File No. P-17029/23/2022-NHM IV Government of India Ministry of Health & Family Welfare (NHM-IV Division)

Nirman Bhawan, New Delhi Dated: 4 June, 2022

To

Mr. Suresh Chand Meena, Mission Director (NHM), Department of Health & Family Welfare, State Health Society First Floor Secretariat Building Dadar Nagar Haveli & Daman and Diu -396230

Subject: Approval of Proposals for PM-Ayushman Bharat Health Infrastructure Mission for FY 2022-23 for the UT of Dadar Nagar Haveli and Daman & Diu -Regarding.

Sir,

This is with reference to the proposal received from the UT of Dadar Nagar Haveli and Daman & Diu vide letter No. NHM/SHS/DNH &DD/ABHIM/253 dated 31st May, 2022 for PM-ABHIM for FY 2022-23 for an amount of Rs. 75.00 Lakhs.

2. The details of Resource Envelope are provided in Table A.

Table-A: Resource Envelope under PM-ABHIM for FY 2022-23

(In Rs Crores)

0.75
0.00
NA
0.75

^{*} The UTs were not included in the XV FC Health grant allocation.

The proposal of the UT has been examined and approval of Rs 75.00 Lakhs for FY 2022-23 for the UT of Dadar Nagar Haveli and Daman & Diu can be accorded to the UT subject to the conditions, that expenditure will be done as per the Operational guidelines of PM-ABHIM- Implementation of 15th Finance Commission (FC-XV) - Health Grants Through Local Government, released on August 31st, 2021- Chapter 2- Section UHWC,

Appendix 2.2 for respective components and Rs 5,00,000 will be provided for Polyclinic Services and no expenditure will be done on hiring of vehicle.

The Summary of Proposals and approvals under PM-ABHIM for the UT of Dadar Nagar Haveli and Daman & Diu for FY 22- 23 is at Table-B below:

Table-B: Summary of Component wise approvals under PM-ABHIM for FY 2022-23 (Excluding XV-FC Health Grants Share)

			(In Rs Lakhs)	
Code	Activities	Amount Proposed	Amount Recommended for approval	
АВНІМ.1	Infrastructure Support for Building-less Sub Health Centres -No. of SHCs sanctioned for Capital expenditure		0.00	
ABHIM.2	Urban health and wellness centres (HWCs)	75.00	75.00	
ABHIM.3	Block Public Health Units	0.00	0.00	
ABHIM.4	Integrated Public Health Labs (IPHLs) in all the Districts	0.00	0.00	
ABHIM.5	Critical Care Hospital Blocks	0.00	0.00	
ABHIM.5.1	Critical Care Hospital Block/Wing (100 Bedded at District Hospitals)	0.00	0.00	
АВНІМ.5.2	Critical Care Hospital Block/Wing (50 Bedded at District Hospitals)	0.00	0.00	
АВНІМ.5.3	Critical Care Hospital Block/Wing (50 Bedded at Government Medical Colleges)	0.00	0.00	
	otal PM-Ayushman Bharat Health ure Mission	75.00	75.00	

The Component wise details of **proposal and approval under PM-ABHIM for the UT of Dadar Nagar Haveli and Daman & Diu** for FY 2022-23 are given at **Annexure-I**.

- 5. The approval is subject to the following conditions:
 - i. State/UT should adhere to the clauses mentioned in the MOU signed
 - ii. The agreed targets and deliverables for various components are as given in Annexure II.
- iii. State/UT is required to strictly comply to the negative lists, which is specified for each of the components in the Operational guidelines for PM-ABHIM.
- iv. State/UT should ensure that there is no duplication or overlap of proposals, tasks, procurements, constructions, hiring of HR etc. under NHM, State budgets & any other funds.

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- v. State/UT to ensure compliance for the Implementation Mechanism and Planning process as per Chapter-2.2 & Chapter-2.3 respectively of the Operational Guidelines of PM-ABHIM. Further Rs 5,00,000 will be provided for Polyclinic Services and no expenditure will be done on hiring of vehicle.
- vi. The HR positions are approved to the extent as mentioned in the Section-V under Chapter-2.5, Section 4.1.6, 4.2.2, 5.2.1, 5.2.2, 5.3, 5.4.1, 5.4.5, 6.5.8, 7.5.4 and 7.5.5 under respective Component of the Operational Guidelines of PM-ABHIM.
- vii. The release of the central share will be based on fulfilment of necessary conditions such as submission of UCs and expenditure reports as per extant Rules and instructions of the Central Government in this regard. All processes for fund release, expenditure and Submission of UCs will be as mentioned in the Chapter 2.6 of the Operational Guidelines of PM-ABHIM.
- viii. States/UTs shall submit Monthly progress on the implementation and update in the Progress Monitoring System (PMS) as mentioned in the Chapter-2.7 of the operational Guidelines of PM-ABHIM.
- ix. All approvals are subject to the conditions mentioned in the Operational guidelines of PM-ABHIM for respective components.

(Sachin Mittal) Director, NHM-IV

Copy to:

- Secretary, Health, UT of Dadar Nagar Haveli and Daman & Diu
- PPS to Secretary, DoE, GOI
- PPS to Secretary, MOHFW, GOI
- · PPS to AS & MD, NHM

Annexure-I

<u>Details of Proposal and Approvals under PM-ABHIM for the UT of Dadar Nagar Haveli and Daman & Diu for FY 2022-23 (Excluding XV-FC Health Grants Share)</u>

(Rs In Lakhs)

	医水色素 (1917年)(1917年)	Pro	posal	By UT	Amount		
Code	Activities	Number of Units		Amount Proposed	Recommended	GoI Remarks	
	Grand Total PM-ABHIM						
ABHIM.1	Infrastructure Support for Building-less Sub Health Centres in 7 high Focus States and 3 NE States* -No. of SHCs sanctioned for Capital expenditure	0	0	0	0		
АВНІМ.2	Urban health and wellness centres (HWCs)	1	75.00	75.00	75.00		
АВНІМ.2.1	No. of Urban HWCs, being established in the ULB or other government or rented premises	1	75.00	75.00	75.00	Recommended for Approval for 1 HWCs in DNH & D	
ABHIM .2.2	No. of urban health facilities (UPHCs / Urban CHCs)	0	0	0	0	as mention in Kof.	

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	Grand Total PM-ABHIM			75.00	75.00	
АВНІМ.5	Critical Care Hospital Blocks	0	0	0	0	-
ABHIM .4.4	No. of Existing District IPHLs Strengthened - Support for recurring expenditure	0	0	0	0	-
АВНІМ .4.3	No. of Existing District IPHLs Strengthened - Support for non-recurring expenditure	0	0	0	0	
ABHIM .4.2	No. of District IPHLs established newly - Support for recurring expenditure	0	0	0	0	
ABHIM.4.1	No. of District IPHLs established newly – Support for non-recurring expenditure	0	0	0	0	
АВНІМ.4	Integrated Public Health Labs (IPHLs) in all the Districts	0	0	0	0	
АВНІМ.З	Block Public Health Units in in 11 High Focus States/UTs **	0	0	0	0	-

^{*} Ten High Focus States covered under the component of <u>Building-less Sub Health Centres</u> are Bihar, Jharkhand, Odisha, Punjab, Rajasthan, Uttar Pradesh and West Bengal and three NE States viz. Assam, Manipur and Meghalaya

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** 11 High Focus States/UTs covered under the Component of <u>BPHUs</u> are Assam, Bihar, Chhattisgarh, Himachal Pradesh, UT-Jammu and Kashmir, Jharkhand, Madhya Pradesh, Odisha, Rajasthan, Uttar Pradesh and Uttarakhand

Annexure-II

Component-wise agreed physical deliverables under PM- ABHIM for FY 22-23

Component	Deliverables through XV-FC Health Grants Share (A)	Deliverables through PM- ABHIM Funds (B)	Total (A+B)
Infrastructure Support for Building- less Sub Health Centers	NA	0	0
Urban Health and Wellness Centers	NA	1	1
Block Public Health Units	NA	0	0
District Integrated Public Health Labs	NA	0	0
100 Bedded Critical Care Blocks in District Hospitals (i)	NA	0	0
50 Bedded Critical Care Blocks in District Hospitals (ii)	NA	0	0
50 Bedded Critical Care Blocks in Government Medical Colleges (iii)	NA	0	0
Total Critical Care Blocks (i+ii+iii)	NA	0	0



Annexure-III

	HR Annexure for the					
FMR Code	Name of the position	Urban Healt h & w ellnes s cent ers	Bloc k Pu blic	of Position District Integrat ed Publi c Health Labs**	Critical Ca re Block- 50/75/10 0 bedded in District H ospitals**	Total A mount P roposed (In Lakh s)
	Medical Officer/GDMO	1	-			9.00
	Staff Nurse/Pharmacist	-	- 100	_		- 1
	Staff Nurse	1	-	-15	•	3.60
	ANM/MPW*	1	- 1	-	-	2.40
	Support Staff	2			-	3.60
	Epidemiologist/Entomologis t					•
	Public Health Personnel					•
	Allied Health Professionals					-
	Veterinary Doctor/Specialist					
	Specialist		•	-	-	
	Lab Technician		-	-	-	
	Pathologist			-	-	-
	Microbiologist				-	- 1947
	Biochemist				-	- 1
	Data Entry Operator	-	- 1	-	-	-
	Data Analyst			-	-	-
	Statiscian				-	-
	ASHA*	-				
	Other	-	-	-	-	-

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Tota 5		18.60

*The ANM & ASHA are responsible for the catchment area of an Urban-PHC wherever ava ilable will be drawn from HWC-UPHC / U-CHC for respective Urban-HWC while deriving the heir salary from their linked HWC-UPHC. In case where ANM, ASHA are not available, the State may engage new ASHA, ANM for Urban-HWCs depending on the local needs and resources available.

** HR support indicated for is for 24x7 functioning District PHL

***HR support is for 24x7 functioning CCB (50/75/100 bedded) subject to following cond itionalities:

- o Specialists round the clock for OT, ICU, Emergency and Other areas
- o GDMO 1 for 10 beds critical care area and 1 for 20 beds non critical area
- o Nurses 1:1 ICU; 1:2 Step Down Unit; 1:6 wards and other areas; OT 2 per OT per shift
- Support staff- as per IPHS/GoI guidelines

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