

Government of West Bengal
Department of Health & Family welfare
State Family Welfare Bureau
Swasthya Bhavan, GN 29, Sector V,
Salt Lake, Kolkata 700091

No. : H/SFWB/21S-05-2013/2035 (26)

Dated : 03/12/2013

To
1-25) The Chief Medical Officer of Health, All Health Districts,
26) The DFWO, Kolkata

Subject: Provision of quality services for Safe Abortion

You are aware that increasing access to and provision of quality service for Safe Abortion is part of Government of West Bengal's maternal health strategy to reduce maternal mortality and morbidity in the state as unsafe abortion is still one of the leading causes of maternal mortality and morbidity.

To ensure provision of quality Safe Abortion Services throughout the state, a roadmap outlining the key steps to be taken for the same has been formulated as stated below. You are instructed to go through the contents of the roadmap and to implement the steps immediately,

Roadmap for provision of quality Comprehensive Abortion Care Services

1. State/ District Nodal Officer for safe abortion services: - ADHS (Maternal Health) in the state & DMCHO in the districts are responsible as nodal officer for the services.

2. District Level Committee for certification, regulation & monitoring of the services in public sector :- The CMOH of the districts are asked to constitute the District Level Committee for the same in the respective district as per provision laid in the MTP Act, 1971, MTP Rules, 2003 & MTP Regulation, 2003, as follows :

- i) The CMOH of the district shall be the Chairperson of the committee,
- ii) The Committee shall consist of not less than three and not more than five members including the chairperson
- iii) One member of the committee shall be the Gynecologist/ Surgeon/ Anesthetist and other members from local medical profession, Non-Government Organization and Panchayati Raj Institution of the district
- iv) Provided that at least one of the members of the committee shall be a woman
- v) Tenure of the Committee shall be for two calendar years and the tenure of the Non-government member shall not be more than two terms,

The CMOHs are asked to constitute the DLC within next 15 days and to intimate the state accordingly.

Constitution of DLC in districts should be followed by :-

- i) Wide publicity on constitution of DLC and availability of Form A for application for approval of a place under clause (b) of Section 4 of MTP Act, 1971
- ii) Ensure availability of Form A in sufficient quantities
- iii) Verification of sites applied for and submission of report to DLC by verification team
- iv) Approval of sites (if verification team is satisfied) in Form B
- v) Conduct meeting with all licensed CE of the district providing Maternity services for dissemination of MTP ACT, Rule & Regulation and constitution of DLC

3. Inclusion of Medical abortion drugs in Essential Drug list: - MMA drugs [Tab Mifepristone, 200 mg (CAT No 35.13(A)/T & Tab Misoprostol, 200 mcg (CAT No 35.09 (A)/T & Tab Misoprostol, 100 mcg (CAT No 35.09 (B)/T)] have already included in CMS approved Drug catalogue of the state. The CMOH of the districts will ensure supply of the drugs to all health facilities of the district where services are being provided.

4. Training of Medical Officers in safe MTP technique:- Already 46 Specialist MO (G & Obs.) and 6 GDMO in the year 2011-12, 70 Specialist MO (G & Obs.) and 50 GDMO in the year 2012-13 and 7 Specialist MO (G & Obs.) and 13 GDMO in the year 2013-14 (total of 192 MOs) have been trained in safe MTP technique throughout the state with technical support and assistance from Ipas.

The CMOH of the districts will ensure that there is at least one CAC trained MO at each BPHC/ CHC/ RH of the district.

The CMOH of the districts are asked to supervise and monitor the performance of the trained MO regularly through District Nodal Officer for the same.

5. Post training mentoring of the service provider:- As per MOU signed between Dept of H & FW, Govt. of WB and Ipas to collaborate in increasing access to safe abortion care in the state including implementation of safe abortion component in RCH II project, which is valid from 1st January, 2012 to 31st December, 2014, Ipas will continue periodic tracking of the trainees and assess the extent of service provision, programme progress and evaluate the impact of the intervention. This organization is doing the same. The CMOH/ Nodal Officer of the district will keep close liaison with the organization and cooperate with the organization for carrying out the activities effectively. (Contact persons: Paramita Aich, State Programme Officer, Ipas, Mb no. 9334196224, Aveek Dey, Associate-Programm, West Bengal, Ipas, Mb no 9378143552)

6. Monthly reporting of progress of CAC services in standard format:- The CMOH will use District Monitoring Format (Monthly) for CAC services to monitor the programme in the district and submit the report to ADHS (Maternal Health) regularly (on monthly basis) by post & email (adhsmh@gmail.com).

The CMOH of the districts will instruct every head of the public facilities and owner of the approved private facilities to maintain a register in Form III as per regulation 5 of MTP Regulations, 2003 for recording therein the details of the admissions of women for termination of their pregnancies and to keep such register for a period of five years from the end of the calendar year it relates to.

The CMOH of the districts will share the "Comprehensive Abortion Care (CAC)- Training & Service Delivery Guideline", which has been already sent to them through email, and this Roadmap with every head of the public and private facilities in the district.

An action taken report in this regard will be sent by the CMOH of the districts within one month from issuing of this letter to the undersigned.



Commissioner, Family Welfare
& Secretary to Govt. of West Bengal

Comprehensive Abortion Care
District Monitoring Format (Monthly)
(Please do not modify/ change the format)

Name of the District :
No of Units in District :

Month & Year of Reporting :

Name of District Nodal Officer for MTP activities:

Designation and Contact Number:

E-mail id :

A. District Level Indicator:

Sl No.	Indicator		Response
1	Whether Comprehensive Abortion Care (CAC)- Training & Service Delivery Guideline is available in district (Yes/No)		
2	District Level Committee (DLC)	Whether District Level Committee is formed & functioning (Yes/No)	
		Whether DLC meeting held regularly (at least once in every month) during reporting month (Yes/No)	
3	Approved NGO, Private Clinic & Hospital	a. Number approved by DLC to provide Safe Abortion Care	
		b. Number of Renewal Certificate issued by DLC during reporting month	
		c. Number of New Certificate issued by DLC during reporting month	
		d. Number of application pending with DLC for one year at the end of reporting month	
		e. Number of New application received during reporting month	
		f. Number of applications out of the new application (e) pending with DLC at the end of reporting month	

- Is MVA Equipments being procured & supplied to Facilities (Yes/No) :
- Are Drugs for MMA being procured & supplied to Facilities (Yes/No) :

B. Capacity Building:

Name of the Nodal Agency for Training:

Sl No.	Indicator		Response
1	Training Site	Number of Tertiary Care Facilities (MCH) conducting training	
		Number of Secondary Care Facilities (DH/SDH/SGH) conducting training	
		Number of any other facility including NGO/ Pvt. Hospital conducting training	
2	Training of MO	MO Training Load cumulative since April 2005	
		Number of MO trained cumulative since April 2005	
		Number of MO trained during reporting month	
		Number of MO trained since April of reporting year	
		Target for MO training for the current year	
3	Number of District Trainer trained cumulative since April 2005		
4	No. of ANM & Staff Nurse trained to provide confidential counseling for MTP & Post Abortion Care cumulative since April 2005		
5	No. of ANM & Staff Nurse trained to provide confidential counseling for MTP & Post Abortion Care during reporting period		
6	No. of ASHA & other field functionaries trained to provide confidential counseling for MTP & Post Abortion Care cumulative since April 2005		
7	No. of ASHA & other field functionaries trained to provide confidential counseling for MTP & Post Abortion Care during reporting period		

IEC/BCC :

Does the district have an IEC/BCC plan for the following :

Sl. No.	Subject	Please specify the frequency of IEC/BCC activities			
1	On the legality of MTP	i) Print:	iii) Video:		
		ii) Audio:	iv) Any other :		
2	On sex determination preceding MTP as an offence	i) Print:	iii) Video:		
		ii) Audio:	iv) Any other :		
3	On mandatory requirements for approval of Pvt./ NGO service delivery sites	i) Print:	iii) Video:		
		ii) Audio:	iv) Any other :		
4	On MTP service availability at nearest facility in public & private sector	i) Print:	iii) Video:		
		ii) Audio:	iv) Any other :		

D. Supportive Supervision :

Sl.No.	Indicator	Remarks
1	What is the supportive supervision/ monitoring mechanism for post training follow up & quality of MTP service delivery	
2	If there is no such mechanism, what is the district's plan for it & the proposed timeline	

E. Biomedical Waste Management :

- * What is the Mechanism of disposal of products of conception:
- * Is this mechanism is in accordance with CAC Guideline (Yes/No) :
- * Whether implemented in all facilities (Yes/No) :

F. Service Availability & Service Utilization :

Sl No	Availability	Facility						
		Medical College Hospital	District Hospital	SDH/ SGH	CHCs (FRU)	24X7 PHCs, Non FRU CHCs	Other PHCs	Approved NGO/ Pvt. Hospital
1	Total number of Health facilities in the district							
2	Number with MTP Drugs							
3	Number with MTP Equipments							
4	Number with MTP Trained Providers							
5	Number with all three (Drug, Equipment & Trained Provider)							
6	Number of Institutions providing MTP services							
7	Number of Institutions providing MTP up to 8 weeks only (MVA/MMA)							
8	Number of Institutions providing MTP up to 12 weeks only (MVA/MMA)							
9	Number of Institutions providing MTP both up to 12 weeks & above 12 weeks (EVA/MVA/MMA)							
10	Utilization							
Number of MTP performed	Up to 12 weeks during reporting month							
	Up to 12 weeks since April of reporting year							
	Above 12 weeks during reporting month							
	Above 12 weeks since April of reporting year							

G. Performance of Facilities:

Category of Facility	SI No	Name of the Facility	Whether facility has MTP drugs (Y/N)	Whether facility has MTP equipment (Y/N)	Whether facility has MTP trained provider (Y/N)	No of MTP performed			
						For the Month		Cumulative since April of the year	
						Up to 12 weeks	Above 12 weeks	Up to 12 weeks	Above 12 weeks
MCH									
DH									
SDH									
SGH									
CHC FRU									
24 X 7 PHCs, CHC Non FRU									
Other PHC									
Approved NGO/ Private Hospital									

Remarks if any (may add separate pages):

Signature of District Nodal Officer with seal

Signature of CMOH with seal

This report is to be sent by the district monthly by 10th of next month to the ADHS (Maternal Health) by post & email (adhsmh@gmail.com)