

## PUBLIC HEALTH

### **A. P.F.A. DEPARTMENT (Rs.100.00 Lakh)**

#### **1. Setting up of a Mobile Laboratory (Rs.47.00 Lakh)**

The Prevention of Food Adulteration Act and Rules framed hereunder seek to prevent adulteration and mis-branding of food articles. In the Government of National Capital Territory of Delhi the responsibility for enforcement of PFA Act has been given to the Directorate of Prevention of Food Adulteration.

During 1998 it was decided by GNCTD that the work of enforcement of PFA Act/Rules assigned to SDM & accordingly all SDM were notified as LHA under PFA Act/Rules. Food Inspectors are lifting the samples under the supervision of SDMs with his own discretion to identify place and item to lift food samples.

It is estimated that approximately 5 Lakh 'food establishments' are functioning in National Capital Territory of Delhi. Our current ratio of food establishment to food inspector is grossly inadequate. One food inspector is expected to monitor approximately 14000 food establishments. Given the fact that food establishments follow a different time schedule than the Government Departments and low ratio of food establishment to food inspector it is impossible to cover even 10% of food establishments in a year. At present about 2900 samples are being collected annually. Current Food Inspector productivity comes to 93 samples per inspector per year, which is very low. Therefore, there is a need to strengthen the existing set up.

A provision of Rs.47 Lakh is proposed for 2009-10 for strengthening enforcement branch, monitoring evaluation wing of PFA Deptt..

#### **2. EDP Cell: (Rs.23.00 Lakh)**

There is a proposal to computerize various operations of the Directorate. The Directorate has purchased hardware for Phase-I of computerization plan as per Techno- Economic study conducted by NIC after seeking approval of I.T. Department. An amount of Rs. 23.00 Lakh is proposed for 2009-10 for meeting the salary expenditure of EDP Cell and creation of new posts and starting iind phase of computerization in PFA Deptt.

#### **3. R & M Of Existing Building (Rs.30.00 Lakh)**

The building where Directorate of Prevention of Food Adulteration is located was built in the year 1992. Since then lots of changes have been made. A new drug laboratory for Indian System of Medicine is being established. Subsequently improvements are needed to make the laboratory fully functional.

## **B. DRUG CONTROL DEPARTMENT (Rs.25.00 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. During the Year 2009-10, new posts of different categories are to be created and different awareness programmes for purchasing drugs on Cash Memo are to be launched.

## **C. DIRECTORATE OF HEALTH SERVICES (RS.200.00 LAKH)**

### **1. STATE HEALTH INTELLIGENCE BUREAU-CUM-RESEARCH/ANALYSIS CELL (Rs.12.00 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". Strengthening of management Information System on Health for whole of Delhi is paramount importance for planning, implementing and monitoring various health and public health activities in Delhi which will also help in predicting the epidemics and taking preventive measures in tackling them in time. It is proposed to continue the scheme in 11<sup>th</sup> Five Year Plan.

#### **b) Achievement Of Annual Plan 2008-09**

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 Annual Plan 2009-10**

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

## **2. G.I.A. TO NGOs FOR APPROVED PROGRAMMES OF DELHI GOVT (Rs.15.00 lakh)**

### **a) Introduction, Aims & Objective**

Our country with its rapid change in demographic profile also needs fast increase in socio-economic development. We have many health problems and felt needs, which have to be solved on priority basis. At present the role and responsibility of our Govt. has increased enormously in health problems like providing curative services, control of communicable diseases/epidemics, provision of safe potable drinking water, sanitation etc. and cannot effectively solve all the problems due to constraint of manpower. Therefore, 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 functioning in different areas of health is a welcome feature and Delhi Govt. wants to take the help and cooperation of these agencies 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.

### **b) Achievement Of Annual Plan 2008-09**

1. Pattern of assistance to NGOs/RWA has been approved.
2. Delhi State Aids Control Society had been provided grant of Rs. 5 lakh.

### **c) Target For Annual Plan 2009-10**

1. Organization of workshops, seminars, health camps/melas of various health programmes through NGOs for their involvement.
2. Strengthening Charitable Dispensaries being run by private agencies / RWA.
3. Support for TB, Leprosy, Cancer patients and blind people through NGOs by providing grant-in-aid by Delhi Govt.

## **3. MEDICAL FACILITIES FOR GOVT. EMPLOYEES AND PENSIONERS OF DELHI GOVT(Rs.15.00 lakh)**

### **a) 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.

## **b) 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.

So long as a person is covered by the Scheme he/ she will not be simultaneously eligible for medical benefits under any other medical attendance rules under which he may be covered by virtue of the office which he/she hold or the service to which he/she belongs or the post held by him/her excepting in the case of emergency, medical attention or any other case as deemed necessary at the discretion of the Dte. of Health Services, Govt. of Delhi.

Modified DGEHS was approved by Delhi Cabinet in October 2003, which envisages employment of hospitals that will provide cash less credit facilities to the beneficiaries during emergency treatment.

## **c) Achievement Of Annual Plan 2008-09**

1. Strengthening of DGEHS cell at DHS(HQ).
2. Other benefit like sanction of own HOD for medical treatment has been approved by Delhi Govt.
3. 56 Hospital and laboratory had been empanelled till now.

## **d) Target For Annual Plan 2009-10**

1. Strengthening of DGEHS Cell at DHs (HQ) with creation and requirement of various staff.
2. Empanelling more private hospitals/ Diagnostic Centres for providing services including cashless services to the beneficiaries.
3. Selection of the Chemists/Medical Shop in the nearby authorized Govt. Dispensaries/Hospitals for providing medicines on the spot on the advise of Doctors in case of non-availability of medicine in Govt. store of dispensaries/hospitals.
4. Exploring possibility of Centralized reimbursement of medical expenditure.

## **4. Directorate of Public Health Services (Rs.58.00 lakh)**

### **a) 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, thalassaemia, 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.

**b) Aims & Objectives**

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

**c) Achievement Of Annual Plan 2008-09**

1. IEC activities carried out
2. Video film on Diabetes and hypertension had been prepared.

**d) Target For Annual Plan 2009-10**

1. Organization of workshop, seminar & training activities of each component of non-communicable diseases for health professionals (at least 5).
2. Efforts for starting specific clinics like diabetic clinic, thalassaemia clinics, genetic counseling centres, de-addiction centres in various hospitals (diabetic clinic, thalassaemia clinics).
3. Involving private practitioners for above activities.
4. Provide guidelines and various services required for above activities.
5. Coordination with different health implementing agencies like MCD, NDMC, Cantonment Board and other agencies of National Capital Territory of Delhi to avoid duplication.
6. 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).

**e) MANPOWER REQUIREMENT**

Following manpower will be required for the Cell: -

The Programme Officers proposed at District level will implement the component of these NCD alongwith all State run public health programmes and national health programmes which will be monitored by the Programme Officers designated at DHS HQ.

## **5. INDIAN INSTITUTE OF PUBLIC HEALTH (Rs. 100.00 lakh)**

The MOU has been signed between GNCT Delhi and The Public Health Foundation of India (PHFI) for establishment of Institute of Public Health . The PHFI, in consultation with GNCTD shall conduct and help to conduct various training programmes for enhancing capacity amongst public Health functionaries to facilitate design and delivery of prioritized and strategic health programmes. The Cabinet has already approved 51.19 acres of Gram Sabha Land at village kanjhawla in order to set up the Indian Institute of Public Health.

## **D. DTE. OF FAMILY WELFARE [Rs. 1200.00 Lakh]**

### **1. Pulse Polio Programme (Rs.25.00 lakh)**

#### **Objective of the scheme**

To immunize all children with OPV up to the age of 5 years and eradicate Polio from Delhi.

#### **Need and justification for the same :**

Delhi being the capital city of the country and also the leader in the initiation of the Pulse Polio Programme in the country, Rs.25 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.

### **2. Special Immunization Programme including MMR (Rs.250 lakh)**

Under this, it is proposed to purchase typhoid and MMR vaccine alongwith other related items. IEC, training activities are also included under this scheme.

### **3. Delhi State Health Mission (Rs.925 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. One ASHA is being selected or 2000 population. For their training, master trainer were 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.

## **E. FORENSIC SCIENCE LABORATORY [Rs. 950.00 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 individualise, 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, Lie Detection and modern Photo Section which are indispensable & integral part of any FSL.

An amount of Rs. 950.00 Lakh is approved for 2009-10 which includes Rs. 50 Lakh under Capital Head and Rs.950 lakh under Revenue head The approved provision under Revenue head includes creation of new posts, meeting the salary expenditure of the staff, purchase of new equipments and chemicals.

## **(F) M.C.D.**

### **I Intensification of Programme for Control of Vector Borne Diseases like Malaria Dengue etc. (Rs.1470.00 lakh)**

Vector borne diseases like Dengue and Malaria are endemic in the Delhi. In the year 2003 there was an epidemic of Dengue. 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.

## **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.

## **Rabies Control Program:**

Under this program, sheep brain cell vaccine was being administered earlier, which had to be used in large quantity and for more days. It was painful too and not free of serious complications in some cases. This vaccine has been replaced by human diploid cell vaccine which is less painful and virtually free of side effects, but is costlier. Anti- rabies serum will be purchased for passive- immunization against dog/ animal bite cases.

I.E.C. activities through the various mass media and I.E.C material, to increase the awareness of public about prevention of Rabies, will be augmented.

## **II. Development & Improvement of Cremation Ground [Rs.500.00 Lakh]**

It is one of the obligatory functions of MCD under the DMC Act to maintain and develop cremation grounds 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 to meet the increased demand. It is proposed to set up C.N.G. based crematorium, which are eco-friendly.

05 new cremation grounds will be developed keeping in view the population growth of the city. Civil work and capital expenditure will be under taken for the development. Expenditure will also be incurred on the upgradation of the existing infrastructure of the Cremation grounds.

### **III. Setting up HRD/Training and studies Cell(Rs.30.00 lakh)**

It is proposed to set up Training Cell at Head Quarter level and satellite cells in Medical Institutions and departments by strengthening the infrastructure and facilities like Lecture Halls, Seminar Rooms, Over-head projectors, LCD Projectors, Computers, Photo-copier machines etc.