Processes of sensitization of VHSC members have started

Sub-centre level Rogi Kalyan Samiti have been formed

4 Rogi kalyan Samiti are to be formed in all four new sub-centres

PHC level Rogi Kalyan Samiti is to be formed in Daman and Diu

Reinitiate the process of monitoring and evaluat on system incorporation all the referral system

Celebration of Eye donation fortnight
 Garba on Wheels during Navratri (9 days preceding Dasshera festival)
 Development of IEC Materials

Celebration of the World Iodine Deficiency Day 21st Oct,2008 at CHC Moti Daman
[All paramedical staff, AWW, ANM participated the programme]

 Sensitization work-shop on Leprosy
 [Dr. Limrigar, HOD, Skin and VD, Surat Medical College too session. The Government, Private, Family Physician participated the sencitization work shop.]

THANK YOU