

PUBLIC HEALTH

This sector includes programme for control on Malaria, Hepatitis B, Dengue, Cancer, Leprosy, T B and plus polio programme, special immunization programme, various health campaign, water born diseases. Implementation of FSSA 2006 and food safety rule 2011 to ensure the safety from food adulteration, Drug Control, Forensic science Laboratory and improvement & development of cremation grounds.

1. Directorate of Prevention of Food Adulteration

Plan Outlay

XII FYP : Rs.1300.00 Lakh

Annual Plan 2012-13 : Rs.260.00 Lakh

The Cabinet has approved to introduce the new act i.e Food safety and standard Act 2006 in place of PFA act 1954 w.e.f 5th August 2011 in the entire local area of NCT of Delhi for laying down science based standards for article of food and to regulate their manufacture, storage, distribution, sale and import to ensure availability of safe and wholesome food for human consumption. As per the Food Safety and Standards Act, 2006 and rules as well as Regulation 2011, it is mandatory to get registration/licenses for all Food Business Operators.

The department is to prohibit the manufacturing, distribution or sale of any article of food which is substandard, adulterated or misbranded. The department also organizes awareness programmes on food safety. The food samples/articles lifted by the Food Safety Officer. If sample found misbranded, adulterated or substandard the adjudication proceeding/enquire is started against the offenders (Rule 3.1). The offenders can be imposed penalty and/or any suitable punishment in accordance with the provisions of the Act.

For Implementation of FSSA 2006 [Direction & Administration]

Plan Outlay

XII FYP : Rs.200.00 Lakh

Annual Plan 2012-13 : Rs.45.00 Lakh

For Implementation of new laws under FSS Act, AR Deptt has recommended 66 posts of various categories.

1.2 Setting up of Mobil Food & Drug lab

Plan Outlay

XII FYP : Rs.100.00 Lakh

Annual Plan 2012-13 : Rs.20.00 Lakh

Quality Council of India conducted a gap study as per guidelines of ISO 17025:2005. Renovation /Upgradation work suggested by QCI in Food Lab to be completed by PWD.

1.3 EDP Cell:

Plan Outlay

XII FYP : Rs.400.00 Lakh
Annual Plan 2012-13 : Rs.95.00 Lakh

The Deptt. has to start licensing of Food Business Operators, operating in NCR Delhi. Infrastructure in each of the 9 districts with the designated Officers will be required. Further, infrastructure (Computers Systems, Chairs, Tables, UPS, Almirah etc.) will also be procured during the next financial year for implementation of the FSS Act.

1.4 Addition & Alteration of Existing Building

Plan Outlay

XII FYP : Rs.600.00 Lakh
Annual Plan 2012-13 : Rs.100.00 Lakh

Under this scheme , expenditure on electrical and civil works for food lab for its NABL accreditation & cost of running of DG set, fire fighting equipment etc.is also incurred in addition to further renovation works by PWD.

2. DRUG CONTROL DEPARTMENT

Plan Outlay

XII FYP : Rs.1300.00 Lakh
Annual Plan 2012-13 : Rs.200.00 Lakh

Under this scheme provisions have been made for creation of posts of different categories, for strengthening of the Drug Control Department including Drugs Testing Laboratory and for computerization of the Department. Drug control department enforces

- The provision of “Drug Remedies Act and Rules made their under” and “Drug (price control) order 1995.
- Intensive inspection and raids for violation of drug and cosmetic act.
- Licensing for surgical and medical devices.
- Approval for private drug laboratory.

3. DIRECTORATE OF HEALTH SERVICES

Plan Outlay

XII FYP : Rs.650.00 Lakh
Annual Plan 2012-13 : Rs.160.00 Lakh

3.1 STATE HEALTH INTELLIGENCE BUREAU

Plan Outlay

XII FYP : Rs.40.00 Lakh
Annual Plan 2012-13 : Rs.5.00 Lakh

a) Introduction, Aims & Objective

The prime objective of this Bureau as recommended by Central Health Intelligence Bureau (branch of DGHS) is to maintain the proper data base of various medical statistics, and publish various Health bulletins and booklets containing concrete report which could evaluate the impact of health related programme and subsequently provide a frame work of future plan which would be more useful for planners to plan future strategies for achieving cherished goal of "Health for All".

b) Achievement Of Annual Plan 2011-12

Morbidity data of communicable and non-communicable diseases are collected and compiled. Citizen charter of DHS had been updated in consultation with CDMOs and programme officers of DHS.

c) Targets for 12th FYP & Annual Plan 2012-13

- Collection & Compilation of morbidity & Mortality data of all health institutions in Delhi.
- Update of Citizen Charter of Hospitals, CDMO offices & other plan schemes/programmes of the previous plan period.
- Publication of Annual Reports of all schemes under DHS.
- Update of Assembly wise Health Facilities in Delhi.

3.2 G.I.A. TO NGOS FOR APPROVED PROGRAMMES OF DELHI GOVT

Plan Outlay

XII FYP : Rs.100.00 Lakh

Annual Plan 2012-13 : Rs.20.00 Lakh

Introduction, Aims & Objective

Govt.'s effort in provision of health services needs to be supplemented and supported through involvement of NGOs/private organization and RWA in this field. The emergence of NGOs/Private organizations and RWA in providing health care services to the public. While implementing the health programmes Govt. wants to provide partial financial support to the private agencies who will also contribute their share in total implementation of the programmes.

12TH Five Year Plan :- To provide the GIA to 150 NGO

Target For Annual Plan 2012-13

- Organization of workshops, seminars, health camps/meals of various health programmes through NGOs for their involvement.
- Strengthening Charitable Dispensaries being run by private agencies / RWA.

- Support for TB, Leprosy, Cancer patients and blind people through NGOs by providing grant-in-aid by Delhi Govt.
- To provide the GIA to 25-30 NGOs

3.3. Medical Facilities for Govt. Employees and Pensioners of Delhi

Plan Outlay

XII FYP : Rs.50.00 Lakh
Annual Plan 2012-13 : Rs.10.00 Lakh

Introduction

Delhi Govt. has introduced the existing Health Scheme for its Employees/Pensioners on the CGHS pattern. The scheme is fully operational. Option was given to the employees to opt or not to opt for contribution to this scheme in the year 1997 and monthly subscriptions are being deducted since then from the salaries of these employees who had opted for the scheme.

Aims and Objectives

The scheme is aimed at providing comprehensive health care services to the employees/pensioners of Delhi Govt. & their dependent families. The scope of provision of facilities is now extended to employees/pensioners residing in National Capital Region.

RE Modified DGEHS was approved by Delhi Cabinet in July 2010, which envisages employment of hospitals that will provide cash less credit facilities to the beneficiaries during emergency treatment. The scheme is now opened ended for pensioner's w.e.f. 01.08.2010.

Target of 12Th FYP Plan & Annual plan 2012-13:-

- Formation of four zones like East, West, North and South for operational
- Supervision of DGEH Scheme with one head quarter.
- Computerization of the scheme.
- Preparation of smart cards for beneficiaries.
- 24 hours call center.
- Engagement of TPA for providing cashless facility to beneficiaries.
- Empanelment of more hospitals/diagnostic centers.
- Computerization of the scheme.
- Empanelment of more hospitals/diagnostic centers.
- Empanelment of chemist shop to be attached to all Delhi Government Dispensaries and Hospitals for providing Drugs and Consumable to beneficiaries.

3.4. Directorate of Public Health Services

Plan Outlay

XII FYP : Rs.460.00 Lakh
Annual Plan 2012-13 : Rs.75.00 Lakh

Introduction, Need And Justification

In Delhi control of communicable diseases and other public health activities are being undertaken by MCD under MCD Act. Govt. of N.C.T. of Delhi is coordinating with all implementing agencies like MCD, NDMC and other local bodies for control measures of epidemics and communicable diseases. Other public health programmes which are not dealt by local bodies are being undertaken under plan scheme "Public Health Programmes by Govt. of N.C.T. of Delhi". However, the increasing trend of risk of non-communicable diseases like heart diseases, obesity, diabetes, hypertension, thalassamia, genetic disorders, flurosis, mental disorders, drugs addiction etc. also require proper attention and timely intervention for health in full swing. The issues related to organ transplantation also needs to be addressed by Delhi Govt. as and when asked for.

Aims & Objectives

- To identify magnitude of problems in the city through collection and analysis of data pertaining to different non-communicable diseases.
- To develop suitable strategies / programmes against these health problems so identified with a view to prevent/control them to improve health of the population.

Target of 12th FYP & Annual Plan 2012-13:-

- Setting up of NCD cell at state and district level .
- Organization of workshop, seminar and training activities on non communicable diseases.
- Establishment of specific clinics like diabetes and hypertension clinic, CVD clinic in various hospitals.
- Coordination with different health implementing agencies like MCD, NDMC, Cantonment Board and other agencies of National Capital Territory of Delhi to avoid duplication.
- Organization of specific public awareness programmes and health educational activities for each component of NCD in the JJ clusters/R.S. colonies, urban slums and schools/colleges (at least 10).
- IEC/BCC Activities.

3.5 Indian Institute OF Public Health

Plan Outlay

Annual Plan 2012-13 : Rs.50.00 Lakh

4. DTE. OF FAMILY WELFARE

Plan Outlay

XII FYP : Rs.11000.00 Lakh

Annual Plan 2012-13 : Rs.2240.00 Lakh

4.1 Special Immunization Programme including MMR

Plan Outlay

XII FYP : Rs.970.00 Lakh

Annual Plan 2012-13 : Rs.234.00 Lakh

Under this, it is proposed to purchase typhoid and MMR vaccine along with other related items. IEC, training activities are also included under this scheme. The objective is to protect infants and new born against the Hepatitis B & Typhoid disease for improving the quality the life of children. About 3.25 lakhs children with MMR vaccine & 3.25 lakhs with Typhiod vaccine are planned for coverage the year 2012-13. Govt. has decided to introduce from the current year for improving the immunization programme to cover the children's by providing pentavalent vaccine which is a 5 in 1 vaccine and includes diphtheria, Pertusis, Tetanus (DPT), Hepatitis B and homophiles influenza type B. this in turn will facilitate achievements of our objective of reduction in the infant Mortality Rate(IMR), and the under 5, mortality rate.

4.2. Pulse Polio Programme

Plan Outlay

XII FYP : Rs.30.00 Lakh

Annual Plan 2012-13 : Rs.6.00 Lakh

Objective of the scheme

To immunize all children with OPV up to the age of 5 years and eradicate Polio from Delhi. Delhi being the capital city of the country and also the leader in the initiation of the Pulse Polio Programme in the country, Rs.6 lakh is kept as provision from State Budget for activities for which no funds is available from SCOVA (Govt. of India). Such as honorarium to Anganwadi Workers and Helpers, Honorarium to Delhi Govt. Staff, Ice and Casual Labour and Social mobilization.

Target for Annual Plan 2012-13

25-26 lakh children under the age of 5 years has been immunized in every Phase of IPPIP. Appox. 8 to 10 phases are to be conducted under this scheme in the year 2012-13 and same target is proposed to be achieved in 2011-12.

4.3 Delhi State Health Mission

Plan Outlay

XII FYP : Rs.10000.00 Lakh

Annual Plan 2012-13 : Rs.2000.00 Lakh

For the implementation of Delhi State Health Mission, Accredited Social Health Activist (ASHA) are selected. The scheme is totally incentive based scheme wherein women volunteers from local community are being selected and trained to reinforce community action for universal immunization, safe delivery, new born care, prevention of waterborne and communicable diseases, improved nutrition and promotion of house holds/community toilets.

5450 ASHAs were to be selected and trained during 2 years for 109 lakhs vulnerable population of the state in phased manner. One ASHA is being selected on 2000 population. For their training, master trainer was identified drawing from Health Department who will train 222 units level trainers. Each units will have 50 ASHAs and 5 trainers. The trainers will give training to ASHAs.

Target for 12th FYP & Annual Plan 2012-13

- Completion of selection of all ASHAs.
- Completion of induction training module V for all phase on ASHA.
- Full operationalization of ASHA MIS .

5. FORENSIC SCIENCE LABORATORY

Plan Outlay

XII FYP : Rs.4800.00 Lakh

Annual Plan 2012-13 : Rs.940.00 Lakh

FORENSIC SCIENCE LABORATORY plays pivotal role in the administration of Criminal Justice system. In modern era, the criminals are becoming more and more wise and well informed and thus the *modus operandi* being adopted by them is often new and also of advanced nature. Investigating Agencies, therefore, are not only required to act swiftly, wisely and decisively to apprehend them but also to find sufficient physical scientific evidence/clues to apprehend and get them convicted in the Courts of Law.

FSL has already started providing DNA Fingerprinting facility for the investigating agencies. Since this technique is able to individualize, the samples of blood, semen, saliva, hair and other body fluids particularly in cases of murder, rape, disputed paternity and shall make the laboratory's findings increasingly more useful in the dispensation of criminal justice. It is also proposed to include the new scientific techniques to detect modern crimes like computer frauds, fraudulent credit cards and forged currency notes various types of explosives etc. and as such proposed to start new division viz. Computer Forensics/Cyber crime, Narco analyzing Board PP, Acoustics (Speaker identification), lie detection, brain finger printing.

It is also proposed to provide round-the-clock forensic facility for crime scene visits by the experts of the laboratory to assist the Investigating Officers for the detection of minute scientific clues / physical evidences at the scene of crime. Similarly it is also proposed to start full-fledged Physics including speaker identification & audio video tape authenticate, Lie Detection and modern Photo Section which are indispensable & integral part of any FSL.

6. MUNICIPAL CORPORATIONS OF DELHI:- MCD has been trifurcated into three Corporations (i) North Delhi Municipal Corporation (ii) South Delhi Municipal Corporation (iii) East Delhi Municipal Corporation, The plan out lay for all corporations wise plan outlay for 12th FYP and Annual Plan 2012-13 is as under :-

Rs in Lakh

12th FYP (2012-17)- Plan Outlay				Annual Plan 2012-13 – Approved Outlay			
Total	NDMC	SDMC	EDMC	Total	NDMC	SDMC	EDMC
37500	15815	14250.5	7434.50	5500	2354	2088.50	1057.50

6.1 Programme for Control of Vector Borne Diseases like Malaria Dengue etc

Vector borne diseases like Dengue and Malaria are endemic in the Delhi. The objective is to reduce morbidity and avert mortality due to vector borne diseases. The environmental conditions and urbanization in Delhi are such that there is a continuous threat of outbreak of diseases like dengue and malaria. It is proposed that the Program should be strengthened with providing new infrastructure, manpower, supplies of consumables, vehicles, machines, equipments, communication and establishment.

Target for 12th FYP

- **Anti Larval Measures:** - to cover 1392 sq. km of urban area which includes 646 sq km of urbanized rural area and unauthorized colonies. it is proposed to purchase 12 power sprayer tankers.
- To procure 300 hand operated fogging Machines for vector borne disease control program.
- Construction of entomological lab in each of 12 Zones
- Construction of Auto workshops for major & minor repairs of machine
- To prevent and control mosquito breeding through IEC activities
- Capacity building for doctors and paramedical staff

Rs in Lakh

12th FYP (2012-17)- Plan Outlay				Annual Plan 2012-13 – Approved Outlay			
Total	NDMC	SDMC	EDMC	Total	NDMC	SDMC	EDMC
31659	13268	12142	6249	4620	1970	1770	880

6.1.1 Strengthening of Epidemiological Unit & Health Education:

Epidemiology Division of the Health Department is implementing the plan scheme “Strengthening of Epidemiological Unit and Health Education”. Under the scheme principal activities of the Epidemiology Division include surveillance of the communicable diseases, preventive & control measures for communicable diseases, outbreak investigation and management, health education, training of field staff and international inoculation services. Control of water borne diseases entails the distribution of chlorine tablets or any other disinfectant for water and ORS packets in colonies where DJB water supply does not exist, areas from where cases are reported and also during outbreaks of water borne diseases. The water and ice samples are tested in Public Health Laboratory for which the department has made provision for purchase of equipments, chemicals, reagents, field kits for testing of water samples in the field for cutting down response time in case of suspected contamination and outbreak of water borne diseases. Two vehicles will be purchased for strengthening

field surveillance and rapid response team. The department has made provision for meeting the expenditure towards POL for the vehicles of the Epidemiology Division.

Provision has been made for training and capacity building of the personnel involved in field control of communicable diseases and other public health emergencies, Yellow Fever vaccination for the International Inoculation Centre. Health Education is a critical component for control of communicable diseases. This activity will be under taken through various media like, DTC Bus-Q shelters, Kiosks on Electric Poles, Outdoor Hoardings (Rent Free), Ornamental Railings on road dividers, Cable TV, Radio Slots, Metro Rail, Cinema Slides, Electronic Sign Boards, Newspaper advertisements and Public Notices, field campaigns, munadi, exhibitions, street plays, audio-visual shows in the field, IEC campaigns through agencies and/or NGOs, hiring of vehicles and public address systems etc. The emphasis is to reach the communities in the vulnerable colonies.

Rs in Lakh

12th FYP (2012-17)- Plan Outlay				Annual Plan 2012-13 – Approved Outlay			
Total	NDMC	SDMC	EDMC	Total	NDMC	SDMC	EDMC
1691	772	520.50	398.50	250	115	77.5	57.5

Rabies Control Program:

Target for 2012-13

- Purchase of Anti-Rabies vaccine and anti sera
- Health education through IEC materials and outdoor publicity
- Capacity building for doctors and paramedical staff

6.2. Development & Improvement of Cremation Ground

It is one of the obligatory functions of MCD under the DMC Act to maintain and develop cremation grounds free from pollution and to provide infrastructural facilities like boundary wall, approach roads, water and electricity supply, toilet blocks, office blocks etc. Although some of the bigger cremation grounds have been handed over to N.G.O's, a large number of Cremation Grounds still remain with MCD.

New traditional cremation grounds and burial grounds will be set up on C.N.G. based crematorium, which is eco-friendly.

Rs in lakh

12th FYP (2012-17)- Plan Outlay				Annual Plan 2012-13 – Approved Outlay			
Total	NDMC	SDMC	EDMC	Total	NDMC	SDMC	EDMC
2400	961	961	478	360	144	144	72

6.2.1 Rabies Control Program:

Target for 2012-13

- Purchase of Anti-Rabies vaccine and anti sera
- Health education through IEC materials and outdoor publicity
- Capacity building for doctors and paramedical staff

Rs in Lakh

12th FYP (2012-17)- Plan Outlay				Annual Plan 2012-13 – Approved Outlay			
Total	NDMC	SDMC	EDMC	Total	NDMC	SDMC	EDMC
1600	759	572	269	240	114	86	40

6.3. HRD/Training and studies Cell

It is proposed to set up Training Cell at Head Quarter level and the various Medical Institutions and department to provide the training programme for the doctors and paramedical staff in the field of Anti malaria operation and dengue in association with Delhi medical association.

Rs in Lakh

12th FYP (2012-17)- Plan Outlay				Annual Plan 2012-13 – Approved Outlay			
Total	NDMC	SDMC	EDMC	Total	NDMC	SDMC	EDMC
150	55	55	40	30	11	11	8