**PIP (2019-2020) for**

**National Programme for Health Care of the Elderly (NPHCE)**

**INTRODUCTION**

The unprecedented increase in human longevity in 20th century has resulted in the phenomenon of population ageing all over the world. Countries with large population such as India have large number of people now aged 60 years or more. The population over the age of 60 years has tripled in last 50 years in India and will relentlessly increase in near future. In 2001, the proportion of older people was 7.7% which will increase to 8.14% in 2011 and 8.94% in 2016. According to 2001 census, there were 75.93 million Indians above the age of sixty years; of them 38.22 million were males and 37.71 million were females. The projections for next five censuses till the year 2051 are: 96.30 million (2011), 133.32 million (2021), 178.59 (2031), 236.01 million (2041) and 300.96 million (2051).

Along with rising numbers, the expectancy of life at birth is also consistently increasing indicating that a large number of people are likely to live longer than before. The expectancy of life at birth during 1996-2001 was 62.3 years for males and 63.39 years for females. The projected data for the periods 2001-2006, 2006-2011 and 2011-2016 are 63.87 and 65.43; 65.65 and 67.22; and 67.04 and 68.8 years respectively for males and females.

Non-communicable diseases requiring large quantum of health and social care are extremely common in old age, irrespective of socio-economic status. Disabilities resulting from these non-communicable diseases are very frequent which affect functionality compromising the ability to pursue the activities of daily living. The treatment/ management of these chronic diseases is also costly, especially for cancer treatment, joint replacements, heart surgery, neurosurgical procedures etc. thereby making it out of bound for elderly whose income decreases post retirement and more so for the elderly in the unorganized sector and dependent elderly women.

The National Sample Surveys of 1986-87, 1995-1996, and 2004 have shown that:

• The burden of morbidity in old age is enormous.

• Non-communicable diseases (life style related and degenerative) are extremely common in older people irrespective of socio- economic status.

• Disabilities are very frequent which affect the functionality in old age compromising the ability to pursue the activities of daily living.

**Vision of the NPHCE is:**

• To provide accessible, affordable, and high-quality long-term, comprehensive and dedicated care services to an Ageing population;

• Creating a new “architecture” for Ageing;

• To build a framework to create an enabling environment for “a Society for all Ages”;

• To promote the concept of Active and Healthy Ageing;

**Specific Objectives of NPHCE are:**

• To provide an easy access to promotional, preventive, curative and rehabilitative services to the elderly through community based primary health care approach

• To identify health problems in the elderly and provide appropriate health interventions in the community with a strong referral backup support.

• To build capacity of the medical and paramedical professionals as well as the care-takers within the family for providing health care to the elderly.

• To provide referral services to the elderly patients through district hospitals, regional medical institutions

• Convergence with National Rural Health Mission, AYUSH and other line departments like Ministry of Social Justice and Empowerment

**Core Strategies to achieve the Objectives of the programme are:**

• Community based primary health care approach including domiciliary visits by trained health care workers.

• Dedicated services at PHC/CHC level including provision of machinery, equipment, training, additional human resources (CHC), IEC, etc.

• Dedicated facilities at District Hospital with 10 bedded wards, additional human resources, machinery & equipment, consumables & drugs, training and IEC.

• Strengthening of 8 Regional Medical Institutes to provide dedicated tertiary level medical facilities for the Elderly, introducing PG courses in Geriatric Medicine, and in-service training of health personnel at all levels.

• Information, Education & Communication (IEC) using mass media, folk media and other communication channels to reach out to the target community.

• Continuous monitoring and independent evaluation of the Programme and research in Geriatrics and implementation of NPHCE.

**Supplementary Strategies include:**

• Promotion of public private partnerships in Geriatric Health Care.

• Mainstreaming AYUSH – revitalizing local health traditions, and convergence with programmes of Ministry of Social Justice and Empowerment in the field of geriatrics.

• Reorienting medical education to support geriatric issues.

**Expected Outcomes of NPHCE:**

• Regional Geriatric Centres (RGC) in 8 Regional Medical Institutions by setting up Regional Geriatric Centres with a dedicated Geriatric OPD and 30-bedded Geriatric ward for management of specific diseases of the elderly, training of health personnel in geriatric health care and conducting research; • Post-graduates in Geriatric Medicine (16) from the 8 regional medical institutions;

• Video Conferencing Units in the 8 Regional Medical Institutions to be utilized for capacity building and mentoring;

• District Geriatric Units with dedicated Geriatric OPD and 10-bedded Geriatric ward in 80-100 District Hospitals;

• Geriatric Clinics/Rehabilitation units set up for domiciliary visits in Community/Primary Health Centres in the selected districts;

• Sub-centres provided with equipment for community outreach services;

• Training of Human Resources in the Public Health Care System in Geriatric Care.

**Status of implementation:**

* NPHCE was launched along with NPCDCS in February, 2014
* NPHCE started in Mizoram in Nov/Dec 2015
* All 9 districts i.e., Aizawl West, Aizawl East, Lunglei, Kolasib, Champhai, Serchhip, Mamit, Lawngtlai & Siaha of Mizoram have been covered.

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| **Sl. No** | **FINANCIAL YEAR** | **DISTRICTS COVERED** |
| 1. | 2015-2016 | Aizawl East & Lungei |
| 2. | 2016-2017 | Aizawl West & Kolasib |
| 3. | 2017-2018 | Champhai |
| 4. | 2018-2019 | Serchhip, Mamit, Lawngtlai & Siaha |

* Currently, there are ? staff under the programme.

**NPHCE PIP 2019- 2020**

**Budget Summary**

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| **FMR CODE** | **BUDGET HEAD** | **AMOUNT (in Lakh)** |
|  | **NCD FLEXIPOOL** |  |
| 6.1.1.21.a | **Recurring Grant-in-Aid :**Machinery & Equipment @ Rs.1.0 lakh per unit for 9 districts | **9.0/-** |
| 6.1.1.21.d | **Non-Recurring Grant-in-Aid :** Machinery & Equipment for CHC @ Rs.0.3 lakhs per unit for 19 PHCs | **5.7/-** |
| **9.5** | **Training** | **5.71/-** |
| 9.5.17.1 | Training of doctors and staff from PHCs   1. 2 Days Training PHC MO’s @ 1.11 2. 1Day Training PHC SN @ 0.55 | 1.66/- |
| 9.5.17.2 | Training of doctors/ staff from PHCs/ SCs | 0.55/- |
| 9.5.17.4 | Any Other – Training of Trainers | **3.50/-** |
|  | **TOTAL** | **20.41/-** |
|  | **MISSION FLEXIPOOL** |  |
| 6.2.17.1 | Drugs & Consumables @ Rs 0.25 lakh per centre x 9 | **2.25/-** |
| 11.20.1 | IEC/ BCC  Public Awareness & IEC for NPHCE @ Rs.0.25 lakh per unit x 9 districts | **2.25/-** |
| **TOTAL** | | **4.5/-** |
| **GRAND TOTAL** | | **24.91/-** |

1. **Recurring Grant-in-aid: Machinery & Equipment for District Hospitals**

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| **FMR Code** | **Head** | **Proposed cost**  **(Rs lakhs)** | **Remarks** |
| **6.1.1.21.a** | Machinery & Equipment @  Rs. 1.0 Lakh per unit x 9 | **9.0/-** | 9 District hospitals –Aizawl West, Aizawl East, Lunglei, Kolasib, Champhai, Mamit, Serchhip, Lawngtlai & Siaha |

**List of equipment proposed @ Rs. 1.0 lakh per unit x 9 units:**

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| --- | --- | --- |
| **Sl. No** | **Items proposed** | **Unit cost (Rs lakhs)** |
| 1 | Maintanence cost for machines & equipment procured under NPHCE | 0.50/- |
| 2 | Glucometers, Glucostrips & lancets | 0.50/- |
|  | **Requirement per unit** | **1.0/-** |
|  | **Total requirement @ Rs. 1.0 lakh per unit x 9** | **9.0/-** |

1. **Non- Recurring Grant-in-aid : Machinery & Equipment for CHCs**

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| --- | --- | --- |
| **FMR CODE** | **BUDGET HEAD** | **AMOUNT (Rs lakhs)** |
| **6.1.1.21.d** | Non- Recurring Grant-in-aid: Machinery & Equipment for CHCs @ Rs. 0.30 lakh per unit x 19 PHCs | **5.70/-** |

**List of equipment proposed for 19 PHC under Aizawl East, Aizawl West, Champhai, Kolasib, Lawngtlai, Lunglei, mamit, Siaha & Serchhip @ Rs. 0.5 lakh per unit as below :**

**Aizawl East**

1. Thingsulthliah PHC
2. Khawruhlian PHC
3. Darlawn PHC

**Aizawl West**

1. Lengpui PHC
2. Aibawk PHC
3. Sairang PHC
4. Sialsuk

**Lunglei PHC**

1. Haulawng PHC
2. Tawipui PHC
3. Chhipphir PHC
4. Buarpui PHC

**Champhai**

1. Hnahlan PHC
2. Kawlkulh PHC
3. Farkawn PHC
4. Khawbung PHC

**Kolasib**

1. Lungdai PHC
2. Kawnpui PHC
3. Bilkhawthlir PHC
4. Bairabi PHC

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| **Sl. No** | **Items proposed** | **Unit cost (Rs lakhs )** |
| 1 | Nebulizer | 3500/- |
| 2 | Glucometer | 1500/- |
| 4 | Shoulder Wheel | 5500/- |
| 5 | Pulse oximeter (finger) | 3000/- |
| 6 | Cervical Traction Manual | 3500/- |
| 7 | Lumber Traction | 4500/- |
| 8 | Exercise Bicycle | 2500/- |
| 9 | Infrared Lamp | 6000/- |
|  | **Requirement for 1 PHC** | **30,000/-** |
|  | **Requirement for 11 PHCs @ Rs. 0.30/- x 19** | **570000** |

1. **Training under NPHCE**

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| **FMR CODE** | **BUDGET HEAD** | **AMOUNT (Rs lakhs)** |
| 9.5 | Training under NPHCE | **5.71/-** |

1. **Training of doctors and staff from CHCs & PHCs**

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| **FMR CODE** | **BUDGET HEAD** | **AMOUNT (Rs lakhs)** |
| 9.5.17.1 | Training of doctors and staff from PHCs | **1.66/-** |

1. **Estimated budget for 2 days training of 19 doctors from 19 PHCs :-**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **FMR CODE** | **Sl No** | **Particulars** | **Rate (Rs)** | **Unit** | **No of days** | **No. of batches** | **Amount (Rs lakhs)** |
| 9.5.17.1 | 1 | Venue Hiring | 2000/- | - | 2 | 2 | 4000/- |
| 2 | Working Lunch, Tea & Snacks | 250/- | 19 | 2 | 9,500/- |
| 3 | Honorarium to Resource Person | 1000/- | 5 | 2 | 10,000/- |
| 4 | Training Materials | 150/- | 19 | - | 2,850/- |
| 5 | TA for trainees | 3000/- approx | 19 | - | 57,000/- |
| 6 | Accomodation (for trainees) | 1000/- | 19 | - | 19,000 |
| 7 | Printing of Training Modules | 300/- | 19 | - | 5700,- |
| 8 | Miscellaneous | - |  |  | 2600/- |
|  |  | **Total amount** | | | | | **1,10,650/-** |

1. **Estimated budget for 1 day training of 19 Staff Nurses from 19 PHCs:**

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| **FMR CODE** | **Sl No** | **Particulars** | **Rate (Rs)** | **Unit** | **No of days** | **No. of batches** | **Amount (Rs lakhs)** |
| 9.5.17.1 | 1 | Venue Hiring | 2000/- |  | 1 | 1 | 2,000/- |
| 2 | Working Lunch, Tea & Snacks | 250/- | 19 | 1 | 4,750/- |
| 3 | Honorarium to Resource Person | 1000/- | 5 | 1 | 5,000/- |
| 4 | Training Materials | 150/- | 19 | 1 | 2,850/- |
| 5 | TA for trainees | 1500/- approx | 19 | 1 | 28,500/- |
| 6 | Printing of Training Modules | 300/- | 19 | 1 | 5,700/- |
| 7 | Miscellaneous | - |  |  | 6200/- |
|  |  | **Total amount** | | | | | **55,000/-** |

1. **Training of doctors/ staff from PHCs/ SCs**

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| **FMR CODE** | **BUDGET HEAD** | **AMOUNT (Rs lakhs)** |
| 9.5.17.3 | Training of doctors / staff from PHCs/ SCs | **0.55/-** |

1. **Budget estimate for 1 day training of 19 Health Workers from 19 PHCs.**

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| **FMR CODE** | **Sl No** | **Particulars** | **Rate (Rs)** | **Unit** | **No of days** | **Amount (Rs lakhs)** |
| 9.5.17.3 | 1 | Venue Hiring | 2000/- |  | 1 | 2,000/- |
| 2 | Working Lunch, Tea & Snacks | 250/- | 19 | 4,750/- |
| 3 | Honorarium to Resource Person | 1000/- | 5 | 5,000/- |
| 4 | Training Materials | 150/- | 19 | 2,850/- |
| 5 | TA for trainees | 1500/- approx | 19 | 28,500/- |
| 6 | Printing of Training Modules | 300/- | 19 | 5,700/- |
| 7 | Miscellaneous | - |  | 6200/- |
|  |  | **Total amount** | | | | **55,000/-** |

1. **Training of Trainers at National Level**

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| **FMR CODE** | **BUDGET HEAD** | **AMOUNT (Rs lakhs)** |
| 9.5.17.4 | Any other | **3.50/-** |

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|  |  |  |  |  |  |  |
| **Category** | **No. of Persons** | **Duration** | **No. of Batches** | **Date** | **Unit cost per trainee** | **Total cost**  **(Rs lakhs)** |
| State Nodal Officer/ Programme Officers | 3 | 3 | - | As per schedule of MoHFW | 50,000 | 1,50,000/- |
| Specialists/ Medical Officers | 4 | 3 | - | 50,000 | 2,00,000/- |
| Miscellaneous |  |  |  |  |  |
|  | **TOTAL** | | | | | **3,50,000/-** |

1. **Drugs & Consumables**

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| --- | --- | --- |
| **FMR CODE** | **BUDGET HEAD** | **AMOUNT (Rs)** |
| 6.2.17.1 | Drugs & Consumables @ Rs. 0.25 lakh per unit x 9 centres | **Rs. 2.25** |

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| **Sl. No** | **Name** | **Rate (Rs)** | **Requirements** | **Amount (Rs)** |
| 1 | Tab. Atenolol 50mg | 1 | 2,000 | 2,000 |
| 2 | Tab. Amlodipine 10mg | 2 | 3,000 | 6,000 |
| 3 | *Tab. Hydrochlorthiazide 12.5mg* | *1* | 2,000 | 2,000 |
| 4 | Tab. Enalapril 2.5mg  5mg | 1  1 | 2,000  2,000 | 2,000  2,000 |
| 5 | Tab. Atorvastatin 10mg | 1 | 2,000 | 2,000 |
| 6 | Tab. Clopidogrel 75mg | 4 | 1,000 | 4,000 |
| 7 | Tab. Metformin 500mg | 1 | 5,000 | 5,000 |
|  | **GRAND TOTAL** |  |  | **25,000** |

**Requirement of drugs for districts (calculated @ Rs 0.25 lakhs per district):-**

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| **Sl. No** | **Districts** | **Amount (in Rs)** |
| **1.** | Aizawl East | 25,000 |
| **2.** | Aizawl West | 25,000 |
| **3.** | Lunglei | 25,000 |
| **4.** | Kolasib | 25,000 |
| **5.** | Champhai | 25,000 |
| **6.** | Siaha | 25,000 |
| **7.** | Mamit | 25,000 |
| **8.** | Serchhip | 25,000 |
| **9.** | Lawngtlai | 25,000 |
|  | **GRAND TOTAL** | **2,25,000** |

**5. IEC/ BCC activities under NPHCE**

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| --- | --- | --- | --- |
| **FMR CODE** | **BUDGET HEAD** | **UNIT COST** | **AMOUNT(Rs lakhs)** |
| **11.20.1** | IEC/ BCC activities under NPHCE proposed at @ Rs. 0.25 lakhs per unit x 9 centres | 0.25 | 2.25 |

IEC activities has been budgeted for 9 Districts viz., Aizawl east, Aizawl West, Lunglei, Champhai, Saiha, Kolasib, Mamit, Serchhip & Lawngtlai @ Rs.0.25 lakhs per district

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| **FMR Code** |  | **IEC Plan & Budget for District NCD Cell** | **Amount (Rs lakhs)** |
| **11.22.2** | **1.      Mass Media** | |  |
| TV Spots | Broadcasting at 1 local channel @ Rs 200/min x 20 days | 0.04 |
| Print media | Advertisements @ Rs. 500 x 10 | 0.05 |
| **2. Printing** | Leaflets = 2@ Rs 5 x 500 copies | 0.05 |
| **3. Awareness Campaign** | Awareness Campaign in schools & colleges @ Rs. 0.02 x 5 | 0.10 |
| **4.Day Observation** | International Day of the Older persons | 0.10 |
|  | **Total Amount** | **0.25** |
| **Total ( District NCD Cell IEC budget)** | | **0.25** |
|  | **Grand Total @ Rs. 0.25 lakh per district for 9 districts** | | **2.25** |