		Progress FY 2012-13						Propos	ed 2013-14		Remarks
		Phys	ical Progress		Financial Progress (Rs. L	_akhs)	•				State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
В		838009952	300914	88078.02	51508.55			744080369	781401072	107712.26	
B1	ASHA	261956	219312	3812.45	3411.91			249272	382994	3808.30	Anexures ASHA.docx
B 1.1	ASHA Cost:	261956		1				249272			latest expenditure is note on ASHA Program.
B1.1.1 B1.1.1.1	Selection & Training of ASHA Module I - IV	52250 2500	51305 12950	1003.74 35.90	952.53	0	ASHA	45273 3840	8632 2867	1009.19 110.08	Budget proposed for Induction Module Attatched Annexure B 1.1.1.1
B1.1.1.2	Module V	5300	5752			0.00		0	0	0.00	Activity deleted as per instructions in analysis of first draft. Integrated with induction module.
B1.1.1.3	Module VI & VII	38600	27799			226.82	ASHA			848.76	HBNC Module VI & VII ASHA training Annexure B 1.1.1.3
B1.1.1.4	Other Trainings	5850 260	4804 180	83.04 6.50	99.05 4.50	2.00	BCM			50.35 6.36	ASHA Facilitator training for HDNC Supervision Appoyure P
B1.1.1.4.1	Block Community Mobilizer training	260	180	6.50	4.50	2.00	BCIVI	355	1792	0.30	ASHA Facilitator training for HBNC Supervision Annexure B 1.1.1.4.1
B1.1.1.4.2	Block Facilitator Training	2800	1834	76.54	45.85	30.69	BF	2478	1775	43.99	ASHA Facilitator training for HBNC Supervision Annexure B 1.1.1.4.2
B1.1.1.4.3	ASHA Software Training HFWTC level	450	450	0.00	34.70	0.00	District Trainer	0	0	0.00	Not requested
B1.1.1.4.4	Block Facilitator Software Training District level	2340	2340	0.00	14.00	0.00	Block Facilitator	0	0	0.00	Not requested
B1.1.1.4.5										0.00	
B1.1.1.4.6 B1.1.2	Procurement of ASHA Drug Kit	58831	0	354.04	0.00			58881		0.00 353.29	
B1.1.2.1	New Kits	58831			0.00	354.04	Kits		600	353.29	ASHA Medicine kit list revised as per Gol guideliens. Detailed itemwise contents of the kit attached. (Attached in Annexure B1.1.2.1)
B1.1.2.2	Replenishment	0	0	0.00	0.00	0		0	0	0.00	Drugs included in the drug kit is as per GOI guideline and as per last year approved drugs Budget not requested.
		0	0			0		0	0		budget not requested.
B1.1.2.3	Procurement of ASHA HBNC Kit	0	0		0.00	-		0	0	0.00	
B1.1.2.4 B1.1.2.5	New Kits Replenishment	0	0	0.00	0.00	0	Kits	0	0	0.00 0.00	Activity is deleted Not required
B1.1.3		91040	109104	628.35	640.57			91818	11420	562.03	
B1.1.3.1 B1.1.3.1.1	Incentive under MH (ANC/PNC)	0	0	0.00	0.00			0	0	0.00 0.00	All incentives of maternal health in maternal health chapter of RCH
B1.1.3.1.2										0.00	PIP.
B1.1.3.1.3		20522	40017	105.22	125 (0			20522	CC1	0.00	ACUA in contine managed for Tribel and Neg tribel area
B1.1.3.2 B1.1.3.2.1	Incentive under CH (HBNC) Incentive ASHA under CH	29523 29523	48317 48317	195.23 195.23	125.68 125.68	69.55	ASHA		661 661	195.24 195.24	ASHA incentive proposed for Tribal and Non-tribal area. Only for HBNC. Annexure B 1.1.3.2.1
B1.1.3.2.2		23020		100.20	125100					0.00	
B1.1.3.2.3										0.00	
B1.1.3.3	Incentive for FP(PPIUCD/others)	0	0	0.00	0.00			0	0	0.00	Incentive requested in FW
B1.1.3.3.1 B1.1.3.3.2										0.00 0.00	
B1.1.3.3.3		<u> </u>								0.00	
B1.1.3.4	Incentive for AH									0.00	
B1.1.3.5 B1.1.3.5.1	Other incentive Incentive under Mission Flexi Pool - Tribal	59289 9523	58559 9736		417.15 70.28	24.95	ASHA			344.06 95.23	Total activities submitted are 62 out of which 34 are new. Justification of each new actiity submited. As per old rates, ASHA was getting average Rs. 500/PM which is very low. Rates and activites are revised in such a way that ASHA should get at least Rs. 1000/PM . This is important for ASHA to keep interest in the scheme. Detailed rates are attached in annexure. Rates revised as per discussion.
		40700	48823	248.93	346.87	0.00	ASHA	49766	500	248.83	Total activities submitted are 62 out of which 34 are new. Justification of each new actiity submited.
B1.1.3.5.2	Incentive under Mission Flexi Pool - Non Tribal	49766									As per old rates, ASHA was getting average Rs. 500/PM which is very low. Rates and activites are revised in such a way that ASHA should get at least Rs. 1000/PM . This is important for ASHA to keep interest in the scheme. Detailed rates are attached in annexure. Rates revised as per discussion.
B1.1.3.5.2 B1.1.3.5.3 B1.1.3.5.4		49766									very low. Rates and activites are revised in such a way that ASHA should get at least Rs. 1000/PM . This is important for ASHA to keep interest in the scheme. Detailed rates are attached in annexure.

				Progress FY 2012	2-13		Proposed 2013-14				Remarks	
		Phys	sical Progress		Financial Progress (Rs.	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.	
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)		Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)		
B1.1.3.5.6										0.00		
B1.1.3.5.7 B1.1.3.5.8										0.00		
B1.1.3.5.9										0.00		
B1.1.3.5.10										0.00		
B1.1.3.5.11										0.00		
B1.1.3.5.12		2228	2228		97.74			2006	9259	0.00		
B1.1.3.6	Other (support provisions to ASHA such as uniform, diary, ASHA Ghar etc)	2228	2228	88.96	97.74			3006	9259	22.74		
B1.1.3.6.1	Uniform to ASHA & BF	0	0	0.00	0.00	0	ASHA & BF	0	0	0.00	this budget included in supplementary PIP	
B1.1.3.6.2	ASHA & BF Diary	0	0	0.00	0.00	0	ASHA & BF	0	0	0.00	this budget included in supplementary PIP	
B1.1.3.6.3	Communication allownces to ASA	0	0	0.00	0.00	0	ASHA & BF	0	0	0.00	this budget included in supplementary PIP	
	and BF											
B1.1.3.6.4	Contingency at PHC, Block, District and State HQ	2195	2195	22.71	36.90	0	PHC, Block, District and State HQ	2197	1035	22.74	Contingency as per last year Annexure B 1.1.3.6.4	
B1.1.4	Awards to ASHA's/Link workers	33	33	66.25	60.84	5.41	Awards to ASHA	809	8224	66.53	Activity completely revised. Awards will be given to ASHA - 2/block and three per district. Award ceremoney at district level. Cost increased due to increase in cost of ceremoney based on last year experience. Detailed cost break up attached in annexture. Annexure B 1.1.4	
B1.1.5	ASHA Resource Centre/ASHA Mentoring Group	59802	58870	1760.07	1757.97			52491	354118	1817.26		
B1.1.5.1	HR At State Level	3	3	5.40	5.00	0.40	No of persons	3	180000	5.40	Three persons at State Monitoring Cell continued from last year Detailed break up annexture as B.1.1.5.1.	
B1.1.5.2	HR at District Level	66	66	58.08	61.18	0.00	No of persons	33	170400	56.23	As per last year. Annexure B 1.1.5.2	
B1.1.5.3	HR at Block Level	58189	58189	1692.30	1688.15	4.15	ASHA + Block Community Mobiliser + Block Facilitator + LHV	50909	3440	1751.34	As per last year. Annexure B 1.1.5.3	
B1.1.5.4	Mobility Costs for ASHA Resource Centre/ASHA Mentoring Group (Kindly Specify)	1544	612	4.29	3.64	0.65	meetings	1546	278	4.29	Mentoring groups are established at State, district and block level. This budget is for expanses on meeting and travelling. Costs norms attached in annexure B.1.1.5.4	
B2	Untied Funds	53501	53501	5402.24	4612.15	790.09		53580	120000	5933.15	Anexures Untied fund.docx	
B2.1	Untied Fund for CHCs/SDH	458	458	229.00	182.21	46.79	SDH, RH, WH and GH	461	50000	230.50	Untied grants are decentralised grants. These grants are to be utilised for the purposes or for the activities for which grants given by State Government are inadequate or for those activities which are area specific and no funds are available for them. These funds can also be utilised for innovative activities. So these funds are usually booked after the State grant is fully utilised. Therefore these grants are more predominantly utilised in third and fourth quarter of the year. New Hospitals - 1) RH Boisar Dist. Thane, 2) RH Saundad, Dist. Gondiya 3) WH - Nanded	
B2.2	Untied Fund for PHCs	1810	1810	426.53	405.36	21.17	РНС	1811	25000	452.75	Untied grants are decentralised grants. These grants are to be utilised for the purposes or for the activities for which grants given by State Government are inadequate or for those activities which are area specific and no funds are available for them. These funds can also be utilised for innovative activities. So these funds are usually booked after the State grant is fully utilised. Therefore these grants are more predominantly utilised in third and fourth quarter of the year. New PHC - PHC- Khataon, Dist. Nanded.	
B2.3	Untied Fund for Sub Centres	10566	10566	1011.27	895.85	115.42	Sub Centres	10559	10000	1055.90	Maharashtra has 10580 approved Sub Centers. However out of these, 21 subcenters are non-functional due to village included in expanded corporation area, SC situated in uninhabited villages and SC village merged in backwater of dams, development projects. Therefore it is requested to release untied funds for 10559 SC only.	
L	<u> </u>	1	I	I		Page 28 of 5	ı	1	1	1		

				Progress FY 2012	2-13			Propos	ed 2013-14		Remarks	
		Phys	sical Progress		Financial Progress (Rs.	Lakhs)	1				State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.	
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)		
B2.4	Untied fund for VHSC	39872	39872	3548.61	2974.20	574.41	Revenue village	39955	10000	3995.50	In Maharashtra, population of revenew villages ranges from 100 to 30000. As per NRHM norms, we are expected to release Rs. 10000/- to all of these villages. This has resulted into under utilisation of the funds in small villages and insufficient funds to bigger villages. This was discussed last year in NPCC and NPCC had agreed for differential budget release norms subjected to total provision of the state @ Rs. 10000/revenew village. As this method of budget distribution is already approved by NPCC last years, this may be continued for 2013-14.	
B2.5	Others	795	795	186.83	154.53	32.30	APHCs	794	25000	198.50	In Maharashtra there are 794 APHCs. Thease units provide all the services except FW operations and medical emergencies. They are situated in larger villages within PHCs, in forest areas, in irrigation colonies and near big govt projects. These APHCs are considered on priority at the time of upgradation to PHCs. As these centers provide RCH services in remote areas, they need to be strengthned. Precaution will be taken to utilised these funds in time during next year (2013-14).	
B.3	Annual Maintenance Grants (only for Government institutions)	10801	10801	2145.00	1904.66			11006	310000	2341.70	Anexures Annual Maintenance Grant.docx	
B3.1	СНС	341	341	341.00	283.77	57.23	RH , WH and GH	355	100000	355.00	Annual Maintenance grants are decentralised grants. These funds is to be utilised for minor repairs & maintenance at institutional level. These grants will be utilise firstly for those repairs & Maintenance which are essential but for which no State grants are available & secondly for those repairs & Maintenance for which State grants are inadequate. So these funds are usually booked after the State grant is fully utilised. Therefore these grants are more predominantly utilised in third and fourth quarter of the year.Increase Institutes are - 1) Dist. Dhule - 1) RH Jaitane 2) RH Thalner, 2) Dist Gondiya- RH Saundad, 3) Dist Nanded - Women Hospital, 4) Dist Osmanabad - Women Hospital 5) Dist Pune - RH Yavat 6) Dist Solapur RH Malshiras, Madha, Karkamb & Wadala. 7) Dist Thane - RH Tokawade, Boisar, Khardi & Wangaon	
B3.2	PHCs		1614	737.03	703.27	33.76	PHC	1651	50000	825.50	Annual Maintenance grants are decentralised grants. These funds is to be utilised for minor repairs & maintenance at institutional level. These grants will be utilise firstly for those repairs & Maintenance which are essential but for which no State grants are available & secondly for those repairs & Maintenance for which State grants are inadequate. So these funds are usually booked after the State grant is fully utilised. Therefore these grants are more predominantly utilised in third and fourth quarter of the year.1) Dist Aurangabad - Jategaon & Aaland.2) Ahmednagar - Sonai.3) Dist Bhandara- PHC Asgaon & Mohdura 4) Dist chandrapur- Nardana, 5Dist Gadchiroli-1) Bodli, 2) MAHAGAON, 3) MARKHANDA ,4) TODSA, 5) DEULGAON, 6) Jalana - Dongoan, 7) Jalgoan - Londe & Dahigaon , 8) Nagpur - Dehegone-Joshi,Titur, Gondi-Khire, 9)Nanded - 1) Ashta 2) Neela 3) Kothari 10) Pune - kedgaon, deulgaon, talegaon, hade, lasurne, bijawadi,Male,belasar,belhe, Amboli, Karanjvihire, Ranjangaon, 12) Kurkumbha , 11) Raigad - PHC Koproli, 12) Sangli - 1)Chinchani 2)Walsang 13) Sindhudurg - Golvan, 14) Solapur - Tungat And Ropale 15) Yavatmal - PHC Hiwari, PHC Dahegaon, PHC Mhasola. Dist. Dhule - jaitane & thalner PHC are decrease due to Converted into Rural Hospital Nandurbar is reduce PHC Jamana is shifted in rented Building at Veli,. Washim is decrease Phc Kiniraja is functional in SC Building.	
B3.3	Sub Centres	8286	8286		680.49	88.20	Sub Centres	8447	10000	844.70	Detailed information of SC is submitted in annexure. Precaution will be taken to utilise the funds in time.	
B3.4	DH	0	0	0.00	0.00	0.00	DH , TB H, Lep H, Mental Hosp, RRC and Ortho H	0	0	0.00	proposed in Supplementry PIP	
B3.5	SDH	80	80	80.00	69.90	10.10 Page 29 of 5	Sub District Hosp	80	100000	80.00		

				Progress FY 2012	2-13			Propos	ed 2013-14		Remarks
		Phys	sical Progress		Financial Progress (Rs.	. Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B3.6	Other	480	480	218.28	167.23	51.05	APHCs	473	50000	236.50	 The differnence in number of APHC for AMG is because of following reasons : 9 APHC in Nandurbar were shifted to rented building as own building is not fit to run health facility so deleted. 2 APHCs (Amravati District Kasbagaon APHC & in Bhandara Distict Yerli APHCs) newly shifted to own building. Thus total 473 APHC are functioning in old building.
B.4 B.4.1	Hospital Strengthening Up gradation of CHCs, PHCs, Dist.	1280 1280	288 288		21826.85 21826.85			905 905	329130444 329130444	23044.84 23044.84	Anexures Infrastructure.docx Anexures Infrastructure.xlsx
D4.1.1	Hospitals	10	10	12620.20	0402.00			25	6600000	4700.00	
B4.1.1 B4.1.1.1	District Hospitals Additional Building/ Major Upgradation of existing Structure	18 8	10 6	12639.28 12369.28	9483.86 9369.86	5458		35 7	66998000 66945000	4700.99 4686.15	The activity revised as per comments in anaylsis. Details of works attached in annexure B.4.1.1.1. Pleaes note that at Nanded the hospital is being transfered to Public Health Department so there is no data on utilisation.
B4.1.1.2	Repair/ Renovation	10	4	270.00	114.00	156.00	DH	28	53000	14.84	Renovation works for Dialysis units and Burn wards which are completed in last year.
B4.1.1.3	Spillover of Ongoing Works	0	0	0.00	0.00	0		0	0	0.00	Not requested
B4.1.1.4 B4.1.2	Staff Quarters CHCs	0 67	0 24	0.00 2126.50	0.00 1898.50	0		0 44	0 40345274	0.00 2959.19	Not requested
B4.1.2.1	Additional Building/ Major Upgradation of existing Structure	12	5	1481.50	1313.50	1168		2	22080000	441.60	Revised as per comments and guideliens in MNH Toolkit. Detailed compliance in annexure. Works required for four hospitals are proposed in Suplementary PIP.
B4.1.2.2	Repair/ Renovation	55	19	645.00	585.00	60.00	Hospitals.	34	4075649	1382.42	Revised as per comments and guideliens in MNH Toolkit. Detailed compliance in annexure.
B4.1.2.3	Spillover of Ongoing Works	0	0	0.00	0.00	0		0	0	0.00	
B4.1.2.4	Staff Quarters	0	0	0.00	0.00	0.00		8	14189625	1135.17	New activity. Staff quarters are essential for getting round the clock services in high utilization hospials.
B4.1.3	PHCs	474	85	5674.00	4561.66			372	11278251	5230.67	
B4.1.3.1	Additional Building/ Major Upgradation of existing Structure	6	0	596.00	497.12	596	РНС	5	6572800	328.64	These PHCs have high number of deliveries and currently available facilities are not adequate. Budget is requested for expansion of labour room, additional ward, sanitary block, drainage sysem, water supply, quarters for drivers and sweepers, etc
B4.1.3.2	Repair/ Renovation	304	22	1998.00	1168.54	829.46	Civil works	218	924229	2014.82	This activity is completely revised as per discussion during VC and MNH Tool Kit. Criteria adopted for selection of PHC are as follows: 1. For high focus district PHCs - more than 10 del/month 2. For other district PHCs - more than 20 del/month No generic budget is requsted but works requested as per need of each facility.
B4.1.3.3	Spillover of Ongoing Works	142	63	2325.00	2241.00	1784		96	2053864	1971.71	This budget is required for the works which started in 2012-13 but will not be completed by 31.3.13. Budget is requested as works are already in progress.
B4.1.3.4	Staff Quarters	22	0	755.00	655.00	755	Staff Quarters	53	1727358	915.50	It is assured that spillover will be completed by March 2014. As per remarks mentioned in anaylsis report, PHCs with less than 10
5											del/month are deleted. Proposal revised and submitted.
B4.1.4	Sub Centres	684	161	2572.00	2376.23			339	998636	1471.85	The increase is because of the actual demand from the districts as per need of the institutions. The amount also increased because of increased awarness in local MLAS/MPS. (They are insisting to include the needful works in their consitutencies in view to give better service to general public.)
B4.1.4.1	Additional Building/ Major Upgradation of existing Structure	0	0	0.00	0.00	0.00		0	0	0.00	Not proposed.
B4.1.4.2	Repair/ Renovation	475	59	1284.00	1088.23	195.77 Page 30 of 5	58	272	391592	1065.13	List of SC revised as per comments of GoI. All the SC with less than 3 deliveries and considered for repairs last year are deleted. Now 237 SC are fulfilling the criteria and are proposed. Detailed list in annexure.

				Progress FY 201	2-13			Propos	ed 2013-14		Remarks	
		Phys	sical Progress		Financial Progress (Rs.	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.	
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)		
B4.1.4.3	Spillover of Ongoing Works	209	102	1288.00	1288.00	850		67	607044	406.72	This budget is required for the works which started in 2012-13 but will not be completed by 31.3.13. Budget is requested as works are already in progress.	
B4.1.4.4	ANM Quarters	0	0	0.00	0.00	0		0	0	0.00	Not Requested	
B4.1.5	Others (MCH Wings)	11	1	1154.00	1038.20			90	25115561	4347.39	Last year, budget was requested under various heads such as IDW, IPHS, High Focus, Hospital strengthning, etc. Therefore, budget is increased. Also budget is increased due to focus on high utilisation (delivery point) facilities.	
B4.1.5.1	(Absolutely) New / Rented to Own Building	0	0	0.00	0.00	0	Hospital	1	3000000	30.00	 This center is good number of deliveries but do not have MCH wing. Hon. Minister H & FW) has desired to construct one MCH wing in this hospital considering the delivery load and potential of incrase in the load. Presently this hospital has 30 beds. Additional 20 bedded MCH wing will be consctructed for delivery and newborn care. Total budget required is Rs. 65 Lskhd. Ou of this 30.0 Lakh is 	
B4.1.5.2	Additional requirement from	0	0	0.00	0.00	0		0	0	0.00	requsted this year. Not Requested	
B4.1.5.3	previous work Carry forward /Spillover of Ongoing	0	0	0.00	0.00	0		0	0	0.00	Not Requested	
	Works	11	4	1154.00	1020.20			00	22445564	4247.20		
B4.1.5.4	Other construction	11	1	1154.00	1038.20			89	22115561	4317.39		
B4.1.5.4.1	Other Construction above than other in IDW	0	0	0.00	0.00	0.00		76	2289474	1740.00	As per discussion during VC, only post mortem rooms are requested. This include post mortem room, martury cabinet room and mourning room. All other proposals relaed to THO office, AYUSH and ZP Dispnsaries deleted. Total requirement is of 107 PM rooms. Out of these 76 are requsted here and remaining 31 are requsted in Suplementary PIP.	
B4.1.5.4.2	Civil works, renovation, repairs of Arogya Bhavan and Program Offices	0	0	0.00	0.00	0.00		0	0	0.00	As per discussion with AS & MD, shifted to A.10.1.11.4	
B4.1.5.4.3	Additional facilities to DH	1	1	194.00	78.20	115.80	DH/GH	0	0	0.00	Deleted as per remarks of GoI.	
B4.1.5.4.4	New Construction of District / Regional Warehouses	10	0	960.00	960.00	960	District / Regional Warehouse	13	19826087	2577.39	 Proposal revised as per discussion in VC. Warehouse type plan is approved by committee under Chief Secretary. Warehouses are being constructed at district HQ (23 districts) and furniture to these 13 and last year constructed 10 warehouses. This is important for distribution of medicines. Out of theae 13 districts are requested in PIP here and remaining 10 districts requested in suplementary PIP. Construction of 10 warehouses of 2012-13 in progress. Total budget will be utilised by end of March 2013. 	
B4.1.5.4.5	Repairs and furniture for existing						All warehouses	0	0	0.00	Deleted as per remarks of GoI.	
B4.1.6	warehouse SDH	26	7	8729.64	2468.40			25	184394722	4334.75		
B4.1.6.1	Additional Building/ Major Upgradation of existing Structure	10	4	8025.64	1878.40	6147.24	SDH	3	76028667	2280.86	These Hosptials have high number of deliveries and currently available facilities are not adequate. Budget is requested for expansion of labour room, additional ward, sanitary block, drainage sysem, water supply, quarters for drivers and sweepers, etc Hosptials and deliveries up to Nov 12 are as follows: Sillod (2887), Ambad (1774), and Shirpur (1664). Regarding Sillod, SNCU + MCH wing will be established. Overview of cost estimates submitted in annexure.	
B4.1.6.2	Repair/ Renovation	15	2	204.00	90.00	114.00	civil works	18	4832722	869.89	Budget revised as per discussion in VC and comments received from GoI. Eight facilities deleted.	
B4.1.6.3	Spillover of Ongoing Works	1	1	500.00	500.00	0 Page 31 of 6	8	1	96100000	961.00	This budget is reqiured for the works of WH Gadchiroli (high focus). Budget is requested as works are already in progress. For Gadchiroli, total budget required is 1661 Lakh. Works started in 12-13 and expected to complete by March 2014. Budget released is Rs. 7.0 Crores and remaining last instalment is expected in 2013-14. Blueprint of work is submitted to Gol at the time of PIP 2012-13.	

				Progress FY 2012	2-13			Propos	ed 2013-14		Remarks
		Phys	sical Progress		Financial Progress (Rs. I	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B4.1.6.4	Staff Quarters	0	0	0.00	0.00	0		3	7433333	223.00	Staff quarters requested in places where there is high load of deliveries and Ceasarian sections are being carried out.
В 4.2	Strengthening of Districts , Sub Divisional Hospitals, CHCs, PHCs	0	0	0.00	0.00	0.00		0	0	0.00	Not requested
B.4.3	Sub Centre Rent and Contingencies	0	0	0.00	0.00	0		0	0	0.00	Not requested
B.4.4	Logistics management/ improvement									0.00	Not requested
B5	New Constructions (proposed for the coming year)	261	205	3773.04	3099.52			404	90269538	6025.49	Anexures Infrastructure.docx
B5.1	CHCs	0	0	0.00	0.00	0		2	17500000	350.00	Revised as per discussion. Three health facilities deleted. New construction is suggested at places where place is available and utilisaiton is likely. At Naigaon, monthly deliveries have crossed 100 mark and currently available building is very old (70 years). New construction is requested for the building by PWD. Estimates will be prepared as per District Schedule of Rates published by PWD.
B5.2	PHCs	32	0	1475.00	1475.00	0.00		17	5000000	850.00	Revised as per discussion in VC. Only High Focus district PHCs kept for construction.
B5.3	SHCs/Sub Centres	25	1		450.00	434		50	1000000	500.00	SC's in High Focus district kept for construction.
B5.4	Setting up Infrastructure wing for Civil works	182	182	562.64	134.29			237	569149	710.01	
B5.4.1	Staff at State level	7	7	18.78	9.55	9.23	salary	9	268333	24.15	Last year approved in A.10.1, 7 post is continued and Salary of two new post is proposed for 6 months.
B5.4.2	Staff at District level	175	175	543.86	124.74	419.12	salary	228	300816	685.86	Four JE increased at high focus districts (1 at Gadchiroli, 2 at Nandurbar and 1 at Gondia) as districts are hilly, tribal and forest areas. One JE is proposed at each district HQ and Ex Engg HQ fo speady approvals, updating the information, inspections and timely payments. This JE will also be used for updating software. Currently we do not have electrical engineer. Electrical works are supervised by civil engineers. Therefore one JE Electrical is being proposed one each for circle (total 8). New Post is proposed for 6 months.
B5.5	Govt. Dispensaries/ others renovations	0	0	0.00	0.00	0		0	0	0.00	Deleted as per remarks of GoI.
B5.6	Construction of BEmONC and CEmONC centres	0	0	0.00	0.00			6	7932670	475.96	
B.5.6.1	Absolutely new SNCU/NBSU/NBCC	0	0	0.00	0.00	0	SNCU	6	7932670	475.96	New Activity as per MNH Tool Kit. SNCU at highly sensitive places Aeri (Gadchiroli), Akkalkua (Nandurbar) and Dharni (Melghat). Also SNCU at highest delivery SDH Sillod dist Aurangabad (2887), Omarga dist Osmanabad (2486), Pusad Dist Yawatmal (2449) and Bhivandi Dsst Thane (3653). These figures are up to November. For yearly deliveries 33% more deliveries will be conducted. in the state. Budget for Sillod SNCU requsted in B.4.1.6.1.
B.5.6.2	Carry forward /Spillover from previous year's sanction for SNCU, NBSU, NBCC	0	0	0.00	0.00	0		0	0	0.00	Not required.
B.5.6.3	Additional requirement for SNCU,	0	0	0.00	0.00	0		0	0	0.00	Activity deleted
B.5.7	NBSU, NBCC Major civil works for operationalization of FRUS	1	1		66.00	126.40	Hospital	4	13700000	548.00	New Activity. Currently Women Hosptial is 60 bedded with bed occupancy of 207% and is situated within the campus of District Hosptial. Monthly deliveries of this hosptial are 752 As the hosptial has become overcoruded, total hosptial is proposed to be shifted to new place within the city. Government is giving land for hosptial free of cost. Plan of new constructed hosptial will be as mentioned in MNH Tool KIt. Total budget required for Hosptial is Rs. 15.0 Crores out of which Rs. 5.0 Crores is requested for year 2013-14. Budgt of Rs. 66 Lakh required for 2 SDH and 2 RH repairs.
B.5.8	Major civil works for operationalization of 24 hour services at PHCs	0	0	0.00	0.00	0		0	0	0.00	Deleted as per remarks of GoI.

				Progress FY 2012	2-13			Propos	ed 2013-14		Remarks
		Physi	cal Progress		Financial Progress (Rs.	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B.5.9	Civil Works for Operationalising Infection Management & Environment Plan at health facilities	0	0	0.00	0.00	0		0	0	0.00	Not required
B.5.10	Infrastructure of Training Institutions	21	21	1093.00	974.23			88	44567719	2591.52	
B.5.10.1	Strengthening of Existing Training Institutions/Nursing School(Other than HR)Infrastructure for GNM Schools and ANMTC	1	1	300.00	300.00	0.00	Cold chain Training Institute and State Leprosy Training Institute.	2	2000000	400.00	 Budget revised as per discussion in VC. This budget is for construction of two institutes. First is construction of Cold Chain Institute at Pune (1380.25 L)as per Gol Guidelines and second is for Leprosy Training Institute (626 L). Considering the time required for construction, Rs. 2.0 Cr proposed for Cold Chain Training Center and Rs. 2.0 Cr for Leprosy training center. Totla budget proposed this year is Rs. 4 Cr. Remaining budget will be requested next year. In Part C, Gol has commented for approval of Cold Chain Institute.
B.5.10.1.1	Additional Building/ Major Upgradation of existing Structure	5	5	666.00	577.93	88.07	Training Institute	18	6227000	1120.86	Budget revised as per discussion during VC. Total budget required for construction is Rs. 29.06 cr. Considering the time required for consturcion, Rs. 11.21 cr requested for this year. Detailed institution wise budget requirement is annexed.
B.5.10.1.2	Repair/ Renovation	15	15	127.00	96.30	30.66	Training Institute & Building	64	561719	359.50	 Budget is revised, Institute of PHI Nagpur is upgraded to SIHFW. As per NIHFW norms budget Rs. 10 lakhs. The existing infrastructure of HFWTCs routing repair renovation work(Rs.35 lakhs) and after merging of DTT/HTT to be upgraded extension and repair renovation of existing infrastructure of DHTCs (Rs.33 lakhs). Budget required for TBT and LTC for repair renovation and furniture main and hostel building at Nagpur and Pune required budget Rs. 50 lakh each. It is Technical Experience for every student of all ANM & GNM (Field Visit). Main Building Construction & Rennovation is for ANM,GNM student of Nursing School as per Norms of GOI there should be well equied main Building Construction and Rennovation very important For Exp. Computer Lab,Hostel Facility ,Library,Study room ,Teaching Hall ect. More Details in Annexures B.5.10.1.2.
B.5.10.1.3	Spillover of Ongoing Works	0	0	0.00	0.00	0	Training Institute	4	17779000	711.16	Budget for Ongoing new construction of PHI Hostel,Nagpur Total cost Rs. 7.11 Cr. This year requsted Rs. 3.0 Cr for PHI hostel Nagpur, HFWTC at Pune (Rs.100 L), Thane (Rs.263.04 L) and Kolhapur (Rs.48.12 L).
B.5.10.1.4	Quarters and hostels/residential facilities	0	0	0.00	0.00	0	Quarters/Residenti al Facility	0	0	0.00	Deleted as per remarks of Gol.
B.5.10.1.5	New Training Institutions/School (SIHFW/GNMTC/ANMTC etc)	0	0	0.00	0.00	0	Training Institute & Building	0	0	0.00	Deleted as per remarks of GoI.
B.5.11 B.5.12	SDH DH									0.00	Not required Not required.
5.5.12				ļ	1	ļ		ļ		0.00	procrequired.

				Progress FY 2012	2-13			Propos	ed 2013-14		Remarks
		Phys	sical Progress		Financial Progress (Rs. I	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)		Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B.6	Corpus Grants to HMS/RKS	2306	2304	2452.21	2269.83	213.67		2310	800000	2462.00	Anexures Rogi Kalyan Samiti.docx
B6.1	District Hospitals	38	38	184.21	147.49	36.72	DH , TB H, Lep H, Mental Hosp, RRC and Ortho H	38	500000	190.00	RKS grants are decentralised grants. These grants are to be utilised for the purposes or for the activities for which grants given by State Government are inadequate or for those activities which are area specific and no funds are available for them. These funds are to be utilised for need based activities and for the services required to be given for the better ment of services to the patients. These funds are utilised for activities for which there is a felt need at the institutional level & for which either inadequate grants or no grants are given by State Government. So these funds are usually booked after the State grant is fully utilised. Therefore these grants are more predominantly utilised in third and fourth quarter of the year. 100 % grants will be utilise for the financial year. This include DH - 23, RRH - 2, TB Hospital - 4, Leprosy Hospitals - 4, Mental Hosptials - 4 and Ortho Hospitals - 1.
B6.2	CHCs	378	377	378.00	358.39	19.61	RH , WH and GH	381	100000	381.00	RKS grants are decentralised grants. These grants are to be utilised for the purposes or for the activities for which grants given by State Government are inadequate or for those activities which are area specific and no funds are available for them. These funds are to be utilised for need based activities and for the services required to be given for the betterment of services to the patients. These funds are utilised for activities for which there is a felt need at the institutional level & for which either inadequate grants or no grants are given by State Government. So these funds are usually booked after the State grant is fully utilised. Therefore these grants are more predominantly utilised in third and fourth quarter of the year. 100 % grants will be utilise for the financial year. 1) RH Boisar Dist. Thane, 2) RH Saundad, Dist. Gondiya 3) WH - Nanded
B6.3	PHCs	1810	1809	1810.00	1690.92	119.08	PHC	1811	100000	1811.00	RKS grants are decentralised grants. These grants are to be utilised for the purposes or for the activities for which grants given by State Government are inadequate or for those activities which are area specific and no funds are available for them. These funds are to be utilised for need based activities and for the services required to be given for the betterment of services to the patients. These funds are utilised for activities for which there is a felt need at the institutional level & for which either inadequate grants or no grants are given by State Government. So these funds are usually booked after the State grant is fully utilised. Therefore these grants are more predominantly utilised in third and fourth quarter of the year. 100 % grants will be utilise for the financial year PHC- Khataon, Dist. Nanded.
B6.4	Other or if not bifurcated as above	0	0	0.00	0.00	0		0	0	0.00	
B6.5	SDH	80	80		73.03	38.26		80	100000	80.00	
B7	Health Action Plans (Including Block, Village)	, 370	370	210.00	120.00			389	3740000	195.00	This activity was completed in the month of November therefore the budget is not booked. Expenditure will be booked in the month of December.
B7.1	State	17	17	50.00	35.00	46.87	State	1	3650000	36.50	In Maharashtra, we are preparing al the plans inhouse without hiring consultant. All the important officers of districts in one division (4-6 districts) sit together and prepare district PIP for 4-5 days. On last two days, the DHO and CS join the team, go through the PIP and finalise the PIP. Deputy Director of Health Services supervise the total process and guide the districts. As per experience of Maharashtra, team work and support by othe districts leads to good quality PIP. As District PIP is prepared at divisional level, this activity may be approved.
B7.2	District	0	0	0.00	0.00	0.00	Disrict	33	50000	16.50	District PIP are submitted to GoI and NHSRC. All the DHAPs are approved by District Health Mission.

				Progress FY 2012	2-13			Propos	ed 2013-14		Remarks
		Phys	sical Progress		Financial Progress (Rs.)	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)		Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
В7.3	Block	353	353	160.00	85.00	154.40	block	355	40000	142.00	Time line of the PIP preperation in Maharashtra is as follows: Immediately after receiving Gol guidelines, one meeting of DHO/CS is conducted and all the districts are disminated guidelines. Village level plans are prepared in one month. These plans are submitted to PHC. PHC and Hosptials plans are prepared in one week after village plans. All the key officials of PHC and hosptials in block sit together at BPMU and prepare plan. Block plans are prepared including all PHCs and Hosptials at district level under supervision of RCH Offficer in 5 days. All block plans + dist HQ plans are put together and district plan is prepared and improised at divisional level under supervision of DD Circle. This takes one week. State plan is prepared at State HQ by verifying and taking into consideration all the distrit plans and state level activities. This takes 3 weeks. From next year onwards, PIP work will be started from August onwards.
B8	Panchayati Raj Initiative	365	1	244.90	3.69			0	0	0.00	Activity is deleted
B8.1	Constitution and Orientation of Community leader & of VHSC,SHC,PHC,CHC etc	353	0	176.50	0.05	15	Batch of PRI members	0	0	0.00	Activity Deleted.
B8.2	Orientation Workshops, Trainings and capacity building of PRI at State/Dist. Health Societies, CHC,PHC	12	1	68.40	3.64	8.00	0	0	0	0.00	Activity completed in 2012-13. Not to be continued next year.
B8.3	Others	0	0	0.00	0.00			0	0	0.00	
B8.3.1 B8.3.2										0.00 0.00	
B8.3.3										0.00	
B8.3.4 B8.3.5										0.00 0.00	
B9	Mainstreaming of AYUSH	748	699	1262.77	1023.32			1452	3513602	1679.11	AYUSH servises are getting very good response in Maharashtra. AYUSH OPD for April 12 to Feb 13 is 5549055 and IPD for same period is 81365 . Maharashtra is providing IPD and OPD for Ayurved, Unani, Homapathy, Yoga and Naturotherapy in all DH. Women Hospitals are also provided Ayurved, Naturopathy and Massagist for pregnant women. Regarding SDH and Rural Hosptial, OPD of three pathies - Ayurved, Homeopathy and Unani are provided. Previously this was provided in selected hosptials but now AYUSH is introduced in all SDH/RH with 100+ OPD/day. Gol AYUSH dept has released Rs. 8.88 Cr for procurement of AYUSH medicines. Ayurvedic medicines are supplied and other medicine procurement is in process.
B.9.1	Medical Officers at CHCs/ PHCs (Only AYUSH)	618	579	1069.68	898.04			967	663697	1498.08	
B.9.1.1	DH	132	108	253.44	185.44	68.00	PG MO & UG MO, Naturopherapist	144	202750	291.96	 This includes budget for PG and UG of Ayurved, Homepathy and Unani faculty each. PG MOs (3/DH) total 69, UG MOs (3/DH) total 69 and Naturotherapy MOs 6 new posts are proposed. Salary is revised and only 8% hike is given to all the doctors. Role of AYUSH MO in National Health Program and their job discription is informed to all AYUSH MOs. For PG unani posts, Unani medical colleges have been approached and the colleges have promised to send doctors for AYUSH program. Out of 144 MOs, 132 are to be continued from last year and 12 to be newly appointed this year. Salary of PG MO - newly appointed MO is Rs. 18000/PM and old MOs is Rs. 20000/PM. Salary of UG MO - newly appointed MO is Rs. 14000/PM and old MOs is Rs. 15500/PM.

				Progress FY 2012	2-13			Propos	ed 2013-14		Remarks	
.		Phys	sical Progress		Financial Progress (Rs.	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.	
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)		Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)		
B.9.1.2	FRUs	254	247	428.16	373.24	54.92	UG MO, PG MO	376	153654	577.74	Budget is revised number of post of Ayurved - (26), Homeopathy - (29) and Unani - (67) are increased in order to give uniform services in all facilities involved in AYUSH. Total 28 Institutes are increased to give AYUSH services. Roles and Responsibilities of AYUSH MOs is circulated to districts and their involment in National Health Program is enssured. Unani post will be filled up by taking campus interview in Unani Medical Colleges. Salary is revised and only 8% hike is given to all the existing doctors.	
B.9.1.3	Non FRU SDH/ CHC	232	224	388.08	339.36	48.72	UG MO, PG MO	427	139293	594.78	Budget is revised number of post of Ayurved - (37), Homeopathy - (57) and Unani - (101) are increased in order to give uniform services in all facilities involved in AYUSH. Total 28 Institutes are increased to give AYUSH services. Roles and Resposibilities of AYUSH MOs is circulated to districts and their involment in National Health Program is enssured. Unani post will be filled up by taking campus interview in Unani Medical Colleges. Salary is revised and only 8% hike is given to all the existing doctors.	
B.9.1.4	24 X 7 PHC	0	0	0.00	0.00	0	Ayurved MO	20	168000	33.60	additional new post is proposed at Sindhudurg District. Ayurved MO for PHCs (Salary Rs 14000/pm)	
B.9.1.5	Non- 24 X 7 PHCs/ APHCs									0.00		
B.9.2	Other Staff Nurses and Supervisory Nurses/ AYUSH pharmacists (Only AYUSH)	94	84	99.72	68.04			124	368790	116.27		
B.9.2.1	DH	69	61	61.27	48.72	12.55	Pharmacist, Yoga Therapist, Massagist	92	82050	75.49	Budget is revised and details remarks is attached separate word document as per Gol Comments.	
B.9.2.2	FRUs	16	14	19.01	1.50	13.61	Yoga Therapist, Massagist	20	79740	15.95	Budget is revised and details remarks is attached separate word document as per Gol Comments.	
B.9.2.3	Non FRU SDH/ CHC									0.00	Not requested	
B.9.2.4 B.9.2.5	24 X 7 PHC Non- 24 X 7 PHCs	0	0		0.00	0	Ayurved MO	0	0	0.00 0.00	Shifted to B.9.1.4 Activity is deleted.	
B.9.2.6	Urban Clinics/ Health Posts	0	0	0.00	0.00	0		0	0	0.00	Not requested	
B.9.2.7	Other	9	9	19.44	17.82	11.34	Dist AYUSH Officer	12	207000	24.84	Budget is revised and details remarks is attached separate word document as per Gol Comments.	
B9.3	Other Activities (Excluding HR)	35	35	58.37	32.41			360	481115	44.75		
B9.3.1	TA/DA to District AYUSH cell	1	1	4.95	3.95	1.00	0	0	0	0.00	Shifted to A.10.7	
B9.3.2	Contingency, Medicine, Equipment to State, District and AYUSH Institute	1	1	11.90	3.72	8.18	Institutes	323	6115	19.75	Contingency of Rs 10000 for District AYUSH Cell and and Contingency of Rs 5000 for CHC is proposed for (State-1, District-33. Institutes 289) total 323. Contingency for each AYUSH institute is proposed newly for local expenditure like stationary,AMG,minor equipement purchase,maintenance of AYUSH services.	
B9.3.3	One AYUSH Camps per District	33	33		24.74	16.78	Camp	33	50000	16.50	One Naturopathy camp per district is proposed newly.	
B9.3.4	Study project and Seminars, Conferences	0	0		0.00	0.00	Research, Conference	2	125000	2.50	proposed newly for analysis of AYUSH role in public health and contribution of AYUSH services in health sector.	
B9.3.5	AYUSH Medicinal Garden at Circle level	0	0	0.00	0.00	0.00	Medicinal Garden	2	300000	6.00	It is universally accepted about nutritional,medicinal and environmental impact of medicinal plant.People are curious to know about the medicinal values of plants. So it is proposed to develop medicinal garden at least one at each Circle level. So that general public will have facility to know it.	
B9.4	Training	1	1	35.00	24.83	10.17	training	1	2000000	20.00	In current year 2012-13, complete Budget for training is utilised. There is need to give various trainings to AYUSH doctors to improve their knowledge and skills. Time schedule is prepared for various trainings and the budget will be utilised completely.	
B10		3667113	263		790.92			21004627	26153349	1493.25		
B.10	Strengthening of BCC/IEC Bureaus (state and district levels)	35	0	128.67	0.00			2	1148000	22.96	Activities were delayed. It is assured that all the expenditure will be booked by March 13.	

				Progress FY 201	2-13			Propos	sed 2013-14		Remarks
		Phys	ical Progress		Financial Progress (Rs.	Lakhs)	-				State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13		Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target		Budget (Rs. Lakhs)	
B.10.1	Development of State BCC/IEC strategy	35	0	128.67	0.00	128.67	State + District Cells	2	1148000	22.96	This budget includes hiring of advertisement of agency, salary of IEC Consultant,salary of DEO & Accountant and Purchase of exibition set for all 33 districts. For creative awarness about various disease condition in the state under various National Programme there are guidelines and publicity of this National Programme. So as people can get benefits of National Health Programme. During epidemics or exageration of disease condition state need to disseminate correct knowledge about the disease condition to people. On all this occassion state do actively IEC via various methods. This year budget requested for hiring of media agency, IEC consultant, development of media center and exhibition sets for districts. While developing IEC material e.g posters, banner, audio visual etc. every time we have do administrative procedures to develop the materials so if government appoints advertising agency then we can develop art work for above materials without delay and can be given for production of mass basis by following government rules and regulation. more details in annexure B.10.1
B.10.2	Implementation of BCC/IEC strategy	14548	133	625.67	580.43			4287	3469181	305.23	
B.10.2.1	BCC/IEC activities for MH	13470	33	417.59	404.00			271	52731	76.80	
B.10.2.1.1	Mass media	0	0	104.09	104.00	55.09	TV Spot, Radio Jingles, Advertisement newspaper	151	43606	65.85	This head budgets include telecasting of T.V. spots (49.56L), Broadcasting of Radio Jingles (22.56L), new activity is Newspaper adverstiments of Maternal Health (15.0L). The details of TV Spots, Radio jingles and print media is attached in annexures B.10.2.3.1 .There will be continuous advertisement on TV throughout the year on various health issues and National Health programes related to Maternal Health for e.g. JSSK, JSY, Family Planning, PCPNDT etc
B.10.2.1.2	Mid-media	13470	33	313.50	300.00	309.2	Event	120	9125	10.95	Budget is revised as per actual needs and the activities are mainly for high focus districts and two tribal districts (Gondia , Amravati). The details of plan attached in the annexures B.10.2.1.2.
B.10.2.2	BCC/IEC activities for CH	720	0	135.03	125.80			3304	2115100	167.00	
B.10.2.2.1	Mass media	0	0	105.63	100.00	105.63	Type of media	4	2112600	84.50	Budget is revised activities include telecasting of TV spots, telecasting of scrolling messages on TV, radio jingles, printing of IEC material for CH themes (RBSK, Vit-A Supplimenation, De-worming, Malnutrition, Immunization,Breast feeding, personel hygines etc.) and newspaper advertisment. Details provide in annexures B.10.2.2.1
B.10.2.2.2	Mid-media	720	0	29.40	25.80	29.4	Trips of vans and districts	3300	2500	82.50	This activites includes IEC and sensitization of Child Health Themes like RBSK, Vit-A Supplimenation, De-worming, Malnutrition, Immunization,Breast feeding, personel hygines etc through AV- Vans in villages mainly in high focus districts.
B.10.2.3	BCC/IEC activities for FP	0	0	51.85	50.63			2	1296350	25.93	Activities were delayed. It is assured that all the expenditure will be booked by March 13.
B.10.2.3.1	Mass media	0	0	51.85	50.63	44.22	Type of media	2	1296350	25.93	This activities include TV, Radio Jingles, Prints and Newspaper Advertivisement for FP. The themes are spacing methods, Tubectomy and Vasectomy etcThe budget is revised and details about each activity is attached in annexures B.10.2.3.1
B.10.2.3.2	Mid-media	0	0	0.00	0.00	0		0	0	0.00	Not requested
B.10.2.4 B.10.2.4.1	BCC/IEC activities for ARSH Mass media	0	0	0.00	0.00 0.00	0	0	0	0	0.00 0.00	Not requested
B.10.2.4.2	Mid-media	0	0	0.00	0.00	0		0	0	0.00	Not requested
B.10.2.5	Other activities (please specify)	-	-			-		-		0.00	Not requested
B.10.2.6	IPC initiatives/tools	358	100	21.20	0.00	21.2	sessions	710	5000	35.50	Two sessions of IPC per blocks. THO/MO will take this sessions specially for Adolescent groups.
B.10.3	Health Mela	33	1	165.00	155.00	161	Health Mela	0	0	0.00	Activity is deleted.
B.10.4	Creating awareness on declining sex ratio issue	296	129	226.96	51.00	175.96	Campaign and media	330	76694	253.09	Activities were delayed. It is assured that all the expenditure will be booked by March 13.

				Progress FY 2012	2-13			Propos	ed 2013-14		Remarks
		Phys	ical Progress		Financial Progress (Rs.	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B.10.5	Other activities	3652201	0	410.86	4.49			21000008	21459474	911.97	This includes printing of Student cards (96.4 Lkh) Rs. 289.30 Lakh, modules (10000), Rs. 15 Lakhs
											Activities were delayed. It is assured that all the expenditure will be booked by March 13.
B.10.5.1	Printing of MCP cards, safe motherhood booklets etc	195	0	100.81	0.00	100.81	Activities	5	4592800	229.64	This includes printing of posters, printing of banners, messages under JSSK/PCPNDT, newspaper advertisements, RCH issues, organisation of epilepsy day camps in 33 districs. More details in annexures B.10.5.1
B.10.5.2	Printing of WIFS cards etc	0	0	0.00	0.00	0	Cards	1000000	5	50.00	New activity Printing of cards.
B.10.5.3	Other printing	3652006	0	310.05	4.49			2000003	16866669	632.33	
B.10.5.3.1	Other important activities under IEC.	6	0	224.75	0.00	224.75	Activities	2	6366667	127.33	Activities include Printing of Maharashtra arogya Patrika, AYUSH radio jingles,TV Spots and Printing, Printing of folders regarding mental health. Activities which were proposed last Activities were delayed. It is assured that all the expenditure will be booked by March 13.
B.10.5.3.2	Printing of health cards and training modules	3652000	0	72.90	4.49	68.91	card per child	2000000	2	400.00	This budgets for printing of Health cards & other Materials for each beneficiaries in RBSK Programme.
B.10.5.3.3	Printing of training modules for Medical officers (School Health)	0	0	0.00	0.00	0		0	0	0.00	Activity is deleted.
B.10.5.3.4	Total RCH Printing			12.40	0.00	12.4	RCH related Printing Material	1	10500000	105.00	Printing related to Maternal Health Register, laboratory, stock register, Child Health related Register, Training Module, ARSH related Printing, Urban RCH related Register and format. RCH Printing other demand on supplementary PIP.
B.10.5.3.5	IEC through local traditional paintings (e.g. Warli Paintings)	0	0	0.00	0.00	0	Project	0	0	0.00	Activity is deleted.
B11	Mobile Medical Units (Including recurring expenditures)	55	55	1182.76	580.53			9604	358825	854.70	Anexures MMU.docx
B11.1.1	Capex	0	0	0.00	0.00	0	vehicle	0	0	0.00	Activity is deleted.
B11.1.2	Opex	40	40		577.16	218.24	Trip	9600	8825	847.20	Cost is calculated as per GoI guidelines dated 10 /07/2012 Recurring cost for salary of MMU staff (NGO), vehicle POL & maintenance, Medicine & Consumables, is considered with hike of 8 % more than previous year approved budget. But in case of equipment maintenance 50% reduction is considered. Also the contingency is raised from 36000 to 1 lakh . More details in anexures B.11.1.1
B11.1.3	HR	3	3	5.32	3.03	2.29	Staff at state level	3	200000	6.00	State Level Staff in MMU Program. Staff are regular work. More Details in Annexure B.11 MMU.xls
B11.1.4	Training/orientation	0	0		0.00	0		0	0	0.00	Activity is deleted.
B11.1.5	Others	12	12		0.34	381.70		1	150000	1.50	
B11.1.5.1	Contingency	1	1	1.20	0.34	0.86	Contigency	1	150000	1.50	Contingency (stationary, printing other office expanses) at SHS.
B11.1.5.2 B11.1.5.3										0.00	
B11.1.5.4										0.00	
B11.1.5.5										0.00	
B11.2	Mobile Medical Vans (smaller vehicles) and specialised Mobile Medical Units	11	11	380.84	0	380.84		0	0	0.00	
B11.2.1	Capex	0	0	0.00	0.00	0		0	0	0.00	Activity is deleted
B11.2.2	Opex	0	0	0.00	0.00	0		0	0	0.00	Activity is deleted
B11.2.3	HR	0	0		0.00	0		0	0	0.00	Activity is deleted
B11.2.4	Training/orientation	0	0		0.00	0		0	0	0.00	Activity is deleted
B11.2.5	Others	0	0		0.00	0	Root	0	0	0.00	Activity is deleted
B11.2.5.1	Floating Dispensary (2) and Floating ambulance (3) in Sardar Sarovar area Nandurbar		5	322.04	0.00	322.04	Boat		4140800	207.04	 Procurement of three ambulances (Rs. 1.2 Cr) and operational cost of 5 boats Rs. 70.0 Lakh. Support units (17.04 L) to be continued this year. Staff are ANM (5), LT (2), Pharmacist (2), Driver (3), Assistant (5). Staff is as per the experience of Narmada Project ambulances.

				Progress FY 201	2-13			Propos	ed 2013-14		Remarks	
		Phys	sical Progress		Financial Progress (Rs.	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.	
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	tontinued from previous year. Justification to be given.	
B11.2.5.2	Mobile Dental Units(2), Mobile Ophthalmic Unit (2) and Mobile Pathology Units (2) in Gadchiroli	6	6	58.80	0.00	58.80	Specialist Unit	6	980000	58.80	These units are in naxalite affected high focus district Gadchiroli. Specialist units to be continued this year. Staff are Dentist (2), LT (2), Pathologist (2), Dental Technician (2), Attendent (6), Driver (6), Opthalmic Officer (2). Revised figures of patients and tests are submitted in annexture. MMU are being run by RKS. Detailed budget requrement for MMU mentioned in Annexure.	
B11.2.5.3 B11.2.5.4										0.00 0.00 0.00		
B11.2.5.5 B12	Referral Transport/Patient transport	: 5454	5025	12101.08	1899.33			4008	53285000	15312.75	Anexures Referral Transport.docx	
B12.1	System Ambulance/EMRI Capex	525	325	6554.54	601.02			433	6018000	9772.69	In Maharashtra, two types of ambulance services - Basic and Emergency are available. Basic Ambulances are used for non- emergency patient transfer, attending epidemic control activities, acendents, etc. PHC ambulances are also used for immunisation, MCP sessions and other outreach activities. These ambulances are one per Health Facility (2368). Emergency ambulances are proposed to be usd only for emergeinces (EMS). Criteia for thse ambulances is 1 per lakh population in rural areas and one per two lakh population os urban areas. Proposed number of these ambulances over next two years is 690 BLS and 247 ALS, total 937. All the basic ambulances purcased thorugh State or NRHM fudns are provided to health facilities. Operational cost is from state funds and also from NRHM funds for specified activities such as JSSK. Tender process of GPS/GPRS facility is complete, agency is fixed and fiting of equpment to Basic Ambulances will start in next two weeks. State is providing one call canter at state level - 102 for basic ambulances and 108 for emergency ambulances. Bothe the call centers will be sittuated in one building at Pune and will have facility of exchanging the calls.	
B12.1.1	State basic ambulance/ 102 Capex	325	325	1632.04	601.02	1031.02	Ambulance	43	583000	250.69	PHC Ambulances (TATA Sumo) 25 ambulances @ Rs. 5.0 Lakh. Hospitl ambulances (TATA Winger) 18 ambulances @ Rs. 7 L.	
B12.1.2 B12.1.3	Advanced life support Capex EMRI Capex-BLS	150	0	3307.50	0.00	3307.5	BLS Ambulance	300	2205000	0.00 6615.00	Total project for Maharashtra is for 704 BLS ambulances. Out of which 300 will be procured in 2013-14. Procurement is in process. Total expendiure will be booked by March 2013.	
B12.1.4	EMRI Capex-ALS	50	0	1615.00	0.00	1615	ALS Ambulance	90	3230000	2907.00	Total project for Maharashtra is for 233 ALS ambulances. Out of which 90 will be procured in 2013-14. Procurement is in process. Total expendiure will be booked by March 2013.	
B12.2	Operating Cost /Opex for ambulance	4929	4700	5546.54	1298.31			3575	47267000	5540.06		
B12.2.1		325	296	1600.00	632.00	968	Ambulance	43	60000	25.80	Considering this year procurement, number of ambulances required is reduced.	
B12.2.2	Operating Cost /Opex for ASL ambulance	2140	2140	501.26	306.90	194.36	Nil	0	0	0.00	Included in operational cost of old ambulances. (B.12.2.9.2)	
B12.2.3	Opex EMRI-BLS	150	0	750.00	0.00	750	BLS Ambulance	300	997000	2991.00	Operating cost of BLS ambulance is Rs. 1.385 lakh per month. Considering the time period required for delivery, operating cost of Rs. 997200 is requested per ambulance for year 2013-14 excluding HR.	
B12.2.4	Opex EMRI-ALS	50	0	270.00	0.00	270	ALS Ambulance	90	1069000	962.10	Operating cost of ALS ambulance is Rs. 1.485 lakh per month. Considering the time period required for delivery, operating cost of Rs. 1069200 is requested per ambulance for year 2013-14 excluding HR.	
B12.2.5	HR Basic ambulance	0	0	0.00	0.00	0	Driver	43	54000	23.22	HR is requested @ Rs. 9000/PM for new 120 basic ambulances for 6 months.	
B12.2.6	HR advanced life support ambulances	0	0	0.00	0.00	0	0	0	0	0.00	In the tender of EMS, HR included in Opex and shown as total rate. It can not be seperated. Therefore HR demand is included in opex.	
B12.2.6	Training/orientation	0	0	0.00	0.00	0 Page 39 of t	0 8	0	0	0.00	Training of EMS Staff is included in opex in the tender. Therfore no separate budget is requested.	

				Progress FY 2012	2-13			Propos	ed 2013-14		Remarks
		Phys	ical Progress		Financial Progress (Rs.	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B12.2.7	Call centre-capex	1	1	100.00	0.00	100	Call Center	1	4000000	400.00	For year 2012-13, Rs. One cr was kept as indicative cost as tender was not opened. Now the budget requested is as per rate mentioned in responsive tender.
B12.2.8	call centre-opex	0	0	0.00	0.00	0	0	0	0	0.00	In the tender of EMS, Opex of call center is included in Opex of Ambulance, no separate rate is communicated by bidder. Therefore no separate rate is requested.
B12.2.9	Others	2263	2263	2325.28	359.41			3098	5087000	1137.94	
B12.2.9.1	PMERS Cell establishment and consultancy services	1	1	25.00	9.30	15.7		1	4000000	40.00	This includes cost of State cell + Third party quality assurance staff who will be visiting the ambulances in field to check the condition of vehicles.
B12.2.9.2	Operational cost of old ambulances (procured during last year or before)	2140	2140	2277.82	327.65	1950.17	Ambulance	2368	20000	473.60	Budget reduced as per discussion. This include cost of diesel, repairs, tyres and batteries required for running of vehicle. Cost is calculated considering the present rates of repairs and diesel.
B12.2.9.3	Procurement of Supervisary Vehciles	0	0	0.00	0.00	0	Car	5	580000	29.00	New activity. Revised as per discussion. Requested only for state level officials.
B12.2.9.4	Appoinment of drivers through Centralised Agency	0	0	0.00	0.00	0	Driver	363	80000	290.40	Drivers will be appointed for ambulances provided oto IPHS/24X7 PHCs where regular driver is not available. One centralised agency will be selected for provision of driver.
B12.2.9.5	Hiring of ambulances of Bharari Pathak	0	0	0.00	0.00	0	Ambulance	72	152000	109.44	Hired ambulances are provided to Medical Officers in very interior places of state (Total 72). MO provides emergency services and OPD services to patients. Part of the payment is made by Tribal Welfare Department. Part payment is requested under NRHM.
B12.2.9.6	Operatioinal cost of additional ambulances fo melghat and high focus areas	0	0	0.00	0.00	0	Ambulance	51	220000	112.20	Ambulances provided - Melghat - 12, Gadchiroli 26 and Nandurbar - 13 from NRHM funds. These ambulances are stationed in interior areas. Operational cost include cost of driver, POL and maintenance.
B12.2.9.7 B12.2.9.8	Repair of ambulances	122	122	22.46	22.46	0	ambulance	238	35000	83.30 0.00	Repairs of ambulances.
B12.2.9.9										0.00	
B12.2.9.10 B.13	PPP/ NGOs	0	0	358.80	203.79			273	26765917	0.00 2660.00	Anexures B13 B14 B18.docx
B13.1	Non governmental providers of health care RMPs									0.00	No budge requested.
B13.2	Public Private Partnerships (Out Sourcing set up, if applicable for State, to be budgeted under this head)	0	0	0.00	0.00			132	12182958	2566.00	
B13.2.1	Outsourcing of Cleaning services in High Utilisation Hosptials	0	0	0.00	0.00	0	Hospital	41	1135000	465.35	Resubmited as per discussion durig PIP VC Outsourcing of cleaning is being introduced to improve the cleaning quality of hospials which has impact on health care delivery. Hospitls selected are all District Hosptials, 10 high utilisation women hosptials and 4 mental hosptials with maximum delivery / patient load. The rates are revised considering Govt contribution to the scheme. Four major agencies will be selectd for service delivery and they will be paid by each hosptial as per work done.
B13.2.2	Outsourcing of Linen in High Utilisation Hosptials	0	0	0.00	0.00	0	Hospital	41	1643780	673.95	Resubmited as per discussion durig PIP VC Outsourcing of linen is being introduced to improve the condition of bedsheets, pilows and other linen of hospials which has impact on health care delivery. Hospitls selected are all District Hosptials, 10 high utilisation women hosptials and 4 mental hosptials with maximum delivery / patient load. The rates are revised considering Govt contribution to the scheme. Four major agencies will be selectd for service delivery and they will be paid by each hosptial as per work done.

				Progress FY 201	2-13			Propos	ed 2013-14		Remarks
	Budget Head	Physi	ical Progress		Financial Progress (Rs.	. Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B13.2.3	Outsourcing of Diet in High Utilisation Hospials	0	0	0.00	0.00	0	Hospital	41	3244678	1330.32	Resubmited as per discussion durig PIP VC Outsourcing of diet is being introduced to improve the quality of food being given to delivery women and other patietns which has impact on health care delivery. Hospitls selected are all District Hosptials, 10 high utilisation women hosptials and 4 mental hosptials with maximum delivery / patient load. The rates are revised considering Govt contribution to the scheme. Four major agencies will be selectd for service delivery and they will be paid by each hosptial as per work done.
B13.2.4	Outsourcing of Security Services	0	0	0.00	0.00	0	Hospital	0.00	0.00	0.00	Submited in suplemetary PIP.
B13.2.5	Outsourcing of Biomedical waste	0	0	0.00	0.00	0	Hospital	0	0.00	0.00	Submitted in suplementary PIP.
B13.2.6	management Defeat Depression Center	0	0	0.00	0.00	0	Call Center	1	500000	50.00	New Activity. After going through remarks, activity is revised as follows: One experienced NGO will be selected for running the center by publishing advertisment in newspapers. NGO will be provided space at Mental Hosptial Pune and Hardware and software for call center. Publicity will be done by State. Budget requred will be as follows: Minor alterations /additions / furniture, etc for center - Rs. 5 Lakhs Hardware and software - Rs. 10.0 Lakhs Payment to NGO for one year - Rs. 25 Lakh. Publicity / IEC of the center - Rs. 10.0 Lakhs. Total Rs. 50 Lakhs. Staff including call assistant will be appointed by NGO. Monitoring will be done by Mental Health Department
B13.2.7	Child Guidance Clinic						Clinic	4	440000	17.60	New Activity. Revised as per comments. Four centers will be established one in each of the Mental Hosptials of the State. (Pune, Thane, Nagpur, Ratnagiri) Budget required per center will be as follows: Psychological testing material - Rs.1 50000/center - one time Toys - Rs. 50000/center - one time Furinture - Rs. 100000/center - one time IEC - Rs. 50000/center - first year for six months Salary of Pyschologist / Councellor - Rs. 15000/PM for six months = Rs. 90000/- first year for six months Total budget required per center - Rs. 440000/-
B13.2.8	Community Health Initiative by Impact India foundation						РНС	0	0	0.00	Deleted
B13.2.9	Jana Aushadhi Stores in 4 select hosptials						Jan Aushadhi Store	4	719500	28.78	Revised as per comments At state level there will be one Program Officer. As stores level two pharmacists (Salary Rs. 15000/PM) and one helper (Rs.7000/PM) will be required.Software and hardware Rs. 1.0 Lakh. Civil works, installation cost and seed money - Rs. 5 Lakh will be requred per center. Total requirement per stores will be Rs. 7 Lakh + Rs. 0.87 Lakh for salary of Program officer for six months at state level.
B13.2.10 B13.3	NGO Programme/ Grant in Aid to	0	0	358.80	203.79			9	2400000	0.00 94.00	
B13.3.1	NGO SNGO			265.00	150.60	114.40 Page 41 of	SNGO	8	1000000	80.00	Budget is not released to SNGOs due to non-submission of reports. Reports are requested from NGOs for budget release. Total expenditure will be booked.

				Progress FY 2012	2-13			Propos	ed 2013-14		Remarks
		Phys	ical Progress		Financial Progress (Rs.	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)		Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	continued from previous year. Justification to be given.
B13.3.2	State Budget			93.80	53.19	40.61	Cell	1	1400000	14.00	This includes quaterky meeting, training, monitoring and evaluation and overhead.
B14	Innovations(if any)	1620	1934	2446.54	1360.08			462	8998821	2271.35	
B14.1	Intersectoral convergence									0.00	
B14.2	Organization of Epilepsy Camps with the help of Epilepsy Foundation Mumbai	11	11	48.40	43.27	5.13	Camps	10	470000	47.00	Considering the number of patients attending camp (300-500 / camp) plus EEG, speech therapy, physiotherapy, etc, total requirement of specilists is 10-12 and technicians 6-10. However, from Mumbai, only Dr Surya and his team goes for the camp. Remaining specilists are invited from local area and civil hospital organising the camp.
B14.3	Health Advice Call Centre (Toll Free 104)	10	10	86.69	68.24	84.11	Seats, PHC	20	484850	96.97	Based on remarks of analysis, budget is revised to Rs. 96.97. Out of this, Rs. 62.52 Lakh are requsted for HACC and remaining Rs. 34.45 Lakh are requested for linkage of Specialists of HACC by Telemedicine with interior PHCs of Thane district for specialist advise.
B14.4	Biometric Attendance of Health Staff	1246	1613	379.00	1.42	377.58	Institutes	57	39123	22.30	Expansion to Primary Health Centers. Procurement process is in progress , 100% expenditure is expected by Mar end.
							Sickle Cell Centre				Details attached in the anexures. The evaluation of each NGOs is conducted through medical colleges. Depending upon the marks obtained they are continued moreover every year audit is also
B14.5	Preventation of Sickle Cell Disease	20	20	1160.94	846.07	314.87		20	5856450	1171.29	conducted for all NGOs. The number of NGOs reduce from 13 to 10 and they all are in tribal districts.
B14.6	Telemedicine Project	63	63	198.11	124.72	73.38	Telemed Centre	63	365317	230.15	Facility wise data is provided in the anexures. Specific steps to increase usage where it is currently less are taken like direct video conferencing, CME etc. Facility wise data of the usages are attached in separate sheet.
B14.7	Hematology Programme	4	0	55.46	5.32	55.46	Hematology center	6	430000	25.80	Budget is revised it is decided not to replicate this program in any district but to support two medical colleges having high load of Hemopillia and Thalesemia patients. State could not start four centres due to delay in procurement of factors. Now it is decided the strengthen this four centres and depending upon the experience it will be replicated to more districts. Details about the objective and implementation is attached in annexure B.14 Innovation. Budget requested in main head B.14.7 is (Rs.25.80L), HR section A.8.1.7.6 (Rs.60.96L), Program management staff A.10.4.4 (Rs.11.00L), euipments required in B.16.1.5.1 (Rs.10.50L) and drugs required in B.16.2.5.1 (RS.578.74). Total budget of Hematology Centre Proposed is Rs. 687 Lakhs.
B14.8	Short Term Certficate Course for Medical Officers in PHD	90	56	22.60	13.95	8.65	Medical Officer	90	33555	30.20	The budget for TA/DA and contingency is added.
B14.9	Health Shelter in Nandurbar District	10	10	132.20	6.86	125.34	Shelter	10	210000	21.00	Last yr approved budget for construction (rs.120 L) and furniture (rs. 5 L) are not proposed this year. This year only recurring cost is
B14.10	Establishment and Functioning of Grievance Cell									0.00	Shifted to B.15.2 QA
B14.11	Strengthening of Supervision and Monitoring System	8		0.00	0.00	0				0.00	Shift to M & E
B14.12	Maher Scheme	57	57	76.00	16.32	59.68	Ghar	57	35088	20.00	Last year, total benificiares attended the Maher ghar were 2041 up to January 2013. As now all the Maher ghar are ready now, it is expected that next year total 3000 mothers will be taking benefit of this scheme. This requires Rs. 15.0 Lakh budget. In addtion to this, Rs. 5.0 Lakh is kept for minor repairs and logistics of the 57 Maher ghars as per requirement.
B14.13	Volunteers to tribal and LEA PHCs	34	34	0.00	0.00	0		0	0	0.00	Shifted to Tribal RCH

				Progress FY 2012	2-13			Propos	ed 2013-14		Remarks	
		Phys	sical Progress		Financial Progress (Rs.	. Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.	
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)		
B14.14	Organization of Specilist Medical and Dental Camps through Medical Colleges in Tribal Hospitals	1 60	53	250.20	205.11	45.09	Camp	60	432000	259.20	During 2012-13, 41 camps were conducted till January 2013. Patients examined and treated - 56830, Surgeries - 3352. Specialists from Medical College attend camp for four days. First day OPD, second and third day operations and fourth day follow up. Presently the camps are being organised in remote tribal areas. The moment other areas are introduced, demand will increase many fold for camp at many places which will be diffficult to meet. We would not get specialsits for these demand and this will ultimately affect the camps in tribal ares.	
B14.15	Coordination Cell for Tribes in	5	5	23.22	17.35	5.87	Tribal District	5	108000	5.40	This cell is for guiding tribal patients in DH. Budget is required for	
	selected Tribal District Hospital										salary of councellors and telephone charges. Salary Proposed in A.10.4.4	
B14.16	Integration of palliative Care in health services	2	2	13.72	11.45	9.33	Block	64	534438	342.04	 Patient care is improved by imparting training to health care providers including ASHA. Licence of morphine is obtained and morphine is being used by patients for pain relief. This has improved the quality of life of patients. We have developed internal capacity to implement the program from SHS level in Vidharbh area. Also TATA Memorial has agreed to support us in training to be organised at Mumbai and Nagpur for paliative care. Gol has recently published draft Paliative care policy, syllabus of Maharashtra is based on this policy. NCD Program deals with cancer patients, diabetes and hypertension petients and elderly. There are patients requiring palliative care under all these conditions. Therefore this program is integarated with NCD since beinging. Now as per revised protocol, ASHA will identify the patient, trained nurse will enroll the patient and start councelling. This is expected to cover all the patients. Training module is developed and training are being conducted in Nagpur for vidharbha region. Monitoring is being carried out by state and divisional level. This will help to implement this program in remote districts also. 	
B15	Planning, Implementation and Monitoring	2810	561	2630.30	640.67			11967	10828037	3923.56	Anexures B15.1 to B15.3.docx	
B15.1	Community Monitoring (Visioning workshops at state, Dist, Block level)	3	3	234.32	131.29			1818	696019	294.23		
B15.1.1	State level	1	1	59.64	42.12	17.52		26	229385	59.64	Expenditure is shown less because of incomplete reporting. Budget increase is as per request of Nodal NGO Sathi-Sehat.	
B15.1.2	District level	1	1	46.83	23.02	23.81		157	29828	46.83	NGOs could not organise community based activities as per approved plan. Therefore expenditure is less. One more disrict added to plan so increase in budget.	
B15.1.3	Block level	1	1	127.85	66.15	61.70		1509	8473	127.86	NGOs could not organise community based activities as per approved plan. Therefore expenditure is less. Additional blocks included in scheme so increase in budget.	
B15.1.4	Other	0	0	0.00	0.00			126	428333	59.90		
B15.1.4.1	State level Common Review Mission			0.00	0.00	0	CRM team	6	398333	23.90	New Activity. Budget revised as per discussion. Independent review committees will be established - 6 in the state. Committee will include Retired seniror officers of department, medical college teachers, civil society members, etc. This committee will visit 3 days to district. Review at least 10 health facilities. De-briefing will be organised at State level. CEO, DHO, CS of the state will be called for the meeting. Plan for correction of the deficiencies will lalso be finitalised during same meeting.	
B15.1.4.2	Cluster Evaluation Survey	0	0	0.00	0.00	0	Clusters of two surveys	120	30000	36.00	CES will be carried out for Rural - tribal and nontribal areas (Total 2 surveys). Survey will be carried out by independent agencies like Medical Colleges and TSPs. Reports will be used for further planning of the state. The budget includes training, stationary, survey costs, preperation of reports and discemination.	
B15.1.4.3 B15.1.4.4										0.00		

				Progress FY 2012				Propose	ed 2013-14		Remarks State to mention whether the activity proposed is new or to be
C. No.	Dudget Used	Physi	ical Progress		Financial Progress (Rs. Lakhs)						continued from previous year. Justification to be given.
S. No. Budget Head		Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13		Commited unspent balance (as on October 2012)		Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B15.1.4.6										0.00	
B15.1.4.7										0.00	
B15.1.4.8										0.00	
B15.1.4.9										0.00	
B15.1.4.10										0.00	

				Progress FY 2012	2-13			Propos	ed 2013-14		Remarks
		Phys	sical Progress		Financial Progress (Rs.	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)		Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B15.2	Quality Assurance	669	350	301.98	176.86	64.09		853	3506748	539.38	
B15.2.1	Quality Assurance Committees at State level	0	0	0.00	0.00	0	State	13	136615	17.76	Budget is revised, At State level monitoring cell - One consultant and one Statistician and one DEO at Mumbai and one Program Officer at Pune and one at Nagpur. Also one Statistical Investigator at each of the circle.Details in Annexure B.15.2 QA. As per comments, review meeting budget is deleted.
B15.2.2	Quality Assurance Committees at District level	18	18	98.14	52.55	55.59	District	33	760000	250.80	Budget is revised detail break up of QA activity is attached in annexure B.15.2 QA. Budget for salary, mobility and contingency. Budget is increased because QA activity is now expanded to all 33 districts from this year.
B15.2.3	Grievance handling system	9	9	42.84	21.01	8.50	Grievence Cell	9	695889	62.63	New post Programme Assistant (33) is proposed at District level in G.R Cell / Committee. Therefore increase in PIP budget. New Salary is proposed for 6 months. More details in annexure B.15.2.3 GR.
B15.2.4	Review meetings							790	159387	160.95	
B15.2.4.1	State	102	49	118.80	70.90	67.9		77	153377	118.10	Some of the review meetings were cancelled or jointly taken so the percentage of the revie meetings is less. State level QA team has visited the districts and health facilities. Records and budget utilisation of these visits were under mobility support.
B15.2.4.2	District	540	274	42.20	32.40	21.8		713	6010	42.85	All review meetings including RCH activities, MFP activities at district level. By March end 100% expenditure is assured.
B15.2.4.3	Block	0	0	0.00	0.00	0		0	0	0.00	
B15.2.5	Others	0	0	0.00	0.00			8	1754857	47.24	
B15.2.5.1	Strengthning of delivery and child care sections of high utilisation facilities.	0	0	0.00	0.00	0.00	6 teams + state	7	494857	34.64	New Activity 6 Teams of one trained Gyenacologist, one Pediatrician and one Public Health Nurse will be established in State under QA Cell. Honorarium based on visits, mobility support and state level support will be provided to the teams. Teams will visit the delivery points, identify deficiencies, stay there to correct deficiency, if required organise training at District Hosptial and ensure functioning as per Gol guidelines.
B15.2.5.2	Paliative Care Monitoring Cell			0.00	0.00		Cell	1	1260000	12.60	Details of this activity provided as follows: Palliative care is being introduced from State budget, NRHM budget and NCD budget. One cell is proposed to monitor this activity. Cell will have one Program Officer, one Statistician, mobility support and contingency. Details provied in annexure B.15.2.5.2
B15.2.5.3 B15.2.5.4					0.00					0.00 0.00	
B15.2.5.5					0.00						
B15.3	Monitoring and Evaluation		208	2094.00	332.52			9296	6625270	3089.95	
B15.3.1	Monitoring & Evaluation / HMIS /MCTS	169	153	299.10	162.07	116.06		2479	2195368	1724.93	
B15.3.1.1	HR for M&E/HMIS/MCTS	43	43	116.14	78.78	49.36		44	293682	129.22	As break up of activities is different during this year, some activities are put together in this seciton. Tailed break up is attached as B.15.3.1.1.
B15.3.1.2	MIS Consultant/ Manager/ Coordinators	5	5	13.40	2.62	8.58		7	324000	22.68	Two types of psts are proposed here. MIS Consultant one post is continuation of last year post. During last year 4 posts of Statistician were approved. Two posts are in Data Center at Directorate of Health Services Mumbai and two at RCH Bureau Pune. This year additional two posts are requested at Mumbai to monitor road maps and conditionalities.

				Progress FY 2012-13				Propos	sed 2013-14		Remarks
		Phys	ical Progress		Financial Progress (Rs.	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B15.3.1.3	Statistical Assistant/ Data Analyst	104	102	134.56	76.44	58.12		104	138715	144.26	State has shifted to facility based reporting since December 2013. This is expected to be stabilised by April 2013. Last year, 98 posts were approved under this head and are being continued. Regarding remaining six posts, these are also already approved in PIP 2012-13 but mentioned under MCTS (2 - 15.3.3.b.e) and MIS Cell at HQ (4 - 15.3.1.1). All these posts are already functional and clubed under this head for simplification. As 3 types of posts are clubbed together, unit cost is given as average cost.
B15.3.1.4	MIS/ M&E Assistants	0	0	0.00	0.00		Assistnce services	2298	60000	1378.80	Activity revised as per discussion with AS & MD. No DEO or acountant will be appointed by the State. Services are requird for MCTS data entry, facility based data entry, medicine and other software data entry, biometry and acounts of the PHC and Hosptials. Work load of one PHC is sufficient for one person as account is also added in service. RKS of PHCs and Hosptials will be instructed to employ agency for provision of above mentioned services. Guidelines for selection will be issued by SHS and selection procedure will be carried out by individual RKS under supervision of district society.
B15.3.1.5	Data Entry Operators	0	0	0.00	0.00	0	salary	1	115200	1.15	One DEO deleted as per comments and budget is revised accordingly.
B15.3.1.6	Others (Please specify)	17	3	35.00	4.23			25	1263771	48.82	
B15.3.1.6.1	Computer Specialist Rs.30000/PM	2	2	6.48	3.78	2.7	computer Specialist	2	360000	7.20	Activity revised. One post of Computer specialist deleted as per comments. Two posts continued from last year.
B15.3.1.6.2	System Analyst Rs. 50000/PM	1	1	5.00	0.45	2.25	System Analyst	1	600000	6.00	Activity revised. One additional post of System Analyst requested for this year is deleted. Only one existing post is continued.
B15.3.1.6.3	Junior Computer Specialist Rs. 22000/PM	6	0	15.84	0.00	3.96	Junior Computer Specialist	14	188571	26.40	For consideration as discussed in VC. These posts are required for E-Office software. This scheme is already approved for expansion to divisioinal level. E-Office state specific innovative project will be expanded to 8 DD circle to monitor this program 8 New Post are required to monitor at DD office. salary proposed for 6 month. Essential Qualification (B.E./ MCA with 1 year experience or Bachelor of Comptuer science with 4 year experience).
B15.3.1.6.4	Lady Call Assistants	8	0	7.68	0.00	7.68	Lady Call Assistant	8	115200	9.22	For MCTS Data Validation Call Center, post existing since last year.
B15.3.1.6.5	Manpower	0	0	0.00	0.00	0	salary	0	0	0.00	Post is deleted as per Gol comments.
B15.3.2	Computerization HMIS and e-	301	55	221.60	170.45			1653	1122500	400.28	
B15.3.2.1.a	governance, e-health HMIS Operational Cost (excluding HR & Trainings)	36	0	64.00	0.00	0		53	45000	23.85	Budget is revised as per the expenditure of 2012-13. Facility based reporting of Maharashtra is started. Budget includes Stationary, Internet charges, Computer stationary, calculators, printing, photocopying and other contingency. 33 Dst + 8 Circle+ 11 Bureau+ SHS. HMIS work is done at Divisional and Bureau Offices. All the district reports under one circle are compiled and MIS meeting is held on 12th of every month. All the National Program reports are compiled by concerned bureau and review is taken on this report by Director on every 15th of month.
B15.3.2.1.b	Procurement of Computers/ printers/ cartridges etc.	250	43	114.40	114.40	0.00	Payment	120	40000	48.00	Budget is revised now E-office will be expanded to 8 Deputy Director circle the budget is required for Computers (100), Scanner (20) etc
B15.3.2.1.c	Maintenance of Computers/ AMC/ etc.	0	0	0.00	0.00	0	Computer	835	3500	29.23	Large number of computers are being used for HMIS. However, warranty of 835 computers is expired so these computers require maintenance. State has shifted to facility based reporting since December 2012. Detailed list is submited in annexure.

				Progress FY 2012	2-13			Propos	ed 2013-14		Remarks
		Phys	ical Progress		Financial Progress (Rs. I	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)		Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B15.3.2.1.d	Other Office and admin expenses	15	12	43.20	56.05			645	1034000	299.20	
B15.3.2.1.d.1	Payment to NIC for Software	1	1	20.00	26.00	0.00	users	500	14000	70.00	Maharashtra has started facility based software. The proposal is now revised to include only Circle offices along with the State level offices. Therefore paymet to NIC is reduced. This is already ongoing activity and being expanded to additional 8 offices only duing 2013-14. Budget is required for ongoing activity and additional offices.
B15.3.2.1.d.2	LAN System	8	8	16.00	26.00	0.00	Payment	10	200000	20.00	Maharashtra has started facility based software. The proposal is now revised to include only Circle offices along with the State level offices. Budget required is for LAN. This is already ongoing activity and being expanded to additional 8 offices only duing 2013-14. Budget is required for ongoing activity and additional offices.
B15.3.2.1.d.3	Internet Connectivity	6	3	7.20	4.05	3.15	Payment	20	300000	60.00	High Speed Internate connectivity is required for State, divisionl and district office due to introduction of various softwares and E- Office. This budget is required for rent of the internet. Budget required for VC deleted.
B15.3.2.1.d.4	Internet Connectivity to Very Remote PHCs	0	0	0.00	0.00	0	РНС	111	120000	133.20	New Activity Budget is revised, Internet connectivity will be provided to very remote PHCs and blocks in high focus districts and remote area block. There are 227 PHCs without any internet facilities. Dish will be procured for each PHC for internet connection. All software MCTS, medicine, Biometric attendence, etc will be communicated through this system. List of remote area PHC is attached in annexure B.15.3.2.1.d.4 116 PHCs in Suplimentary PIP.
B15.3.2.1.d.5	Internet Connectivity to 4 HFWTCs for Software training.	0	0	0.00	0.00	0	HFWTC	4	400000	16.00	New Activity Four HFWTCs are identified for software training. Computer lab with 20 computers is already established at thease places. Currently broad band connection is available which is not adequiate for training. Training is disturbed many times due to poor connectivity. It is proposed to establish fibre optic lease line for four places to improve connectivity. Cost is Rs. 5.0 for connection and Rs. 1.2 Lakh per year operational cost. Total budget per HFWTC is Rs. 6.2 Lakh.
B15.3.2.2.a	MCTS Operational Cost (excluding HR & Trainings)	224	0	76.20	0.00			2298	52545	137.88	
B15.3.2.2.b		224		76.20	0.00	76.2	Computers	0	41545	0.00	Activity deletd as per Gol Comment
B15.3.2.2.c	Maintenance of Computers/ AMC/ etc.	0	0	0.00	0.00	0	Computer	0	5000	0.00	Activity deleted as per Gol comments
B15.3.2.2.d	Other Office and admin expenses	0	0	0.00	0.00	0	Contingency	2298	6000	137.88	Recurring expenditure to health facilities for MCTS work on telephone, internet connection, stationary, etc. @ Rs. 500/PM/health institute.
B15.3.3		1444	0		0.00			2866	3254857	826.86	
B15.3.3.1	HMIS Training	33	0	16.50	0.00	16.5	District	33	50000	16.50	One batch at each of the district headquarter. State has shifted to Facility Based Reporting since December 2012.
B15.3.3.2	MCTS Training	865	0	26.00	0.00	26	Blocks and corporations	395	7000	27.65	One batch at each block HQ in Rural Areas and Corporations in urban areas. Services dellvery data will be timely reported.
B15.3.3.3	Mobility Support for HMIS/ MCTS	83	0	111.30	0.00	0	SO + M & E Officer + SPO	83	45000	37.35	Travel and DA to Officers related to Monitoring and Evaluation. State has shifted to Facility Based Reporting since December 2012.
B15.3.3.4	Review Meetings for HMIS	0	0		0.00	0		0	0	0.00	Included in review meeting B.15.2.4.1
B15.3.3.5 B15.3.3.6	Review Meetings for MCTS Data Validation Call Centers - CAPEX	0 0	0 0	0.00 0.00	0.00	0	Center	0	0 160000	0.00 1.60	Included in review meeting B.15.2.4.2 New item in previously approved activity Head phone and other minor renovations of center.
B15.3.3.7	Data Validation Call Centers - OPEX	0	0	0.00	0.00	0	Center	1	320000	3.20	New item in previously approved activity. Telephone charges and contingency of the center.

				Progress FY 201	2-13			Propos	ed 2013-14		Remarks
		Phys	sical Progress		Financial Progress (Rs.	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)		Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B15.3.3.8	e-Governance Initiative	0	0	0.00	0.00	0	E-Aushadhi Software	2298		137.88	Discussed in PIP VC. As per discussion, the E-Aushadhi software is being estabilshed in state. This activity is approved in 2012-13 and being continued in 2013-14 wih expansion. Budget is required for software, training of all Pharmacy Officers and i/c of warehouses, computers, lan system, hiring of experts for maintenance, etc.
B15.3.3.9	Hospital Management Softwares	1	0	1198.24	0.00	115	Hospital Management Software	38			Activity revised as per discussion in PIP VC. Last year approved activity. The software of CDAC finalised and MoU signed. Software modification and testing started. Budget requreid for computers, lan system, internet connectivity and manpower. Details attached in annex.
B15.3.3.10	Others	462	2	0 145.06	0.00)		17	1166857	32.6	
B15.3.3.10.1	Website Maintenance	2	0	30.00	0.00	30	Payment	2	1000000	20.00	Web site maintance required the propose amount. Details are provided in annexures B.15.3 M & E
B15.3.3.10.2	Workshop for Facility wise Data Reporting	0	0	0.00	0.00	0	circle			8.00	One workshop in each health circle
B15.3.3.10.3	Printing & Supply Integrated RCH Register	460	0	115.06	0.00	115.06		0	0	0.00	last year approved in MCTS
B15.3.3.10.4	Reorientation MCTS Workshops for DHO, CS & MOH {One workshop with 92 participants X (100 Rs.for working lunch + 200 Rs DA) at state office}+ organizational cost and Recurring expenditure (Telephone & Internet connection charges) Internet connection (@ Rs.1000 per month X 12 months for 4 computers) and Telephone connection (@ Rs.4000 per month X 12 months for 5 telephone lines)		0	0.00	0.00	0	workshop, MCTS Contingency	7	66857	4.68	One workshop in each revenew division for district level staff (Rs.1.80 L for 6 workshop). new activity, contingency for MCTS Cell (Rs. 2.88 L for 12 months)
B15.3.3.10.5	Infrastructure for Dedicated Video Conferencing	0	0	0.00	0.00	0	vc	0	0	0.00	Activity deleted as per Gol comments.
B.16	PROCUREMENT	834000657	4967	11482.07	6847.03			722729058	1768503	27942.09	Anexures B 16.docx
B16.1	Procurement of Equipment		2649	2558.38	1867.92					4154.83	
B16.1.1	Procurement of equipment: MH	2600	0	64.38	0.00			55	160700	88.39	
B16.1.1.1	Equipments for Blood Banks/ BSUs	0	0	0.00	0.00		Blood bank + BSU	55	160700	88.39	Thease equpment are required for replacement in well functioning existing blood banks at places where ceserean section is being conducted. Prices revised so budget is reduced.
B16.1.1.2	MVA /EVA for Safe Abortion services	2600	0	64.38	0.00	64.38		0	0	0.00	This year procurement is in process. No requirement for next year.
B16.1.1.3	Others (please specify)	0	0	0.00	0.00			0		0.00	
B16.1.1.3.1										0.00	
B16.1.1.3.2 B16.1.1.3.3										0.00 0.00	
B16.1.1.3.3 B16.1.1.3.4										0.00	
B16.1.1.3.4 B16.1.1.3.5										0.00	
B16.1.1.3.6										0.00	
B16.1.1.3.7										0.00	
B16.1.1.3.8		1								0.00	
DIGITITION		-	•								
B16.1.1.3.9										0.00	

			Progress FY 201	2-13			Propos	ed 2013-14		Remarks	
		Phys	ical Progress		Financial Progress (Rs.	Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B16.1.2	Procurement of equipment: CH	301	0	12.90	0.00			110	24000	26.40	
B16.1.2.1	Mannequin (Baby Model for NSSK training)	208	0	12.48	0.00	12.48	Mannequin	0	0	0.00	Activity is delected as per comments
B16.1.2.2	Kelly Forceps for PPIUCD for District	93	0	0.42	0.00	0.42		0	0	0.00	Procurement procedure is under process. Activity is Deleted.
B16.1.2.3	Procurement of Infanto-meter, Stadio Meter & MUAC tapes	0	0	0.00	0.00	0	Instruments	0	0	0.00	Activity is delected as per comments
B16.1.2.4	Equipment for RBSK check up	0	0	0.00	0.00	0		0	0	0.00	Equipments are being procured from saving in budget of 2012-13 PIP.
B16.1.2.5	Baby warmers during transportations	0	0	0.00	0.00		Baby warmer	110	24000	26.40	One Baby Warmer will be provided to each of the very interiour subcenters in the state. Total 110 baby warmers will be requred. List of SC is annexed.
B16.1.2.6 B16.1.2.7										0.00 0.00	
B16.1.2.7 B16.1.2.8										0.00	
B16.1.2.9										0.00	
B16.1.2.10										0.00	
B16.1.3	Procurement of equipment: FP	2634	2634	2440.40	1841.14			5119	491974	1547.99	
B16.1.3.1	NSV kits									0.00	
B16.1.3.2 B16.1.3.3	IUCD kits minilap kits									0.00	
B16.1.3.4	laparoscopes									0.00 0.00	
B16.1.3.5	PPIUCD forceps									0.00	
B16.1.3.6		2634	2634	2440.40	1841.14				491974	1547.99	
B16.1.3.6.1	Procurement of Consumables for PHCs and Hosptials including Burn Wards and Dialysis Units	0	0	0.00	0.00	0	PC and Hosptals	2298	10000	229.80	The consumables will be provided to IPHS Hosptials. Last year, this was included in IPHS as a gap baseed activity. So no budget shown for year 2012-13. Details in annexure.
B16.1.3.6.2	IPHS - Support services (Diet, Laundry, Cleaning, Biomedical Waste Management and Security)		878	1096.80	796.80	990.56	Health Facility	929	50000	464.50	Budget revised. Deficit budget requird for running of services like diet, laundry, cleaning, biomedical waste and security in IPHS health facilities. Expenditure is less as initial payment to these services is made from government budget. This excludes budget for 41 hspitals which is included in PPP. Last year approval uder B.4.1. Details in annexure.
B16.1.3.6.3	IPHS - Maintenance of Instrument Equipment (required)	878	878	104.00	58.96	95.04	Health Facility	929	23974	222.72	Budget revised. Budget is requested as per the submitted plan by the health facilities. This is for AMC and spares of equipment. Last Year Approved Budget under IPHS B.4.1. Details in annexure.
B16.1.3.6.4	IPHS - Other (Required)	878	878	1096.80	842.58	954.22	Health Facility	929	55000	510.95	Budget requred for other maintenance activities of hospitals and phcs which are not specified but important for functioning of hospital. List as per gaps identified under IPHS. List is enclosed in annexure. Last Year Approved Budget under IPHS B.4.1.
B16.1.3.6.5	Establishment of SNCU - Maintenance of Equipment			142.80	142.80	142.8	SNCU	34	353000	120.02	Last Year Approved Budget under B.4.1.3 SNCU.
B16.1.4	Procurement of equipment: IMEP	0	0	0.00	0.00			41	70000	28.70	
B16.1.4.1	OT Fumigator	0	0	0.00	0.00	0	RH/SDH/WG/DH	41	70000	28.70	For major hosptials with heavy OT load. Included in PPP for major hosptials. The equipment is decided by committee of Professors (Surgery and Anasthesia). Porcuremetn will be by E-tendering syste.
B16.1.4.2	Syringe and Needle Destroyer	0	0	0.00	0.00	0	PHC + Hospitals	0	0	0.00	Deleted as per Gol comments
B16.1.4.3	Puncture proof containers	0	0	0.00	0.00	0	PHC + Hospitals	0	0	0.00	For PHCs and hosptials as per need.
B16.1.4.4										0.00	
B16.1.5	Procurement of equipment other									2426.25	
	than above	20	20	246 55	222.47	244.00		26	4075000	407.50	
B16.1.5.1	Innovation - Equipment	20	20	346.55	232.47	314.08	Centres for Sickle cell (20) and Heamatology (6)	Ζδ	1875000	487.50	Budget required for Laboratory Consumables to PHCs, Electrophoresis testing centre, Other RH/SDH & HPLC machine Weighing scale machine, Solubility & Electrophoresis test kits. Details in Annexure B.16.1.5.1 Innovation Equipment. SICKLE CELL (581.10) + HEMATOLOGY (10.50)

				Progress FY 2012	2-13			Propos	ed 2013-14		Remarks
		Phys	ical Progress		Financial Progress (Rs. I	_akhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
S. No.	Budget Head	Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B16.1.5.2	IPHS Equipment	0	0	1645.20	923.49	0	District	33	4900000	1617.00	Total IPHS Equipment is purchase 12490 for 33 District.
B16.1.5.3	ECG Machines Celll Counter and Semi Auto analyser for select PHCs	0	0	0.00	0.00	0	РНС	99	325000	321.75	This is requested for delivery point PHCs with more than 50 delivers/month. Will be useed for delivery patients and other patients (ECG). This will improve quality of services in PHCs. MO trained in MOCP program will be given these equipment. List of PHCs in annexure.
B16.1.5.4										0.00	
B16.1.5.5 B16.1.6	Equipments for ARSH/ School Health	440	0	13.20	13.20			0	0	0.00	
B16.1.6.1 B16.1.6.2	Equipments for ARSH Clinics Equipments for School Health Equipments for School Health Screening (weighing scale, Height measurement scale and Snellens' Charts)	440	0		0.00 13.20	0 13.20	Team	0	0	0.00	Activity deleted propose under CH for RBSK.
B16.1.7	Equipments for Training Institutes	15	15	27.50	13.58	13.93		53	70000	37.10	For the Purpose of various trainings processes the equipments like Laptop, LCD, IDP & other AV Aids & their maintenance etc. are needed at PHI & HFWTC level. Details in annexure.
B16.1.8	Equipments for AYUSH									0.00	
B16.1.9	Procurement of Others/Diagnostics									0.00	
B.16.2	Procurement of Drugs and supplies	833994667	2318	8923.69	4979.11			722723680	951829	23787.27	
D 46 D 4		470404074		1000 66	674.00			406506050	265	046.06	
B.16.2.1 B.16.2.1.1	Drugs & supplies for MH RTI /STI drugs and consumables	478134071 160961	0		671.23 0.00	44	Drug Kit		365 22	816.36 128.54	Budget revised as per comments of GoI.
B.16.2.1.2	Drugs for Safe Abortion	31719	0	27.91	0.00	27.91	Drug Kit	31719	88	27.91	Procurement Procedur is Progress & Exp will be Completed by
D 46 D 4 D		477044204		4440.75	674.00			405075760	255	650.04	March 2013.
B.16.2.1.3 B.16.2.1.3.1	Others (Please specify) Drugs for Maternal Health for Sub	477941391 477924479	0		671.23 671.23	851.97	Drugs		255 0.15	659.91 608.93	As per the comments, Tab. Calcium deleted from procurement.
	Centres / Urban HP										
B.16.2.1.3.2	Support for HIV Detection & Management			186.77	0.00	186.77	Medicine kits	0	0	0.00	Submitted in suplimentary PIP
B.16.2.1.3.3	Provision for IV Iron (Iron Sucrose) for severally anemic pregnant mothers	16912	0	84.56	0.00	84.56	ANC	20000	255	50.98	ELA is Increased. Submitted in suplimentary PIP
B.16.2.1.3.4	Supply of Sanitary napkins to all institutional deliveries			25.55	0.00	25.55	Delivery Cases	0	0	0.00	Submitted in suplimentary PIP
B.16.2.1.3.5	Consumables for F-ICTCS	0	0	0.00	0.00	0	Comsumebales	0	0	0.00	Submitted in suplimentary PIP
B.16.2.1.4 B.16.2.1.5	RPR Kits Whole blood finger prick test for HIV									0.00 0.00	
5.10.2.1.5	whole blood hinger prick test for hiv									0.00	
B.16.2.2 B.16.2.2.1	Drugs & supplies for CH Essential drugs for JSSK benificiaries	355858278	0		2586.60 95.30	175		22052646	403	676.14 0.00	
B.16.2.2.1	Essential drugs for JSSK benificiaries	26000	0	175.00	95.30	175	Patient	0	0	0.00	
B.16.2.2.2	Drugs required for Bi-annual De- worming and Vitamin A Supplementation	355832278	0	640.49	555.71	640.49	bottle, tablet	22022646	3	556.14	This includes budget for medecine of Bi annual rounds. Details are Shown in Annexures B.16.2.2
B.16.2.2.3	CH Medecine Sub-Centre			2728.85	1935.59	2728.85	bottle, tablet, kit	0	0	0.00	This medicine is added in general list (EDL) as per the comments.
B.16.2.2.4	Essential drugs for newborns admitted in SNCU.	0	0	0.00	0.00	0	Patient	30000	400	120.00	Drugs requsted @ Rs. 400/New Born.
B.16.2.2.5										0.00	
B.16.2.3 B.16.2.3.1	Drugs & supplies for FP Intravenous Injection	0	0		0.00 0.00	0	Injections	0	0	0.00 0.00	Activity deleted as per comments on PIP
B.16.2.3.2	Cap Ampicillen + Cap. Cloxacilline				0.00	0	Capsules	0	0	0.00	Activity deleted as per comments on PIP
B.16.2.3.3	Tab Diclofenac 50 mg (10 tab per case)			0.00	0.00	0	Tablets	0	0	0.00	Activity deleted as per comments on PIP
B.16.2.3.4	Tab Dicyclomine (10 tab per tubectomy case)			0.00	0.00	0	Tablets	0	0	0.00	Activity deleted as per comments on PIP
B.16.2.3.5	Chromic catgut (1 box 10 pieces)			0.00	0.00	0	Вох	0	0	0.00	Activity deleted as per comments on PIP

	Budget Head	Progress FY 2012-13						Propos	sed 2013-14	Remarks	
S. No.		Phys	sical Progress		Financial Progress (Rs. Lakhs)					State to mention whether the activity proposed is new or to be	
		Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)		Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	continued from previous year. Justification to be given.
B.16.2.4	Supplies for IMEP	0	0	0.00	0.00			72450	560	83.07	
B.16.2.4.1	Biodegradable bags	0	0	0.00	0.00	0	Кg	63450	60	38.07	State has developed comprehensive plan for biomedical waste management from collection of the waste to transport to point of disposal. Various sub-activities related to this important are submitted at different places due to structure of PIP. Per bed cost of IMEP activities will be calculated based on load with the help of experts.
B.16.2.4.2	OT Fumigation Solution	0	0	0.00	0.00	0	Bottle	9000	500	45.00	OT fumigatioin solution is required for Ots. It is part of IMEP activity.
B.16.2.4.3	Linen Disinfectant	0	0	0.00	0.00	0	Jar	0	0	0.00	Deleted
B.16.2.4.4	Hand Rub Disinfectant	0	0	0.00	0.00	0	Bottle with dispensar	0	0	0.00	Deleted
B.16.2.4.5										0.00	
B.16.2.5	General drugs & supplies for health facilities	2318	2318	3105.00	1240.69			4596	900000	20682.00	
B.16.2.5.1	IPD	2298	2298	2742.00	1240.69	1501.31	PHC + Hospitals	2298	445000	10226.10	 Activity revised. State has published policy and also assured the Assembly for free drugs from all the public health facilities. Maharashtra has revised EDL (facility based EDL) for SC, PHC, Secondary care hosptials and tertiary care hosptials. Now state has seperate Procuremetn Department, E-tendering system, Generic medicine purchase policy and purchase only from Manufacturers. Maharashtra has now strengthned the distribution system and total medicine distribution is now computerised thorugh software. As per the comments medicne mentioned for SC is deleted and will be procureed from this section. This included Hematology drugs Rs. 578.74 Lakhs.
B.16.2.5.2	OPD	20	20	363.00	0.00	363	PHC + Hospitals	2298	455000	10455.90	 Activity revised. State has published policy and also assured the Assembly for free drugs from all the public health facilities. Maharashtra has revised EDL (facility based EDL) for SC, PHC, Secondary care hosptials and tertiary care hosptials. Now state has seperate Procuremetn Department, E-tendering system, Generic medicine purchase policy and purchase only from Manufacturers. Maharashtra has now strengthned the distribution system and total medicine distribution is now computerised thorugh software. As per the comments medicne mentioned for SC is deleted and will be procureed from this section. This included Sickle Cell drugs Rs. 30.00 Lakhs.
B.16.2.6	Drugs & supplies for WIFS	0	0	661.88	355.26			293988646	1	923.93	
B.16.2.6.1	IFA			533.75	355.26	533.75	Tablet	28000000	0	840.00	This requirement is as per the
B.16.2.6.2	Albendazole			128.13	0.00	128.13	Tablet	13988646	1	83.93	Albendozale Tablets @ 60 paisa /tablet for WIFS.
B.16.2.7	Drugs & supplies for SHP	0	0	365.20	125.33	365.2	Kits for SHP &AWC	1130	50000	565.00	This budget includes procurement of medicine required for 1093 for RBSK teams & 37 teams for Ashram Schools.
B.16.2.8	Drugs & supplies for UHCs			26.61	0.00	26.61	Drugs	8154	500	40.77	ELA is increased hence more budget is proposed.
B.16.2.9	Drugs & supplies for AYUSH									0.00	
B.17	Regional drugs warehouses/Logistics management	234	218	1013.31	328.03			340	5106794	1440.68	Details in Annexures B.17 Regional Drug Warehouse

S. No. Bu B.17.1 Drug warehous		rgets 2012-13	(as on Feb 2013)	Budget 2012-13		Lakhs) Commited unspent balance (as on October 2012)	Unit of Measure				State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.
	Tar		(as on Feb 2013)		(as on feb 2013)	balance	Unit of Measure				,
B.17.1 Drug warehou	es 41	41	1	648.80		(as on October 2012)		Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
					239.56	409.24	Warehouse	41	1380000	565.80	As per the discussion with AS & MD, the distribution system of medicines is being strengthned in phased manner. Regional and District Warehouses are being constructed in the state in phased manner. Last year, budget was approved for 10 district warehouses. This year additional 14 new warehouss are being constructed to streamline distribution and monitoring system of state. Budget required is for maintenance of circle warehouses (Rs. 24.0 Lakh), New Construction of District Waehouse (Rs. 429 L), Contingency to Procurement Cell 24.0 L, contingency to district and circle warehouses @ Rs. 1.2 L total Rs. 88.8 Lakh. Last year, warehouse construction was approved under B.5 and this yeassr it is taken hear so the budget is seen as increased. Major part of expenditure is construction so it is reported in March 13.
B.17.2 Staff at State le	/el 17	16	5	41.68	25.12	16.56	Staff at State level	50	182480	91.24	Under warehouse only one person (Market Surveillance Officer) is added this year. All the remaining staff is from last year and is working in the Procuremet Department at the time of submission of PIP. Last year only 16 persons were requsted from this section and remaining 36 persons requested from Software section and other places. Therefore salary is increased. This year, total staff required for state level procurement cell is mentioned in single activity so staff is increased in this cell. This total budget is for salary of staff so it will be utilsed.
B.17.3 Staff at District	level 74	74	1	93.24	42.23	51.01	salary	140	104314	146.04	 33 Warehouses of DHO, 33 warehouses of CS and 8 warehous of circles are included. In addition to previous staff 1 Statistical person per warehous is added to districts. This is because of four fold increase in suppply and also software being used for all the stock related information. Expenditure is less as salary is not paid completely. Total exp will be done by march 13.
B.17.4 Others	102	2 87	7	229.59	21.12			109	3440000	637.60	
B.17.4.1 Transport of m to health facilit	edicines and supplies 0 es	0		0.00	0.00	0.00	Warehouse	74	290000	214.60	New Activity. As new health policy is in place this year, the medicines are being supplied directly to district and regional warehouses and from theere transported to healt facilities priodically as per schedule. As per the comments of Hon. AS & MD druign VC, the proposal is revised to furthre strengthen the distribution system. Budget is required for transportation and supprt services.
B.17.4.2 Equipment ma	ntenance and repairs 102	2 87	7	229.59	21.12	208.47		8	2250000	180.00	In Maharashtra there are 8 Biomedical Engineer teams called as Health Equipment Managemetn Teams(HEMT) established fo rrepairs of equpment and instrument in the health facility. All the eupment with less than 5.0 Lakh price are repaired by these teams. The HEMT visits one block HQ usually at Hosptial once in three months and repairs the instruments equuipment of PHCs and hosptials. NRHM supprot is provided to team in the form of technical persons, biomedical engineers, electricians, etc, mobility support to the team and procuremet of spare parts.
B.17.4.3 Furnitures and	ixers for Warehouse 0	0		0.00	0.00	0	Warehouse	27	900000	243.00	Furniture and fixers for storing cartoons of medicines and other items at all district and regional warehouses. These furniture are required for keeping medicines in storage system. Budget is requiested only at the places where the system is not available presently.
B.17.4.4 B.17.4.5										0.00 0.00	

	Budget Head			2-13			Propos	ed 2013-14	Remarks		
		Physi	ical Progress	Financial Progress (Rs. Lakhs)						State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.	
S. No.		Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)	Unit of Measure	Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B.17.4.6 B.17.4.7										0.00 0.00	
B.17.4.7 B.17.4.8										0.00	
B.17.4.9										0.00	
B.17.4.10 B.18	New Initiatives/ Strategic	0	0	0.00	0.00			2	43062000	0.00 1291.86	Anexures B13 B14 B18.docx
	Interventions (As per Stategic Interventions (As per State health policy)/ Innovation/ Projects (Telemedicine, Hepatitis, Mental Health, Nutrition Programme for Pregnant Women, Neonatal) NRHM Helpline) as per need (Block/ District Action Plans)	0	0	0.00	0.00			3	43062000	1291.80	Anexures B13 B14 B18.00CX
B.18.1	Help Lines	0	0	0.00	0.00		Initiatives	3	43062000	1291.86	Activities are Rehabilitation Day Care centre for Mental Health (26.00), Establishment of blood transport facility at Gadchiroli, Parbhani, Amrawati, Beed and Raigad (11.36), 10 Metro Blood Banks(1254.50 L)
B.19	Health Insurance Scheme									0.00	
B.20	Research, Studies, Analysis	4	0	15.00	0.00	15	No of studies	12	400000	48.00	This includes SHSRC Studies (38.00 L) and Impact of Iron Sucrose (10.0 L)
B.21	State level health resources centre(SHSRC)	0	0	100.00	61.51			2	10010000	100.10	Anexures B21 SHSRC.docx
B.21.1	SHSRC - HR	0	0	67.00	45.90	21.10		1	8627000	86.27	Total budget for HR is given as there is different salary pattern among the group members. Details about the budget is attaching here with.
B.21.2	Other cost	0	0	33.00	15.61	0		1	1383000	13.83	This includes Office expenses (13.83 lakhs). Details are attaching here with.
B22	Support Services	97	90	2148.57	519.76			50	161191261	3751.05	
B22.1	Support Strengthening NPCB	23	23	455.83	0.00	455.83	District	33	850061	280.52	The grant for 2012-13 is for equipment purchase which is in progress. Total grant will be utilised by March 13.
B22.2	Support Strengthening Midwifery Services under medical services									0.00	
B22.3	Support Strengthening NVBDCP	33	33	484.09	184.13	484.09		1	70208000	702.08	Budget is revised.
B22.4	Support Strengthening RNTCP	41	34	780.00	176.18	603.82		1	55400000	554.00	Budget is revised as per Gol Comments.
B22.5	Contingency support to Govt.									0.00	
B22.6	dispensaries Other NDCP Support Programmes			428.65	159.45	269.20	Programmes	5	25177400	1258.87	This includes support to Programme such as Mental Health (250.0 L), leptospirosis prevention and control programs (375.05 L), HIVS (109.93 L), RI (226.42 L) and NLEP (297.47).
B22.7	Non communicable diseases	0	0	0.00	0.00	0	District, Hospital	10	9555800	955.58	 Two New Activities : 1) Expansion of NCD Program in six districts on similar lines to NPCDCS Program and also provision of Calposcope to 8 WH in state. Rs. 971.58 Lakhs. 2) Oncology Services at District Hospitals in Beed, Satara and Sindhudurg and Daga Women Hospital Nagpur, activities includes Training of Physicians, Surgeons, Gynec., and Peadatricians, Orthopedic Surgeons (3 each) at TATA Hospital Mumbai and Provision of Chemotherapy medicines to patients. Rs. 284.00 lakhs. Details is anexures.
B.23	Other Expenditures (Power Backup, Convergence etc)	320	320	844.40	4.97			645	5205987	1133.28	
B.23.1	Uninteruptted Power Supply to Health Facilities	320	320	844.40	4.97	839.43 Page 53 of 5		634	89987	570.52	Solar Procurement is at state level, procedure is completed upto technical evaluation. End of March 13 all the solar system will install at respective institution accordingly budget will be utilized. All Details in Annexure B.23.1 Solar Backup. This budget includes augumentation and maintainance of 634 solars uninteruptted power supply.

	Budget Head			Progress FY 201	2-13			Propos	sed 2013-14	Remarks	
S. No.		Phys	sical Progress		Financial Progress (Rs. Lakhs)					State to mention whether the activity proposed is new or to be continued from previous year. Justification to be given.	
		Targets 2012-13	Achievement (as on Feb 2013)	Budget 2012-13	Expenditure (as on feb 2013)	Commited unspent balance (as on October 2012)		Quantity / Target	Unit Cost (Rs)	Budget (Rs. Lakhs)	
B.23.2	Isolation ward in 23 DH and 3 GH	0	0	0.00	0.00	0.00	District and General Hosptial	0	0	0.00	Submitted in supplementary PIP
B.23.3	Clinical Establishment Act	0	0	0.00	0.00	0	District, State Council	11	5116000	562.76	This act will be passed in Mansoon session of asembly in 2013. Total cost of establishment of act is Rs. 1966.10 Lakh. Howeve, considering the time required to put all the things in place, this year budget requsted is Rs. 562.76 Lakh.
B.23.4										0.00	
B.23.5 B.23.6										0.00	
B.23.7										0.00	
B.23.8										0.00	
B.23.9										0.00	
B.23.10	IMMUNISATION	1292857	745022	6812.17	2151.37			4391221	114777465	0.00 3549.11	
C.1		1281881	743469		740.24			3793819	615079	1405.53	
C.1.a	Mobility Support for supervision for distict level officers.	4224	2450	87.50	15.76	71.74	District	35	250000.000	87.50	
C.1.b	Mobility support for supervision at State level	35	20	1.50	0.07	1.43	State HQ	1	150000	1.50	
C.1.c	Printing and dissemination of Immunization cards, tally sheets, monitoring forms etc.			211.08	0.11	210.97	cards	2119380	5	105.97	Printing of MCP Cards in process due care is taken to complite the Exp. By March 2013
C.1.d	Support for Quarterly State level review meetings of district officer	4	1	2.00	0.16	1.84	meetings	160	1250	2.00	
C.1.e	Quarterly review meetings exclusive for RI at district level with Block Mos, CDPO, and other stake holders	4	3	5.29	3.29	2.00	meetings	5290	100	5.29	These are the review meeting of MO at PHC, MS at CHCs. Their approximate no. is 2646. Budget is calculated @ Rs.100/- participant which comes to Rs. 2.64 lakhs. However the proposed budget is only 50% of this excepted amount. So may be approved.
C.1.f	Quarterly review meetings exclusive for RI at block level		3	180.00	40.05	139.95	, , , , , , , , , , , , , , , , , , ,	1412	3000	42.36	
C.1.g	Focus on slum & underserved areas in urban areas/alternative vaccinator for slums		2610	20.25	7.12	13.13	ANM	4500	450	20.25	
C.1.h	Mobilization of children through ASHA or other mobilizers	636536	369191	954.80	468.45	486.35	ASHA	400000	150	600.00	Due Care is taken to complite the Exp. By March 2013
C.1.i	Alternative vaccine delivery in hard to reach areas	73378	42559	110.07	31.35	78.72	Sessions	50000	150	75.00	Due Care is taken to complite the Exp. By March 2013
C.1.j	Alternative Vaccine Deliery in other areas	563158	326632	422.37	164.64	257.73	Sessions	400000	75	300.00	
C.1.k	To develop microplan at sub-centre level			7.40	0.67	6.73	meetings	10580	50	5.29	
C.1.I	For consolidation of microplans at block level						meetings	387	546	2.11	Due Care is taken to complite the Exp. By March 2013
C.1.m	POL for vaccine delivery from State to district and from district to PHC/CHCs	35		52.50	8.41	44.09	District	35	150000	52.50	
C.1.n	Consumables for computer including provision for internet access			1.68	0.16	1.52	District	35	4800	1.68	
C.1.0	Red/Black plastic bags etc.			24.00	0.00	24.00		800000	3	24.00	
C.1.p	Hub Cutter/Bleach/Hypochlorite solution/ Twin bucket			21.79	0.00	21.79	РНС	1816	500	9.08	
C.1.q	Safety Pits								+	0.00	
C.1.r	State specific requirement						Qtr	50	4000	2.00	The budget for shipment of vaccine samples which are sent for
				22.1.5				100	50000		tasting.
C.1.s C.1.t	Teeka Express Operational Cost Measles SIA operational Cost	3		334.42	0.00	334.42	Lum Sum	138	50000	69.00 0.00	
C.1.u	JE Campaign Operational Cost			1					1	0.00	
C.1.v	Others									0.00	
C.2	Salary of Contractual Staffs	36	0	43.44	22.19			36	276000	47.64	
C.2.1	Computer Assistants support for State level	1		1.44	0.79	0.65	State HQ	1	144000	1.44	
C.2.2	District level	35		42.00	21.40	20.60	District	35	132000	46.20	
C.2.3	Others(service delivery staff)					Page 54 of 5				0.00	

ANNEX 3e