

# **Ministry of Health & Family Welfare**

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## **RECORD OF PROCEEDING CHHATTISGARH**

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**2021-2022**

### **National Health Mission**

## Preface

Record of Proceedings (RoP) document has the budgetary approvals under NHM for the financial year and serves as a reference document for implementation. The approvals given by NPCC are based on the State PIP and discussions with the State officials.

Through the last year, our country has fought fiercely against COVID. We have performed even better than many developed countries in limiting the impact of COVID. In past few months we have strived to maintain the essential services and most of the States have now achieved the pre-COVID levels of essential services. The pandemic has taught us many lessons which must be used for developing resilient Health Systems, which are not only able to fight any sudden calamity like COVID but be sustainable and consistent in reaching our health indicators and goals.

COVID pandemic has made us appreciate our frontline workers even more and has reminded us again of the driving role that motivated and adequate skilled human resources play in the health systems. The States have shown utmost diligence in timely recruitment of requisite human resources from doctors and nurses to paramedics during the last year which must continue in a sustainable manner. Ensuring high quality recruitment, skill assessment of the clinical HR using OSCE (Objective structured clinical examination) is the first step towards bringing quality HR. We need to have in place a regular specialist cadre to ensure PGMO recruitment at entry level. As a short term measure to overcome the shortage of Gynecologists and Anesthetists, EmOC and LSAS training and their proper posting and mentoring is equally important. The 8 broad speciality Diploma courses (of 2 years post MBBS) granted by NBE will help you overcome the short-supply of specialist and provide additional HR to improve service quality in our secondary care health facilities.

We are always striving to increase Public Health expenditure for strengthening our Public Health System. The 15<sup>th</sup> Finance Commission has reiterated the goal set by NHP 2017 of increasing PHE to 2.5% of the GDP. Furthermore, we have PM ASBY, which would provide Comprehensive Primary Health Care, strengthen the surveillance capacities at all levels, research and digital health services. PM- ASBY will also facilitate pandemic preparedness. The States should leverage these provisions for extending comprehensive care at all levels.

As we go to Cabinet for the extension of NHM, it is important to evaluate our work in order to build on our strengths and work on the aspects where we still lag. We have a good report in the form of NITI Aayog's Evaluation Report on NHM. It clearly shows how far we have come and how much we have achieved in terms of crucial indicators like IMR, MMR, Life expectancy at birth along with integrating various health programmes. However, in view of the achievements, our focus on Mother and Child should not get diluted. LaQshya, availability of basket of contraceptive choices, training and formation of a cadre of midwives for quality delivery services are critical under RMNCH+A. We are well poised to move mother and Child care to an Entitlement based framework under Surakshit Matritva Abhiyan with robust grievance redressal systems and effective community participation using multisectoral approaches.

The States have done well in providing drugs and diagnostics services in times of this pandemic. Putting in place a system with robust procurement system, effective quality monitoring, IT backed supply chain management which has quality monitoring, service guarantee and awareness generation is the need of the hour, so that we can keep the OOPE in public health facilities as low as possible.