



Janani Shishu Suraksha Yojna (JSSY)

State Institute of Health & Family Welfare, Jaipur

Need of JSSY

- Janani Suraksha Yojana - number of institutional deliveries has increased
- More than 25 % pregnant women still hesitate to access health facilities.
- High out of pocket expenses on :
 - User charges for OPD, Admission, Diagnostic tests ,Blood etc
 - Purchasing medicines and other consumables



- High expense on Caesarean Operation
- Non availability of diet
- Expensive transport

Janani Shishu Suraksha Yojna



- Central Gov launched on 1 June, 2011 - **Janani Shishu Suraksha Karyakram**
- Rajasthan State Government launched on 12 September 2011 in all 33 districts- **Janani Shishu Suraksha Yojana**



Objective

- Estimated to benefit more than one crore pregnant women & new borns
- Emphasis on entitlements and elimination of out-of pocket expenses for pregnant women and sick neonates
- Enhancing access to public health institutions
- Reduce MMR & IMR

Entitlements for Pregnant Women



- Free Delivery & C –Section
- Free Drugs & Consumables before, during and till 6 months after the delivery
- Free Diagnostics(Blood, Urinetests & Ultrasonography etc)
- Free diet during stay (upto 3 days for normal delivery & 7 days fro C-Section
- Free transport from home to health institution, between health institution in case of referrals & drop back home
- Exemption from all kinds of user charges

Entitlements for Sick Newborn till 30 days after birth



- Free and zero expense treatment
- Free drugs & consumables
- Free diagnostics
- Free provision of blood
- Free transport from home to health institution, between health institution in case of referrals & droop back home
- Exemption from all kinds of user charges



Actions at State Level

- Issue Government order on free entitlements
- Nominate a State Nodal Officer
- Grievance redressal mechanism for ensuring the implementation
- Ensure regular procurement ,availability of drugs & consumables.
- Ensure functional lab facilities & diagnostic services
- Establish and Operationalising blood banks at District levels & Blood Storage Centers at FRUs.



- Establish district wise referral linkages with GPS fitted vehicles and centralized control rooms
- Provide required finances and necessary administrative steps
- Financially empower the districts and facility in-charges for emergency situations/stock outs.
- Regular monitoring & reporting
- Review the implementation status

118679 private vehicles available for transport

Of these 88757 are listed with the health facilities – Source: DM&HS



Actions at District Level

- Nominate a District Nodal Officer
- Circulate G.O. on free entitlements to all facility in charges
- Publicise free entitlements
- Grievance redressal mechanism for ensuring the implementation
- Ensure availability of drugs and consumables at public health institutions
- Ensure functional lab facilities & diagnostic services at DH,SDH,FRU,CHC and 24 x7 PHCs



- Prepare time bound action plans for establishing and Operationalising blood banks at District levels & Blood Storage Centers at FRUs
- Review referral linkages & utilization by beneficiaries
- Financially empower the Block MOs & Facility in-charges for emergency situations/stock outs
- Regular monitoring & reporting on designated formats
- Review the implementation status during Block MOs/MOs meeting

Dissemination of the entitlements in public domain



- Publicise through print and electronic media
- Display hoardings & boards in all Gov health facilities (Main entrance, Labour rooms, Female and Neonatal wards & OPDs)
- Utilize IEC budget sanctioned in PIP



Ensure Drugs & Consumables

- Notify drug list for RCH services
- Ensure regular procurement, uninterrupted supply and availability of drugs & consumables
- Proper display of daily availability of drugs at health facility
- Empower Head of the District /Health facility to procure drugs & consumables to prevent stock out

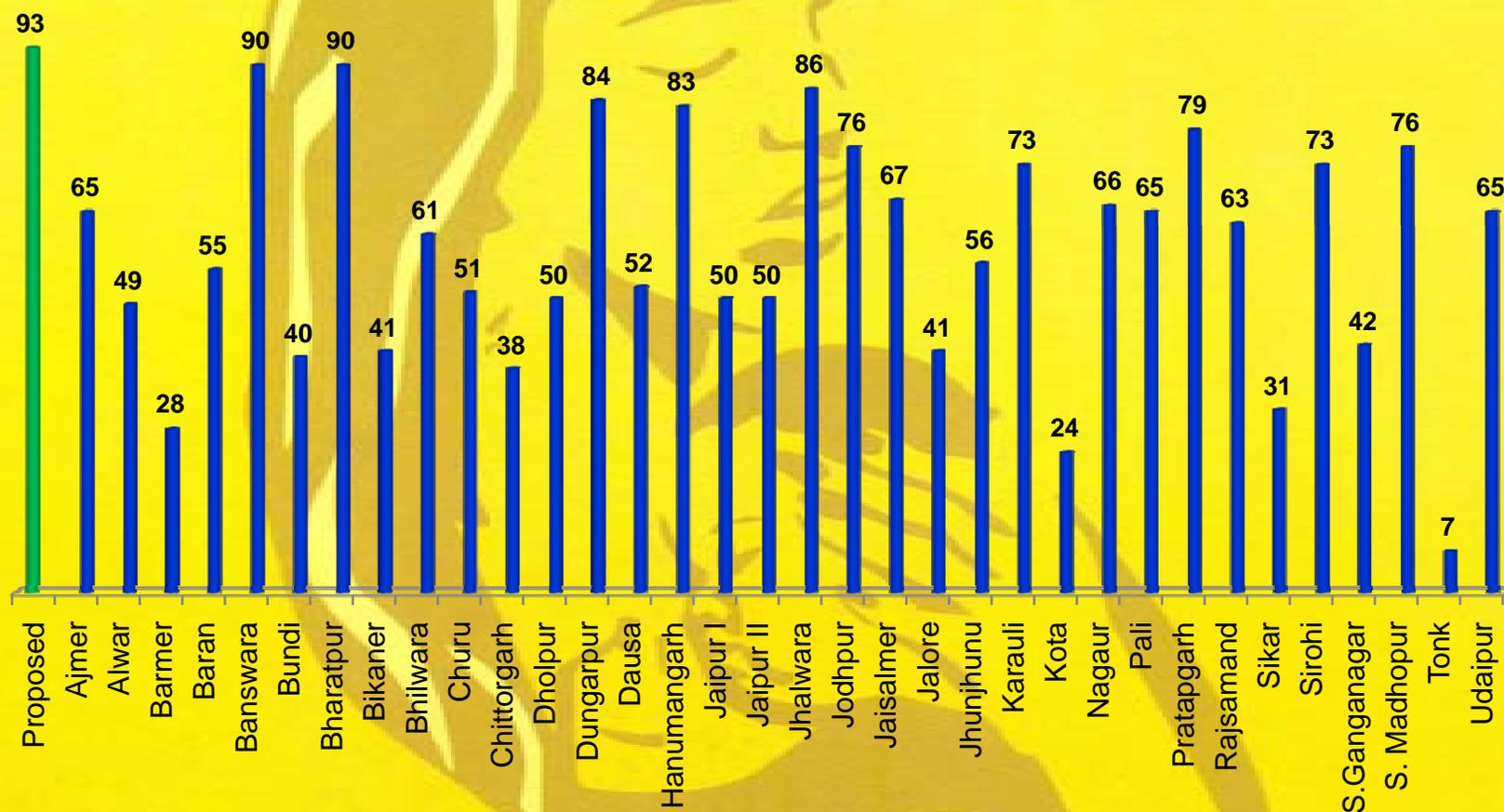
As per the guidelines total 93 types of drugs (14-Newborn,79-Mothers) should be available at the facility



- Ensure the quality and shelf life of drugs
- Ensure timely reporting on stock outs and expiry of drugs
- Ensure availability of drugs at the dispensing points (labour room, OT, indoors, casualty etc.)
- Ensure “FIFO” protocol is used for expiry drugs
- Ensure cleaning of drug stores with adequate ventilation and cooling



District Wise Availability of Drugs



Source:-DM&HS Rajasthan



Interpretation

- As per the guidelines total 93 types of drugs (14-Newborn,79-Mothers) should be available at the facility.
- But maximum districts shows the availability 50-55 types of drugs. Out of which Banswara & Bharatpur shows maximum availability i.e. 90 & Tonk shows lowest availability i.e.7.



Strengthen Diagnostic

- Ensure lab & diagnostic services at DH, SDH, FRU, CHC & 24 x 7 PHCs
- Ensure availability of routine investigations like pregnancy test, Hb & urine at sub-center level
- Ensure rational posting of Lab technicians for integrated & comprehensive utilization in program
- Ensure availability of round the clock investigation



- Ensure uninterrupted supply of reagents, consumables and other essentials required for lab investigations
- Empower the Head of the district/Health facility to procure reagents, consumables and other essentials to prevent their shortage/stock-out
- Free investigations can be provided through PPP/outourcing if in house lab & diagnostic services are not available



Ensure Provision of Diet

- At all delivery points from district hospital up to 24x7 PHC
- Outsourcing of kitchen & manpower if not available
- Proper nutritious diet should be given
- Quality of food should be monitor be facility in – charge



- Diet is to be provided :
 - 3 days- Normal Delivery
 - 7 days- C –Section
- Funds should be received in advance for ensuring provision of free diet



Availability of Blood

- Prepare time bound action plans for establishing and Operationalising Blood Banks at District levels & Blood Storage Centres at FRUs
- Maintain adequate stock for each blood group
- Ensure availability of reagents and consumables for blood grouping, cross matching and blood transfusion



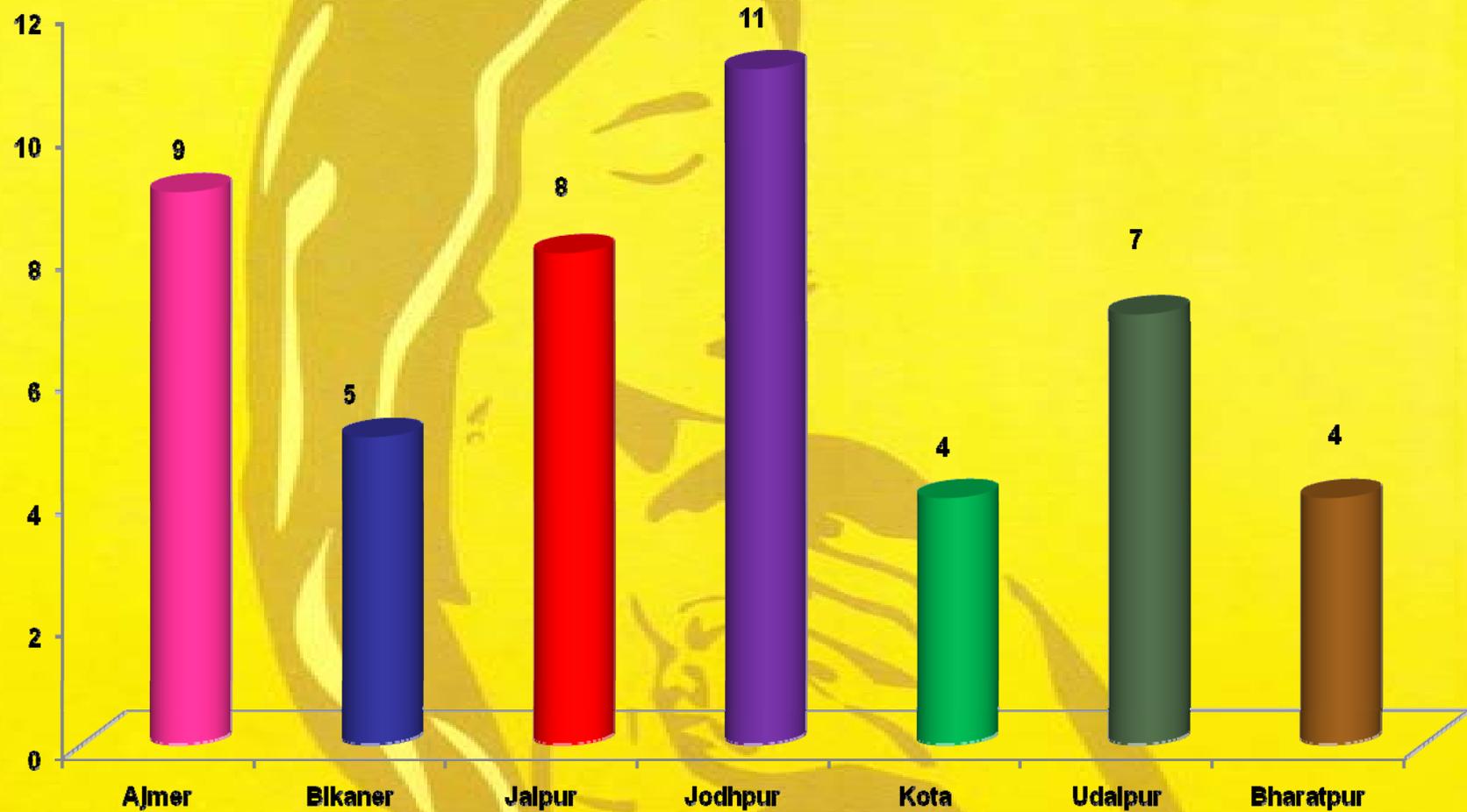
- Ensure mandatory screening of blood before storage & organize blood donation camps
- Adequate funds to blood banks for electric back up and POL
- Alternate sources of power back up for blood bag refrigerators
- Regular monitoring & supervision should be done by MO in-charge/ lab technician at blood storage unit



Status of Blood Banks & Blood Storage Centers

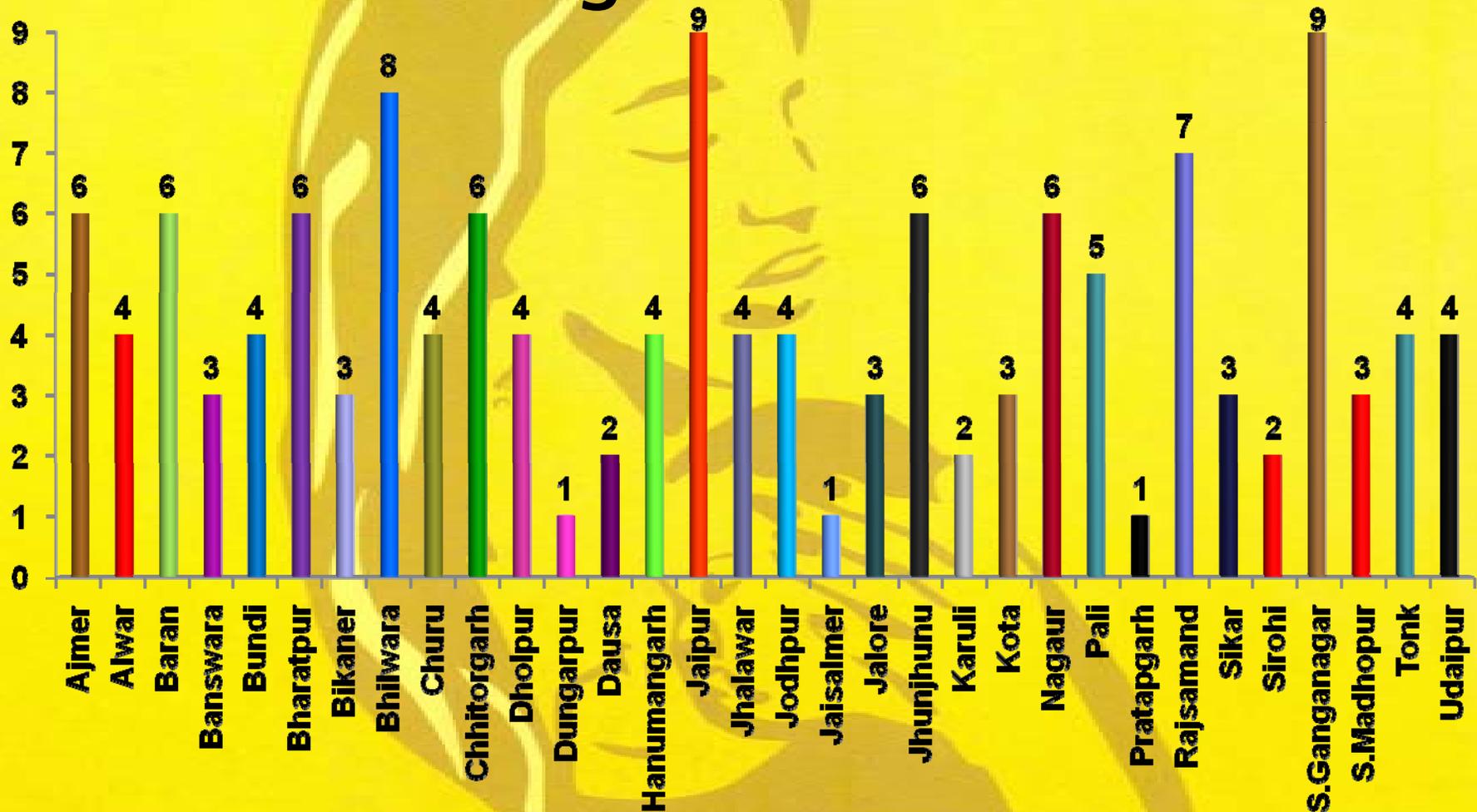


Operationalising List of Blood Banks



Source:-DM&HS Rajasthan

Operationalising List of Blood Storage Centers



Source:-DM&HS Rajasthan



Exemption of User Charges

- Issue Government order for exemption from any user charges for pregnant women & sick new borns up to 30 days , at public health facilities



Referral Transport

- Ensure universal reach of the referral transport with 24x7 referral services
- State is free to use- Gov. ambulances, EMRI, referral transport PPP model etc
- Establish call centers with toll free number, at district or state level
- GPS provide to ambulances for effective tracking & management



- Establish linkages for the inaccessible areas (hilly terrain, flooded or tribal areas etc.) to the road head/pick up points
- Publicize free & assured referral transport through print & electronic media
- Monitor & supervise the utilization of the each vehicle & number of cases transported

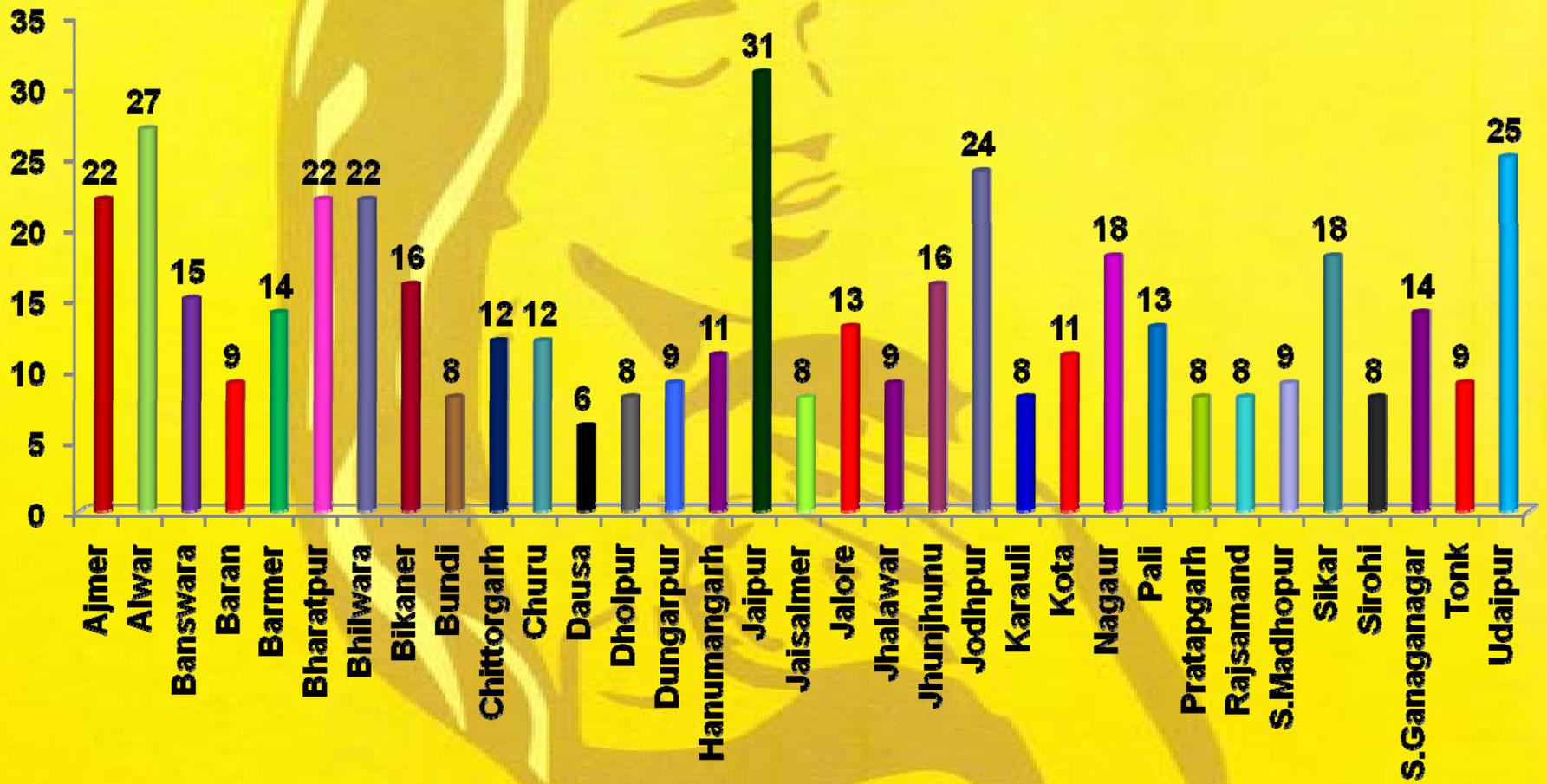
If referral provide by private vehicle payment should be:

- 12 Km > 125Rs
- 12Km -25 Km – 250Rs
- 25 Km< 7Rs added per Km

Source:-G.O ,DM&HS Rajasthan



District Wise List of Functional 108 Ambulances



Source:-108 Ambulance Services ZHCL Rajasthan as on July 2012

Budget for Transportation (Sep 2011 – March 2012)–Rajasthan



	For pregnant Women	For Sick newborn Child
Total	1462 Lakh	523.60 Lakh

Source: G.O, rajswasthya.nic.in

Grievance Redressal



- Display & disseminate the names, addresses, e-mails, telephones, mobiles and fax numbers of grievance redressal authorities at state, district level & public domain
- Set up help desks, suggestion / complaint box at Gov. facilities
- Weekly fixed two hours for meeting the complainants & redressing their grievances
- Take action on the grievances within a suitable timeframe & communicate to the complainants
- Maintain proper record

Funds (as approved under PIP 2012-13)



- Drugs and consumables
 - For normal deliveries – Rs. 1200 lakhs
 - For complicated deliveries – Rs. 1080 lakhs
 - For caesarean deliveries – Rs. 900 lakhs
 - For sick newborn – Rs. 120 lakhs
- Diagnostics
 - For pregnant women – Rs. 2400 lakhs
 - For newborns – Rs. 9 lakhs
- Blood Transfusion
 - For pregnant women – Rs. 150 lakhs
 - For newborns – Rs. 20 lakhs



- Diet
 - For normal deliveries – Rs. 1468.80 lakhs
 - For caesarean deliveries – Rs. 214.20 lakhs
- Free referral transport
 - For pregnant women
 - From home to institution – Rs. 1375 lakhs
 - From institution to home – Rs. 1625 lakhs
 - Referral to higher facility and drop back – Rs. 450 lakhs
 - For sick newborn
 - Mildly sick – Rs. 300 lakhs
 - Severely sick – Rs. 60 lakhs



Monitoring and Follow Up

- At National -NHSRC, MHD & MoHFW GoI
- At State & District Level-State & District Nodal officer

IMPLEMENTATION STATUS OF JANANI SHISHU SURAKSHA KARYAKARAM (JSSK): NATIONAL LEVEL



Reporting Month/ Year:

A) ENTITLEMENTS: CASHLESS SERVICES & USER CHARGES

Sno.	Provision for Cashless deliveries for all pregnant women and sick newborns at all public health facilities	No. of States/ UTs that have issued G.O.	No. of districts implementing
1.	Provision of Free drugs/ consumables		
2.	Provision of Free Diagnostics		
3.	Provision of Free Diet		
4.	Provision of Free blood (inclusive of testing fee)		
5.	Provision of free treatment to Sick newborns up to 30 days		
6.	Free Referral Transport for PW ¹		
7.	Free Referral Transport for Sick newborns ¹		
8.	Exemption from all user charges for all PW and sick newborns		
9.	Empowerment of MO in-charge to make emergency purchases		

B) ENTITLEMENTS: REFERRAL TRANSPORT (RT)

Sno.	Referral transport services	State owned	EMRI/ EMTS	PPP	Other
1.	Total number of ambulances/ referral vehicles				
2.	No. fitted with GPS				

- 3. Call centre(s) for the ambulance network: No. of Districts – No. of States –
- 4. No. of States that have toll free numbers:

C) SERVICE UTILISATION: REFERRAL TRANSPORT (RT)

Sno.	Referral transport services	State vehicles	EMRI/ EMTS	PPP	Other
1.	No. of PW who used RT services for:				
	i. Home to health institution				
	ii. Transfer to higher level facility for complications				
2.	No. of sick newborns who used RT services for:				
	i. Home to health institution				
	ii. Transfer to higher level facility for complications				
	iii. Drop back home				

D) OTHER MECHANISMS:

- 1. No. of States/ UTs that have identified State Nodal Officer:
- 2. No. of districts that have identified District Nodal Officer:
- 3. No. of States/ UTs that have identified State Grievance Redressal Officer:
- 4. No. of districts that have identified District Grievance Redressal Officer:
- 5. No. of States/ UTs where free entitlements are displayed at all public health facilities :

¹ including for home to health facility, between facilities for higher referral, and drop back home

IMPLEMENTATION STATUS OF JANANI SHISHU SURAKSHA KARYAKARAM (JSSK): STATE LEVEL



State/ UT: No. of districts: No. of Blocks: Reporting Month/Year:
 State Nodal Officer in place (Y/N): State Grievance Redressal Officer in place (Y/N):
 No. of District Nodal Officers in place: No. of District Grievance Redressal Officers in place:

A) ENTITLEMENTS: CASHLESS SERVICES & USER CHARGES

Sno.	Provision for Cashless deliveries for all pregnant women and sick newborns at all public health facilities	Whether G.O. issued (Y/ N)	Month when started / proposed timeline	No. of districts implementing
1.	Provision of Free drugs/ consumables			
2.	Provision of Free Diagnostics			
3.	Provision of Free Diet			
4.	Provision of Free blood (inclusive of testing fee)			
5.	Provision of free treatment to Sick newborns up to 30 days			
6.	Free Referral Transport for PW (to & fro, 2 nd referral)			
7.	Free Referral Transport for Sick newborns (to & fro, 2 nd referral)			
8.	Exemption from all user charges for all PW and sick newborns			
9.	Empowerment of MO in-charge to make emergency purchases			

NOTE: Pls. provide a copy of relevant Govt. Order(s)

B) ENTITLEMENTS: REFERRAL TRANSPORT (RT)

Sno.	Referral transport services	State owned	EMRI/ EMTS	PPP	Other
1.	Total number of ambulances/ referral vehicles in the State/ UT				
2.	Whether vehicles fitted with GPS (specify no.)				
3.	Call centre(s) for the ambulance network: Districts (no.s) - State (Y/N):				
4.	Toll free number (provide number, if available):				

C) IMPLEMENTATION: CASHLESS SERVICES

Sno.	Provision for Cashless deliveries for all pregnant women and sick newborns at all Govt. health facilities	Status
1.	No. of districts where free entitlements are displayed at all health facilities	
2.	No. of districts where free diet is available to PW (at all facilities 24x7 PHC and above level)	
3.	No. of districts where lab is functional for basic tests for PW (at all facilities 24x7 PHC and above level)	
3a.	No. of districts where any facility has stockouts of lab reagents / equipment not working	
4.	No. of districts where any facility has stock outs of essential drugs / supplies for PW and sick newborns	
5.	No. of districts where any facility has user charges for PW / sick newborns for:	
	i. OPD	
	ii. Admission / delivery / C-section	
	iii. Lab tests / diagnostics	
	iv. Blood	
6.	Total no. of govt. medical colleges in the State	
7.	Total no. of govt. medical colleges not levying any type of user charges	

D) SERVICE UTILISATION: REFERRAL TRANSPORT (RT)

Sno.	Referral transport services	State vehicles	EMRI/ EMTS	PPP	Other
1.	No. of PW who used RT services for:				
	i. Home to health institution				
	ii. Transfer to higher level facility for complications				
	iii. Drop back home				
2.	No. of sick newborns who used RT services for:				
	i. Home to health institution				
	ii. Transfer to higher level facility for complications				
	iii. Drop back home				

E) GRIEVANCE REDRESSAL

Sno.	Grievance redressal	Status detail
1.	No. of complaints/ grievance cases related to free entitlements	
2.	No. of cases addressed / no. of cases pending	

IMPLEMENTATION STATUS OF JANANI SHISHU SURAKSHA KARYAKARAM (JSSK): DISTRICT LEVEL



District / State: Total no. of blocks: Reporting Monthly/ Year:
 District Nodal Officer in place (Y/N): District Grievance Redressal Officer in place (Y/N):

A) CASHLESS SERVICES

Sno.	Provision for Cashless deliveries for all pregnant women and sick newborns at all Govt. health facilities	Sub-centre	PHC	Block PHC/ CHC	SDH	DH
1.	No. of govt. health facilities in the district					
1a.	No. of facilities where deliveries take place ("Delivery points")					
2.	No. of facilities where free entitlements displayed					
3.	No. of facilities where free diet is available to PW					
4.	No. of facilities where lab is functional for basic tests for PW ¹					
4a.	No. of facilities with stock outs of lab reagents / equipment not working					
5.	No. of facilities with stock outs of essential drugs / supplies					
6.	No. of facilities with user charges for PW / sick newborns for:					
	i. OPD					
	ii. Admission / delivery / C-section					
	iii. Lab tests / diagnostics					
	iv. Blood					

B) REFERRAL TRANSPORT (RT)

Sno.	Referral transport services	State vehicles	EMRI/ EMTS	PPP	Other
1.	Total no. of ambulances/ referral vehicles in the district				
2.	Whether fitted with GPS (specify no.)				
3.	No. of PW who used RT services for:				
	i. Home to health institution				
	ii. Transfer to higher level facility for complications				
	iii. Drop back home				
4.	No. of sick newborns who used RT services for:				
	i. Home to health institution				
	ii. Transfer to higher level facility for complications				
	iii. Drop back home				

5. No. of blocks where referral transport service is available:

6. Whether district level call centre in place (Y/N):

C) GRIEVANCE REDRESSAL

Sno.	Grievance redressal	Status detail
1.	No. of complaints/ grievance cases related to free entitlements	
2.	No. of cases addressed / no. of cases pending	
3.	Average no. of days taken per case	

¹ Lab technician is in place and pregnancy test, Haemoglobin, urine routine for sugar and protein are available



Status of RJSSY

RJSSY: Performance



S.No	Services	No. of beneficiaries (Sept 12, 2011 – March 31, 2012)	No. of beneficiaries (April 1 – July 15 2012)
1	Total Deliveries	430235	192210
2	No. of pregnant women provided free medicine	753058	305844
3	No. of pregnant women provided free lab tests	417319	186478
4	No. of pregnant women availed free hot food	516437	197816
5	No. of pregnant women provided free referral transport from house to health facility	227716	142684
6	No. of pregnant women provided free referral transport from health facility to house	289978	153604
7	No. of pregnant women provided free blood facility	18860	13086

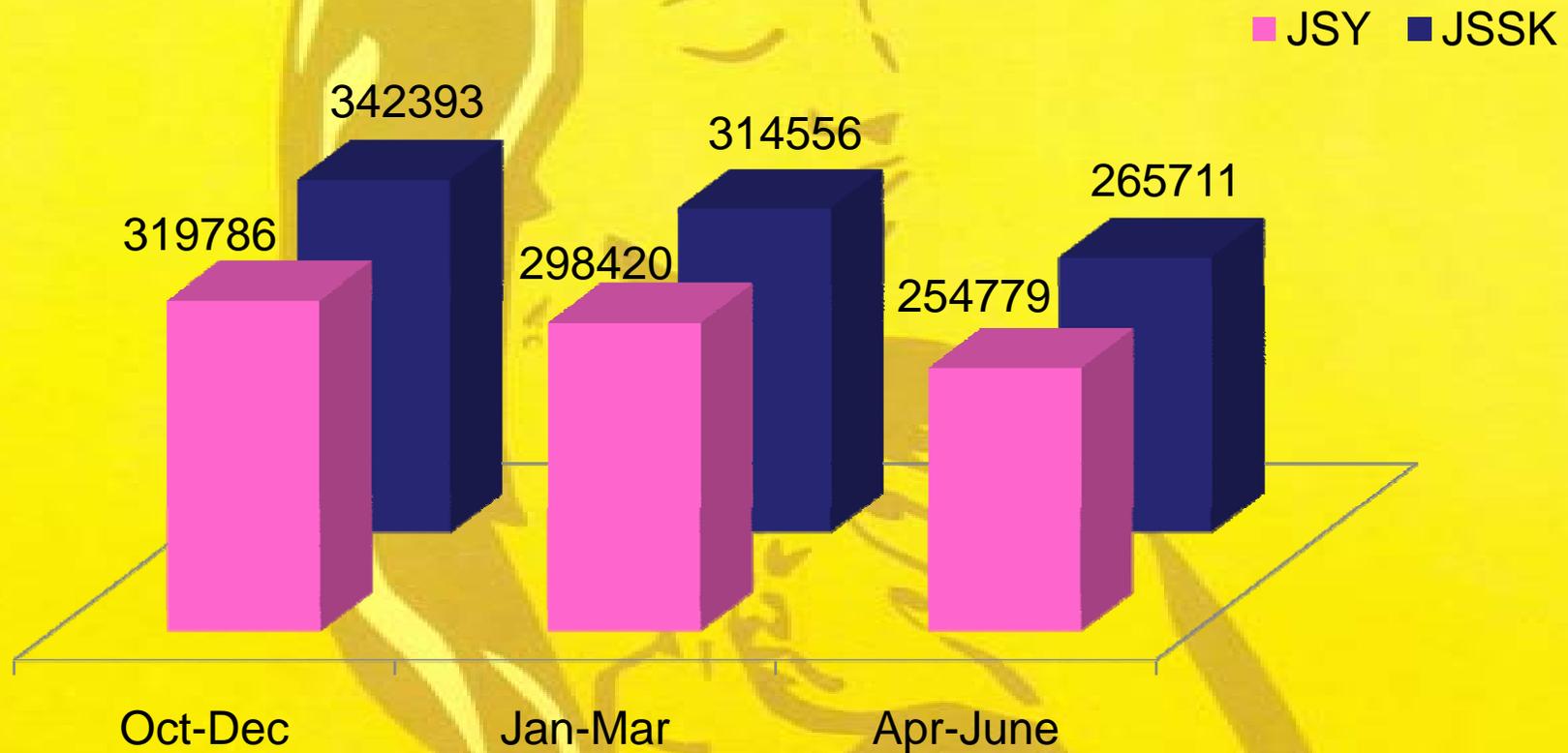
RJSSY: Performance



S.No	Services	No. of beneficiaries (Sept 12, 2011 – March 31, 2012)	No. of beneficiaries (April 1 – July 15 2012)
1	No. of Sick Neonates (30 days) received free medicine	132387	60777
2	No. of Sick Neonates (30 days) received free lab tests	35399	18002
3	No. of Sick Neonates (30 days) received free referral transport from house to health facility	8434	2712
4	No. of Sick Neonates (30 days) received free referral transport from health facility to house	13850	5212
5	No. of Sick Neonates (30 days) provided free blood facility	711	723

Source:-DM&HS

ID under JSY and JSSK



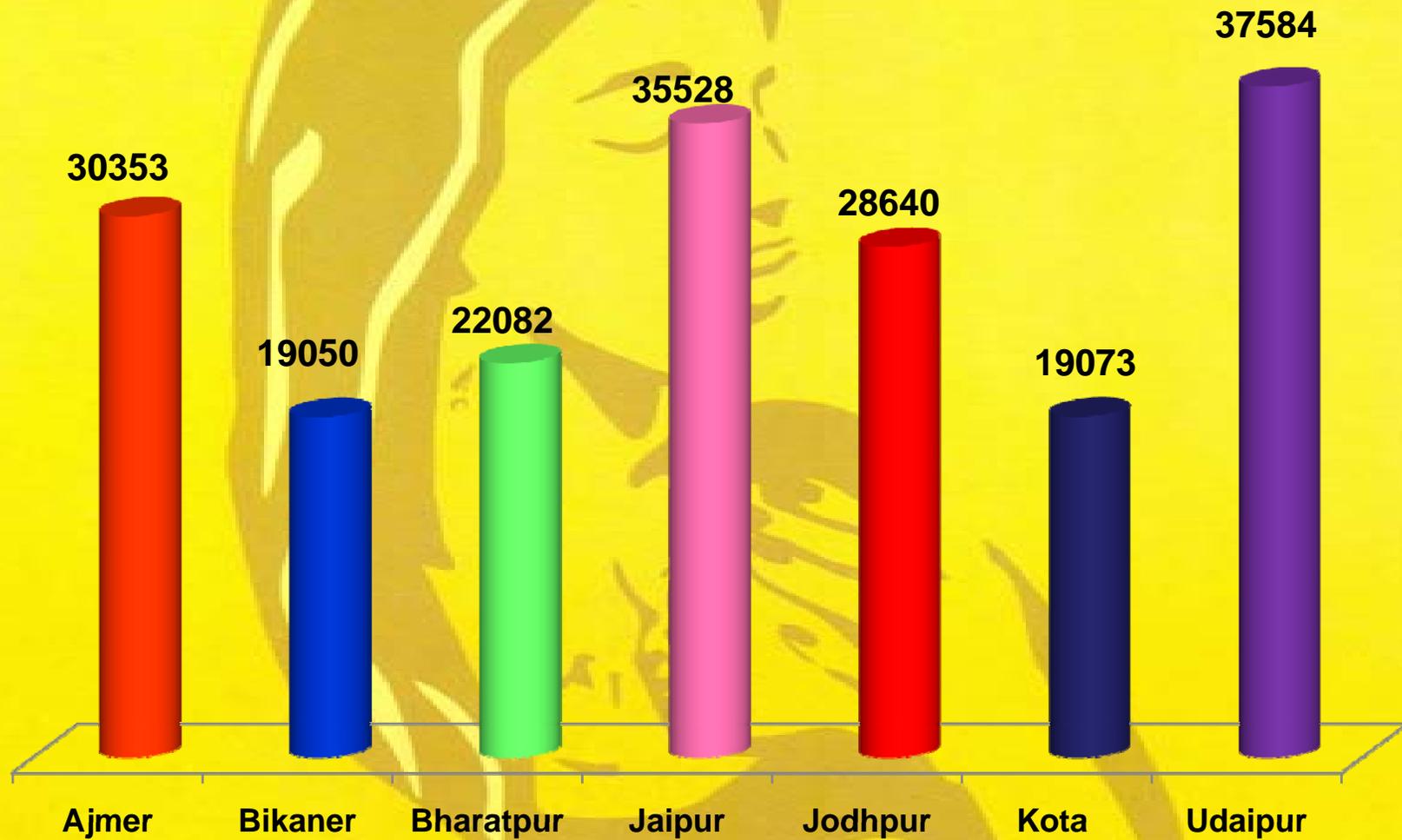
Source: DM&HS monthly reports –data compared with ID of previous year for same quarters



Zone Wise status of RJSSY for Pregnant Women

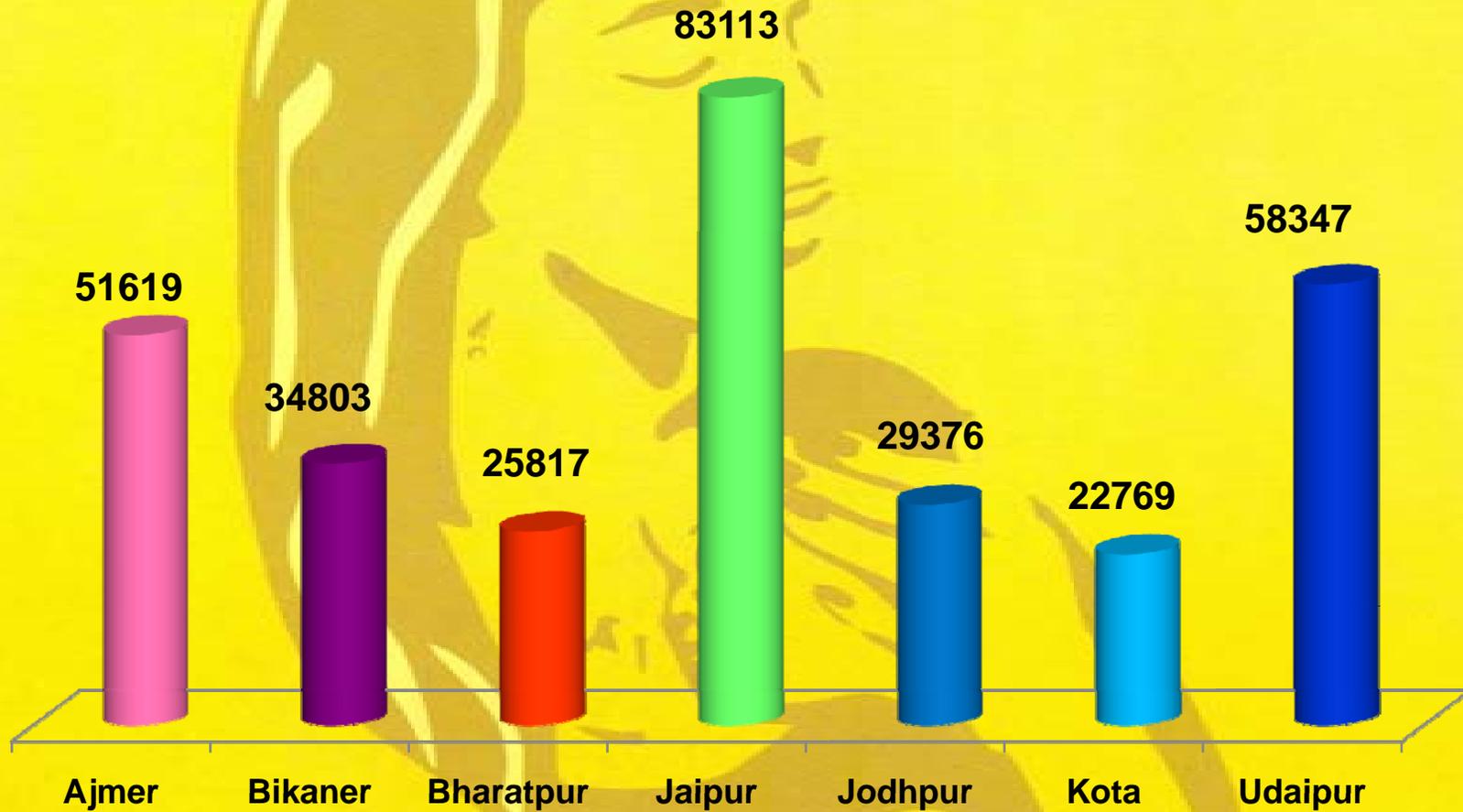


Total Deliveries



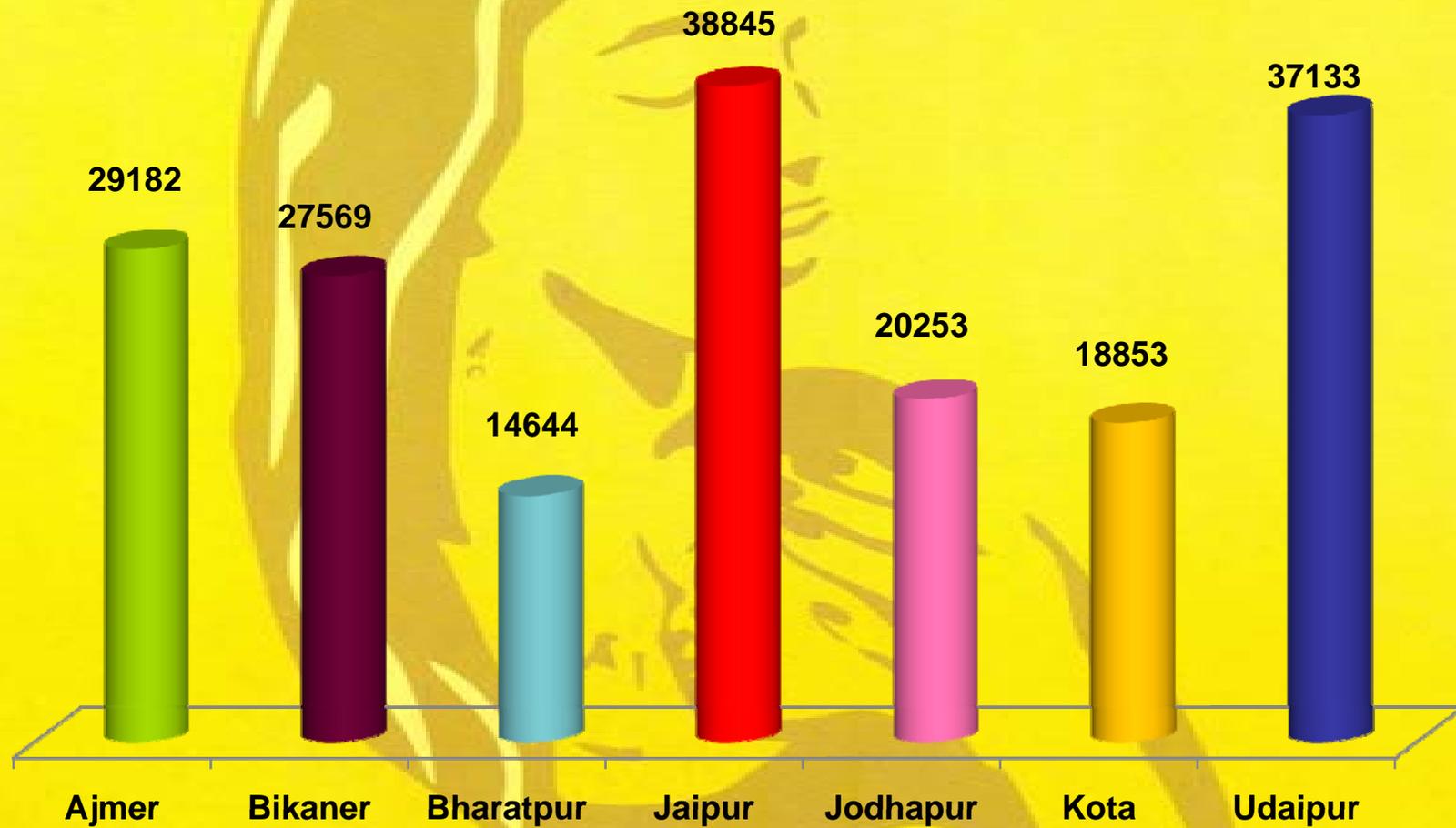
Source:-DM&HS Rajasthan (From April 1- July 15,2012)

No. of Women Received free Medicines



Source:-DM&HS Rajasthan (From April 1- July 15,2012)

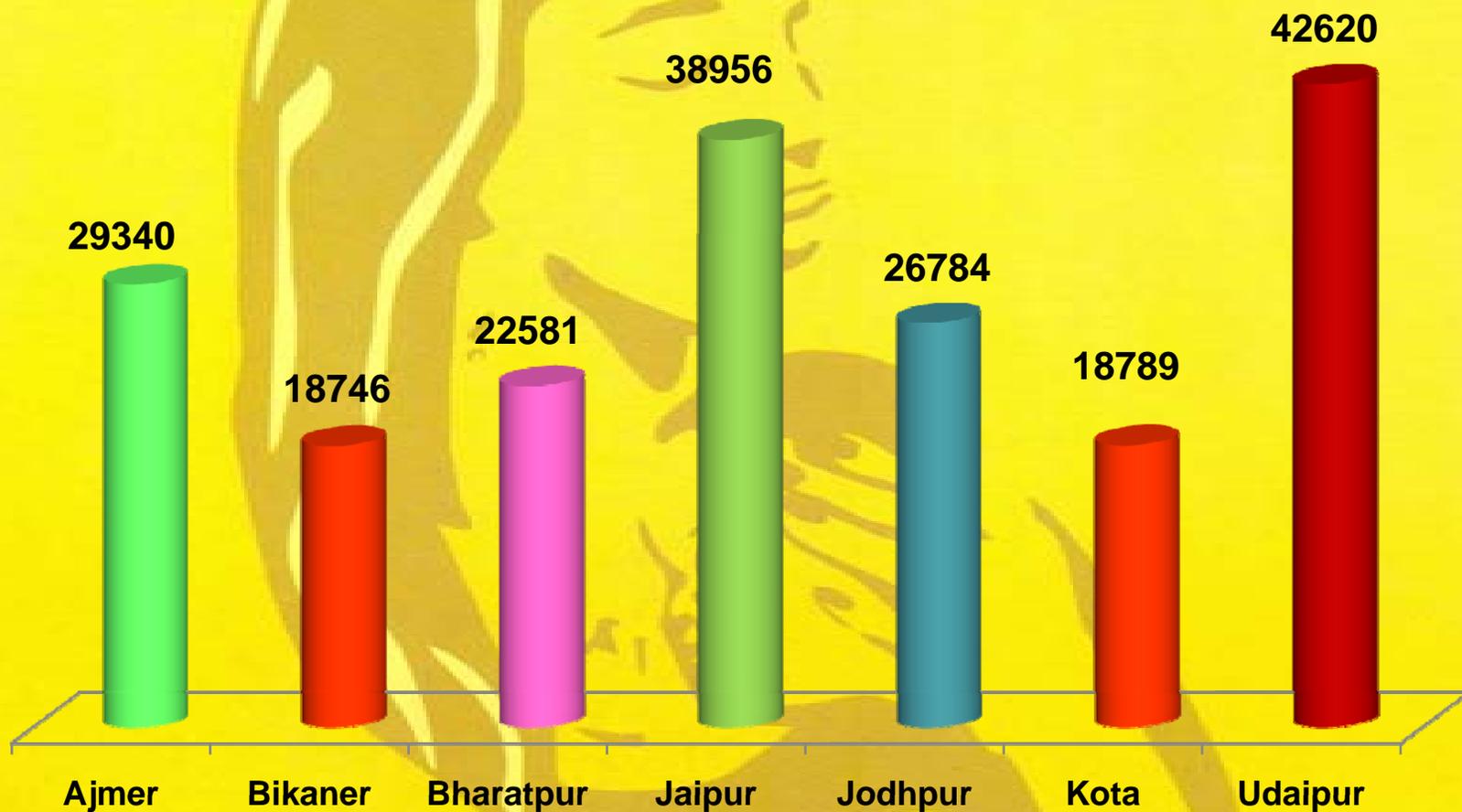
No. of Women Received Free Lab Test



Source:-DM&HS Rajasthan (From April 1- July 15,2012)



No. of Women Received Free Food

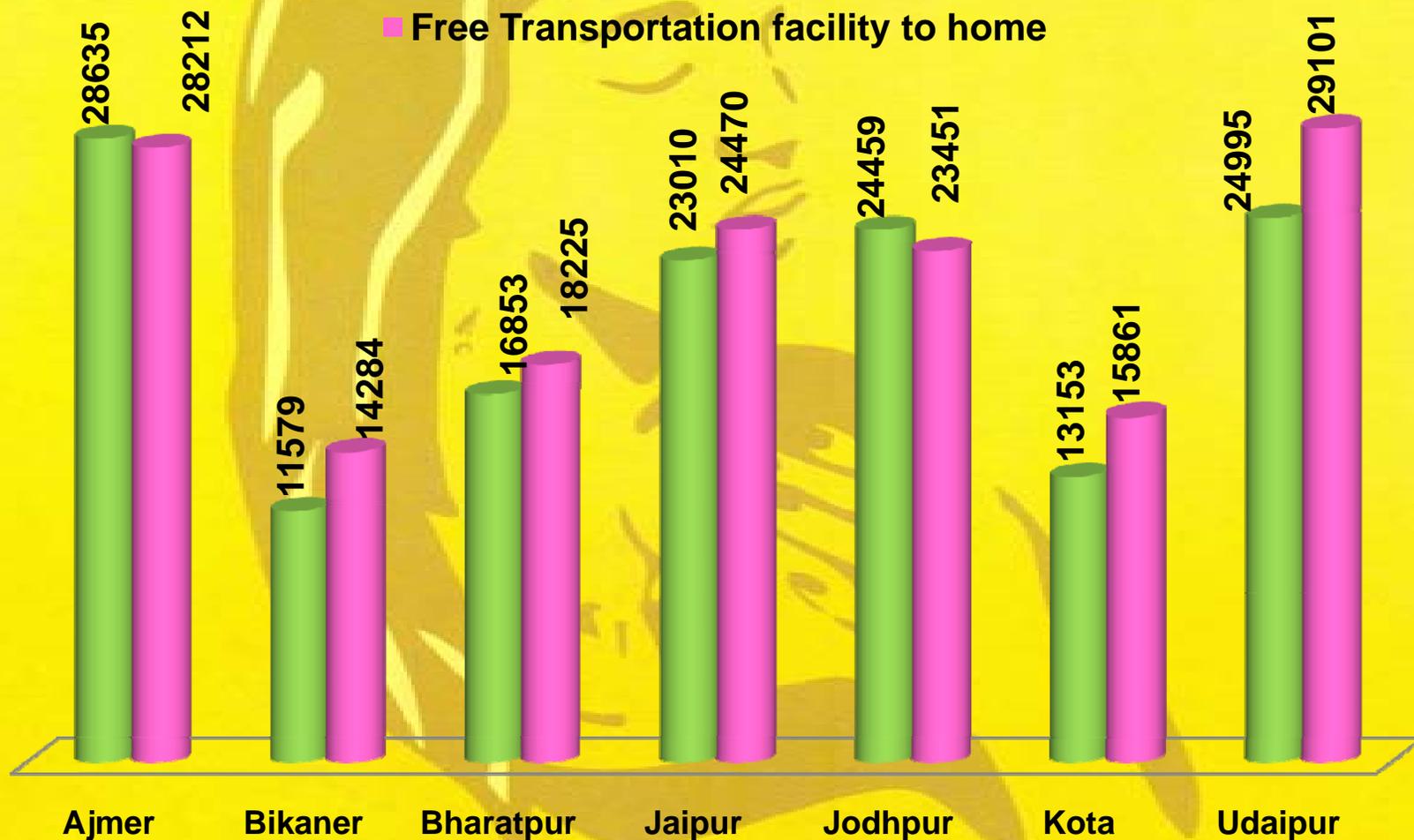


Source:-DM&HS Rajasthan (From April 1- July 15,2012)



No. of Women Received Free Transportation Facility

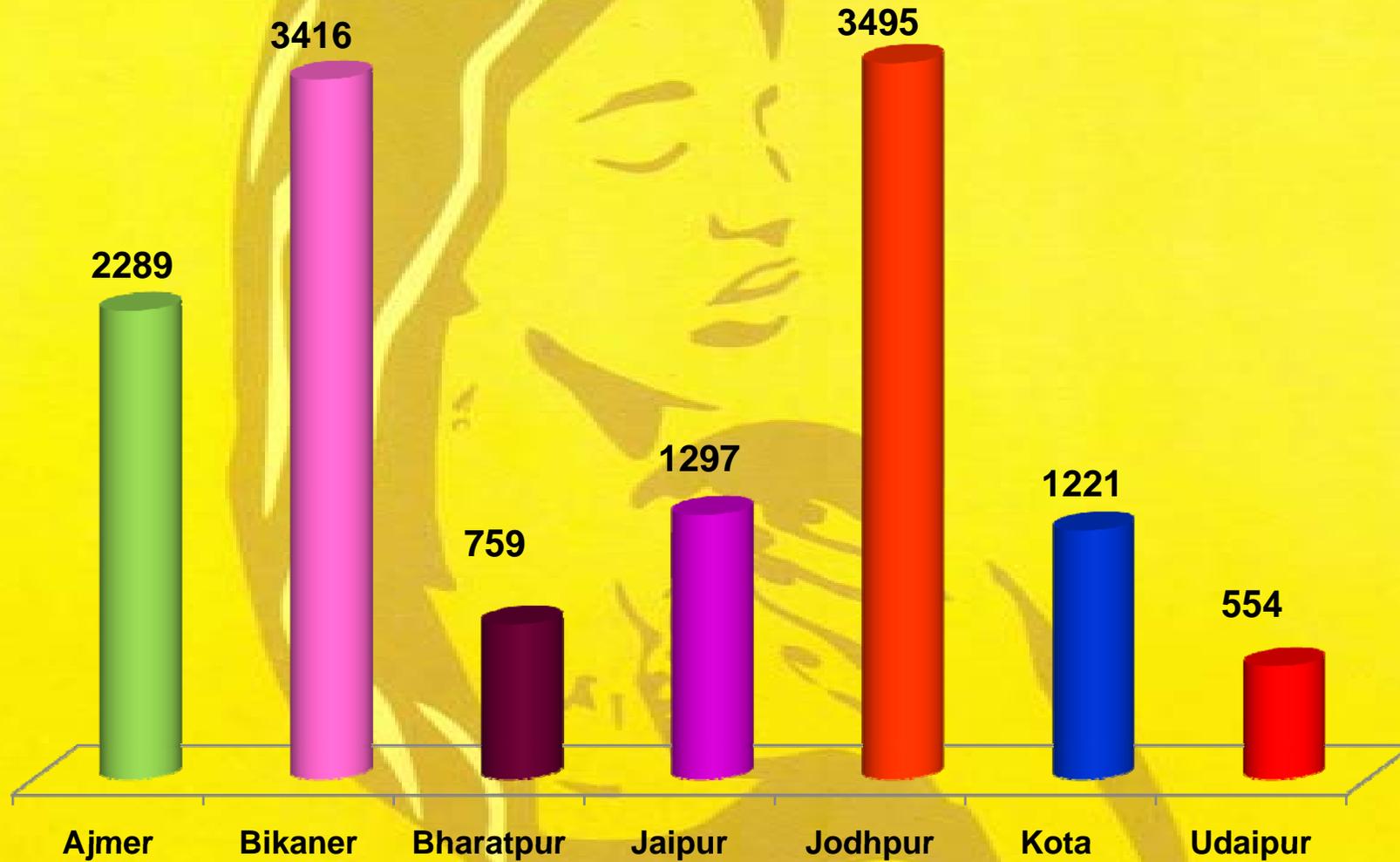
- Free Transportation home to facility
- Free Transportation facility to home



Source:-DM&HS Rajasthan (From April 1- July 15,2012)



No. of Women Received Free Blood

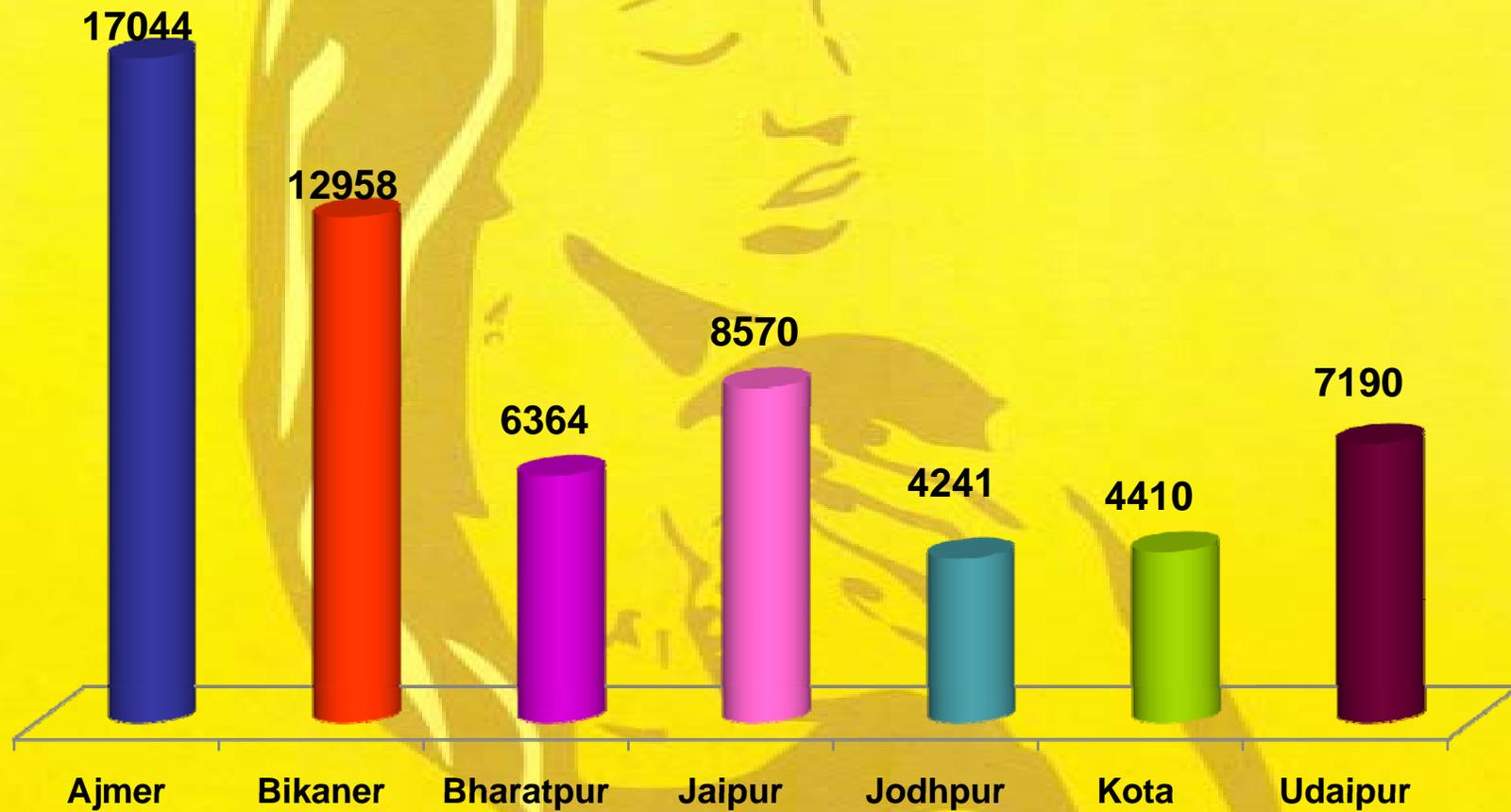


Source:-DM&HS Rajasthan (From April 1- July 15,2012)



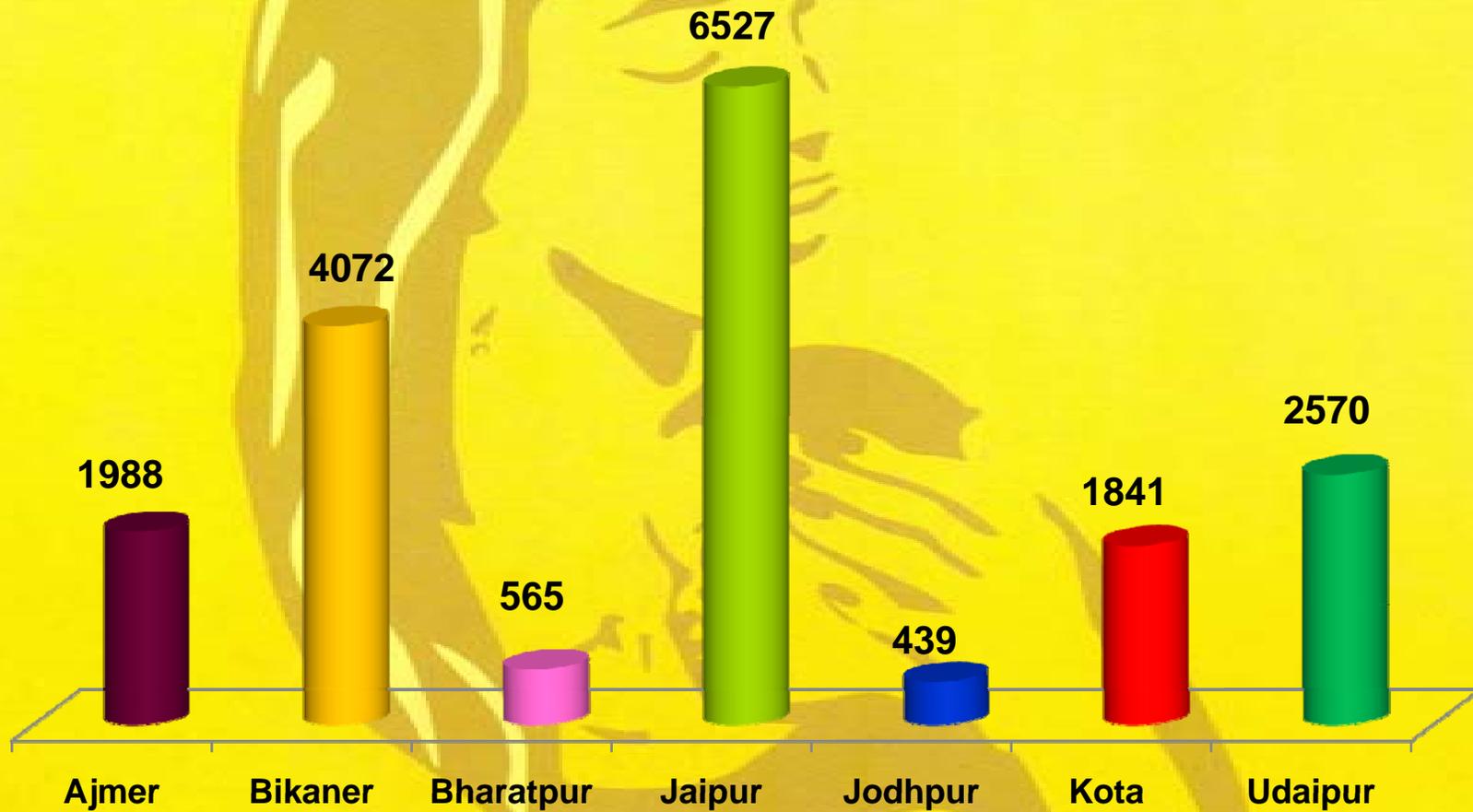
Zone Wise status of RJSSY for Sick Newborn

No. of Newborns Received Free Medicines



Source:-DM&HS Rajasthan (From April 1- July 15,2012)

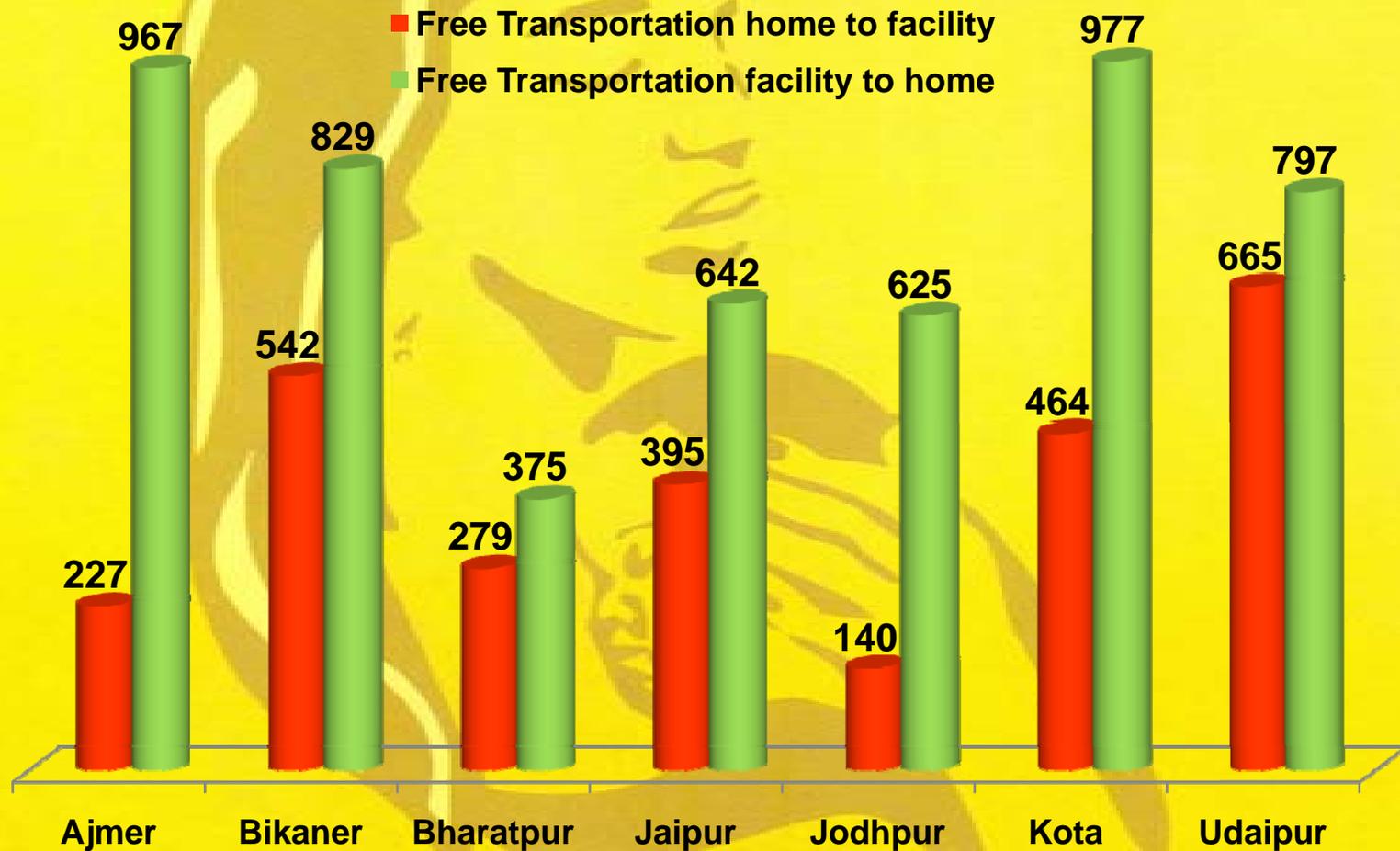
No. of Newborns Received Free Lab Test



Source:-DM&HS Rajasthan (From April 1- July 15,2012)

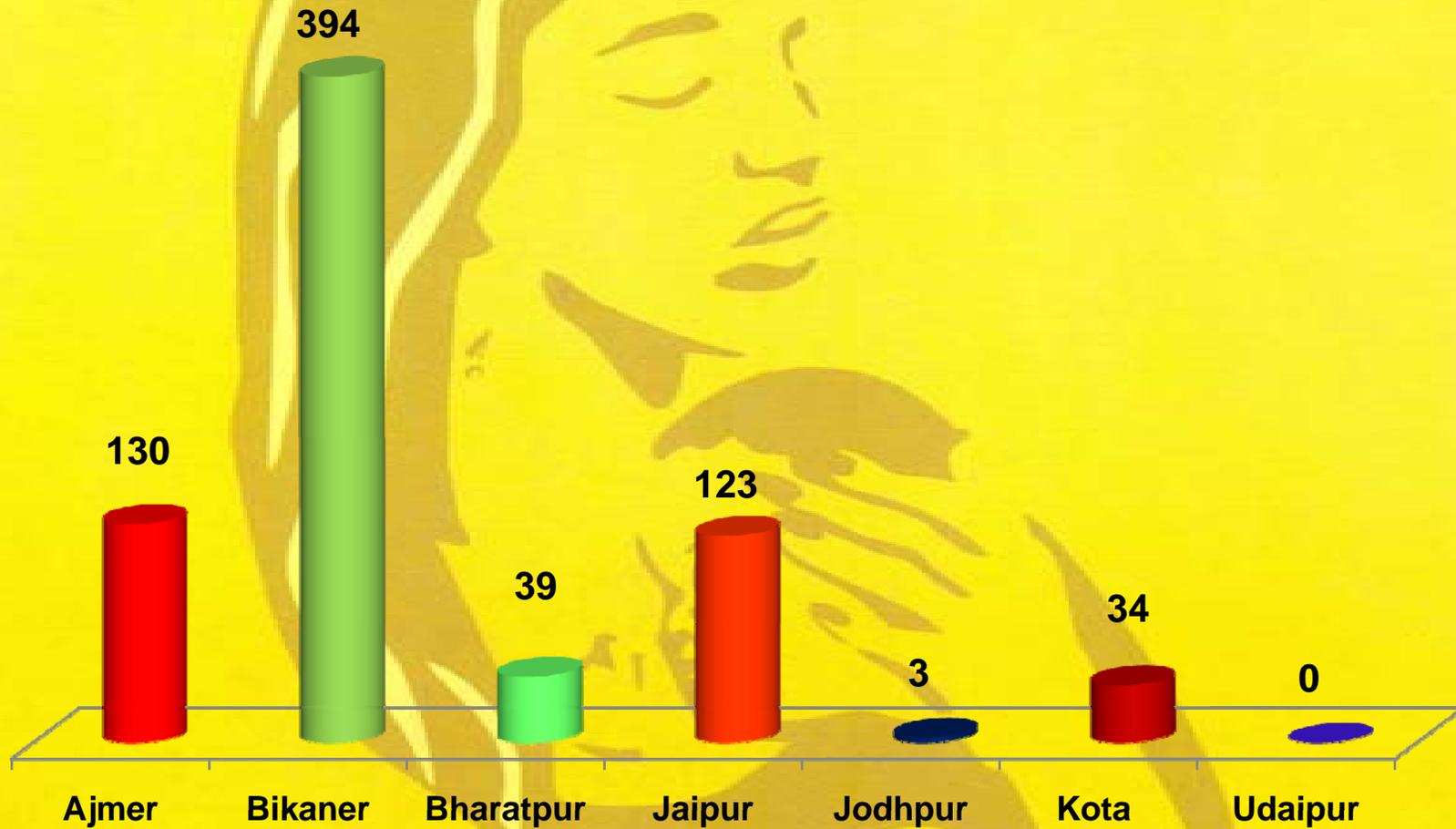


No. of Newborns Received Free Transportation from Home to Facility



Source:-DM&HS Rajasthan (From April 1- July 15,2012)

No. of Newborns Received Free Blood



Source:-DM&HS Rajasthan (From April 1- July 15,2012)



Thank You

For more details log on to
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or

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