Minutes of the 7th Meeting of
The Mission Steering Group of National Rural Health Mission
Held under the Chairmanship of Union Minister of Health & Family Welfare
on 21st June 2011 at 4:00 p.m. at Dr. Ramalingaswami Board Room, AIIMS, New Delhi

The Seventh meeting of Mission Steering Group (MSG) of NRHM was held on 21st June 2011 under the Chairmanship of Shri Ghulam Nabi Azad, Union Minister of Health and Family Welfare. The list of participants is annexed.

At the outset, **Shri K. Chandramouli, Secretary (HFW)** welcomed the Chairperson and the members of Mission Steering Group to the meeting. He thanked the Hon'ble Ministers for their presence in the meeting. Thereafter, he briefed the members about the progress made in various areas under NRHM and told that the mission has been able to make a positive impact in various areas and the 4th Common Review Mission launched in December 2010 has reported notable progress. The mission is moving towards achievement of objectives set at the time of its launch. But a number of challenges remain and pace of progress needs to be accelerated. It was mentioned that the 12th Five Year Plan provides the much needed opportunity to meet the challenges and achieve the objectives set forth. He briefed the members about the priorities identified for the 12th Plan. He thanked the MSG members for providing the leadership and guidance to the Mission and for finding time from their busy schedules to attend the meeting of the MSG.

Shri Ghulam Nabi Azad, Union Minister of Health and Family Welfare (HFM) briefed the MSG about the path breaking initiatives taken by the Government in the last 2 years which has revitalized the heath system across the country. Upgradation of health infrastructure, additional manpower at health facilities, improved skills of health care providers, better availability of drugs and diagnostics and service delivery through the participation of community have been the hallmark of National Rural Health Mission. He informed that during the year 2010-11, the number of beneficiaries under Janani Suraksha Yojana has crossed 11.3 million as against approx. 7,40,000 in 2005-06. Talking about new initiatives, the Minister particularly mentioned that the Mother and Child name based tracking system have also picked up in different States. The data base for more than 40 lakh mothers and 15 lakh children has already been created. The Ministry has introduced new vaccines in the UIP - Hepatitis B and 2nd dose of Measles. Pentavalent vaccine has

also been introduced in Tamil Nadu and Kerala. While praising the sharp reduction in the numbers of polio cases in the country, just 42 in 2010 and only one in the current year so far, **HFM** attributed the success to introduction of bivalent polio vaccine by the Ministry. He also mentioned that a new initiative 'Janani Shishu Suraksha Karyakaram' has been launched on June 1, 2011 which provides a number of entitlements to pregnant women and neonates.

HFM informed the members about the steps taken to increase the Human Resources base in the country for both doctors, nurses and paramedics like increase in intake limit in medical colleges from 150 to 250, rationalization of the rules regarding land requirement for setting up of new medical colleges and increase in the number of postgraduate seats by relaxing the Teacher: Student ratio from 1:1 to 1:2. Additionally, one National Institute of Paramedical Sciences (NIPS) at Delhi and 8 Regional Institutes of Paramedical Sciences (RIPS) are being set up. 269 ANM/GNM schools have been sanctioned in districts without any such schools and in areas having poor health indicators. The **HFM** highlighted that disease control programmes were provided a renewed focus. The Long Lasting Insecticide treated Nets (LLINs) introduced by the Ministry have become very popular and are very effective in controlling malaria. National Center for Disease Control is set to be upgraded to make it a world class institute. **HFM** stressed that population stabilization is a strong thrust area of the Ministry and that delivery of contraceptives at doorsteps of people through ASHA is one of the agenda items today. **HFM** also stressed the importance of private sector engagement for increasing community participation. Further, observing the issue of accessibility for majority of the population he stressed upon the importance of strengthening of public health facilities.

After the opening remarks by the HFM, the discussion was held as per agenda circulated in advance.

Agenda Item No. 1

Confirmation of Minutes of the 6th Meeting of MSG held on 15th June, 2010

The Minutes of the 6th meeting of the Mission Steering Group held on 15th June 2010 were confirmed by the MSG

Agenda Item No. 2

Action taken report on the decisions taken in the 6th Meeting of the MSG held on 15th june, 2010

Sh P.K. Pradhan, Special Secretary and Mission Director, NRHM apprised the members of the MSG on the Action Taken on decisions taken in the 6th meeting of the Mission Steering Group held on 15th June 2010.

During discussion on the Action Taken report, the HFM briefed the members about the Prime Minister's visit to Jammu and Kashmir and the urgent need of setting up of Maternity Hospitals at Jammu and Srinagar. The MSG in its 6th meeting had approved a sum of Rs 50 Crores each for two 200 bedded hospitals, one at Jammu and another at Srinagar and the State Government was to provide the balance amount. But the estimated cost of the hospitals is about 65 crores each. The issue was discussed and it was decided that as State government has acute shortage of funds, for the sake of completion of these projects, MSG decided that 100% cost of these two hospitals will be borne by the government of India from NRHM while the land for the same will be provide by the State Government. They will provide manpower and run the facilities out of their own resources. Total expenditure on this will be now approximately Rs. 130 crores.

Agenda Item No. 3:

NRHM Physical & Financial Progress

Shri P.K. Pradhan apprised the MSG about physical and financial progress of NRHM. Members of MSG noted the progress and various aspects of NRHM were deliberated upon.

Acknowledging the achievements of NRHM and importance of population stabilization, **Shri T.V.Antony,** member of the MSG suggested constitution of a sub-committee on population stabilization to review strategies of population stabilization. He further underlined the importance of involvement of all ministries and of the collectors in promoting population stabilization. **HFM** assured that all the Chief Ministers of the State Governments were being involved and he is writing to them and speaking to them regularly on the issue. Sh Antony also emphasized on review of outputs and outcomes and rather than inputs to the program.

Dr. Sayeeda Hameed, Member (Planning Commission) raised the issue of number of active RKS and VHSC. **HFM** told that the Ministry intends to put in place a system of 3rd party monitoring of various activities under NRHM from the next plan period.

Sh Vilasrao Deshmukh, Minister of Rural Development talked about the social audits being done by the Rural Development Department wherein all the information is placed before the Gram Sabha. He also underlined the desirability of having one agency for monitoring of projects of various departments, including health, Rural Development, Education etc. at the village level. He suggested that a committee of Secretaries of the concerned departments should be constituted to suggest a mechanism for the same. It was agreed that such an exercise would be taken up shortly.

Dr. Abhay Bang, SEARCH, Maharashtra suggested the need to bring in technology for effective remote monitoring like use of bio-metric attendance etc. He also suggested that a part of the salary of employees should be placed in the hands of the beneficiaries.

Dr. Sayeeda Hameed acknowledged the importance of convergence of efforts of different Ministries in monitoring. **Shri K. Chandramouli, Secretary (Health & FW)** agreed to the suggestion. **Shri Vilasrao Deshmukh** emphasized the importance of awareness generation on various government schemes. He said that Janani Shishu Suraksha Karyakram is a great scheme but people should be told about the scheme by putting up posters in every health facility. **HFM** informed that the ministry is planning advertisements in regional Television Channels to make the people aware of the schemes. **Shri Vilasrao Deshmukh, Hon'ble Minister of Rural Development and Panchayati Raj** also stressed the need to strengthen capacity of medical colleges. **HFM** informed the Hon'ble Minister that attention is being paid to this issue and Rs. 1150Cr was provided to Medical Colleges for increasing their infrastructure and human resources.

Agenda Item No. 4:

Minutes of the 12th and 13th Meeting of Empowered Programme Committee, held on 29th November 2010 and 9th June 2011 for perusal of the MSG

The minutes of the 12th and 13th Meeting of Empowered Programme Committee, held on 29th November 2010 and 9th June 2011 were noted by the MSG.

Agenda Item No. 5:

Proposal for Performance Linked Payment Plan to ASHAs for Improving acceptance of IUDs

The proposal as recommended by the Empowered Programme Committee was placed before the MSG. After detailed discussion on the proposal the members of the MSG felt that ASHA should not be held responsible for IUD retention but may be incentivized for counseling and promoting use of IUDs as a spacing method. It was informed that there exists a cash incentive for motivating a woman for accepting IUD. The proposal in the present form was not approved by the MSG.

Agenda Item No. 6:

Proposal for delivery of contraceptives (Condoms, OCPs, ECPs) by ASHAs at the homes of beneficiaries

The following proposal as recommended by the EPC was considered and approved by MSG:

a. To utilize the services of ASHAs for delivery of contraceptives at the homes of the beneficiaries
b. To allow ASHAs to charge Rs 1.00 for a pack of 3 condoms, Rs 1.00 for an OCP cycle and Rs 2.00 for an ECP from the beneficiaries for the efforts made in distributing these reproductive commodities.

Agenda Item No. 7:

Proposal for Enhancement of the Compensation Scheme in Sterilization in 20 High Focus States

After detailed discussion, the proposal was not agreed to.

Agenda Item No. 8:

Proposal for District Level Household Survey (DLHS) – 4

The proposal was placed before the MSG. **Dr. V. R. Muraleedharan, Professor, Department of Humanities & Social Sciences; IIT Chennai** suggested that the DLHS should include a component to evaluate the out-of-pocket expenditure on health care which was noted. The proposal as recommended by the Empowered Programme Committee was approved by the MSG.

Agenda Item No. 9:

Proposal for Modifications in the Scheme for Promotion of Menstrual Hygiene

The proposal was placed before the MSG. After detailed discussion the proposal as recommended by the EPC was approved by the MSG. It was also decided that matter will be taken up with State Governments by the Ministry for exemption of sanitary napkins provided by the GoI from VAT.

Agenda Item No. 10:

Differential Financial approach for comprehensive healthcare

The MSG approved revision of norms for untied funds and RKS grants for health facilities as recommended by the EPC. The MSG also decided to empower District Health Society to reallocate upto 15% of the admissible untied funds and RKS grants.

Agenda Item No. 11:

Proposal for involving ASHA in Home Based Newborn Care

The proposal as recommended by the Empowered Programme Committee was approved by MSG. MSG also decided that the incentive amount would be paid one time after 45 days of delivery subject to the following:

- Recording of weight of the newborn in the MCP card
- Ensuring BCG, 1st dose of OPV and DPT vaccination
- Both the mother and the newborn are safe till 42 days of the delivery, and
- Registration of birth has been done.

Agenda Item No. 12:

Proposal for revision in the criterion of allocation of funds to the States under NRHM

The proposal as recommended by the Empowered Programme Committee was placed before the MSG. During discussion on the issue, **Ms. Neidono Angami,** suggested some measures for improving implementation of NRHM in the North East States. She suggested that health ministers of NE states should meet every six months to share their experiences and also monitor the progress of NRHM in NE states. She also highlighted the need for a meeting of Medical and Non- Medical employees of NRHM in the NE states. This will further encourage sharing of experiences. HFM appreciated the suggestions.

After detailed discussions it was decided to set up an expert group comprising of the following to look into the existing weightage formula, analyze the impact of the proposed revision and suggest revision in the weightage formula for adoption from the 12th Plan.

1) Special Secretary & Financial Adviser - Chairperson
2) Dr. Nagesh Singh, Adviser, PAMD, Planning Commission.
3) Representative of Ministry of Finance.
4) Representative of Min. of Rural Development.
5) JS (RCH)/Director (RCH).
6) JS (Policy)/Director (NRHM-I)
7) Director (NRHM-Finance).
8) Representative of NHSRC.
9) Representative of NIHFW.
10) Representative of NIPFP.
11) Economic Adviser, MoHFW-Member Secretary

MSG also decided that 10% of the total allocation under flexible pools of NRHM be kept apart at the national level which can be released to different States for specific activities. The eligibility of the States shall be based on their performance against the monitorable targets and implementation of specific reform agenda in the health sector besides full contribution on State share and enhancement of Plan budget by 10% every year.

Agenda Item No. 13:

Expansion of Village Health and Sanitation Committees to include Nutrition in its mandate and renaming it as Village Health, Sanitation and Nutrition Committee (VHSNC)

The proposal regarding renaming of the Village Health and Sanitation Committee (VHSC) to Village Health, Sanitation and Nutrition Committee (VHSNC) and its role was discussed and approved by the MSG.

MSG also decided to expand the mandate of Village Health and Sanitation Committee to create awareness about nutritional issues; carry out surveys on nutritional status, inclusion of Nutritional needs in the Village Health Plan, monitoring and supervision of Village Health and Nutrition Day and supervise the functioning of Anganwadi Centre (AWC). In addition the committee will facilitate early detection and ensure referrals of malnourished children to the nearest Nutritional Rehabilitation Centres and act as a grievance redress forum to the community. MSG also decided that States will be advised to make the VHSNC a sub-committee of the Gram Panchayat.

Agenda Item No. 14:

Payment of monthly honorarium @ Rs. 500/- to ASHA in addition to performance incentives available under various programmes

The proposal of payment of fixed monthly honorarium in addition to performance linked incentive to ASHAs was discussed in great detail in the MSG. There was a clear agreement that the existing scheme of performance based incentives should be continued.

However, MSG further decided that the areas where incentivization will increase the monthly take home money of ASHAs may be worked out and appropriate proposal in this regard may be brought to MSG.

Agenda Item No. 15:

Proposal for partial modification of the Centrally Sponsored Scheme for development of AYUSH Hospitals and Dispensaries for mainstreaming of AYUSH under NRHM

The proposal as recommended by the Empowered Programme Committee was approved by the MSG.

Agenda Item No. 16:

Any other Item with the permission of the Chair

Shri A.K Sarkar Additional Chief Secretary (Health), Department of Health & Family Welfare, Jharkhand raised the issue of incentives to Human Resources in LWE districts. He was told that provision for such initiatives are already exists.

Dr. Sayeeda Hameed commended the setting up of the Central Supervisory Board on Declining Child Sex Ratio. **HFM** informed the members that Ministry is planning to organize conference of the Health Ministers and Health Secretaries of States on Gender issues.

HFM thanked the members for contribution to the deliberations of MSG.
The meeting ended with vote of thanks to the chair.