



GOVERNMENT OF KARNATAKA

ANNUAL REPORT

1998-99

DEPARTMENT OF HEALTH AND FAMILY WELFARE



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DEPARTMENT OF HEALTH AND FAMILY WELFARE SERVICES

The Department of Health and Family Welfare Services implements various National and State Health Programmes of Public Health importance and also provides comprehensive Health Care Services to the people of the State through various types of Health and Medical Institutions.

The Health Care Services are provided by implementation of:

1. Rural Health Component of the Minimum Needs Programme
2. Medical Development Programme and Hospital Pharmacy Programme.
3. National 'AIDS' Control Programme.
4. Mother & Child Health (MCH), Family Welfare and Immunisation Programme.
5. National Leprosy Eradication Programme.
6. National Tuberculosis Control Programme.
7. National Programme for Control of Blindness.
8. National Malaria Eradication & National Filaria Control Programme.
9. National Guinea Worm Eradication Programme.
10. Prevention and Control of Communicable Diseases like Diarrhoeal diseases, Kyasanur Forest Disease, Japanese Encephalities etc.,
11. Health Education and Training Programme.
12. Nutrition Programme - Nutrition Education & Demonstration.
13. National Iodine Deficiency Disorder Programme.
14. Laboratory Services and Vaccine Production Units.
15. Education and Environmental Sanitation & Curative Services.

There are external Aided Projects implemented in the State like:

1. Karnataka Health System Development Project with the World Bank Assistance.

2. KFW with German Assistance.
3. India Population Project-IX(K)
4. OPEC (Improvements of District Hospitals in Raichur with the assistance of OPEC).
5. DANIDA Assisted Programme for control of Blindness.

ADMINISTRATION AND DIRECTION

The Director of Health and Family Welfare Services is the Head of the Department. The Administrative powers and Financial Powers of the Department are vested with the Director. The Director of Health and FW Services is responsible to provide the Health Care Services to the Community by way of implementing various National and State Health Programmes in the State.

The Director of Health and Family Welfare Services is assisted by Additional Directors, Joint Directors, and Demographer, Chief Accounts Officer cum Financial Advisor and a Chief Administrative Officer ^{assist} in all matters pertaining to Finance and Accounts and Administration of the Department respectively. There are Deputy Directors to assist the Joint Directors.

There are Four Divisional Joint Directors of Health & Family Welfare Services and each Divisional Joint Director of Health and Family Welfare Services is assisted by two Deputy Directors.

The Divisional Joint Directors are responsible for Supervision and effective implementation of various National and State Health Programmes, including Family Welfare Programme and MCH Services in the Districts

coming under their Divisions.

At the District level, there are District Health and Family Welfare Officers assisted by the District Leprosy Officer, District MCH Officer, District Malaria Officers, District TB Officers, Medical Officers of District Lab., Medical Officers (FW & MCH) and Taluk Health Officers. These officers are responsible for implementing and reporting of various National and State Health Programmes including Family Welfare Programme and MCH Services.

The District Surgeons of the District Hospitals are responsible for providing curative and preventive services including referral services.

At the Taluk Level, there are 175 taluk Health Officers and they are responsible for prompt and effective implementation of various National and State Health Programme in their taluks.

At the Primary Health Centre Level: The Medical Officers of Health are similarly responsible for the implementation of various National and State Health Programmes, including Family Welfare Programme and MCH Services.

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ACHIEVEMENTS FOR 1998-99

1. Sanction has been accorded for upgradation of Primary Health Centre, Bethamangala, Bangarpet Tq, Kolar District and Primary Health Centre, Vittala, Buntawal Taluk, D.K. District to Community Health Centre.
2. Formation of District Health Offices in the newly created seven districts i.e., District Health and FW Offices, District Leprosy Offices, District TB Centres, District Family Welfare Offices and District Malaria Offices.
3. Sanction of Staff to 10 bedded Maternity Annexes attached to:-
 - a) Primary Health Centre, Ripponpet, Hosanagar Tq, Shimoga District.
 - b) Primary Health Centre, Bhagamandala, Madikeri Tq, Kodagu District.
 - c) Primary Health Centre, Basavapatna, Arkalagud Tq, Hassan District.
 - d) Primary Health Centre, Kothathi Mandya Tq, Mandya Dt.,
 - e) Primary Health Centre, Kalloru, Gubbi Tq, Tumkur Dt.,
 - f) Primary Health Paduvalahippe, Holenarasipura Tq, Hassan District.
 - g) Primary Health Centre, Doddarasinakere, Maddur Tq, Mandya District.
 - h) Primary Health Centre, Marganakunte, Bagepalli Tq, Kolar District.
4. Sanction of Staff to 6 bedded Maternity Annexes attached to:
 - a) Primary Health Centre, Belagola, Srirangapatna Tq, Mandya District.
5. Sanction for enhancement of stipend to SC/ST candidates undergoing Departmental training Rs.1000/- per month.
6. Additional Staff to:-
 - a) General Hospital, Sagar, Shimoga District.
 - b) Community Health Centre, B.Bagewadi, Bijapur Dist.,
 - c) Community Health Centre, Hiresave, Channarayapatna Tq, Hassan District.
 - d) District Hospital, Bidar.
 - e) Primary Health Centre, Gote, Jamkhandi Tq, Bagalkote Dt
7. ~~2~~ Sanction for purchase of 100 equipments for providing Laboratory facilities to PHCs under PFA Act.
8. Sanction for purchase of X-Ray Units with accessories with Odelca Cameras to the newly created districts Haveri, Gadag, Bagalkote and Udupi under National TB Control Programme.
9. Sanction of 3 New vehicles to Dist.TB Centres, Haveri, Gadag Bagalkote under National TB Control Programme.

Details of Staff in the Department of Health & FW +Services as on 1.1.99

Group	Posts sanctioned			Working			Vacancies		
	in the Dept.	K.H.S.D.P.	Total	in the Dept.	K.H.S.D.P.	Total	in the Dept.	K.H.S.D.P.	Total
A	5179	549	5728	4474	459	4933	705	90	795
B	420	64	484	267	32	299	153	32	185
C	37127	2266	39393	29080	1331	30411	8047	935	8982
D	15753	1327	17080	14258	-	14258	1495	1327	2822
Total	58479	4206	62685	48079	1822	49901	10400	2384	12784

Appointments & Posts filled up ~~fixing~~ during the
Year 1998-99

The following recruitments are made and posts filled up during the year 1998-99

1. Nursing Tutors	- 25	On Promotion
2. Staff Nurses	- 1586	Appointment
3. Senior Health Assistants	- 169	on Promotion
4. X-Ray Technicians	- 101	Appointment
5. Junior Health Assistant(Female)	- 464	-"-
6. Deputy Health Education Officer	- 13	On Promotion
7. Stenographer Gr.I	- 10	-"-
8. Skilled Tradesmen	- 15	-"-
9. First Division Asst.	- 21	Compassionate Grounds Appointment
10. Second Division Asst.	- 105	-"-
11. ' D ' Group	- 94	-"-

Action to recruitment 573 doctors has been started.

URBAN HEALTH SERVICES

The District Hospitals are not only providing treatment to patients but also provides preventive services, Major Hospitals, Teaching Hospitals and Specialised Hospitals, Provide Specialised Services. The details are as follows:

HOSPITALS	NUMBER OF INSTITUTIONS	NUMBER OF BEDS
District Hospitals	16	5788
Teaching Hospitals	9	5907
Major Hospitals	8	1521
Specialised Hospitals	16	3330
General Hospitals/Maternity Hospitals	127	6677
TOTAL	176	23223

Each District Hospitals has got the following specialities

- | | |
|----------------------------|----------------|
| 1. Medicine | 8 Skin and STD |
| 2 Surgery | 9 Radiology |
| 3 Obstetrics & Gynaecology | 10 Anaesthesia |
| 4 Paediatric | 11 Dental |
| 5 Orthopaedic | 12 Psychiatry |
| 6 Ophthalmology | 13 Blood Bank |
| 7 Ear, Nose and Throat | |

The Specialist Departments in the District Hospitals are catering to the needs of the patients coming directly as well as those referred from small peripheral rural centres and moffusil hospitals. The District Hospitals serve as referral hospitals to the peripheral institutions.

Burns & Casualty wards are established at SC Hospital, Hassan, Mgann Hospl, Shimoga, SNR Hospl, Kolar and Dist. Hospl, Bijapur. Sexually Transmitted Disease clinics are functioning in District Hospitals & also in the Gnl. Hospl, at Udupi KGF and Kollegal.

Physiotherapy units are functioning at the District Hospitals, Shimoga, Hassan, Tumkur, Chitradurga, Kolar, Mandya and Bijapur. All the teaching hospitals have got Physiotherapy Units. Physiotherapy Unit is also functioning in KC General Hospital, Bangalore & in General Hospital, J'nagar.

The Emergency and Casualty Department work round the clock.

The existing Blood Banks are being strengthened in all the District Hospitals and in all Major Hospitals of the State. AIDS Screening facility is being developed in District and Major Hospitals in ^aphased manner.

Radiology services are available in all the District Hospitals and in many taluk level hospitals.

Dental Clinics are established in all the District Hospitals and Major Hospitals and in Taluk Level Hospitals

Epidemic Diseases Hospitals are functioning at Bangalore, Mysore and KGF. They are special type of institutions. These hospitals are meant for treating epidemic diseases like Cholera, Gastroenteritis, Diphtheria, Tetanus, Whooping Cough, Rabies, Measles, Chicken Pox and other highly infectious diseases.

RURAL HEALTH SERVICES

In line with the Government of India guidelines in the implementation of minimum needs programme (Rural Health) the State has revised its Health Policy and decided to establish a 3 Tier Health Infrastructure, viz., Sub-Centres, Primary Health Centres and Community Health Centres.

The existing Primary Health Units are being upgraded into Primary Health Centres in a Phased manner and establishment of New PHU's has been discontinued wef 1.4.1987

COMMUNITY HEALTH CENTRE

It is the intention of Government of India and the State Government to establish a Community Health Centre for one lakh population/One Community Health Centre out of every 4 Primary Health Centres. The policy of the Government is to upgrade all the taluk level institutions to 30 bedded hospitals and at Sub-Divisional Hospitals into 50 bedded hospitals. These institutions will serve as Rural Referral Hospitals for the population living in rural areas for specialised services.

In these 30 beded hospitals there will be a minimum of four specialities viz.,

- | | |
|---------------------------|--------------------|
| 1. General Medicine. | 2. General Surgery |
| 3. Obstetric Gynaecology. | 3. Dental Surgery. |

In the 50 beded hospitals, in addition to these specialities, there is one Paediatrician

PRIMARY HEALTH CENTRE

The Primary Health Centres provide the basis Health Services which include Curative, Preventive and Promotive Health Care Services. The National and State Health Programmes are also being provided through the Primary Health Centres.

As per the guidelines given by the Government of India, there will be one Primary Health Centre for every 30000 population in plain areas and one Primary Health Centre for every 20000 populationⁱⁿ Hilly and Tribal areas. Every Primary Health Centre is supplied with drugs worth Rs.50000/-annually. At present there are 1676 Primary Health Centres, sanctioned in the state as on 31.12.1998.

PRIMARY HEALTH UNIT

In Karnataka, there are institutions known as Primary Health Units, which also provide curative, preventive and promotive Health Care Services and 583 PHU's are functioning. They will be upgraded as PHU's in a phased manner.

HEALTH SUB-CENTRES

It is the intention of Government of India and the State Government to have one Health Sub Centre for every 5000 population in plain areas and one sub-centre for every 3000 population in the Hilly and Tribal areas. Each Sub-Centre is managed by one Junior Health Assistant (F) and one Junior Assistant (Male) and drugs worth Rs.5000/- per annum are being supplied for treatment of minor ailments.

RURAL HEALTH CARE SERVICES ARE PROVIDED THROUGH VARIOUS TYPES OF INSTITUTIONS WHICH ARE DETAILED BELOW

CENTRES	1996-97	1997-98	1998-99 (upto DEC 98)
Community Health Centres	242	252	252
Primary Health Centres	1601	1676	1676
Urban Primary Health Centres	-	9	9
Primary Health Units	589	583	583
Sub-Centres	8143	8143	8143
Bed	15282	16262	16262

NATIONAL AIDS CONTROL PROGRAMME

The National AIDS Control Programme is being implemented in the State as per the Guidelines of National AIDS Control Organisation, Ministry of Health and Family Welfare, Govt. of India. This is a 100% centrally sponsored scheme.

The State AIDS Cell is established during May 1992, in the Directorate of Health and F.W. Services, to monitor and supervise the activities under various components of National AIDS Control Programme. The State Level Empowered Committee is constituted under the Chairmanship of Health Secretary, Govt. of Karnataka and Karnataka State AIDS Prevention Society is formed during December 1997.

SURVEILLANCE AND CLINICAL MANAGEMENT

Three(3) AIDS Surveillance Centre are functioning which are taking-up Surveillance and Sentinel Surveillance activities at Victoria Hospital, Bangalore; National Inst. of Mental Health and Neuro-Sciences, Hosur Road, Bangalore; and Kasturba Medical College, Manipal.

BLOOD SAFETY PROGRAMME

Ten(10) Zonal Blood Testing Centres are established and functioning, all the Blood Banks i.e. Government, Private and Voluntary Blood Banks are linked to these Zonal Blood Testing Centres for screening for HIV to ensure Blood Transfusion Safety. 52 Blood Banks have been modernised by way of supply of equipments and consumables in a phased manner.

One Blood component Separation Facility is sanctioned and established during 1994-95 at Kidwai Memorial Inst. of Oncology Bangalore.

SEXUALLY TRANSMITTED DISEASE CONTROL PROGRAMME

The service care at the existing 30 STD Clinics attached to Major Hospitals and Teaching Hospitals are strengthened by way of supply of equipments, drugs and laboratory supplies.

INFORMATION, EDUCATION AND COMMUNICATION

The Information, Education and Communication under AIDS Control Programme is intensified to create awareness among the Community, Television spots and messages on Prevention of AIDS are being telecasted through TV and Radio spots are being Advertised through All India Radio(AIR). Printed materials like, Folders, Posters, Pamphlets are being distributed. Audio Cassettes with songs and dramas on Prevention of AIDS is distributed. Hoardings and Wall-paints in Major cities and towns are taken-up and street plays were conducted.

NON-GOVERNMENTAL ORGANISATION CO-ORDINATION

Nearly 97 Non-Governmental Organisations are registered out of this 8 are supported financially, to take up awareness campaign on AIDS.

Training Programme is being organised for Medical Officers, Para-Medical staff and Non-Governmental Organisations.

Since 1987 to December 1998, 3,98,887 Blood Samples have been screened. Out of which 4649 are found HIV positives, 167 AIDS cases and 77 have died.

Sentinel Surveillance activities were taken up in Eight(8) HIV Sentinel Sites as per the approved protocol of National AIDS Control Organisation.

The following category of staff have been trained during the year 1998-99

Sl.No.	Category	No. trained
1	Dental Surgeons	28
2	Medical Officers	6
3	Lab. Technicians	5
4	District Nodal Officer	22

Financial release by National AIDS Control Organisation, Govt. of India

YEAR	release	Expenditure
1998-99 (upto end of Dec. 1998)	731.94 lakhs	115.62 lakhs

FAMILY WELFARE AND MOTHER AND CHILD HEALTH PROGRAMMES:

INTRODUCTION:

The exploding population and the vulnerability of infants, children and mother to a host of ailments resulting in their high morbidity and mortality rates are among the front ranking problems enaciating the country as a whole. It is in order to tackle these ~~the~~ mutually inter-linked problems of high birth rate and high infant and maternal mortality rates and bring about demographic transition that Family Welfare and Mother and Child Health Programme have been thoughtfully formulated and implemented through out the length and breadth of the country.

Karnataka deserves a special mention in their history of Family Planning Programme due to the pioneering steps taken as early in 1930's by the Maharaja of Mysore by ordering establishment of Birth Control Clinics one ⁱⁿ Vani Vilas Hospital Bangalore and other at Cheluvamba Hospital, Mysore. Further, in the implementation of the programme, Karnataka has been fairly successful, scaling more heights than many a major state. In many of the demographic indicators, Karnataka has bettered the national average.

2. OBJECTIVES: The objectives of Family Welfare and MCH Programmes, as set out in the National Health Policy document 1983, are the following.

1.	Crude Birth Rate	21
2.	Crude Death Rate	9
3.	Infant Mortality Rate	60
4.	Net Reproduction Rate	1

5.	Decadal growth Rate of Population	1.2%
6.	Effective Couple Protection Rate	60%
7.	Life Expectancy at birth	64 Years
8.	T.T. for pregnant women	100%
9.	DPT, Polio, BCG and Measles Vaccination for infants	100%

INDICATORS:

3. IMPACTE: Considerable impact has been registered in the State due to the programme. More than 1.7 crore births have been awaited. The other achievement are enumerated below:

1. Fall of crude birth rate from 41.6 in 1961 to 22.7 in 1997.
2. Decline of crude death rate from 22.2 in 1961 to 7.6 in 1997.
3. More than 40 points fall in infant mortality rate from 95 in 1971 to 53 in 1997.
4. Decrease in General Fertility rate in rural areas from 154.9 in 1972 to 112.1 in 1989 and in urban areas from 124.9 to 96.0.
5. The total fertility rate has come down from 3.6 in 1981 to 2.9 in 1993.
6. The life expectancy has gone up to 65.1 66.3 years respectively for Males and Females.
7. The average age at marriage has increased as follows:
 - a) For girls from 16.4 in 1961 to 19.2 in 1991.
 - b) For boys from 24.17 in 1961 to 25.86 in 1991.
8. The effective couple protection rate has scaled upto 57.7% in 1997 from 23.76% in 1981.

- 16
9. The annual growth rate of population decreased to 2.1% by 1991 from 2.6% in 1981.
10. The progress under immunisation is depicted in Annexure - I.

11. The average number of children of acceptors of Family Welfare methods in 1995-96 was as follows:

a) Vasectomy	2.6
b) Female Sterilisation	2.6
c) IUD	1.3

12. The average age of acceptors of various Family Welfare methods in 1995-96 was as follows:

a) Vasectomy	30.4
b) Female Sterilisation	26.8
c) IUD	24.9

Strategies adopted in implementing Family Welfare Programme.

a) IEC ACTIVITIES: Imaginatively produced informative, educative and communicative material and propagation through multi-media have generated enormous awareness and demand for Family Planning and immunisation services among general public and in particular among eligible couples and mothers.

b) INSTITUTIONS: A vast and closely knit network of 8143 sub-centres, 1676 FHCs, 583 FHUs and 176 hospitals 103 post partum centres, 86 urban FW centres have been established to provide services.

c. MANPOWER DEVELOPMENT: The Officers, Surgeons, Workers and Supervisors are periodically trained in various training centres and their skills and competence are upgraded.

d) SPACING METHODS: Appreciating the potential of spacing methods in the regulations of fertility, campaigns are being organised twice in a year in the months of October and March.

e) COMMUNITY NEEDS ASSESSMENT APPROACH: The success of the programme and the attainment of goals can materialise only if it becomes a people's programme. In due recognition of this, a paradigm shift has been ushered in according to which the needs and sentiments of the community are assessed and incorporated in the action plans formulated for implementing the programme. In this process, quality of service also gets sufficient priority and ensures desired impact.

As a part of involving the community, the 5000 and odd Mahila Arogya Sanghas in rural areas and a host of Non-Governmental organisations are assisting in educational as well as implementation activities.

OTHER SCHEMES: Implementation of special programmes like Post Partum Scheme, Sterilisation-bed Scheme, and Medical Termination of Pregnancy Act are contributing to fertility control and population stabilisation. During 1997-98, 15,448 unwanted pregnancies are medically terminated.

REPRODUCTIVE AND CHILD HEALTH SERVICES PROGRAMME:

The Family Planning Programme has crossed several milestones absorbing new schemes and interventions like E.P.I., U.I.P., C.S.S.M., ORT. It is with the " REPRODUCTIVE AND CHILD HEALTH SERVICES " Programme that it is entering

a new era with a new look and thrust . In deference to the decisions of the International Conference on Population and Development, 1994, held at Cairo, the emphasis is now on providing quality conscious Reproductive and Child Health Services rather than on mere Family Planning. The RCH Programme encompasses Fertility Regulation, Child Survival and Safe Motherhood management of Reproductive Tract Infection, and Sexually Transmitted Infections.

This Programme is externally assisted and has been shaped as a centrally sponsored scheme. Apart from services, its significant components are civil works, hiring the services of consultants, operationalising FRU, appointing contractual staff for promoting institutions deliveries, provision of equipment and evaluation of the services and Facilities.

ANNEXURE-ITARGET ACHIEVEMENT AND PERCENTAGE OF ACHIEVEMENT UNDER FAMILY WELFARE AND
IMMUNISATION PROGRAMME

										(in Lakhs)	
Sl No	Programme/ Method.	1996-97			1997-98			1998-99 upto end of Dec 98			Antici- pated Achievement from Jan to March 99
		T	A	%	T	A	%	T	A	%	
<u>I FAMILY WELFARE</u>											
1	Sterilisation	-	3.84	-	-	3.96	-	-	2.70	-	
2	I.U.D.	-	3.76	-	-	3.72	-	-	2.53	-	
3	CC Users	-	3.59	-	-	3.23	-	-	2.75	-	
4	O.P. Users	-	1.52	-	-	1.56	-	-	1.44	-	

NOTE: FW Programme is declared as Target Free Programme by Government of India.

II IMMUNISATION

1	DPT	11.85	11.51	97.1	10.99	11.16	101.5	11.36	3.85	69.0	3.51
2	Polio	11.85	11.52	97.2	10.99	11.17	101.6	11.36	7.86	69.1	3.50
3	BCG	11.85	12.17	102.7	10.99	11.94	108.6	11.36	7.96	69.1	3.50
4	Measles	11.85	10.67	90.00	10.99	10.33	94.00	11.36	7.17	63.1	4.19
5	TT (PW)	13.0	12.78	98.0	12.08	12.50	103.40	12.41	3.42	67.8	3.99

ANNEXURE II

BRIEF NOTE ON I.E.C ACTIVITIES FROM APRIL 1998 TO NOV. 98

The Information, Education and Communication Wing consists of Information and Publication sections. The IEC activities are carried out in the State through District Level, Deputy District Health Education Officer at sub divisional level and Block Health Educators at Primary Health Centre level. They are responsible to carry out the educational and motivational activities on Family Welfare, Mother and Child Health and other Health Programme through out the year in a phased manner, as per the plan of action.

The main objectives of IEC component under Family Welfare and Mother and Child Health are:

- a) To motivate the eligible couples to adopt small size family as a norm,
- b) To involve community and to ensure their participation in FW & MCH Programme.

The progress achieved under IEC activities from April 1998 to November 1998 is as follows:

Sl. No.	Activities	Annual Target	Achievement Upto Nov.98	Anticipated Achievement from Dec.1998 to March '98
1	2	3	4	5
I) Activities in Mahila Swasthya Sanghas				
1)	Manila Vichara Vinimaya	5488	567	4921
2)	Healthy Baby Shows	5488	1489	3999
3)	Atte Sose Samavesha	5098	320	4778
4)	World Population Day/No Scalpel Vasectomy Training	4332	359	3973
5)	Women's Day Celebration	3373	-	3373

1	2	3	4	5
II. <u>Materials for MSS, PHCs and Grama Panchayats</u>				
1) Metallic Tin Plates on No Scalpel Vasectomy	2,500	-	2,500	
2) Installation of Nirodh Boxes in Hospitals	100	-	100	
III) <u>Local Specific IEC Activities</u>				
1) Production and Procurement of VHS Copies (Folk Songs)	1,000	-	1,000	
2) Photo Exhibits	50 Sets	-	50 Sets	
3) Hearingase on FW & MCH	10	-	10	
IV) <u>Publication Materials</u>				
1) Flip book on FW & MCH	7,200	-	7,200	
2) Buntings on FW & MCH	333 Sets	-	333 Sets	
3) Foldars	2,70,000	-	2,70,000	
4) Programme Information Kit	4,000	-	4,000	
V) <u>Workshops</u>				
1) Publication Workshop	1	-	1	
2) State Level MSS Presidents Workshop	1	-	1	
3) District Level "	2	1	1	
4) Workshop for IMPCO Members	1	-	1	
5) Workshop for ZSS, NGOs and other Developmental Department Staff	1	-	1	
6) Divisional Level I E C Workshop	4	-	4	
7) State Level DHEO/ Dy.HEO Workshop	1	1	-	
8) State Level World Population Day	1	1	-	

1	2	3	4	5
<u>VI) Normal MEM activities</u>				
1) Exhibition (Mini and Major)	-	21,425	20,000	
2) Press Advertisement	-	169	300	
3) Press release	--	377	400	
4) Film Shows	-	802	700	
5) Film Strip shows	-	7,565	5,000	
6) T.V /VCR shows	-	811	700	
7) Multi Media Campaign	-	36	30	
8) Folk Media Programme	-	61	150	

ANNEXURE III

Statement showing Budget provision for the year 1998-99, expenditure upto December 1998 and probable expenditure for the period from 1/99 to 3/99 under the head of Account 2211 - Family Welfare

Rs. in lakhs

S1. No.	Schemes	Budget provision	Expenditure up to 12/98(MMR)	Probable expenditure from 1/99 to 3/99
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I. Generally Sponsored Scheme

1.	Director and Administration	692.34	366.35	325.99
2.	Rural F.W. Services	4475.93	2430.46	2045.47
3.	Urban F.W. Services	396.11	201.92	194.19
4.	R.C.H.	3907.79	921.94	2985.85
5.	Transport	279.51	72.87	206.64
6.	Compensation	1163.32	234.17	874.65
7.	Other Services & Supplies	1163.99	313.04	345.95
8.	Mass Education	114.54	11.85	102.69
9.	Training	400.05	152.66	247.39
TOTAL		12599.08	5270.26	7328.32

II. State Plan

1.	Safe Motherhood and child Survival	3.00	2.60	0.40
2.	State Health Transport Organisation	102.55	78.31	24.24
3.	Transportation of vaccine from Regional Dist. stores	3.00	1.01	1.99
4.	Supply of x drugs under FW Programme	107.66	14.64	93.02
5.	India population project III	22.00	11.42	10.58
6.	Maintenance of equipments	2.00	1.16	0.84
7.	Insurance scheme	1.30	0.69	0.61
TOTAL		241.51	109.83	131.68

III. State non Plan

1.	India Population Project- I	693.16	475.30	222.74
2.	India Population project -III	41.01	25.46	15.55
Total		739.17	500.76	238.29

NATIONAL LEPROSY ERADICATION PROGRAMME

I. Introduction:

Leprosy is a public health problem and also social problem in the State. National Leprosy Eradication Programme (NLEP) was conceived of as a control programme and launched in 1954-55. Its main thrust was early detection, sustained and regular treatment of all patients with 'Dapsone'. This had some limitations like treatment was long leading to irregular treatment and this was leading to development of drug resistance.

To overcome these limitations, Multi Drug Treatment (MDT) was introduced which was brought into all endemic districts which had a prevalence rate of 5 or more per 1000 population. This became the National Policy after 1986 and in Karnataka all districts are covered under MDT in phased manner.

II. Main Objectives:

1. Rendering all infections case, non-infections in a short period by early detection and treatment.
2. Preventing deformities by early detection and prompt treatment.

3. To disseminate correct information about the disease and removing mis-conception by means of Health Education for the community, family and individual.
4. To provide rehabilitation services to the cured persons.
5. Arresting the diseases in all leprosy cases by 2000 A.D.

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MODIFIED LEPROSY ELIMINATION CAMPAIGN PROGRAMME

Modified Leprosy Elimination Campaign has been carried out in the State from 20.4.98 to 25.4.98 as per the Govt. of India guidelines. About 29,450 Searchers were engaged in the programme and enumerated 4,63,80,776 people, examined 3,66,45,454, suspected 75,515 and confirmed 9,881 leprosy cases and treated during the above period.

K A R N A T A K A
-.-.-.-.-

Karnataka is considered as a low endemic state upto end of 31.3.98. There are 12,667 cases. So far, 3,48,863 cases have been cured with MDT from 1986.

1. Infrastructure facilities available for eradication of leprosy in Karnataka is as follows:-

Joint Director (Leprosy), 'EPST', SSA Units - A, DLO's-18, MLCC's - 31, ILCU's - 1A, ULC's - 40, SET Centres - 677, THW's -22, LTC's - 2, LPU's - 2 in addition to this infrastructure, there are 25 Voluntary Organisations are working for eradication of leprosy. There are 1,110 beds available out of which, 410 beds are maintained by Voluntary Organisations for which grant-in-aid is provided by the Govt. of India at the rate of Rs.185/- per bed for adults and Rs.90/- per bed for children.

2. Budget Allocation and Expenditure for the Year

1996-97, 1997-98 and 1998-99 (Upto end of Dec. 98)

Year	100% CSS (Plan)		State (Plan)	
	Budget Provision (in lakhs)	Expendi- ture (in lakhs)	Budget Provision (in lakhs)	Expendi- ture (in lakhs)
1996-97	100.00	83.44	35.00	24.35
1997-98	96.00	111.39	70.00	27.31
1998-99 (Upto 12/98)	108.00	76.83	90.00	28.73

Anticipated Expenditure for Remaining 3 Months

	100% CSS (Plan)	State (Plan)
1.1.99 to 31.3.99	35 Lakhs	10 Lakhs

PHYSICAL TARGET AND ACHIEVEMENTS

Year	New Cases Detected		Cases Cured	
	Target	Achievement %	Target	Achievement %
1996-97	8,000	19,589	23,000	20,883
1997-98	6,000	17,761	19,320	21,202
1998-99 (Upto 12/98)	1,302	947 73%	2,004	1,316 66%

Anticipated Achievement for the Remaining 3 Months

New Cases to be Detected	Cases to be Cured
1,600	2,000

3. MULTI DRUG TREATMENT

As per the main objectives of the MDT Projects were taken in all the 20 Districts in a phased manner from 1985 to 1994.

The prevalence rate has been drastically reduced to early detection, regular treatment, monitoring of self drug administration and follow-up of defaulters. 50% of villages in the State are free from leprosy cases. 40:40% cases are voluntary reporters. This shows awareness treated in the community is very high.

4. Surveillance:- Apart from active surveillance and voluntary reporting SSA Units and EPST Units have been carrying out Epidemiological Surveillance and Sample Survey during 1997-98 in 10 Districts. 510 Villages are covered in 90 schools survey has been covered and 41 new cases were detected.

5. Evaluation:- For evaluation of the programme, monthly and quarterly review is being conducted to know the programme activities.

5.1 Supervision:- Additional Director, State Leprosy Officer, District Leprosy Officers, Medical Officers, Non-Medical Supervisors are taking frequent field visits.

5.2 Consultants:- Appointed by Govt. of India are also evaluating the programme and guide in implementation of the programme. Prompt feed back is given to the Director and District Leprosy Officers.

6. Patches:- Among newlydetected cases, single patch cases are more. This shows early detection. Nearly, 50% cases are single patch cases.

7. Plan of Action for 1999-2000

1. Consolidation of IDT services.
2. Intensification of Health Education Activities.
3. Training for all the Health Personnel and Public in the NLEP.
4. Replacement of wornout vehicles under NLEP.
5. Establishment of Regional Leprosy Training & Research Institute (RLTRI) from Govt. of India.

1002-9

NATIONAL TUBERCULOSIS CONTROL PROGRAMME

National Tuberculosis Control Programme is a Centrally sponsored scheme which is integrated with General Health Services at the peripheral level. This programme is being run by State and Central assistance of 50:50 share.

The State Tuberculosis Centre located in Bangalore is responsible for Planning, Implementation, Supervision, Monitoring and Evaluation of Tuberculosis Programme in the State. The State Tuberculosis Centre has got the following 7 wings:

- 1) Epidemiology and Surveillance
- 2) Bacteriology
- 3) Research Wing
- 4) Administrative Wing
- 5) Monitoring of National TB Programme in the State
- 6) Training to Medical and Para Medical Personnel &
- 7) Clinical section to cater the needs of TB patients who are referred to State Centre.

All the Districts in Karnataka State are provided with District Tuberculosis Centres for implementing National Tuberculosis Control Programme.

Revised National Tuberculosis Control Programme under Phase III with World Bank assistance has been implemented in Bangalore Urban District since November '98. The remaining four Districts will be implemented from next year for which preparatory activities are going on.

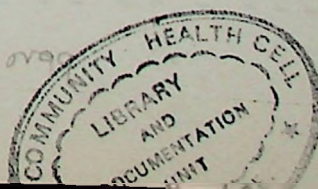
OBJECTIVES OF THE PROGRAMME:

- 1) To provide facilities for diagnosis of TB patients through integrated general health services.
- 2) Detection of new TB cases (sputum positives, x-ray suspects and extra pulmonary cases).
- 3) To provide optimum treatment nearer to the residence of the patients.
- 4) To prevent infection, immunisation is done by doing BCG vaccination.
- 5) Health Education to encourage patients and their relatives, village leaders through Health workers to take full course of treatment.

STRUCTURE UNDER NATIONAL TB CONTROL PROGRAMME:

- 1) One State TB Centre at Bangalore
- 2) 20 District TB Centres (one in each District)
- 3) 5 Additional District TB Centres at Sirsi (Karwar Dist), Sirsi (Tumkur) Dist), Hospet (Bellar-y Dist), and Yadgir (Gulbarga Dist) and Chikkaballapura (Kolar Dist).
- 4) 9 Government TB & Chest Diseases Hospitals
- 5) 2836 TB beds in Government Hospitals
- 6) 172 X-ray Centres
- 7) 805 Microscopic Centres
- 8) 840 Referral Centres
- 9) One After Care and Rehabilitation Training Centre at Bangalore
- 10) Short Course Chemotherapy is provided in all the 20 Districts of the State.

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TRAINING REGARDING NATIONAL TUBERCULOSIS CONTROL PROGRAMME
IS BEING PROVIDED FOR MEDICAL AND PARA - MEDICAL PERSONNEL
AT STATE TB CENTRE DURING 1998-99 (UP TO THE END OF DEC'98).

A)	1. 7th semester Medical students	-	122
	2. 8th Semester Medical students	-	90
	3. House Surgeons	-	67
	4. Doctors from MTI (trainers training) Health & FW Training	-	21
	5. Doctors	-	25
	6. B.Sc., Nursing Students	-	60
	7. Nursing Students	-	30
	8. Senior Health Assistants	-	12

B) TRAINING UNDER R.N.T.C.P:

1) Doctors	-	65
2) Laboratory Technicians	-	23
3) S.T.S.	-	3
4) S.T.L.S.	-	3
5) Treatment Organiser	-	1

PHYSICAL ACTIVITIES:

Target and Achievement during the year 1998-99

New TB Cases Detected			Sputum Examination		
Target	Achievement upto 31.12.98	Percentage	Target	Achievement upto 31.12.98	Percentage
70284	55557	79 %	782172	236175	30 %
-	18519	26 %	-	78725	11 %

(1.1.99 to
31.3.99 anti-
cipated achieve-
vement)

FINANCIAL ACTIVITIES:BUDGET ALLOCATION AND EXPENDITURE INCURRED DURING1998-99 (Rs. in lakhs).

Central budget	Expenditure (upto 31.12.98)	State budget	Expenditure (upto 31.12.98)
Information is yet to be received	- -	320.00 lakhs	Central assis- tance is through supply of + Drugs, X-ray films, and equipments.

1002-10

NOTE ON NATIONAL PROGRAMME FOR CONTROL OF BLINDNESS IN KARNATAKA STATE

I. Introduction:

The National Programme for Control of Blindness formulated in 1975 as a Centrally Sponsored Scheme.

II. Objective :

The Programme aims at reduction in the incidence of the blindness from 1.4% to 0.3% by 2020 A.D. The main cause of blindness is cataract which covers 82%. The population of Karnataka is 4.5 crores. The incidence rate in Karnataka is 1.29%. The estimated incidence is above 4.5 lakhs. To tackle this aspect following infrastructure was developed.

1. One state Ophthalmic cell has been created to plan, monitor and to evaluate the programme.

Minto Ophthalmic Hospital, Bangalore has been upgraded as Regional Institute of Ophthalmology to provide advance eye health care.

2. Five medical colleges have been upgraded to provide higher clinical ophthalmic service. They are

- a. JJM Medical college, Davanagere
- b. J.N. Med. college, Belgaum
- c. KMC Hubli
- d. Medical college, Mysore &
- e. Medical college, Bellary

3. All district hospitals of Karnataka have been developed to provide surgical/clinical ophthalmic services and in addition Gen. Hospitals have been upgraded at Hospet, Udupi, KGF, Gadag and Holenarasipura

4. 29 Dist. Mobile Ophthalmic units are established at Davanagere, Chikmagalur, Bijapur, Raichur, Karwar, Tumkur, Hassan, Bidar, Shimoga, Dharwad, Mandya, Mangalore, Kolar, Mysore, Bellary, Gulbarga, Kodagu, Belgaum, Chitradurga, K.C. General Hospital, Gen. Hospital, Jayanagar at Bangalore, Galkote, Chamara, Janagar, Koppal and Gekak, Tiptur, Yadgir, Gadag, and Hospet.

5. 418 PHCs were developed with a creation of one ophthalmic asst. Post.

6. Three eye banks are functioning at Minto Hospital, Bangalore; K.R. Hospital, Mysore and District hospital Belgaum to provide grafting services.

7. Danida is supporting NPCB Programme by providing following facilities:

- a. Equipment & vehicle to mobile ophthalmic units.
- b. Equipments to Primary Health Centres
- c. Continuous education training Programme for medical officers of PHCs and PHOs

- d. Recurring expenditure of State Ophthalmic cell
 e. Supporting and monitoring of District blindness control societies.

9. In all districts Dist.Blindness Control Societies have been established. The Deputy Commissioner will be the Chairman. The DPM will be appointed by DANIDA who will be the Member Secretary. The following are the functions of BECS.

- Periodically assess the magnitude of the problem of blindness in the District & to monitor and to report.
- To activate voluntary organisation in arranging camps, provide free spectacles to the poor patients who have undergone cataract surgery.
- Grants to voluntary organisation for free eyecamps

DANIDA is giving financial assistance directly to these societies through Government of India.

IV PHYSICAL TARGET & ACHIEVEMENTS UNDER NPCB

YEAR	TARGET	ACHIEVEMENT	PERCENTAGE
1996-97	1,50,000	1,36,683	91.10
1997-98	1,68,000	1,60,323	95.40
1998-99	1,84,800	1,20,245	64.93

Upto Dec. 98

V ALLOCATION OF FUNDS & EXPENDITURE OF STATE PLAN SCHEME (Rs. in lakhs)

YEAR	ALLOCATION	EXPENDITURE	REMARKS
1996-97	35.00	32.56	
1997-98	69.63	85.93	
1998-99	147.00	48.09	Upto Dec.98

VI ALLOCATION OF FUNDS & EXPENDITURE TOWARDS CENTRAL SHARE

YEAR	STATE ALLOCATION	ALLOCATION OF GOVT. OF INDIA	ACTUAL RELEASED	EXPENDITURE	REMARKS
1996-97	110.00	74.44	97.19	97.13	
1997-98	110.00	27.00	20.66	11.96	
1998-99	42.57	61.20	30.60	11.68	Upto Dec. 98

NATIONAL MALARIA ERADICATION PROGRAMME

Malaria Control Programme is Implemented in the State as per the technical guidelines of Government of India.

The main objective of the programme is to prevent deaths due to Malaria and to bringdown the Incidence of Malaria to such an extent that it is no longer a Public Health problem.

Activities implemented under the Programme are as follows:

1. **SURVEILLANCE** : Regular fortnightly surveillance (active surveillance) is done by the Health Assistants visiting house to house to screen the fever cases and administer presumptive treatment after collecting blood smears. Passive surveillance is done at the PHCs, PHUs, Hospitals, Dispensaries etc., where fever cases visiting the Medical Institutions are screened for Malaria and treated with anti malarials.
2. **LABORATORY SERVICES** : Laboratory services have been provided at PHC level, District level and state level for examination of blood smears.
3. **RADICAL TREATMENT** : Malaria cases detected are radically treated with anti malarials. F.T.Ds. and D.D.C's have been established.
4. **INSECTICIDAL SPRAY** : Regular rounds of Insecticidal spray operations with DDT, Malathion and synthetic pyrethroids is taken up in areas reporting APT 2 and above and focal spray in areas below API 2.
5. **ENTOMOLOGICAL STUDIES** : Four Entomological teams are provided one in each division which is functioning for regular entomological studies to study the prevalence of vector species bionomics and resistance status to the Insecticides.
6. Bio-environmental methods of malaria control is also being implemented in state by introduction of larvivorous fishes for control of mosquito breeding and malaria.

PHYSICAL ACHIEVEMENTS :

Incidence of Malaria are as follows :

Year	B/s examined	MPP cases	PI cases	ABER	SPR	SFR	API	RT %
1997	7304866	161775	39877	17.09	2.39	0.54	4.06	97
1998	7350068	107910	23469	-	1.49	0.52	-	97

During the year 1998 there is a decrease of 33.5% of malaria incidence when compared to 1997. Special measures have been implemented in high risk areas for immediate detection and treatment of malaria cases by establishing field laboratories and implementation of revised drug policy as per NMEP guidelines and insecticidal spray with synthetic pyrethroids was taken up in the Districts of Hassan, Chikmagalur, Tumkur, Chitradurga, Mandya, Bijapur and Raichur.

FINANCIAL ACHIEVEMENTS :

Year	PLAN				NON-PLAN	
	Budget allotted		Expenditure		Budget	Expenditure
	State	Centre	State	Centre	allotted	ture
1997	950	950.00	805.89	361.07		
1998	950	700.54	583.67	156.39		

URBAN MALARIA SCHEME

Urban Malaria Scheme is implemented in 8 Cities/towns namely, Bangalore, Tumkur, Chikmagalur, Hassan, Bellary, Hospet, Belgaum and Raichur by the concerned local bodies. Main activities under the programme are weekly anti-larval measures to check the breeding of mosquitoes along with pyrethrum space spray in and around the house where malaria cases are detected.

PHYSICAL ACHIEVEMENTS :

Year	B/s. Examined	Malaria Cases	Pf Cases	Radical Treatment %
1997	103671	12548	382	94.0
1998	121544	7521	598	93.0

FINANCIAL ACHIEVEMENTS

	PLAN			
	Budget Allotted		Expenditure	
	State	Centre	State	Centre
1997-98	100	100	20.15	-
1998-99	55	55	-	-

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NATIONAL FILARIA CONTROL PROGRAMME

Filaria Control activities are continued in the Districts of Gulbarga, Bidar, Bijapur, Raichur, Dakshina Kannada and Uttara Kanada.

Under National Filaria control programme there are 8 Filaria Control Units and 25 Filaria Clinics have been established in the endemic towns.

Main activities under the programme are Anti-mosquito measures carried out through filaria control units, filaria clinics undertake parasitological surveys to detect and treat microfilaria and disease manifestation cases with DEC tablets. One Filaria Survey unit is functioning in Raichur to conduct Filaria Survey in the District.

PHYSICAL ACHIEVEMENTS :

Year	No. of persons examined	No. of +ve person for microfilaria	No. of persons with disease manifestation	No. of persons treated
1997-98	121145	930	4960	5682
1998-99	97516	1253	4420	5872

FINANCE PROGRESS:

The expenditure on materials and equipments is shared on 50:50 basis between State and Centre, entire operational cost is met by the State.

(Rs. in Lakhs)

Year	Allocation		Expenditure	
	Centre	State	Centre	State
1997-98	16.00	16.00	-	6.72
1998-99	6.22	6.00	-	-

DIARRHOEAL DISEASES AND COMMUNICABLE DISEASE CONTROL PROGRAMME

INTRODUCTION

The Diarrhoeal Diseases and Communicable Diseases Control Programme deals with Communicable Diseases like Guinea Worm, Gastroenteritis and Cholera, Kyasanur Forest Disease, Viral Hepatitis, Typhoid etc., and Management of Handigodu Syndrome Disease.

GUINEA WORM ERADICATION PROGRAMME (Centrally Sponsored Scheme)

Guinea worm eradication programme was started in Karnataka during 1981-82 on a 50:50 sharing basis between State and Centre. Out of 20 Districts, 8 Districts were found to be endemic. They are Bellary, Raichur, Gulbarga, Bidar, Dharwad, Karwar, Belgaum and Bijapur. From 1987 to 1990 Bellary, Belgaum, Bidar, Dharwad and Karwar Districts are declared as free from Guinea worm disease. At present Gulbarga, Raichur and Bijapur districts are endemic districts.

OBJECTIVES:

1. Prompt implementation of the programme to eradicate the disease at village level to achieve ZERO incidence.
2. To identify unsafe drinking water sources in the affected villages.
3. Treat the unsafe drinking water sources with Temophos.
4. Bandaging wounds of all Guinea worm patients if traced.
5. Intensifying the search and supervision every month in the infected areas.
6. Intensifying Health Education activities.

PHYSICAL PROGRESS:

incidence of Guinea worm cases are reported during 1998

FINANCIAL PROGRESS

(Rs.in lakhs)		
YEAR	BUDGET ALLOCATION	EXPENDITURE
1998-99	Rs.6.00	1.25 (upto end of December 1998)

GASTROENTERITIS AND CHOLERA

Karnataka is endemic for Cholera/Gastroenteritis almost every year during pre and post monsoon. In order to contain the disease, Government of Karnataka has sanctioned 5 District Cholera Combat Teams and these are located in endemic districts of Karnataka i.e., Gulbarga, Bellary, Bijapur, Chitradurga and Mysore. The main activity of these Cholera Combat Teams is to make epidemiological investigations and also to take containment measures, whenever epidemic occur.

By sinking of Bore wells in rural areas and supply of safe drinking water in Towns by local Municipalities, the incidence of water borne diseases are reduced.

All preventive measures viz., Chlorination of drinking water, treatment of Gastroenteritis/Cholera patients, distribution of ORS packets, disinfection of houses were taken up. Health Education to the Public through All India Radio, Doordarshan, Pamphlets, Posters were given during epidemic.

PHYSICAL PROGRESS

Incidence of Gastroenteritis/ Cholera during the period from 1.1.1998 to 31.12.1998.

GASTROENTERITIS		CHOLERA	
ATTACKS	DEATHS	ATTACKS	DEATHS
26881	501	434	2

VIRAL HEPATITIS

The disease is caused by consumption of contaminated water and food. The incidence of Viral Hepatitis during the year 1998 is as follows:

ATTACKS	DEATHS
2520	2

TYPHOID

The incidence of Typhoid during 1998 was reported in Epidemic form from seven districts viz., Hassan, Chikmagalur, Raichur, Uttara Kannada, Bijapur, Belgaum Shimoga and Dharwad.

ATTACKS	DEATHS
8242	4

The affected villages and towns were taken up for control of fly nuisance and all drinking water sources have been Chlorinated with bleaching powder.

FINANCIAL PROGRESS

For the control of Diarrhoeal diseases the State Government have allocated (under State Sector PLAN Scheme) a sum of Rs. 25 lakhs for the purchase of medicine, disinfectant and to supply the same to the affected district through the Government Medical Stores, Bangalore.

(Rs.in lakhs)

YEAR	BUDGET ALLOCATED	EXPENDITURE
1998-99	25.00	25.00 (upto end of Dec 98)

KYASNUR FOREST DISEASE

This disease is prevalent in the districts of Shimoga, Uttara Kannada, Dakshina Kannada and Chikmagalur.

The disease is prevalent in the Taluk of Thirthahally, Hosanagar and Saraba in Shimoga District, Honnavara, Bhatkal, Kumta, Supa and Yellapura Taluks in Uttara Kannada District, Koppa taluk in Chikmagalur District and Belthangadi Taluk in Dakshinna Kannada District.

In addition, the surveillance activities are carried out by the staff of both field stations and field staff of district Health and FW Officer, for diagnosis, treatment and prevention.

PHYSICAL PROGRESS

The incidence of Kyasanur Forest Disease during 1998 are as follows:

NUMBER OF SUSPECTED CASES ^v		NUMBER CONFIRMED	
ATTACKS	DEATHS	ATTACKS	DEATHS
298	1	47	1

FINANCIAL PROGRESS

(Rs. in Lakhs)

YEAR	BUDGET	EXPENDITURE
1998-99	5.00	1.5 (upto end of Dec. 1998)

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HANDIGODU SYNDROME

This is a peculiar disease of genetic origin found in few villages of Shimoga and Chikmagalur Districts and found mostly in Harijan Families. This disease will cause the disability mainly because of its affliction of joints and bones.

The rehabilitation and symptomatic treatment are given these patients.

PHYSICAL PROGRESS

The incidence of Handigodu Syndrome are as follows:

DISTRICT	NO. OF VILLAGES	NO. OF CASES
Shimoga	49	438
Chikmagalur	30	338
TOTAL	79	776

HEALTH EDUCATION AND TRAINING

The Health Education and Training section of the Directorate is mainly responsible for Planning, Organising and implementation of Health Education Activities and School Health Services in the State including production & supply of Health Education materials and Audio-visual Equipments.

I. Pre-Service Basic Training Courses:

- 1) Multipurpose workers training (Male)
- 2) X-Ray Technicians Training.

II. In-Service Basic Training courses:

- 1) Para Medical Workers Training Course
- 2) Health Inspectors Training Course.

III. In Service Continued Education Training:

In service Training Course under continued education, under IPP IX(K) to Medical and Para Medical personnel of short duration/orientation course are organised at Five Health and Family Welfare Training Centres of the State under different programmes, deputation of officers and officials, within the state and outside the state are being done by the Bureau. The workshop conference of short duration are also being organised by the Bureau.

ACHIEVEMENT DURING THE YEAR 1997-98 AND 1998-99

The World Health Day on 7th April was observed throughout the State on the Theme selected relating to the year 1997-98 and 1998-99 issuing necessary guidelines to all the districts. A major Health and Family Welfare Staff was arranged on the occasion of Mysore Dasara Exhibition at Mysore during these years and also assisted to organise the Health and Family Welfare Exhibition at Hassan, Tumkur and other places.

The Health Education materials like Folders, Posters, leaf-lets etc., were prepared and printed in local languages on different programmes in addition to purchase of Audio-Visual Equipments, File prints, Exhibition sets etc., pertaining to different health discipline.

TRAINING ACTIVITIES

The programme of continued education programme under IPP IX(K) programme with duration of 2 to 3 weeks has been conducted at five Health and Family Welfare Training Centres the state.

Sl No	Name of the Training Centre	1997-98	1998-99 upto end of 11/98
1	Medical Officers	156	206
2	Block Health Educators	144	125
3	Senior Health Asst., (Male & Female)	574	388
4	Junior Health Asst., (Male & Female)	341	2956
5	Senior & Junior Health Assistants (Male and Female) trained by Mobile Team, Bangalore.	145	175

II BASIC TRAINING

Sl No	Name of the Training Centre	1997-98	1998-99 upto end of 11/98
1	Para Medical Workers	127	102
2	Training of MPW (Male)	-	-
3	X-Ray Technicians	-	30

III. Number of Medical and Para Medical Personnel deputed and trained within the state and outside the state and abroad on various training programmes.

Year	Within the State		Outside the State		Abroad.	
	Medical	Paramedical	Medical	Paramedical	Medical	Para Medical
1997-98	50	12	7	5	4	-
1998-99 upto 11/98	200	803	2	8	-	-

SCHOOL HEALTH PROGRAMME

The School Health Programme has been implemented in all the Primary and Higher Primary Schools in Rural areas of the state. Various activities such as medical examination of students, immunisation of children with DT and TT providing treatment for minor ailments and students requiring specialists care are referred to nearest hospital, regularly. Health Education to teachers as well as students regarding personal hygiene, environmental sanitation, drinking water, use of aerines etc., are being inspected regularly.

ACHIEVEMENTS UNDER SCHOOL HEALTH PROGRAMME:

Sl No	Particulars	1997-98	1998-99 upto end of Nov.98
1	No. of students in Schools (I, IV & VII)	3130472	3373185
2	No. of students medically examined.	1585474	477832
3	No. of students found defective	278719	101442
4	No. of students followed up for defects.	193332	74358

IMMUNISATION SERVICES

1	No. of students given D&T Vaccination.	683786	485864
2	No. of students given TT Vaccination.	701025	490977
3	No. of Health Talks given in school.	96706	46131
4	No. of teachers trained under School Programme.	1366	1352

Four Mobile Ophthalmic and Dental Specialists Units attached to Divisional Joint Directors of Health and Family Welfare Services are functioning under this programme in the state.

Sl No	Particulars	1997-98	1998-99 upto end of 11/98
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DENTAL

1.	No. of students examined	46525	17334
2.	I, IV & VII Std.		
2.	No. found defective	9980	3819
3.	No. of students treated	5225	1416

OPHTHALMIC

1.	No. of students examined	48334	19368
2.	No. found defective	1988	424
3.	No. of students treated	1660	493

Budget allocation and expenditure for the year 1997-98 and 1998-99 under State Sector Scheme. (in Lakhs)

Sl No.	Name of the Scheme	<u>OUT LAY</u>		<u>EXPENDITURE</u>	
		1997-98	1998-99	1997-98	1998-99 upto end of 11/98
1	2	3	4	5	6
1	Bureau of Health Edn.,	9.42	-	8.99	-
2	School Health Services	55.00	10.50	55.00	-
3	X-Ray Techn. Training	0.60	0.60	0.60	0.60
4	Support of employment Programme for Women (STEP)	2.00	2.00	2.00	-
5	Financial Assistance to professional organisations.	0.80	1.00	1.00	-
6	Incentive to SC & STs (Under Plan & Sub-Plan)	0.40	30.40	0.05	-
7	Training of Medical and Para Medical personnel.	-	-	-	-

The following are the anticipated achievements from January 1999 to end of March 1999.

1. The ongoing training programmes under continued education and IPP-IX Programme will be continued to the training batches as per annual training calender for the year 1999-2000.
2. The School Health Services and Incentives to SC/ST candidates programmes, Budget, Government order has been received and action will be taken to implement the programme.
3. Action is being taken to observe the World Health Organisation on 7th April 1999.
4. The Action is being taken to start the next batch of X-Ray Technicians training course during the year 1999-2000.
5. Action is being taken for production and procurement of posters, folders, book lets, file books, flash cards etc., according to the requirement of the concerned programme officers of the Directorate.
6. A letter received from Chief Managing Director (P & D) stating that the support of employment programme for women training is completed, the medicines are not required, therefore provided budget is not necessary on the basis of a letter addressed to Government, the above training budget may be cancelled.

NUTRITION PROGRAMMES1998-99.

The major goal to be achieved under Nutrition is reduction of severe and moderate malnutrition by half by 2000 AD of children of below five years of age with the specific goals of:

- i) Control of vitamin 'A' deficiency and its consequences including blindness.
- ii) Reduction in the incidence of low birth weight babies.
- iii) Universal consumption of Iodised salt.
- iv) Reduction of Iron deficiency Anaemia.

THE MID DECADE GOALS INCLUDE:

1. To bring down the level of severe malnutrition to half of the level of 1990.
2. Reduction of low birth weight babies by 10%.
3. Reduction of Iron deficiency anaemia by 20%.
4. Ensure universal consumption of iodised salt.
5. To reduce the prevalence of Bitot spots to less than 1%.
6. Exclusive breast feeding upto 4 to 6 months by 50% of mothers and introduction of proper supplementary feeding by 90% of mothers.
7. All hospitals and maternity centres to be made 'Baby friendly'.

THE EXISTING PROGRAMMES UNDER NUTRITION INCLUDE:

1. Prophylaxis programme against vitamin 'A' deficiency.
2. Integrated Child Development Services Scheme.
3. National Iodine Deficiency Disorder/Control programme.
4. Nutrition Education Activities including Training.
5. Continuous Monitoring of Diet and Nutrition surveys by NNM unit.

I. PROPHYLAXIS PROGRAMME AGAINST VITAMIN 'A' DEFICIENCY:

In order to prevent severe form of vitamin 'A' Deficiency a Mega dose of vitamin 'A' concentrate is administered to the children of 9 months to 3 years. One ml of vitamin 'A' concentrate containing one lakh I.U. of vitamin 'A' is administered to the children of 9 months along with measles immunisation. 2 ml of vitamin 'A' concentrate containing 2 lakh I.U. is administered to the children of 1-3 years orally at six monthly intervals. The vitamin 'A' is supplied by Government of India free of cost.

THE PROGRESS DURING THE YEAR 1998-99 (FROM APRIL-98 TO DECEMBER-98)IS AS FOLLOWS:

	Target	Achievement	%
1. Measles linked vit 'A' programme	1017000	253457	25%
2. Prophylaxis programme for 1-3 years children	2437000	617165	25.3%

II. INTEGRATED CHILD DEVELOPMENT SERVICES SCHEME:

This programme is being implemented with the co-ordinated efforts of Department of Health & F.W. Services and Department of Women and Child Development. A package of services like Immunisation, Supplementary Nutrition, Health Check-up, Referral services, non-Formal pre-school Education, Nutrition and Health Education are provided. The beneficiaries of this programme are 0-6 years children and pregnant and lactating mothers. At present 184 projects are sanctioned and all projects are monitored.

THE PROGRESS FOR 98-99 IS AS FOLLOWS: (UPTO DECEMBER-98)a) SECTORAL LEVEL TRAINING CONDUCTED BY MOS:

QUARTER	TARGET	ACHIEVEMENT	PERCENTAGE
I	5562	3841	69
II	5562	3042	54
III	5562	2781	50

b) ANGANWADI CENTRES VISITED BY MOS FOR HEALTH CHECK-UP:

QUARTER	TARGET	ACHIEVEMENT	PERCENTAGE
I	39855	22127	55.5
II	39855	24001	60.2
III	39855	24111	61.1

c) IMMUNISATION PROGRAMME:

VACCINE	TARGET	ACHIEVEMENT	PERCENTAGE
BCG	1009362	499515	49.4
DPT	1009362	516360	51.1
POLIO	1009362	515326	51
MEASLES	1009362	445952	44.1
TT (M)	1109270	537087	48.4

III. NATIONAL IODINE DEFICIENCY DISORDERS CONTROL PROGRAMME:

National Iodine Deficiency Disorders Control programme was initiated in the State Health Directorate during 1988-89 as 100% centrally sponsored scheme to control the Goitre and other Iodine Deficiency Disorders in the state.

Since April-98 546 cases of Goitre has been reported from 27 districts of the state (upto the end of December-98).

QUALITY CONTROL:

Inorder to maintain the quality of iodised salt at different levels samples of salt under PFA are being collected from wholesale and retailers and analysed at the Public Health Institute, Bangalore.

SAMPLES ANALYSED UNDER PFA:

Total	Satisfactory	Not satisfactory
30	29	1

SAMPLES ANALYSED UNDER NON-PFA:

No. of samples Analysed	Satisfactory	Not satisfactory
941	592	349

Samples of salt at the consumer level are also being tested, by the Health functionaries with the help of field testing kits to know the iodine content of the samples.

SALT SAMPLES TESTED WITH THE HELP OF FIELD TESTING KITS BY THE HEALTH FUNCTIONARIES:

Total samples tested	Above 15 PPM	Below 15 PPM	0 PPM
3,76,678	1,64,849 (43.8%)	1,34,515 (35.7%)	77,314 (20.5%)

HEALTH EDUCATION ACTIVITIES:

During May-98 taluk level Buyers and Sellers meet in three taluks i.e., Koppa, Sringeri and Mudigere & Chickmagalur district were organised to sort out the problems of salt dealers. Similarly District level buyers and sellers meet at Mudigere was also held during August-98.

During Global IDD celebrations of different health education activities like arranging talk on IDD to the school children, group discussion to the Manila Mandal members, Jatha by the School Children and testing of salt with the help of field testing kits by the health functionaries were undertaken in all the districts of the state.

IV. NUTRITION EDUCATION ACTIVITIES INCLUDING TRAINING:

Five Nutrition Education & demonstration units are functioning in 5 districts of Bangalore Division viz., Bangalore(Rural), Kolar, Chitradurga, Shimoga and Tumkur. Cooking demonstrations, Film shows, exhibitions and Group meetings on Nutrition are organised in rural areas.

A joint training programme on MCHN activities was organised for LHV's and Mukhya Sevikas of Bellary District from 24-6-98 to 26.6.98 at Bellary. 41 members attended the training programme.

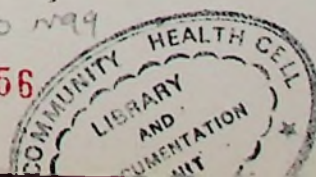
Similar training programmes were organised for LHV's and Mukhya Sevikas of Bijapur district from 17-11-98 to 19-11-98 and for Bagalkot District from 18-11-98 to 20-11-98 at Bijapur. 48 members from Bijapur and 35 from Bagalkot attended the training programme.

V. CONTINUOUS MONITORING OF DIET AND NUTRITION SURVEYS BY NMB UNIT:

NMB unit, a branch of ICMR attached to Bureau of Nutrition is conducting Diet and Nutrition surveys on the protocol of National Institute of Nutrition, Hyderabad. During this year the unit has conducted tribal surveys in Chickmagalur and Dakshina Kannada district.

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HOSPITAL PHARMACY PROGRAMMEINTRODUCTION

'Hospital Pharmacy' is a programme being implemented by the Government of Karnataka under State sector..

OBJECTIVES:

- 1) To organise a technically sound dispensing section, Quality Control System, Central Sterile Supply Division and store Practice in the Hospitals.
- 2) To develop a reliable 'Drug Information Service' for the benefit of staff and the patients/their attendants.
- 3) To manufacture life saving intravenous fluids for use in the hospitals.

Physical Progress of the Hospital Pharmacy Units for the year
1998-99 (UPTO November '98).

<u>NAME OF THE HOSPITAL</u>	<u>NO. OF BOTTLES MANUFACTURED</u>
1 Victoria Hospital, Bangalore	148846
2 Bowring & Lady Curzon Hospital, Bangalore.	63433
3 KR Hospital, Mysore	86070
4 Wenlock Hospital, Mangalore	44531
5 CG Hospital, Davangere	81318
6 KMC Hospital, Hubli	2443 (No production since April '98 due to PWD works)
7 District Hospital, Belgaum	76305
8 District Hospital, Gulbarga	26492
9 Medical College Hospital, Bellary	68641
10 McGann Hospital, Shimoga	68049
11 District Hospital, Mandya	6450 (No production since June '98 due to PWD works)
12 District Hospital, Chitradurga	36694
13 District Hospital, Bidar	35221
14 District Hospital, Bijapur	No production due to want of qualified staff.

ANNUAL PHYSICAL PROGRESS

<u>YEAR</u>	<u>NO. OF BOTTLES</u>
1997-98	1293090
1998-99	744413 (Provisional upto NOV '98)

FINANCIAL PROGRESS (RS. IN lakhs)

<u>YEAR</u>	<u>PLAN</u>		<u>NON PLAN</u>	
	<u>ALLOTMENT</u>	<u>EXPd.,</u>	<u>Allotment</u>	<u>EXPND.</u>
1997.98	3.28	3.23	57.8	-
1998.99	14.82	-	63.60	-

HEALTH EQUIPMENT REPAIRS AND MAINTENANCE UNIT

OBJECTIVES: Procurement repairs and maintenance of the Equipments.

THE MAJOR REGULATORY FUNCTIONS ARE:

- 1) To keep the records of equipments.
- 2) Monitoring of the equipments.
- 3) Maintenance and repairs of the equipments.
- 4) Supply, installation and the Commissioning of equipments.

ACHIEVEMENTS DURING 1998-99 (up to December-98)

Sl No	Head of Account and Budget	Name of Hospital	Amount released
1	"2210.01.110.2.19" Equipment to Dist. & Major Hospitals. Rs.10.13 lakhs.	1. McGann Hospital, Shimoga. 2. KC Gnl.Hospital Bangalore. 3. District Hospital, Madikeri.	Rs.1.00 lakh Rs.2.00 " Rs.2.00 "
		Total	Rs. 5.00
2	"2210.01.800.0.02" Repairs to Hospital Equipments. Rs. 9.00 lakhs.	1. MC Gann Hospital, Shimoga. 2. Dist Hospital, Chitradurga. 3. Dist.Hospital, Udupi 4. Genl.Hospl, KGF 5. Women & Children Hospl, KGF. 6. General Hospital, Channapatna. 7. SNR Hospital, Kolar.	Rs.1.00 Rs.2.00 Rs.0.25 Rs.0.50 Rs.0.50 Rs.0.75 Rs.0.50
		8. MC Gann Hospital, Shimoga 9. -do- Shimoga	Rs.0.17,15 0 Rs.0.34,100
		Total	Rs.6,01,250

STATE HEALTH TRANSPORT ORGANISATION

The main object of this organisation is to provide dependable Transport system for the successful implementation of the various Health and Family Welfare programme by providing prompt services maintains and repairs of the vehicles of this Directorate as well as Directorate of Medical Education. The central workshop attached to this Directorate will undertake repair works of various types of Vehicles and also painting works to Jeeps etc. being done at Central Workshop.

Apart from this Central Workshop there are 25 Districts having mobile workshops in the State (except Bangalore Urban and Rural).

The 25 M.M.Units undertake major and minor repairs to the vehicles of the Health Department coming under district jurisdiction of Zilla Panchayats.

The total vehicles position as on 31.12.1996 in the department is 1542 among them 1324 vehicles are under control of Zilla Panchayat and 218 vehicles are under control of Directorate of Health and Family Welfare services. Out of 1542 vehicles 1087 vehicles are on Road and remaining 455 vehicles are off Road, which are under various stages of repairs, for the year 1998-99, twelve vehicles have been proposed for condemnation and at Central workshop 106 vehicles have been repaired.

LABORATORY SERVICES

VACCINE INSTITUTE, BELGAUM

The Vaccine institute, Belgaum, is manufacturing Anti-Rabies Vaccine (SPL inactivated) and supply the vaccine to all Government Health and Medical institutions and to the Health and Medical Institutions run by local bodies and also the Registered Medical Practitioners. In addition to the UIP Vaccines supplied by Government of India are also stored and supplied to 8 districts of Belgaum and Gulbarga Divisions.

institute also import training to Medical students of Perent Medical Colleges, Health Inspectors trainees, ANMs and Staff Nurses of District Hospitals and Demonstrations have also been arranged in connection with the preparation of Anti Rabies Vaccine and Testing and Mode of Administration of Anti Rabies vaccine.

This institute also undertakes, quality control test of KFD vaccine manufactured at KFD Vaccine Unit of Virus Diagnostic Laboratory, Shimoga. During the year 1998-99 (upto end of December 1998) 16,17,100 ML of Anti Rabies vaccine has been manufactured as against the annual target of 25,00,000 ml. thus covering 64.7 of Annual Target.

BUDGET AND EXPENDITURE FOR THE YEAR 1998-99

(In Rs)

YEAR	BUDGET		EXPENDITURE	
	PLAN	NON PLAN	PLAN	NON PLAN
1998-99	75,000	93,14,000	67,389	60,90,440

PUBLIC HEALTH INSTITUTE

Public Health Institute is the state level Health Laboratory in the department of Health and Family Welfare Services. This institute is headed by the Joint Director (Laboratories).

ACTIVITIES:1. Diagnostic Bacteriological Section

Bacteriological examination of Food Samples and isolation of vibrio cholera in stool samples are undertaken in this section.

2. Water Bacteriological section

Bacteriological examination of water for drinking purposes are being undertaken to confirm whether the water is fit for human consumption.

3. Chemical Examiner's section

Analysis of lokayuktatha cases under Prevention of Corruption Act, analysis of Spiritus Medicinal preparations and Excise samples under Excise Act are being undertaken. Also examination of blood & urine samples for alcohol content.

4. Food Analysis section

Analysis of food samples received under Prevention of Food Adulteration Act 1954 and samples received from other sources are being undertaken.

5. Water Analysis section

In this section, water for potable purpose, and for industrial purposes are being analysed. samples received under Water (Pollution Control Act) Air (Pollution Control Act) are being analysed. Apart from this chemical substances like Alum and Bleaching powder which are used in water treatment are also being analysed.

6. Divisional Food Laboratory

Food and Liquor samples of Bangalore Division are being analysed at this laboratory.

Spray scraping and pesticides ~~water~~ used under National Malaria Eradication Programme are being analysed in this laboratory.

8. Food Inspector's Training Programme

Departmental Graduate Health Assistants are being given Food Inspector's Training under Prevention of Food Adulteration Act.

9. Senior Laboratory Technician's Training Programme

Under this programme, departmental Junior and Senior Laboratory Technicians are being given training.

10. Food Squad

Educating the consumers and merchants regarding hazards of food adulteration by participating in exhibition and through audio-visual aids throughout the State.

PROGRESS REPORT

Laboratory and details of samples.	No. of samples analysed		
	1996-97	1997-98	1998-99 (upto 12/08)
1	2	3	4
1) Diagnostic Bacteriology Laboratory:			
a) Stool samples	3151	3509	1902
b) Food samples	43	115	-
2) Water Bacteriology Laboratory:			
a) Drinking water	1850	2225	1812
3) Chemical Examiner's Laboratory:			
a) Spiritus Medicinal Preparation	60	154	23
b) Liquors	192	93	71
c) Bac Blood & Urine	70	91	49
d) Lekhayuktha cases	86	105	80

1	2	3	4
4) Food Laboratory:			
a) Under Prevention of Food Adulteration Act	1549	468	847
b) Other Food samples	621	176	532
c)			
5) Water Analysis Laboratory:			
a) Potable water	639	407	364
b) Effluent under water Act	68	02	27
6) Divisional Food Laboratory:	184	228	224
7) Pasteurization Laboratory:	436	30	111

FINANCIAL POSITION:

Revenue/Income during the year (Upto 12/98)
comparison with corresponding figures of last year
two years:

year	Revenue receipts
1996-97	Rs. 1,51,387
1997-98	1,32,356
1998-99 (Upto 12/98)	91,620

ANNUAL BUDGET AND EXPENDITURE FOR 1998-99 (Upto 12/98)
with corresponding figures of last two years:

Year	Budget Rs.	Expendi- ture Rs.	Percent- age
1996-97	96,17,000	69,24,957	72.1
1997-98	95,59,700	62,12,695	64.5
1998-99 (Upto 12/98)	92,40,500	38,50,328	42.2

CENTRALLY SPONSORED SCHEMES (100%)

Name of the Scheme	Budget provision (Rs. in lakhs)	Remarks
1. Supply of Laboratory Equipment under P.F.A. Act	11.25	G.O. issued. Stores purchase dept. has been addressed to supply the equipments.
2. Providing Laboratory facilities to 100 Primary Health Centres	7.50	G.O. issued. Action is being taken to address the S.P.D.

GOVERNMENT MEDICAL STORES-BANGALORE

Government Medical Stores, Bangalore, is Central Store catering to the Medical and Health Institutions in the State.

The Main objective of the Government Medical Stores :

1. To procure drugs chemicals, from the rate contract firms and such other sources such as Public Sector undertakings, with the specific approval of Government to the extent of the budget allocated and to supply the drugs so procured to the needy Medical and Health Institutions as per their Indents and budget provision.
 - a) To effect timely supply of the procured items to all the concerned institutions, and to maintain accurate accounts Government Medical Stores has computerised arrangements. The Drugs are also supplied to the needy institutions in the event of emergencies like flood, natural calamities, resulting in epidemics etc., Drugs are also supplied to the needy institutions under National Programmes such as Family Welfare, Prevention and Control of Blindness, Leprosy Eradication Programme etc.,
 - b) The Government Medical Stores will have a reserve stock of Drugs of about Rs.7.00 crores for meeting the urgent needs.
2. The therapeutic committee cum experts decide the number and items of Drugs to be tendered, and to procure the same after rate contract is awarded. The High Power Committee after examining the recommendations of the experts Committee recommends to the Government the items to be procured with the rates and the forms from whom to procure etc.,
3. To arrange for proper accounting and maintenance of the store, the main store is divided into sub-stores as under :

i) 'A' Stores (Injections)	- Injections
ii) 'A' Stores (Tablets)	- Tablets and Capsules
iii) 'B' Stores	- Powders, Ointments, IV Fluids, and disinfectants
iv) 'C' & 'D' Stores	- Instruments, Bandage Cloths, Stature materials etc.,

India Population Project-IX(K)


Programmes, Achievements undertaken during the year 1998-99
under India Population Project-IX(K)

During 1998-99 totally construction of 315 sub-centres, 14 Primary Health Centres and 43 Medical Officers quarters works have been completed in the selected 13 districts of the state under IPP-IX(K). Also construction works of State Health & Family Welfare Training Center in Bangalore, 8 Dist. Training Centers, 4 Junior Health Assistants (Female) Training Centers and 1 Health & Family Welfare Training Center in Mysore have been completed. Apart from this repairs of the all 1225 buildings have also been completed.

In Training sector under IPP-IX(K), totally 3994 different health staff including Medical Officer's have been provided training during the year 1998-99.

During the year 1998-99, action has been taken to put 1000 metallic tin boards having the aims of the IPP-IX(K) in K.S.R.T.C. buses. Also, to bring awareness among the rural people about Health & Family Welfare, 12 Tele serials, 11 Tele-Films and 100 V.H.C. copies of telefilms have been provided for exhibition under I.E.C. To get cooperation of N.G.Os for implementation of the Project, 3 workshops have been conducted.

During the year 1998-99, action has been taken to supply furnitures to the buildings which are already completed and action has also been taken to provide computers to each Dist. Hospital.



POPULATION CENTRE, BANGALORE.

I. INTRODUCTION

The main objective of the Population Centre is to assist the Government of Karnataka, especially the Directorate of Health and Family Welfare Services, in implementing various Health and Family Welfare Programme more effectively and efficiently by undertaking various research and evaluation studies and organising in-service training programmes for various categories of officials.

II. ADMINISTRATION

During the period under report Dr.P.J.Bhattacharjee, Assistant Director is continuing in additional charge of the post of Director.

Staff Position as on 31.12.1998

Category of post	Sanctioned number of posts at the end of the year	Number of filled-in posts			
		Male	Female	SC	ST
A	15	4	2	1	-
B	3	-	-	-	-
C	44	16	9	5	-
D	7	2	1	-	1
Total	69	22	12	6	1

III. FINANCIAL DETAILS

Budget allotment and expenditure for the year 1998-99

Head of Account: Plan: "2211 Family Welfare - 108 Selected Area Programme - 071 IPP-IX (Karnataka) 102 - Special grants.

Non-Plan: "2211 Family welfare - 108 Selected area Programme - Including IPP-01-India Population Project - Population Centre".

Item	Budget proposed for 1998-99	Expenditure incurred upto Dec. 98
	Rs.	Rs.
<u>Plan</u>		
Usefulness of the training granted to the tribal girls	25,000/-	25,000/-
<u>Non-Plan</u>		
1. Pay of Officers	7,39,000/-	2,59,826/-
2. Pay of Staff	11,47,000/-	7,26,519/-
3. Dearness Allowance	28,16,000/-	15,19,442/-
4. Other Allowance (including medical expenses)	4,49,000/-	2,64,407/-
5. Office Expenditure	4,00,000/-	50,044/-
6. Motor vehicles	2,00,000/-	8,665/-
7. Travel Expenses	1,00,000/-	8,947/-
Total	58,51,000/-	27,92,810/-

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Total	58,51,000/-	27,92,810/-

ACTIVITIES OF POPULATION CENTRE DURING 1996-99I STUDIES COMPLETED

1. Perception of People about Quality of Medical Services in Secondary Level Hospitals in Kolar District.
2. Status of Primary Health Care in Hassan District.
3. A District Profile of Karnataka on Socio-Economic, Demographic and Family Welfare Indicators.
4. Concurrent Evaluation of Family Welfare Slogans Printed on KSTRC Tickets.

II STUDIES IN PROGRESS

1. Evaluation of ANM Training for Tribal Girls under the Innovation scheme of IPP-IX.
2. Multi-Indicator Cluster Survey.
3. A study on benefit accrued from IPP-I and IPP-III in Karnataka.
4. Role of Mahila Swasthya Sangha - A Study.

Externally Aided projects

Karnataka Health Systems Development Project

A grant of Rs. 80 Crores has been provided for this project during the year 1998-99. The progress achieved under various components of the project to end of December, 1998 is as under

1. *Civil works*

Out of 201 hospital building works, 46 Architects have been engaged for 200 hospital works. Preliminary drawings have been cleared by World Bank Architect for 170 hospital works. Estimate have been approved for 158 works, 119 works have been awarded after evaluation of bids under National Competitive Bidding, 6 works are taken up on Local Shopping Procedure. In addition to this World Bank Architect has reviewed and cleared the preliminary drawings for 14 hospitals with some observations and formal clearance is awaited. In addition to this, Karnataka Health Systems Development Project has also undertaken improvements to existing Blood Bank Buildings and construction of new Blood Bank buildings, improvements to existing District Laboratories and construction of new District Laboratories and District Workshop Buildings. Karnataka Health Systems Development Project has also constructed a Workshop buildings. Karnataka Health Systems Development Project has also constructed a State Surveillance Unit building in E.D. Hospital campus at Bangalore and it has started functioning. So far 12 hospital buildings are completed and handed over.

Equipment (Medical and others)

Equipment and machinery required for the hospitals coming under this project have been provided at a cost of Rs. 2,58,78,179/- during the current year. Tenders have been invited on 10-8-1998 and 28-10-1998 in respect of equipment and machineries required for the hospitals included in III and IV phases of the project and the same will be provided. Action has also been taken to provide necessary medical equipment to the Laboratories.

3. *Vehicles*

The World Bank has already given approval to procure a total of 116 Ambulances for the District and Taluk Hospitals covered under this project. Tenders were invited in this regard on 6-10-1998 and after evaluation, the same has been approved by the World Bank. Orders have been issued for the supply of these Ambulances on 4-2-1999. The total cost of these Ambulances is Rs. 33,58,547/-.

4. *Medicines*

During 1998-99, orders have been placed for the supply of 54 life saving drugs and other drugs required by the hospitals on various companies. These drugs have been partially supplied and full suppliers are expected before the end of March 1999. The cost of these drugs is

Rs. 10,44,47,963/-. In addition, action has also been taken to supply the required chemicals & Speciality Blocks of Hospitals and District Laboratories.

5. Local Training

During the period April 1998-January 1999, a total of 230 Specialist Doctors have been trained in various disciplines. Training in Paediatrics was provided at Indira Gandhi Institute of Child Health; Orthopaedics at HOSMAT & Malya Hospital, ICCU at Sri Jayadeva Institute of Cardiology, OBG at M.S. Ramaiah Medical College & Hospital, Neurology, Neuro-surgery, Psychiatric and Mental Health at NIMHANS, Dental Surgery at Government Dental College, Ultrasonography at Anjana Diagnostic Centre, Sreenivasa Scanning Centre and Victoria Hospital, ENT at Basavanagudi Care Centre, General Surgery at SDS TB Sanitorium and Rajiv Gandhi Chest Diseased Hospital and Medico-legal Training at Victoria Hospital.

At District Level, 110 Doctors have been trained so far. Administrative Training has been provided to 73, Induction Training to 135, Equipment Induction Training to 34 persons to end of November 1998. During the period April 1998 to January 1999, a total of 1120 Nurses have been trained in various disciplines. So far 57 Nurses have been trained in Equipment Management.

Under this programme, 21 Doctors have been trained abroad and one Doctor is continuing Post-graduate studies abroad.

In order to provide better health care facilities to SC/ST population, Yellow Card Programme has been introduced which is continued. Since a large number of "D" Group posts are vacant in several hospitals, the non-clinical activities have been hampered. Therefore, the non-clinical activities have been entrusted to private agencies in respect of 6 hospitals and action has taken to extend this system to 12 more hospitals.

German assisted KfW Project

An amount of Rs. 4.00 Crores has been released for the project. The project envisages renovation and expansion of 51 hospitals of Gulbarga Revenue Division. In the I Stage, 26 hospitals are proposed to be covered. Under civil works component, out of 26 hospitals, preliminary drawings in respect of 23 hospitals have been approved. Final drawings and estimates for these 23 works are under preparation. The objectives of this project are similar to those of Karnataka Health Systems Development Project. In accordance with the agreement between KfW and the World Bank, items not provided under KfW project will be provided under Karnataka Health Systems Development Project.

OPEC assisted Project at Raichur

In order to cater to the medical needs of the people of North Karnataka a modern Super Speciality Hospital with a Bed Strength of 350 has been taken at Raichur at a cost of Rs. 26.90 Crores with the assistance of OPEC. The work will be completed by the end of March 1999. The existing District Hospital at Raichur will be improved with the assistance of OPEC at cost of Rs. 2.86 Crores, which will function as Women & Child Hospital.

DEPARTMENT OF INDIAN SYSTEMS OF MEDICINE & HOMOEOPATHY

The Department of the Indian Systems of Medicine and Homoeopathy is rendering Medical relief to the Public in Ayurveda, Unani, Yoga, Naturopathy and Homoeopathy Systems of Medicine and regulates Medical Education, Drugs Manufacture and Practice of Medicine in these Systems.

The Director of Indian Systems of Medicine and Homoeopathy is being assisted by the following Officers at the Directorate as well as at the Divisional level.

1. Deputy Director. (Ayurveda).
2. Deputy Director. (Unani).
3. Deputy Director. (Homoeopathy).
4. Physician Gr-I. (Naturecure & Yoga).
5. Administrative Officer.
6. Accounts Officer.
7. Deputy Director, Divisional Offices of Gulbarga, Mysore and Belagaum.

The Department is provided with a Budgetary Provision for the year 1997-98 and 1998-99 is as follows:-

(Rs. in lakhs).							
1997-98.				1998-99.			
STATE SECTOR			Z.P. SECTOR		STATE SECTOR	Z.P. SECTOR	
Budget.	Revised.	Expr.	Budget.	Expr.	Budget.	Budget.	
Plan.	150.00	101.85	99.05	311.49	89.69	200.00	247.41
Non-Plan.	1196.35	1037.07	982.27	982.27	1266.12	1121.93	
		1044.23					
C.S.S.	6.00	6.00	2.17	-	-	6.00	-
TOTAL:	1352.35	1152.08	1138.29	1293.76	1072.16	1472.12	1369.34

The Expenditure under Plan provided to Z.P.'s is available only through M.M.R. figures. Since the Non-Plan Expenditure is maintained by the Z.P.'s and Budget directly released by the Govt., the expenditure under Non-Plan of Z.P.'s is not available. Hence it is presumed the entire amount provided under Non-Plan to Z.P.'s is spent.

ACHIEVEMENTS FOR THE YEAR 1998-99. (UP TO 31-12-1998):-STATE SECTOR:-

1. 126 Physicians are appointed through Public Service Commission for the year 1998-99.
2. One Post of Drug Inspector (Homoeopathy) and other essential Posts have been created for Directorate of Indian Systems of Medicine and Homoeopathy.
3. A divisional Office of ISM&H. has been sanctioned to Bangalore Division and essential posts have been created to divisional Office of ISM&H, Belgaum.
4. A 10 Bedded Govt. Unani Hospital has been sanctioned to Bellary.
5. Govt. have accorded to Purchase One Vehicle (Jeep) for Divisional Office of ISM&H., Belgaum.
6. The Bed Strength of Unani Unit at Sri.Jayachamarajendra Institute of Indian Medicine, B'lore has been increased from 75 to 100 and one 10 Bedded Homoeopathic Unit has been Established at Govt. Ayurvedic Hospital, Bijapur.
7. Ladies Hostels one each to Mysore and Bellary have been Sanctioned.
8. 5 Teaching Posts to Taranatha Govt. Ayurvedic Medical college, Bellary and essential teaching and Non-Teaching posts to Govt. Unani Medical college and Govt. Homoeopathic-Medical college, B'lore have been created.

DISTRICT SECTOR:-

1. 5 Taluk level hospitals have been sanctioned and 2 Ayurvedic dispensaries have been Upgraded in to 6 Bedded Hospitals.

THE FOLLOWING PROPOSALS ARE UNDER THE CONSIDERATION OF GOVT:-

1. Creation of essential Posts to Govt. Naturecure and Yoga college of Mysore.
2. Establishment of ISM&H. Dispensaries in the Rural areas.

MEDICAL RELIEF:-

There are 92 Hospitals and 582 Dispensaries functioning in the State as on 31-12-98. The System wise breakup is given hereunder.

Name of the Systems.	Hospitals.		No. of Dispensaries.
	No. of Hospitals.	No. of Beds.	
Ayurveda.	68	1077	507
Unani.	11	202	45
Homoeopathy.	06	90	25
Naturecure.	03	26	05
Yoga.	03	15	--
Siddha.	01	10	--
TOTAL:	92	1420	582

AYURVEDA:-

16 Ayurvedic Hospitals are at District level of which the following 3 Serves as Teaching Hospitals.

Beds Strength. (Ayurveda).

1. Sri.Jayachamarajendra Institute of Indian Medicine, B'lore,	225
2. Govt. Ayurvedic Medical college and Hospital, Mysore.	140
3. Govt. Taranatha Ayurvedic Hospital, Bellary.	85

The remaining 13 Hospitals at Dist. level as well as the Hospitals functioning in the Rural areas with the Bed Strength of 6 to 10 Beds is noted below.

Sl.No.	Name of the Place.	Bed Strength.	Bed Strength.		
			10 Beds.	6 Beds.	5 Beds.
1	2	3	4	5	

DIST. LEVEL HOSPITALS:-

1. Bijapur.	50
2. Shimoga.	40
3. Hubli.	25
4. Karwar.	10
5. Mandya.	25
6. Hassan.	25
7. Madikeri.	10
8. Tumkur.	15
9. Bidar.	15
10. Raichur.	15

TALUK LEVEL HOSPITALS:-

13	24	-
----	----	---

RURAL AREAS HOSPITALS:-

01	12	1
----	----	---

1	2	3	4	5
11.	Koppala.	06		
12.	Chamarajanagara.	10		
13.	Gadaga.	10		
14.	Bagalkot.	10		

There are 507 Ayurvedic dispensaries functioning in the State.

UNANI:-

There are 11 Unani hospitals and 45 dispensaries in the State. The Unani wing of 100 Beds attached to Sri.Jayachamarajendra Institute of Indian Medicine, B'lore is serving as a Teaching Hospital for Govt. Unani Medical college, B'lore. 20 Beds are provided in Govt. Ayurvedic Medical college & Hospital, Mysore. 10 Beded Unani Wings are functioning at Bidar, Tumkur, Shimoga, Bijapur, Rayachur and Ramanagara. A 10 Beded Govt.Unani-Hospital has been sanctioned to Bellary during the year 1998-99. 2 Six Beded Unani hospitals are functioning at Manvi and Thimmapur Rangampet.

A Clinical Research Unit in Unani Systems of Medicine has been functioning at Sri.Jayachamarajendra Institute of Indian Medicine, Bangalore by the Govt. of India.

HOMOEOPATHY:-

One Govt. Homoeopathic Hospital is functioning at B'lore. with 40 Beds as a Teaching hospital to Govt. Homoeopathic Medical college, B'lore. A 10 Beded Homoeopathic hospital is functioning at Somwarpet. Further 10 Beded Homoeopathic wings are established One each at Mysore, Hassan and Shimoga. During 98-99 One 10 Beded Homoeopathic wing has been sanctioned to Govt. Ayurvedic Hospital, Bijapur. There are 25 Homoeopathic Dispensaries functioning in the rural areas of the State.

NATURECURE:-

Two 10 Beded Naturecure hospitals are functioning at B'lore and Bellary. One 6 Beded hospital is functioning at Mysore. There are 5 Naturecure dispensaries functioning in the State.

YOGA:-

Yoga wings of 5 Beds each have been established to provide treatment in Yoga Therapy at Sri.Jayachamarajendra-Institute of Indian Medicine, B'lore, Govt. Ayurvedic Medical college and Hospital, Mysore and Taranatha Ayurvedic Hospital, Bellary. Further Yoga Camps are being conducted.

SIDDHA:-

A siddha wing of 10 Beds has been provided in the Sri.Jayachamarajendra Institute of Indian Medicine, B'lore.

RESEARCH:-

Research on Madhumeha (Diabetics) has been under taken by the Research Wing at Sri.Jayachamarajendra Institute of-Indian Medicine, Bangalore.

MEDICAL EDUCATION:-

AYURVEDA:- (B. A. M. S. COURSE):-

There are 3 Govt. Ayurvedic Medical colleges and 39 Private Ayurvedic Medical colleges functioning in the State, Of which 5 Ayurvedic Medical colleges are under Grant-in-Aid. The names and Intake of Govt. Ayurvedic Colleges are given below.

<u>Sl.No.</u>	<u>Name of the College.</u>	<u>Intake.</u>
1.	Govt.Ayurvedic Medical college, B'lore.	60
2.	Govt.Ayurvedic Medical college, Mysore.	50
3.	Taranatha Govt. Ayurvedic Medical-College, Bellary.	50

The Intake capacity of the Private colleges is fixed from 25 to 75 on the availability of the facilities and infrastructure of the concerned colleges.

Apart from this Post-Graduate Degree courses in Ayurveda are being conducted in the following specialities at B'lore, Mysore and Bellary Ayurvedic Medical colleges.

<u>Sl.No.</u>	<u>College.</u>	<u>Subject.</u>	<u>Intake.</u>
1.	Govt.Ayurvedic Medical college, Bangalore.	Dravyaguna. Shalakyatantra. Shalyatanta.	07 07 07
2.	Govt.Ayurvedic Medical college, Mysore.	Kayachikitsa.	10
3.	Taranatha Ayurvedic Medical College, Bellary. (100% C.S.S.)	Rasashastra & Bhyshajyakalpna.	07

UNANI:- (B.U.M.S. COURSE):-

One Govt. Unani Medical college is functioning at B'lore with an Intake capacity of 50. Further Govt. have sanctioned 2 Private Un-aided Unani Medical colleges One each to Tumkur and Gulbarga with an intake strength of 25.

HOMOEOPATHY:- (B.H.M.S. COURSE):-

There are 15 Homoeopathic Medical colleges in the State., of which One is run by the Govt. at B'lore with an intake of 40. In the remaining 14 Homoeopathic Un-aided Medical Colleges the intake strength is fixed from 25 to 100 on the availability of the facilities and infrastructure of the concerned colleges.

NATURECURE:-

One Govt. Naturecure and Yoga Degree college has been sanctioned during 98-99 to Mysore. The intake capacity of the college is 25. It will function from 1999-2000 academic year. Further Sri. Dharmastala Manjunatheshwara College of Naturecure and Yoga is functioning at Ujire with an intake capacity of 40 Students. Further a private Naturecure and Yoga college is functioning at B'lore (Zindal - Institute of Naturopathy and Yogic Sciences) with an intake capacity of 40.

DRUGS CONTROL:-

The Department regulates manufacture and Sale of Medicines of Indian Systems of Medicine and Homoeopathy under the Provision of Drugs and Cosmetics Act 1940 and the rules thereunder.

The number of Licence issued to for manufacture of Ayurveda, Unani and Homoeopathy Medicines as on 31-12-98 are as follows.

Systems,	No. of Manu- facturing Licence Hol- ders,	Loan Licence,	No. of Sales Licence Holders,	
			Wholesale,	Retail.
Ayurveda.	241	23	-	-
Unani.	14	01	-	-
Homoeopathy.	10	--	60	108

GOVT. CENTRAL PHARMACY, BANGALORE:-

Ayurveda and Unani Medicines are being manufactured at the Govt. Central Pharmacy, B'lore. Out of the Budget Provision made for the purchase of Medicines for Hospitals and Dispensaries 60% of the medicines are being supplied by the Govt. Central Pharmacy, Bangalore. A Drug Testing Laboratory is also attached to this Institution, to ensure the quality of Raw Drugs and Medicines. The Budget Provision for drugs during 98-99 is Rs.72.00 lakhs.

HERB GARDEN:-

Small Herb Gardens are being maintained at B'lore, Mysore and Bellary which are attached to the college. The Medical Plants required daily for demonstration of students and green herbs required daily for the hospitals are being raised in these herb Gardens. Further, Dhanwantri Vana has been established in 30 acres of land at Nagarabhavi near B'lore University Campus for development of Herbarium and about 500 Herbs are raised.

DRUGS CONTROL DEPARTMENT

The Drugs Control Department in Karnataka is functioning as an independent Department since 1962 under the Health & Family Welfare Department, Government of Karnataka with the Drugs Controller as the Head of Department. There are three wings in the Department:-

ADMINISTRATION AND ENFORCEMENT,
DRUGS TESTING LABORATORY,
PHARMACY EDUCATION.

I. ADMINISTRATION AND ENFORCEMENT WING:-

The main function of the Department is to protect the health of the consumers by enforcing the provisions of Drugs and Cosmetics Act, 1940 and Rules thereunder and other allied Acts and exercising strict control and vigilance so that the drugs which are manufactured and sold in this State are of standard quality, safe and effective and are available at controlled prices.

The department enforces the following Central Legislations through its administrative machinery:-

1. Drugs and Cosmetics Act, 1940 and Rules thereunder.
2. Drugs (Prices Control) Order, 1955.
3. Drugs and Magic Remedies (Objectionable) Advertisements Act, 1954 and Rules thereunder.

4. The Pharmacy Act, 1948 and Regulations thereunder.
5. The Poisons Act, 1919 and Karnataka Poisons Rules, 1966.
6. Narcotics and Psychotropic Substances Act, 1985 in relation to Drugs covered by the Drugs and Cosmetics Act & Rules thereunder.

A. Administrative and Enforcement Wing:

Presently there are 616 Licensees comprising of 269 manufacturing units, 273 Loan Licensees and 67 Cosmetics manufacturing Licensees and 3 repacking units (large and small scale) engaged in the manufacture of both bulk drugs and formulations. There are 83 Blood Banks operating in the State and approved 8 Testing Laboratories are functioning. There are 12,747 dealers, namely, Chemists and Druggists, Wholesale dealers and Restricted licensees who sell House-hold Remedies.

ENFORCEMENT OF THE DRUGS AND COSMETICS ACT, 1940 AND
RULES THEREUNDER.

The following are the details pertaining to the prosecutions instituted under this Act and Rules during the year 1998-99 (April 1998 to December 1998).

Sl. No.	Particulars	As per	
		D & C Act	D.P.C.O.
1.	Prosecutions pending at the beginning of the year (i.e., as on 1.4.1998)	163	44
2.	Prosecutions launched (as on 31.12.1998)	24	4
3.	Total (as on 31.12.1998)	187	48
4.	Prosecutions decided (as on 31.12.1998)	2	-
	(a) Cases ended in acquittal /discharge as on 31.12.1998.	1	-
	(b) Cases ended in conviction (as on 31.12.1998)	1	-
5.	Prosecutions pending (as on 31.12.1998)	185	48

II. DRUGS TESTING LABORATORY:-

The Drugs Testing Laboratory was started during the 3rd Five Year Plan period. At present the laboratory is equipped to analyse all types of drugs and cosmetics except Vaccines, Sera, Blood & Blood Products. Analytical facilities are extended to the samples drawn by the Drugs Inspectors of Delhi.

ACHIEVEMENTS (FROM 1.4.1998 TO 31.12.1998)

Number of drugs samples analysed.	1090
Number of samples found to be standard Quality.	922
Number of sample found to be not of standard quality.	91
Number of Samples partly analysed.	97

III. PHARMACY EDUCATION:-

Pharmacy Education consists of two wings viz:-

Government College of Pharmacy at Bangalore
Board of Examining Authority at Bangalore

The Government College of Pharmacy was started in the year 1964 under the Administrative Control of this Department. The Pharmacy Education imparted here is at Diploma, Degree and Post Graduate levels. The Government of India is giving 100% assistance for the development of Post-graduate course in Pharmacy.

The following disciplines are established under the Post-graduate Courses:-

Pharmaceutical Technology,
Pharmacology,
Pharmacognosy,
Pharmaceutical Chemistry.

STATISTICS (FROM 1.4.98 TO END OF 31.12.98)

	<u>Appeared</u>	<u>Passed</u>
<u>Number of B.Pharm</u>		
students passed		
- <u>Rajiv Gandhi Health University</u>		
- I Year	46	23
- II Year	23	18
- <u>Bangalore University</u>		
- III year	43	22
- Final year	23	13
<u>Number of M.Pharm</u>		
students passed		
- <u>Rajiv Gandhi Health University</u>		
- Part I	23	12
- Part II	18	18

The Board of Examining Authority under the Chairmanship of the Principal, Government College of Pharmacy, Bangalore is functioning entrusted with the responsibility of enforcing Education Regulations stipulated by the Pharmacy Council of India at Diploma level in this State and to conduct examinations at Diploma level for the students admitted in the Government and Private Pharmacy Colleges in the State. There are 95 Diploma Colleges imparting Pharmacy Education.

ACHIEVEMENTS (FROM 1.4.98 TO END OF 31.12.98)

	<u>ER-81</u>	<u>ER-91</u>
Number of students appeared for a) Preliminary D.Pharm	1269	1507
b) Number of students passed.	217	348
c) Number of students appeared for Final D.Pharm	2171	500
d) Number of students passed in Final D.Pharm	382	174

STATEMENT SHOWING THE ACHIEVEMENTS OF DRUGS CONTROL
DEPARTMENT DURING 1998-99.

- (1) Large scale investigation of violations by manufacturers of prices fixed by Government of India has been taken up and an exclusive Drugs Price Control Cell for investigation has been set up in the department.
- (2) With a view to ensure quality of drugs supplied to the Government institutions and hospitals, G.M.P Certificates as per W.H.O guidelines have been issued to units who are following WHO G.M.P norms.
- (3) Administrative sanction has been given for construction of 4th floor at the Government College of Pharmacy to augment the laboratory facility and the work has started.
- (4) Computer section has been established at the Government College of Pharmacy for the benefit of the students.

FINANCE

The following is the details of Budget Allotment and Expenditure for the year 1998-99 (upto Dec.98)
(Rs.in lakhs)

Sl. No.	Budget Head	Budget allotment for 98-99		Expenditure during 98-99	
		Plan	Non-plan	Plan	Non-plan
1	2	3	4	5	6
				(upto Dec.98)	
1.	<u>2210-06-104-0-01</u> Drugs Controller.	-	196.59	-	99.64
2.	<u>2210-06-104-0-02</u> Drugs Testing Laboratory.	1.00	106.75	-	55.13
3.	<u>2210-06-104-0-14</u> Govt.College of Pharmacy	15.00	109.95	-	35.29
4.	<u>2210-06-104-0-04</u> Addl.Tech & Supporting staff.	2.00	8.14	-	3.85
5.	<u>2210-06-104-0-05</u> Vigilance Cell	-	2.04	-	1.12
6.	<u>2210-06-104-0-06</u> Legal Cell	-	-	-	-

1	2	3	4	5	6
7.	<u>2210-06-104-0-07</u>	36.33	5.49	6.01	1.91
	Blood Bank				
8.	<u>2210-05-104-0-08</u>	2.00	-	--	--
	Enforcement Scheme				
9.	<u>2210-05-104-0-09</u>	9.67	15.47	1.51	8.60
	Upgradation of Dist. Offices				
10.	<u>2210-06-104-0-11</u>	2.00	-	-	-
	Consumer Awareness On Drug & Cosmetics				
11.	<u>World Bank Assisted Project</u>				
	<u>2210-05-105-1-32</u>	1.00	-	-	-
	strengthening of Enforcement machinery And Drugs Testing Laboratory.				
12.	<u>4210-03-105-2-01</u>	31.00	-	-	-
	Capital outlay buildings				
Total:		100.00	444.43	7.52	205.00

1	2	3	4	5	6
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CENTRALLY SPONSORED SCHEME

1. <u>2210-06-104-0-15</u>	20.00	16.99	4.40	10.16
Central Plan Schemes				

2. <u>2210-06-104-0-10</u>	20.00	--	16.50	--
Drugs Testing facilities - Drugs Testing Laboratory.				

Total:	40.00	16.99	20.90	10.16
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REVENUE RECEIPTS:

<u>Sl.No.</u>	<u>Budget Head</u>	<u>Rs.</u>
1.	0210-04-104-02 Drugs Controller.	9,20,000.00
2.	0210-03-105-01 Government College of Pharmacy & Board of Examining Authority.	7,46,000.00
	Total:	16,66,000.00

DIRECTORATE OF MEDICAL EDUCATION.

PURPOSE:

The Directorate of Medical Education was established to streamline the administration and for the effective functioning of the Institutions coming under the Jurisdiction of the Director of Medical Education.

ADMINISTRATION:

The Director of Medical Education will be the administrative head for the Institutions coming under the Jurisdiction of the Medical/Dental/Nursing Colleges and Nursing Schools and also the Teaching Hospitals.

The following Officers will be supervising the administrative, Technical, financial and Plan Schemes and will be rendering the required help and assistance to the Director of Medical Education.

1. Joint Director (Medical Education)
2. Deputy Director (Med.Edn)- I & II.
3. Chief Administrative Officer (M.E.)
4. Administrative Officer (M.E.)
5. Chief Accounts Officer-cum-Financial Adviser (Medical Education).
6. Planning Officer (M.E.).
7. Health Equipment Officer (M.E.).
8. Deputy Director - Transport - common to Health and Medical Education.

In the State there are 21 Teaching Hospitals which have full fledged Units, Specialists, certain super specialities and well equipped with ultra modern equipments.

1. Hospital Pharmacy Units.
2. Burns Units and Trauma Centres
3. I.C.U. Unit.
4. Child Guidance Clinics.
5. Blood Bank Service
6. Skin and STD Centres.
7. Mental disease rehabilitation Centres.
8. Dental Clinics.
9. Eye Banks.
10. National Blindness Prevention Service Units.
11. Security Service Units.

The following institutions function under the control of the Directorate of Medical Education.

1. Medical Colleges.
2. Dental Colleges.
3. Nursing Colleges.
4. X-Ray Technician Training Centres.
5. Lab. Technician Training Centres.
6. Nursing Schools.

7. Teaching Hospitals.

8. Some Centres attached to each Medical Colleges as per the pattern of Govt. of India with 3 Primary Health Centres attached.

The list of Medical/Dental/Nursing and Pharmacy Colleges run by the Government and Private Organisations.

<u>Subjects.</u>	<u>Govern.</u>	<u>Private.</u>	<u>Total.</u>
	<u>ment.</u>		
1. Medical Colleges.	4	14	18
2. Dental Colleges.	1	40	41
3. Nursing Colleges	1	26	27
4. Nursing Schools	11	132	143
5. Pharmacy Colleges.	1	41	42

The following training centres have been established to train up the Para Medical Students.

1. X-Ray Technician Training.
2. Laboratory Technician Training.
3. Dental Mechanic and Dental-Hygienist Training.
4. Medical Records Technicians - training.
5. Ophthalmic Asst. Training.

The following Autonomous Institutions are

getting grants through the Government:-

1. NIMHANS (National Institute of Mental Health and Neuro Sciences)Bangalore.
2. Kidwai Memorial Institute of Oncology, Bangalore.
3. Sri.Jayadeva Institute of Cardiology, Bangalore.
4. Indira Gandhi Institute of Child Health, Bangalore.
5. Vijayanagara Institute of Medical Sciences, Bellary.
6. Karnataka Institute of Medical Sciences, Hubli.

The artificial Limbs Centres have been established at Bangalore and Mangalore District Hospitals and these Hospitals come under the control of this Directorate.

Re-Orientation programmes implemented in 9 Districts and 3 Primary Health Centres in each District are being continued. 20 Bedded Temporary Leprosy wards have been provided under the modified National Leprosy Control Programme established in Bellary, Mysore, & Hubli.

To develop the Eye operations, training programmes have been taken up for Doctors and Ophthalmic Assistants in Medical Colleges, Cancer detection Units in Preliminary stage are running in the Medical Colleges at Mysore and Karnataka Institute of Medical Sciences.

TEACHING HOSPITALS:

Victoria, Vani Vilas, Bowring and Lady Curzon Hospital, S.D.S.T.B. & C.D.Hospital and Minto Ophthalmic Hospital are coming under Bangalore Medical College. A Master plan has been sanctioned by the Government for the construction of building.

COLLEGE HOSPITAL, MYSORE:

The K.R.Hospital, Cheluvamba Hospital and P.K.T.B. & C.D.Hospital, Mysore and the said Hospital services have been made available and these Hospitals are coming under the administrative control of Mysore Medical College. They have the required different specialists service which are functioning well.

COLLEGE HOSPITAL, BELLARY:

The Government Medical College, Bellary is now an autonomous Institution. A sum of Rs.656.53 lakhs has been earmarked under Plan Scheme to the Vijayanagara Institute of Medical Sciences, Bellary.

Similary K.M.C.Hospital, Hubli is now an autonomous Institution as Karnataka Institute of Medical Sciences and K.M.C. Hospital and Karnataka Institute of Mental Sciences, Dharwad are attached to KIMS, Hubli.

DISTRICT HOSPITAL, MANGALORE:

Wenlock Hospital, Mangalore and Lady Goschen Hospital, Mangalore are the two Teaching Hospitals which have been attached to Manipal and Mangalore Medical Colleges. The Artificial Limb Centre building of Mangalore is completed and functioning. The building work attached to Wenlock Hospital is under progress.

BUILDING CONSTRUCTION:

1. The O.P.D. Block rectification of K.R. Hospital, Mysore is completed except the lift work.
2. Out patient block in K.R. Hospital, Mysore have been completed.
3. Construction work of Auditorium at J.K. Ground attached to Mysore Medical College have been completed and roof work and other works are under progress.
4. Providing water facility work to Vani Vilas Hospital is under progress.
5. Building work under the Jurisdiction of Victoria Hospital is completed.

1998-99 ANNUAL REPORT PROGRESS AND ACHIEVEMENTS:

1. In the Jurisdiction of the Directorate of Medical Education there are 4 Government and 14 Private Medical Colleges. And there is Provision for 400 MBBS Students admission -

capacity and in the Private Medical Colleges, there is a provision of 1565 MBBS Students admission capacity. In the Government Dental College, there is a provision of 60 Students and 1361 Students in Private Dental Colleges.

2. In the P.G. Selection, the Govt. Medical Colleges, there is a provision for 226 Degree and 216 Diploma seats wherein in Medical Colleges there are 89 Degree and 83 Diploma seats. Government seats available.

3. At Govt. Dental College, Bangalore there is provision for 17 P.G. seats and in Private Dental College, there is provision for 17 seats and total management seats are 56.

4. The Entrance Examination for MBBS/BDS Examination are being conducted by Common Entrance Cell.

5. The Government Medical Colleges of Bellary and Hubli have been made autonomous Institutions. The Directors and Principals have been appointed for these Institutions who are able to carry out the administration effectively.

6. For the development of Library of Medical/ Dental Colleges, adequate funds are released -

and are being utilised. At Govt. Medical Colleges, computers and CDRMO & Video libraries have been provided.

7. The new OPD Block of K.R. Hospital, Mysore is well equipped and furnished and adequate staff have also been appointed.

8. The building construction work at Victoria and Bowring and Lady Curzon Hospital are under progress.

9. Master Plan building of Vani Vilas Hospital is completed and required instruments and equipments for Surgical Wing have been provided.

10. Dharmashala building work at Victoria Hospital is under progress.

11. Incinerators are provided to all major Hospitals.

12. Under the Plan Schemes, total of Rs.2597.74 lakhs grants is provided under the Plan Scheme. In this, State share is Rs.2500.00 lakhs. Centre share is Rs.97.74 lakhs and for the building Rs.230.00 lakhs is provided.

13. For the building works during the year 1998-99 Rs.230.00 lakhs has been released by the Directorate of Medical Education.

14. The mortuary and cold storage units at Bowring and Lady Curzon Hospital building have been completed.
15. Building construction work at K.R.Hospital, Mysore , OPD and Inpatient block is completed. Required grants for equipments and instruments has been released. Furniture for these blocks have been provided. The total no.of 112 Post of Staff Nurses have been filled up.
16. Action has been taken for appointment of 42 Staff Nurses at K.R.Hospital,Mysore.
17. Proposal have been submitted to Government to fill up 46 Group 'D' Staff to K.R. Hospital, Mysore.

KARNATAKA CHIEF MINISTER'S MEDICAL RELIEF SOCIETY:

A sum of Rs.19,86,54,503.00 has been collected for the Karnataka State Chief Minister's Medical Relief Society/Fund. Out of this amount Rs.5,00,00,000/- have been received from Govt.of India and another Rs.5,00,00,000/- has been received from the State Government. Rs.9,86,54,503/- has been received as donations

from various Institutions. An interest of Rs.6,28,39,189.69 has been accrued from this Corpus Fund which is invested in various Financial Institutions. So far 3178 patients have been benefitted from this Scheme by incurring an expenditure of Rs.1,52,00,000/-.

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