

Z.15015/46/2021-NHM-I  
Government of India  
Ministry of Health & Family Welfare  
(National Health Mission)

Nirman Bhavan, New Delhi  
Dated 13<sup>th</sup> August 2021

To,

Dr. K. Shamsudheen  
Mission Director (NHM),  
Department of Health and Family Welfare  
Government of Lakshadweep  
Directorate of Medical and Health services,  
Administrator of UT of Lakshadweep,  
Kavaratti 682555 - Lakshadweep

**Subject: Approval of Proposals under Emergency COVID Response Package: Phase-II for the UT of Lakshadweep for implementation from 1.7.2021 to 31.3.2022 - reg**

*Dear Dr. Shamsudheen ji,*

*Namaskar !*

This refers to approval of proposals submitted under Emergency COVID Response Package: Phase-II by the UT of Lakshadweep amounting Rs.1.49 crore. It is to inform that detailed ECRP-II guidance note was shared with all State/UTs on 14<sup>th</sup> July 21 subsequent to which ECRP-II Orientation meeting was held on 15<sup>th</sup> July 21. Initially, the UT of Lakshadweep submitted their ECRP- II proposal on 5<sup>th</sup> August 21. Appraisal meeting under the chairmanship of JS(Policy) was held on 6<sup>th</sup> August 2021, through VC mode and based on deliberations of the Appraisal meeting, State has submitted the revised proposal under ECRP-II on 9<sup>th</sup> August 21.

2. The Details of resource envelope, as communicated to the UT vide letter dated 14<sup>th</sup> July 2021 is given below:

(In Crores)

State	Central Share	Matching Share	State	Resource under ECRP-II	Envelope
Lakshadweep	1.49	NA		1.49	

3. Against a Resource Envelope of **Rs.1.49 Crore** as conveyed vide Secretary (H&FW)'s letter dated 14<sup>th</sup> July 2021, approval of the competent authority is hereby conveyed to UT of Lakshadweep for an amount of **Rs. 1.49 Crore** under COVID-19 Emergency Response and Health System Preparedness Package: Phase-II for implementation from 01.07.2021 to 31.03.2022 subject to the following conditions:-

**3.1** All the conditionalities outlined under the Guidance Note for Emergency COVID Response Package-II (ECRP-II) dated 14<sup>th</sup> July 2021 are applicable to ECRP-II approvals for FY 21-22.

**3.2** All the approved activities are to be completed well before 31<sup>st</sup> March 2022.

**3.3** The State must ensure that the funds approved under ECRP-II are used ONLY for the activities indicated and under no circumstances, they should be utilized for any other activity.

**3.4** Monthly financial report has to be submitted to MoHFW in the pre-defined FMR codes.

**3.5** While the focus is on combating the current emergency, the larger goal of strengthening the Public Health system for epidemic preparedness should also be kept in mind while implementing the ECRP-II. Hence, such activities may be prioritized that not only facilitate effective COVID-19 response but also strengthen public health facilities to respond to any similar outbreaks in future.

**3.6** Funds under ECRP-II would be released in instalments. In order to ensure implementation of critical activities at the State/District levels to prepare the public healthcare system in response to the evolving pandemic, 15% of the Central Share of Resource Envelope of the State/UT, has been released in-advance to the State on 22<sup>nd</sup> July 2021.

**3.7** The State share, applicable as per NHM norms and as indicated in Table at Para 2 above, is to be released by the State at the earliest for effective completion of all the approved activities.

**3.8** The funds under ECRP-II will flow from MoHFW to the State Treasury and from the State Treasury to the State Health Society (SHS). The SHS will also receive the corresponding State Share and then would spend the necessary funds as per

detailed activities of ECRP-II approved and enclosed in Annexure-I. Because of urgency of the situation, it is expected that the State Government would transfer the funds under ECRP-II to SHS within 7 working days from the date of release of allocation from the Central Government.

**3.9** The Department of Expenditure has concurred with the proposal of DoHFW by way of a special dispensation, granting exemption from O.M. F.No.1(13)/PFMS/FCD/2020 dated 23.03.2021 of Department of Expenditure till 31.03.2022 for implementation of the revised CSS procedure pertaining to release of funds under CSS in this ECRP Phase-II scheme, on the special ground of emergency COVID-19 related expenditure (copy enclosed). The State/UT may take note of the same.

**3.10** The State must ensure that there is no duplication in the proposals sent for approval under ECRP-II with other schemes/initiatives of the Govt. of India & State Governments and a certificate to this effect must be provided by the State/UT, while submitting the Utilization Certificate of the first instalment. For receiving the next tranche of ECRP-II funds, following mandatory conditions would need to be ensured.

1. The State must ensure physical and financial progress reporting in the NHM-Progress Monitoring System (IT-enabled Dashboard) on a monthly basis.
2. Timely updating of this dashboard is a mandatory criterion for release of next tranche of fund under ECRP-II.

**3.11 Procurement Norms:** The funds released under this package shall be utilized, duly following the mandatory conditions pertaining to procurement as mentioned below:-

- a. Efforts should be made to ensure that there is no duplication in procurement being done by various agencies at the State level.
- b. All procurements should be undertaken through GeM using the resources under ECRP-II and this is a mandatory condition that the States/UTs would need to adhere to.





- c. Wherever exceptions are to be made on this condition, the same can be taken up in exceptional circumstances, with the concurrence of AS&FA of MoHFW and after an appraisal of the State's proposal regarding the same and as assessment of the States capabilities to undertake this procurement through other robust mechanisms and institutions.

**3.12 Monitoring and Reporting/ Dashboard:** The State will send the progress reports on both physical and financial progress against the approved plan on monthly basis by 7<sup>th</sup> of each month (besides updating in the Portal being created for ECRP-II) to the Ministry of Health and Family Welfare, Govt. of India.

**3.13 Audit:** The general process of annual audit undertaken by the Chartered Accountant (CA) under NHM for its programmes will also be applicable to ECRP-II and the audit report should have a separate chapter on ECRP-II. The State must ensure that the conditions laid down in Funds Release Order(s) issued by MoHFW under the COVID Package-II should be complied with.

**3.14 Human Resource:** Under ECRP-II, support is available only for engagement of Human Resources for Health such as PG Residents, MBBS interns, MBBS final year students, final year nursing students and final year GNM students. Accordingly, approval has been given for engagement of PG Residents, MBBS interns, MBBS final year students, final year nursing students and final year GNM students in the dedicated budget lines (S-3.1 to S-3.5) for HRH as per State's proposal. Other than the HRH approved in the dedicated FMR codes (S-3.1 to S-3.5), no other HRH or salary for HR is permitted under ECRP-II. All the temporary posts approved under ECRP-II are only for a maximum period of 9 months (1<sup>st</sup> July 2021 to 31<sup>st</sup> March 2022). Engagement of this HR for this period does not entitle them to claim for continued employment through NHM resources. Approval given for engagement of specific HR such as UG Interns, PG residents, Final MBBS, BSc Nursing and GNM Students may be utilized as and when required only.

**3.15** Similarly, approval given for augmenting additional fleets of ambulances may be utilized for the periods of requirements only.

4. As per the Appraisal meeting, the details of proposed and approved activities /  
Emergency COVID Response Plan (ECRP) Phase II: Summary Sheet are given below:

(in Rs lakhs)			
FMR	Activity / Item of expenditure	Budget Proposed	Budget Approved
	<b>Grand Total</b>	149.6	149.6
<b>S.1</b>	<b>COVID essential Diagnostics and Drugs</b>	<b>31.94</b>	<b>31.94</b>
S.1.1	Provision for RAT and RT-PCR tests	19.47	19.47
S.1.2	Lab Strengthening for RT-PCR ( <b>only for 327 District Public Health Labs / districts not having the RT-PCR Lab in public health system</b> )	0	0
S.1.3	Essential drugs for COVID19 management	12.47	12.47
<b>S.2</b>	<b>Ramping up Health Infrastructure with focus on Paediatric care units</b>	<b>109.4</b>	<b>109.4</b>
S.2.4	ICU beds in public healthcare facilities including 20% paediatric ICU beds	91.4	91.4
S.2.6	Referral Transport	18.00	18.00
<b>S.3</b>	<b>Enhancement of Human Resources for Health</b>	<b>0.00</b>	<b>0.00</b>
<b>S.4</b>	<b>IT Interventions - Hospital Management Information System and Tele-Consultations</b>	<b>8.26</b>	<b>8.26</b>
S.4.1	Hospital Management Information System (HMIS)	0.76	0.76
S.4.2	Strengthening the Telemedicine/ Tele-consultation Hubs	7.50	7.50
<b>S.8</b>	<b>Capacity Building and Training for ECRP II components</b>	<b>0.00</b>	<b>0.00</b>
	<b>Grand Total</b>	<b>149.6</b>	<b>149.6</b>

Detailed proposals and approval details are given at Annexure-I



5. As complying to the conditions of the guidance note, State has complied with all the non-negotiable components under ECRP-II as below:

Particular	Compliance by the State/UT
One Paediatric Unit in every district.	No (UT has proposed paediatric beds under FMR S.2.4)
One Centre of Excellence for Paediatric per state.	UT is supported by Government Medical College, Ernakulam, Kerala
Functional Hospital Management Information System (HMIS) across all district hospitals.	Yes
RT-PCR testing facility in public healthcare system in all the districts.	No 1 lab is functional at Indira Gandhi, Hospital Kavaratti
At least one LMO plant (with MGPS) in each district	No (As per UT, PSA plant with required oxygen cylinder is available at district hospital. Hence, transportation of oxygen as per need is possible)

6. Accordingly, an administrative approval is herewith conveyed for an amount of **Rs. 1.49 Crores** under Emergency COVID Response Package: Phase-II for the UT of Lakshadweep for implementation from 1.7.2021 to 31.3.2022, to be implemented from 1<sup>st</sup> July 2021 to 31<sup>st</sup> March 2022.

*With sincere regards,*

*Vidushi*  
Vidushi Chaturvedi,  
Director(NHM-IV)

Copy to

- Secretary, Health, UT of Lakshadweep
- PPS to AS&MD
- PPS to JS Policy
- NHM-II Section to host in the NHM Website

**Annexure-I: Detailed proposals and approvals under Emergency COVID Response  
Plan (ECRP) Phase II of Lakshadweep**

(in Rs. lakhs)

FMR	Sl No	Activity / Item of expenditure	Unit Cost (In Rs./ unit)	No. of Units Proposed	Budget Propose d	Budget Approve d	Remarks
		<b>Grand Total</b>			<b>149.6</b>	<b>149.6</b>	
<b>S.1</b>		<b>COVID Essential Diagnostics and Drugs</b>			<b>31.94</b>	<b>31.94</b>	
<b>S.1.1</b>		<b>Provision for RAT and RT- PCR tests</b>			<b>19.47</b>	<b>19.47</b>	
	1	No. of RTPCR test Kits	50	15,000	<b>7.50</b>	<b>7.50</b>	As ECRP II discussion, Rs. 7.5 lakhs is approved for RT-PCR test kits Rs. 50/unit. (Maximum test 847 tests on 16 <sup>th</sup> July= 70% of 847=592.9 *270=1,60,083/2 =80,041 tests)
	2	No. of Rapid Antigen Test Kits	70	17,100	<b>11.97</b>	<b>11.97</b>	As per ECRP II discussion, Rs. 11.97 Lakhs approved for Rapid Antigen test kit @Rs. 70/unit. (Maximum test 847 tests on 16 <sup>th</sup> July= 70% of 847=592.9 *270=1,60,083/2 =80,041 tests)
<b>S.1.2</b>		<b>Lab Strengthening for RT-PCR (only for 327 District Public</b>			<b>0.00</b>	<b>0.00</b>	



FMR	SI No	Activity / Item of expenditure	Unit Cost (In Rs./ unit)	No. of Units Proposed	Budget Propose d	Budget Approve d	Remarks
		Health Labs / districts not having the RT- PCR Lab in public health system)					
	1	Budget proposed for establishing RT-PCR Lab (with five year warranty) including procurement of RT-PCR Machine, biosafety cabinet, essentials such as -20 degree Celsius Freezer, pipettes, refrigerated centrifuge, vortex, etc			0	0	
S.1.3		Essential drugs for COVID19 Management, including maintaining buffer stock (List of drugs to be attached)	12,47,00 0	1	12.47	12.47	Approved Rs.12.47 Lakhs
S.2		Ramping up Health Infrastructure with focus on Paediatric care units			109.4	109.4	
S.2.1		Establishing dedicated Paediatric care units			0.00	0.00	
S.2.2		Establishing Paediatric CoEs			0.00	0.00	

*Vidhi*



FMR	SI No	Activity / Item of expenditure	Unit Cost (In Rs./ unit)	No. of Units Proposed	Budget Propose d	Budget Approve d	Remarks
		at Medical Colleges/ State Hospital/ Central Government Hospital					
S.2.3		Establishing additional Beds by provision of Prefab Units closer to the community			0.00	0.00	
S.2.4		ICU beds in public healthcare facilities including 20% paediatric ICU beds			91.4	91.4	
	1	No of ICU beds (duly indicating number of Paediatric ICU beds separately) <b>added at Medical Colleges</b>	-	-	-	-	-
	2	No of ICU beds (duly indicating number of Paediatric ICU beds separately) <b>added at District Hospitals</b> (other than the Paediatric units mentioned at Para 31.2.1)	410000 (ICU beds)	2	8.2	8.2	Approved <b>Rs. 8.2 Lakhs for 2 Paediatric ICU beds at IGH, Kavaratti @ Rs. 4.1 Lakh per ICU bed</b>
			200000 (HDU Beds)	2	4	4	Approved <b>Rs. 4 Lakhs for 2 Paediatric HDU beds at IGH, Kavaratti @ Rs. 2.00 Lakh</b>

FMR	Sl No	Activity / Item of expenditure	Unit Cost (In Rs./ unit)	No. of Units Proposed	Budget Proposed	Budget Approved	Remarks
							per HDU bed
	3	No of ICU beds (duly indicating number of Paediatric ICU beds separately) <b>added at Sub District Hospitals</b> (other than the Paediatric units mentioned at Para 31.2.1)- @ 40 per subdistrict hospitals in all 28 SDH	4,10,000 (ICU beds)	4	16.4	16.4	Approved <b>Rs. 16.4 Lakhs for 4 Paediatric ICU beds</b> (2 each at RGHS, Agatti and 2 each at SDH Minicoy) @ Rs. 4.1 Lakh per ICU bed
			2,00,000 (HDU Beds)	4	8.00	8.00	Approved <b>Rs. 8.00 Lakhs for 4 Paediatric HDU beds</b> (2 each at RGHS, Agatti and 2 each at SDH Minicoy) @ Rs. 2.00 Lakh per HDU bed
	4	No of ICU beds (duly indicating number of Paediatric ICU beds separately) <b>added at Community Health Centres</b> (other than the Paediatric units mentioned at Para 31.2.1)	4,10,000 (ICU beds)	5	20.5	20.5	Approved <b>Rs. 20.5 Lakhs for 5 Paediatric ICU beds</b> (2 Beds each for CHC, Amini & Andrott and 1 for Kadmat) @ Rs. 4.1 Lakh per ICU bed

FMR	SI No	Activity / Item of expenditure	Unit Cost (In Rs./ unit)	No. of Units Proposed	Budget Proposed	Budget Approved	Remarks
			2,00,000 (HDU Beds)	6	12.00	12.00	Approved <b>Rs. 12.00 Lakhs for 6 Paediatric HDU beds</b> (2 Beds each for CHC, Amini, CHC Andrott and CHC Kadmat) @ Rs. 2.00 Lakh per HDU bed
	5	No of ICU beds (duly indicating number of Paediatric ICU beds separately) <b>added at Public healthcare facilities, other than the four mentioned above</b> (other than the Paediatric units mentioned at Para 31.2.1)	4,10,000 (ICU beds)	3	12.3	12.3	Approved <b>Rs. 12.3 Lakhs for 3 Paediatric ICU beds</b> (1 Bed each for PHC Chetlat, Kiltan and Kalpeni) @ Rs. 4.1 Lakh per ICU bed
			2,00,000 (HDU Beds)	5	10.00	10.00	Approved <b>Rs.10.00 Lakhs for 5 Paediatric HDU beds</b> (2 Beds for PHC, Chetlat(1 for FAC Bitia), and 1 Bed for PHC for Kiltan& 2 Beds for Kalpeni)@ Rs. 2.00 Lakh per HDU bed
S.2.6		<b>Referral transport</b>				0.00	
		Support for additional	200000	1	18.00	18.00	Approved <b>Rs. 18.00 Lakhs</b>

FMR	SI No	Activity / Item of expenditure	Unit Cost (In Rs./ unit)	No. of Units Proposed	Budget Propose d	Budget Approve d	Remarks
		ambulances for nine months and preference to be given for ALS Ambulances					<p>@ Rs. 2 lakhs/month/ALS for 1 ALS ambulance for 9 months as support for additional ambulances with conditionality that:</p> <ol style="list-style-type: none"> <li>1. These ambulances are additional ambulances in addition to existence fleet.</li> <li>2. The state must saturate ambulances to one ALS per district.</li> <li>3. The ambulance preferably should be providing ALS facility.</li> <li>4. To monitor the following parameters: average calls received per day, number of trips and total kilometres travelled per day for each ambulance, avg. response time per day for each ambulance, average breakdown time in a month for each ambulance,</li> </ol>





FMR	Sl No	Activity / Item of expenditure	Unit Cost (In Rs./ unit)	No. of Units Proposed	Budget Proposed	Budget Approved	Remarks
							percentage of EMTs trained, their type and duration of training, etc.
S.3		<b>Enhancement of Human Resources for Health</b>			0.00	0.00	
S.4		<b>IT Interventions - Hospital Management Information System and Tele-Consultations</b>			8.26	8.26	
S.4.1		<b>Hospital Management Information System (HMIS) - to be implemented in 426 District Hospitals of the Country (HR support is not covered)</b>			0.76	0.76	
	1	Support to DHs to implement all modules of HMIS in District Hospitals	76000	1	0.76	0.76	Approved Rs. 0.76 Lakh for implementation of HMIS in 1 DH.
S.4.2		<b>Strengthening the Telemedicine/ Tele-consultation Hubs</b>			7.5	7.5	

<b>FMR</b>	<b>SI N o</b>	<b>Activity / Item of expenditure</b>	<b>Unit Cost (In Rs./ unit)</b>	<b>No. of Units Proposed</b>	<b>Budget Propose d</b>	<b>Budget Approve d</b>	<b>Remarks</b>
	1	No of District Hubs established (indicate their locations such as Medical Colleges, DHs, etc) with required hardware and other essentials.	-	-	-	-	-
	2	No of District Hubs strengthened (indicate their locations such as Medical Colleges, DHs, etc) with required hardware and other essentials	75000	2	1.5	1.5	Approved Rs. 1.5 Lakh for establishing 2 Hubs @75000 per Hub. (IGH, Kavaratti, RGSB, Agatti)
	3	No of Spokes established (indicate their locations such as category of Public healthcare facilities including CCCs, etc) with required hardware and other essentials.	-	-	-	-	
	4	No of Spokes strengthened at CHCs,UPHCs, PHCs and Health Subcentres	75000	8	6.00	6.00	Approved Rs.6.00 Lakhs for strengthening of 8 spokes (SDH-GH,Minicoy, CHCAndroth, CHC Amini,



FMR	Sl No	Activity / Item of expenditure	Unit Cost (In Rs./ unit)	No. of Units Proposed	Budget Propose d	Budget Approve d	Remarks
							CHCKadmath,PH C Kalpeni, PHC Kiltan, PHC Chetlath, PHC Agatti)
S.8		Capacity Building and Training for ECRP II components			0.00	0.00	

*Vidhi*

**Anexure-II: Key Deliverables of ECRP-II of Lakshadweep**

Sl No	Major Milestones		Outcome by March 2022	Annexure
1.a	RT-PCR Tests Kits	No. of tests	15,000	NA
1.b	Rapid Antigen Test Kits	No. of kits	17,100	NA
2.	RT-PCR Lab	No. of Labs	NA	NA
3.	Essential drugs for COVID19 Management, including maintaining buffer stock	No. of Districts	1	NA
4.	Establishing dedicated Paediatric care units (42 bedded)	DH	NA	NA
		Medical college	NA	
5.	Establishing dedicated Paediatric care units (32 bedded)	SDH	NA	NA
		DH	NA	NA
6.	Establishing PediatricCoEs	Name of Institution	UT is supported through Government Medical College, Ernakulam, Kerala	
7.	Augmentation of 6 beds units at HWC-SC/HWC-PHCs and 20 bedded units at CHCs	HWC-SHC	NA	NA
		HWC-PHC	NA	NA
		CHC	NA	NA
8.	No of ICU beds (duly indicating number of Paediatric ICU beds separately)	Medical Colleges	NA	NA
		District Hospitals	4	Appendix I
		Sub District Hospitals	8	Appendix I
		Community Health Centres	11	Appendix I
		Public healthcare facilities, other than the four mentioned above	8	Appendix I
9.	Field Hospital	100 bedded	NA	NA
		50 bedded	NA	NA
10.	Referral transport	State Budget	NA	NA
		ECRP-II	1	NA
11.	LMO tank with 10 KL capacity with MGPS	State Budget	NA	NA
		ECRP-II	NA	NA
		PM Cares	NA	NA
		Other source	NA	NA
12.	Human Resource	MBBS Intern (UG)	NA	NA
		Residents (PG)	NA	NA
		Final Year MBBS	NA	NA

*Vishu*



<b>Anexure-II: Key Deliverables of ECRP-II of Lakshadweep</b>				
<b>SI No</b>	<b>Major Milestones</b>		<b>Outcome by March 2022</b>	<b>Annexure</b>
		students		
		Final year B.Sc Nursing Students	NA	NA
		Final year GNM Nursing Students	NA	NA
13.	Implementation of HMIS	Number of District Hospitals	1	AppendixII
		Any other facility	NA	
14.	Teleconsultation- Hub	DH	1	Appendix II
		SDH	1	Appendix II
15.	Teleconsultation- Spoke			AppendixII
		PHC	4	
		CHC	3	
		SDH	1	

*Vedh*

**Appendix- I****List of District Hospitals proposed for adding ICU & HDU Beds**

S. No	District Name	Facility Name
1	Lakshadweep	IGH, Kavaratti

**List of Sub-District Hospitals proposed for adding ICU & HDU Beds**

S. No	District Name	Facility Name
1	Lakshadweep	RGHS, Agatti
1	Lakshadweep	SDH Minicoy

**List of Community Health Centre proposed for adding ICU & HDU Beds**

S. No	District Name	Facility Name
1	Lakshadweep	CHC Amini
1	Lakshadweep	CHC Andrott
1	Lakshadweep	CHC Kadmat

**List of Primary Health Centre proposed for adding ICU & HDU Beds**

S. No	District Name	Facility Name
1	Lakshadweep	PHC Chetlat
2	Lakshadweep	PHC Kiltan
3	Lakshadweep	PHC Kalpeni
4	Lakshadweep	FAC Bitra (1 HDU Bed)



## Appendix-II

### List of Hospitals proposed for strengthening of HMIS in the District Hospital

S. No	District Name	Facility Name
1	Lakshadweep	IGH, Kavaratti

### List of District and Sub-District Hospitals proposed as Hubs for Tele-Consultations

S. No	District Name	Facility Name
1	Lakshadweep	IGH, Kavaratti
2	Lakshadweep	RGSH, Agatti

### List of health facilities selected as spokes for Tele-Consultations

S. No	District Name	Facility Name
1	Lakshadweep	SDH- GH,Minicoy
2	Lakshadweep	CHC, Androth
3	Lakshadweep	CHC,Amini
4	Lakshadweep	CHC, Kadmath
5	Lakshadweep	PHC,Kalpeni
6	Lakshadweep	PHC,Kiltan
7	Lakshadweep	PHC,Chetlath
8	Lakshadweep	PHC,Agatti

*Vedhi*