

Government of West Bengal
Department of health & Family Welfare
National Rural Health Mission
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No. HF/SPSRC/25/2012/Part.II/NRHM/2099

Dated, Kolkata 30th August, 2012

A policy document named Essential Services Package for basic healthcare was published vide GO No. No. HF/O/TDE/91/5S-07/03 Dated 3.2. 2003. The development of a new and comprehensive Essential Services Package accompanied with Essential Drug List and Essential Equipment Lists, to improve quality of Basic Health Care, was under consideration of this department for some time past.

This was necessitated due to changing needs with time, resource related issues, prevalent disease profile and implementation of new programmes and policies like NRHM, IPHS etc. An Essential Services Package for Basic Health Care (revised version 1) has accordingly been developed. Based on the Essential Services Package, other important policy documents like Essential manpower norm, Essential Drug List and Equipment Lists shall also be developed.

The undersigned is directed to state that The Governor is pleased to order that the approved Essential Services Package for Basic Health Care (Revised) shall be implemented throughout the state in a phased manner. The document containing the approved Essential Services Package is enclosed with this Memorandum.

State Mission Director, NRHM
West Bengal

Copy forwarded for information & necessary action to:-

No. HF/SPSRC/25/2012/Part.II/NRHM/2099/1(12)

Dated, Kolkata 30th August, 2012

1. The Director of Medical Education WB & e.o. secretary
2. The Director of Health Services WB & e.o. secretary
3. The Special Secretary, MA branch
4. The Special Secretary, MS branch
5. The Special Secretary, TDE branch
6. The Commissioner FW
7. The Director, SPSRC
8. The Executive Director, SH&FW Samity
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State Mission Director, NRHM
West Bengal

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Service Packages

Service Package	Service Components at Household/ Community	Service Components at Sub Centre	Remarks
A. REPRODUCTIVE & CHILD HEALTH			
A.I. Reproductive Health			
<i>A.I.1. Family Planning and Contraception</i>	<ul style="list-style-type: none"> • Education, Motivation and counselling to adopt appropriate Family planning methods • Follow up services to the eligible couples adopting any family planning methods (terminal/spacing). • Distribution of condoms • Distribution of OCP 	<ul style="list-style-type: none"> • Education, Motivation and counselling to adopt appropriate Family planning methods • Provision of contraceptives such as condoms, oral pills, emergency contraceptives, • advice on contraindications, side-effects and administration of OCPs • IUD Insertion, follow up Removal & Referral of complications • Follow up services to the eligible couples adopting any family planning methods (terminal/spacing). 	Updating of Eligible couple list
A.I.2. Safe abortion services (MTP)	<ul style="list-style-type: none"> • Counselling and appropriate referral for safe abortion services (MTP) for those in need • Follow up for any complication after abortion/MTP 	<ul style="list-style-type: none"> • Counselling and appropriate referral for safe abortion services (MTP) for those in need • Follow up for any complication after abortion/MTP 	

<p>A.I.3. Antenatal care</p>	<ul style="list-style-type: none"> • Early registration of all pregnancies, within first trimester (before 12th week of Pregnancy) • Name based tracking of all pregnant women for assured service delivery . • Counseling on diet, rest, tobacco cessation and any minor problem during pregnancy , advice on institutional deliveries, pre birth preparedness and complication readiness, danger signs, clean and safe delivery at home if called for, postnatal care & hygiene, nutrition, care of new born and registration of birth. initiation of breast feeding, exclusive breast feeding for 6 months, demand feeding, supplementary feeding (weaning and starting semi solid and solid food) at 6 months, infant & young child feeding, contraception • Provide information about provisions under current schemes and programmes like Janani Suraksha Yojana, JSSK etc.. 	<ul style="list-style-type: none"> • Early registration of all pregnancies, within first trimester (before 12th week of Pregnancy). • Minimum 4 ANC (Suggested schedule for antenatal visits: 1st visit: Within 12 weeks— preferably as soon as pregnancy is suspected—for registration of pregnancy history , and first antenatal check-up; 2nd visit: Between 14 and 26 weeks; 3rd visit: Between 28 and 34 weeks; 4th visit: Between 36 weeks and term • Associated services like general examination such as height, weight, B.P., anaemia, abdominal examination, breast examination, Folic Acid Supplementation in first trimester, Iron & Folic Acid Supplementation from 12 weeks, injection tetanus toxoid, treatment of anaemia etc., (as per the Guidelines for Antenatal care and Skilled Attendance at Birth by ANMs and LHVs) • Minimum laboratory investigations like Urine Test for pregnancy confirmation, haemoglobin estimation, urine for albumin and sugar and linkages with PHC for other required tests. • Identification and management of danger signs during pregnancy. Appropriate and Timely referral of such identified cases which are beyond her capacity of management. • Identification & basic management of STI/RTI. • Counselling & referral for HIV/AIDS. 	<ul style="list-style-type: none"> • However even if a woman comes late in her pregnancy for registration, she should be registered and care given to her according to gestational age. • providing assistance in conduction of RCH plus/outreach medical camp by MO from PHC
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A.I.4. Intra-natal care	<ul style="list-style-type: none"> • Promotion of institutional deliveries • Skilled attendance at home deliveries when called for 	<ul style="list-style-type: none"> • Appropriate and Timely referral of high risk cases • identification and basic first aid treatment for PPH, Eclampsia, Sepsis and prompt referral of such cases 	as per 'Antenatal Care and Skilled Birth Attendance at Birth' or SBA Guidelines
A.I.5. Postnatal care	<ul style="list-style-type: none"> • Post-natal home visits on 0,3,7, 14, 21, 28 and 42nd day (both for mother & baby) including recording of birth weight in case of home delivery • Identification and referral of cases for further management 	<ul style="list-style-type: none"> • Initiation of early breast-feeding and colostom feeding within one hour of birth • During post natal visit, Advice regarding care of the mother and care and feeding of the newborn and examine the newborn for signs of sickness and congenital abnormalities as per IMNCI Guidelines and appropriate referral, if needed. • Counselling on diet & rest, hygiene, contraception, essential newborn care, infant and young child feeding. (As per SBA Guidelines) and STI/RTI and HIV/AIDS • Tracking of missed and left out PNC 	

A.II. Child Health Services			
<i>A.II.1. Immunization Services</i>	<ul style="list-style-type: none"> • IEC/BCC and beneficiary mobilization 	<ul style="list-style-type: none"> • IEC/BCC and beneficiary mobilization • conduction of immunisation session at clinic and outreach/VHND as per national schedule for Infants 0 to 1 Year; Children older than 18 months ; Children older than 5 years ; Children older than 10 years ; Children older than 16 years ; • Name based tracking of all infants and children as per immunization programme • Identification and follow up, referral and reporting of Adverse Events Following Immunization (AEFI). • Vaccination against JE in selected districts 	
<i>A.II.2. Vitamin A prophylaxis</i>	<ul style="list-style-type: none"> • IEC/BCC and beneficiary mobilization 	<ul style="list-style-type: none"> • IEC/BCC and beneficiary mobilization • Vitamin A administration as per national schedule 	
<i>A.II.3. Newborn Care</i>		<ul style="list-style-type: none"> • Care at the Time of Birth • Management of Asphyxia, maintain the airway and breathing • Prevention of Hypothermia, provision of warmth/ Kangaroo Mother • Prevention/Management of infection, cord care, and care of the eyes, initiate breast feeding within one hour as per the guidelines for Ante-Natal Care and Skilled Attendance at Birth • Care of LBW-Babies • Identification & Referral of sick babies • Post natal visits as mentioned under ‘Post natal Care’ 	

<i>A.II.4. Under 5 Care</i>	<ul style="list-style-type: none"> • Promotion of exclusive breast-feeding for 6 months and weaning after 6 months as per Infant and Young Child Feeding Guidelines • Growth Monitoring. Nutritional Surveillance • Health Check-Ups • Oral Rehydration therapy • Care in illness - Diarrhoea , ARI, Measles, Malaria, Under-nutrition 	<ul style="list-style-type: none"> • Promotion of exclusive breast-feeding for 6 months and weaning after 6 months as per Infant and Young Child Feeding Guidelines • Growth Monitoring. Nutritional Surveillance • Health Check-Ups • Oral Rehydration therapy • Care in illness - Diarrhoea , ARI, Measles, Malaria, Under-nutrition 	
A.III. Adolescent & school health services			
<i>A.III.1. Adolescent health services</i>	<ul style="list-style-type: none"> • Education, counseling and referral on nutritional and health needs, personal/ menstrual hygiene and health problem • Distribution of IFA, Anti-helminthic 	<ul style="list-style-type: none"> • Education, counseling and referral on nutritional and health needs, personal/ menstrual hygiene and health problem • Prevention and treatment of Anemia - Distribution of IFA, Anti-helminthic • Counselling for tobacco/substance abuse cessation 	
<i>A.III.2. School health services</i>	<ul style="list-style-type: none"> • Provision of Assistance to school health services 	<ul style="list-style-type: none"> • Provision of Assistance to school health services 	As per state guideline
B. DISEASE RELATED SERVICES			
B.I. Communicable Diseases			
<i>B.I.1. Air borne Diseases</i>			

<u>B.I.1. e. Tuberculosis</u>	<ul style="list-style-type: none"> • Referral of suspected symptomatic cases to the PHC/Microscopy centre • IEC/BCC for community and Patient (cough hygiene etc.) • Initial Home visit, Contact identification • Defaulter retrieval 	<ul style="list-style-type: none"> • Referral of suspected symptomatic cases to the PHC/Microscopy centre • Provision of DOTS at sub-centre and proper documentation and follow-up as per the RNTCP guidelines. • collection and transport of sputum samples as Sputum collection centres established for in rural , tribal, hilly & difficult areas where Designated Microscopy Centres are not available as per the RNTCP guidelines. 	<ul style="list-style-type: none"> • Care should be taken to ensure compliance and completion of treatment in all cases. • Adequate drinking water should be ensured at Sub centre for taking the tablets.
<u>B.I.1. i. Leprosy</u>	<ul style="list-style-type: none"> • IEC/BCC • Referral of suspected cases of leprosy and its complications to PHC • Defaulter retrieval • Distribution of self-care kit • Preparation of line list and referral of cases fit for reconstructive surgeries 	<ul style="list-style-type: none"> • IEC/BCC • Referral of suspected cases of leprosy and its complications to PHC • Provision of subsequent doses of MDT and follow up for persons under treatment for leprosy , maintain MLF-01 and monitor for regularity and completion of treatment • Distribution of self-care kit, footwear etc. 	<p>Care for reconstructive surgery cases and rehab</p>
<u>B.I.2. Water & Food borne Diseases</u>			
<u>B.I.2. a. Diarrhoeal Diseases</u>	<ul style="list-style-type: none"> • IEC/BCC • Water source Disinfection • Stool sample collection • Water sample collection • Information of outbreak 	<ul style="list-style-type: none"> • IEC/BCC • ORS distribution, treatment of mild cases • Referral of complicated cases 	<ul style="list-style-type: none"> • Reporting of cases in IDSP S form • Technical assistance and collaboration for village Health & sanitation Committee for sanitation & drinking water disinfection • Outbreak investigation

<i>B.1.3. Vector borne Diseases</i>			
<u>B.1.3.a. Malaria</u>	<ul style="list-style-type: none"> • Collection of Blood slides (active/passive/fever contact). • Rapid Diagnostic Tests (RDT) for diagnosis of Pf malaria in high Pf endemic areas/ inaccessible areas/pf death. • Appropriate anti -malarial treatment by ASHA, HA in confirmed malaria cases. • IEC and community mobilization for Prevention of breeding places of vectors. • Technical assistance and collaboration for village Health & sanitation Committee for vector control • Indoor residual spray 	<ul style="list-style-type: none"> • Collection of Blood slides of fever patients • Rapid Diagnostic Tests (RDT) for diagnosis of Pf malaria in high Pf endemic areas. • Appropriate anti -malarial treatment of uncomplicated cases. • Assistance for planning and implementation of integrated vector control activities in relation to Malaria, Filaria, JE, Dengue, Kala-azar etc. as prevalent in specific areas. • Promotion of use of insecticidal treated nets, wherever supplied • Record keeping and reporting as per programme guidelines. 	
<u>B.1.3.a. b. Filaria</u>	<ul style="list-style-type: none"> • Identification of cases of lymphoedema / elephantiasis and hydrocele and referrals. • Mass drug administration (under NVBDCP programme) • Home based care of lymphoedema • IEC/BCC 	<ul style="list-style-type: none"> • Identification of cases of lymphoedema / elephantiasis and hydrocele and referrals. • IEC/BCC 	<ul style="list-style-type: none"> • Organization of hydrocele operation camp • Pre/post MDA survey
<u>B.1.3.a. c. Kala-azar</u>	<ul style="list-style-type: none"> • Identification of suspected cases and screening by rapid test kit rK-39 and referral after initial management • Follow-up & defaulter retrieval. 	<ul style="list-style-type: none"> • Identification of suspected cases and screening by rapid test kit rK-39 and referral after initial management • Provision of DOT and administration of injectables. 	

<u>B.1.3.a. d. Dengue</u>	<ul style="list-style-type: none"> • Identification of fever case having rash and referral after initial management. • IEC and community mobilization for Prevention of breeding places of vectors. 	<ul style="list-style-type: none"> • Identification of cases fever case having rash and referral after initial management • IEC 	Reporting of cases in IDSP S form
<u>B.1.3.a. e. Chikungunea</u>	<ul style="list-style-type: none"> • Identification of fever case having rash and referral after initial management. • IEC and community mobilization for Prevention of breeding places of vectors. 	<ul style="list-style-type: none"> • Identification of cases fever case having rash and referral after initial management • IEC 	Reporting of cases in IDSP S form
<u>B.1.3.a. f. JE</u>	<ul style="list-style-type: none"> • Identification of fever case and referral after initial management. • IEC and community mobilization for Prevention of breeding places of vectors. 	<ul style="list-style-type: none"> • Identification of cases fever case and referral after initial management • IEC/BCC • Vaccination against JE in selected district 	Where Acute Encephalitis Syndrome/ Japanese Encephalitis is endemic
<i>B.I.7. Vaccine Preventable Diseases</i>			
<u>B.I.7. a. Polio</u>	<ul style="list-style-type: none"> • IEC/BCC and early referral of suspected cases. • Reporting of AFP cases 	<ul style="list-style-type: none"> • IEC/BCC and early referral of suspected cases. • Reporting of AFP cases • Immunization coverage as per child health related service package 	Participation in SNID/NID
<u>B.I.7. b. Diphtheria</u>	<ul style="list-style-type: none"> • IEC/BCC and early referral of suspected cases 	<ul style="list-style-type: none"> • IEC/BCC and early referral of suspected cases. • Immunization coverage as per child health related service package 	
<u>B.I.7. c. Pertusis</u>	<ul style="list-style-type: none"> • IEC/BCC and early referral of suspected cases 	<ul style="list-style-type: none"> • IEC/BCC and early referral of suspected cases. • Immunization coverage as per child health related service package • Toxoid to pregnant mother 	

<u>B.I.7. d. Tetanus</u>	<ul style="list-style-type: none"> • IEC and early referral of suspected cases 	<ul style="list-style-type: none"> • IEC and early referral of suspected cases. • Immunization coverage as per child health related service package 	
<u>B.I.7. e. Measles</u>	<ul style="list-style-type: none"> • IEC and early referral of suspected cases 	<ul style="list-style-type: none"> • IEC and early referral of suspected cases. • Immunization coverage as per child health related service package • Administration of Vit A 	Outbreak Response Immunisation (ORI)
<i>B.1.8. Other communicable Diseases</i>			
<u>B.1.8. a. HIV/AIDS</u>	<ul style="list-style-type: none"> • IEC activities • Condom promotion & distribution of condoms to the high risk groups 	<ul style="list-style-type: none"> • Condom promotion & distribution of condoms to the high risk groups. • Help and guide patients with HIV/AIDS receiving ART with focus on adherence • IEC activities to enhance awareness and preventive measures about STIs and HIV/AIDS, PPTCT services and 	HIV-TB coordination.
<u>B.1.8. a. RTI/STI</u>			
B.II. Non-communicable Disease			
<i>B.II.1. Mental Health Disorders</i>	<ul style="list-style-type: none"> • Identification and referral of common mental illnesses for treatment and follow up. • IEC activities for prevention and early detection of mental disorders and greater participation / role of Community for primary prevention of mental disorders 	<ul style="list-style-type: none"> • Identification and referral of common mental illnesses for treatment and follow up. • IEC activities for prevention and early detection of mental disorders and greater participation / role of Community for primary prevention of mental disorders • 	

<i>B.II.2. Cancer</i>	<ul style="list-style-type: none"> • IEC/BCC • Identification and referral • Homebased palliative treatment and care 	<ul style="list-style-type: none"> • IEC/BCC • Identification and referral 	As per national programme for control of Cancer, Diabetes, Cardio-vascular Disease & Stroke
<i>B.II.3. Diabetes</i>	<ul style="list-style-type: none"> • IEC/BCC • Identification and referral 	<ul style="list-style-type: none"> • IEC/BCC • Identification and referral 	As per national programme for control of Cancer, Diabetes, Cardio-vascular Disease & Stroke
<i>B.II.4. Cardio-vascular Disease</i>	<ul style="list-style-type: none"> • IEC/BCC • Identification and referral 	<ul style="list-style-type: none"> • IEC/BCC • Identification and referral 	As per national programme for control of Cancer, Diabetes, Cardio-vascular Disease & Stroke
<i>B.II.5. Stroke</i>	<ul style="list-style-type: none"> • IEC/BCC • Identification and referral 	<ul style="list-style-type: none"> • IEC/BCC • Identification and referral 	As per national programme for control of Cancer, Diabetes, Cardio-vascular Disease & Stroke
<i>B.II.6. Endocrine, metabolic & Nutritional Disorders</i>			
<u>B.II.6. a. Iodine Deficiency Disorders</u>	<ul style="list-style-type: none"> • IEC Activities to promote consumption of iodized salt by the community. • Testing of salt for presence of Iodine through Salt Testing Kits (community survey) 	<ul style="list-style-type: none"> • IEC Activities to promote consumption of iodized salt by the community. • Testing of salt for presence of Iodine through Salt Testing Kits by ASHA/HA 	As per guideline of National Iodine Deficiency Disorders Control Programme

<i>B.II.7. Environmental Diseases</i>			
<u>B.II.7. a. Fluorosis</u>	<ul style="list-style-type: none"> • Identification the persons at risk of Fluorosis, suffering from Fluorosis and those having deformities due to Fluorosis and referral. • Line listing of reconstructive surgery cases, rehabilitative intervention activities and referral services. • Focused behaviour change communication activities to prevent Fluorosis. • Water sample collection 	<ul style="list-style-type: none"> • Identification the persons at risk of Fluorosis, suffering from Fluorosis and those having deformities due to Fluorosis and referral. • Focused behaviour change communication activities to prevent Fluorosis. 	
<u>B.II.7. b. Arsenicosis</u>	<ul style="list-style-type: none"> • Identification the persons at risk of Arsenicosis, suffering from Arsenicosis and those having deformities due to Arsenicosis and referral. • Referral services. • IEC/BCC • Water sample collection 	<ul style="list-style-type: none"> • Identification the persons at risk of Arsenicosis, suffering from Arsenicosis and those having deformities due to Arsenicosis and referral. • IEC/BCC • Referral services 	As per state programme guideline
B.III. Accident, injuries	<ul style="list-style-type: none"> • 	<ul style="list-style-type: none"> • Provide treatment for minor ailments including fever, diarrhea, ARI, worm infestation and First Aid including first aid to animal bite cases(wound care, tourniquet (in snake bite) assessment and referral). • Appropriate and prompt referral. • 	
<i>B.III. 1. Dog bite</i>	<ul style="list-style-type: none"> • IEC/BCC • First aid and referral 	<ul style="list-style-type: none"> • IEC/BCC • First aid and referral 	

<i>B.III. 2. Snakebite</i>	<ul style="list-style-type: none"> • IEC/BCC • First aid and referral 	<ul style="list-style-type: none"> • IEC/BCC • First aid and referral 	
<i>B.III. 3. Disaster</i>	<ul style="list-style-type: none"> • Provision of first aid • Management of minor ailments • Distribution of drugs, ORS etc. • Distribution of disinfectant 	<ul style="list-style-type: none"> • Provision of first aid • Management of minor ailments • Distribution of drugs, ORS etc. • Distribution of disinfectant 	Technical assistance and collaboration for sanitation & drinking water disinfection
C. OTHER HEALTH RELATED SERVICES			
C.I. Blindness	<ul style="list-style-type: none"> • IEC/BCC • Referral • Assisting for screening of school children • Assisting for preparation of blindness register 	<ul style="list-style-type: none"> • IEC/BCC • Referral • Administration of Vitamin A 	As per guideline of National programme for control of blindness
C.II. Deafness	<ul style="list-style-type: none"> • Detection of cases of hearing impairment and deafness during House to house survey. • 	<ul style="list-style-type: none"> • Awareness regarding ear problems, early detection of deafness, available treatment and health care facilities for referral of such cases. • Education of community, especially the parents of young children regarding importance of right feeding practices, early detection of deafness in young children, common ear problems and available treatment for hearing impairment/ deafness. 	As per guideline of National Programme for Prevention and Control of Deafness (NPPCD)
C.III. Oral Health	<ul style="list-style-type: none"> • IEC/BCC 	<ul style="list-style-type: none"> • Health education on oral health and hygiene especially to antenatal and lactating mothers, school and adolescent children • Providing first aid and referral services for cases with oral health problems • Physiotherapy support 	

C.IV. Health Care of Elderly	<ul style="list-style-type: none"> • Domiciliary visit by Nursing staff/physiotherapist 	<ul style="list-style-type: none"> • Counselling of Elderly persons and their family members on healthy ageing. • Referral of sick old persons • Distribution of aids/appliances 	As per guideline of National programme for Health Care of Elderly
C.V. HMIS	<ul style="list-style-type: none"> • Recording and reporting of vital events including births and deaths, particularly of mothers and infants to the health authorities • Maternal Death Audit • Infant Death Audit • Malaria Death Audit • Diarrhoeal Death Audit 	<ul style="list-style-type: none"> • Record keeping related to vital statistics • Record keeping related to death audit 	
C.VI. Handicap certification	<ul style="list-style-type: none"> • Identification of cases and referral 	<ul style="list-style-type: none"> • Identification of cases and referral 	

Essential