7. Immunization & Prophylaxis:

ings sinte v dinor	During the month	Cumulative since April
No. of Sessions planned	of access to the second of a color of	of Afacosio eleganovate editatav ir d
No. of Sessions held		
No. of outreach Sessions held		

COMPANY OF THE		D	uring th	e mon	th	Cui	mulative	since	since April			
	Latination in	Under	-1 Yr.	Above	- 1 Yr.	Ur	Under – 1 Yr.		Above - 1		Yr.	
		Male	Female	Male	Female	Male	Female	Total	Male	Female	Total	
BCG			121.03					ronessi				
	DPT-1											
DPT	DPT-2		Day 1									
	DPT-3					THE R	in cont	de la company				
	OPV-0											
	OPV-1							i af				
OPV	OPV-2							idgl/60				
	OPV-3							1				
	Hep -1											
Hepatitis B	Hep -2		137.537					VAR				
	Hep -3						6.123					
Measles			I've.					9 3				
Fully Immunized Children under 1 year	Having BCG+3 doses of OPV & DPT +Measles							Alos U				
VITAMIN - A	Dose - 1							1				
Children more	DPT Booster											
than 18 months	OPV Booster											
•	Dose – 2									17-4	1	
LOTAL AND A	Dose - 3									-		
VITAMIN - A	Dose - 4									A SAND	Pro-	
	Dose - 5											
Children more	DT - 1										Here!	
than 5 yrs.	DT - 2											
Children more	TT-1										TA.	
than 10 yrs.	TT - 2											
Children more	TT-1											
than 16 yrs.	TT-2											
No. of Children re	eceived IFA									I KILLY	l si	
UNTOWARD RE	ACTION											
Reported dea with immunization							H. W.W.	1911				
2. Number of al	oscesses							in the			48	
3. Other Compli											-	

SI. No.	Services		ormanc orting r	e in the nonth	The state of the s			
8.	Vaccine preventable diseases for under- 5 Years children							
a)	Diptheria	M	F	T	M	F	T	
	i) Cases	E SHITE!		N. Frysland	THE THE	TO BE ST	100	
	ii) Deaths							
	b) Poliomyelitis							
	i) Cases			· ·			, and the same of	
	ii) Deaths		H CENT				19.25	
	c) Neo Natal Tetanus							
	i) Cases			The state of the s		William III		
	ii) Deaths				1796		_ M95	
	d) Tetanus other than Neo Natal							
	i) Cases			All estimates		Manne Contraction of the Contrac		
	ii) Deaths				10/8/5/1			
	e) Whooping Cough							
	i) Cases					William I	Annin III	
	ii) Deaths	19-15		7500	The Late			
	f) Measles							
	i) Cases			147777777777777777777777777777777777777	, , , , , , , , , , , , , , , , , , ,			
	ii) Deaths	West 1		100000	200		130.252	
8.1	Other specified communicable diseases							
	a) Malaria							
	i) Cases			Kullininini		Million		
	ii) Deaths			1.000	et le	18.91		
100	b) Tuberculosis							
	i) Cases					WIII SIIIIII		
- 10	ii) Deaths		The state of			9190		
	c) Leprosy							
	i) Cases			WILLIAM TO THE STATE OF THE STA	A CONTRACTOR	MILLIAM		
	ii) Deaths						ALL ADDRESS	
9.	ARI under 5 years (Pneumonia)							
	a) Cases						Millimi	
	b) Treated with Co-trimoxazole				150	A Albert	HE TOTAL OF	
	c) Deaths							
10.	Acute Diarrhoeal Diseases under 5 years							
	a) Cases							
	b) Treated with ORS					PS DWALL	The Handbell	
	c) Deaths	1,0,0						
11.	Child Deaths							
	a) under 1 week							
	b) 1 week to under 1 month			100				
	c) 1 month to under 1 year							
	d) 1 year to under 5 years				130 F2 U/U	- 40.75	111 121 2	

	Services	No. of Eligible Couple already	0 1 1 TO 1	ance in the ing month	Cumulative performance
SI. No.		protected (as existing on 31" March preceding year)	No. of New Acceptors (b)	Nos. Discontinued OR taken off for crossing Eligible age (c)	Since Aprilincluding carried over performance (a + b - c)
12	Contraceptive Services				
12.1	Male Sterilisation				
	a) Conventional				
	b) No Scalpel				
12.2	Female Sterilisation				
	a) Abdominal				
	b) Laparoscopic				
12.3	Total IUD insertions				
12.3.1	Cases followed up				
12.3.2	Complications				***************************************
12.4	No. of CC users				
	a) No. of OP users				
	b) No. of Condom users				
12.5	Total Nos. protected by all methods (12.1+12.2+12.3+12.4)				
12.6	No. of Eligible Couples accepted sterilization		(1)	nance in the ling month	Cumulative performance Since April_
12.6.1	Having 2 living children				
12.6.2	Having 3 or more living children	Name of the last o			
12.7	No. of CC distributed				
12.7.1					
12.7.2					
13.	Abortions				
	a) Spontaneous				
	b) No. of MTPs done				
100	c) Deaths				
14	Deaths				
	a) Maternal Deaths (as in Sl. No. 5)			
	b) Child Deaths (as in Sl. No. 11)				
	c) Other Death except Sl. No. 5 & 11				
14.1	Total Death = SI. No.14 (a + b+ c)				
45	IEC Activities	Heli	d	Att	tendance

15.	IEC Activities	Н	eld	Attendance		
		Topics	No. Held	Male	Female	
	1. Group Discussion		•			
	2. Deployment of Folk Media					
	3. Others (Specify)					

সাব-সেন্টারের মাসিক রিপোর্ট সি.ইউ.ডি.পি.-৩ / সি.এস.আইপি. / আইপি.পি.-৮ / আইপি.পি.-৮(সম্প্রসারণ) / আর.সি.এইচ.-আসানসোল / স্বেচ্ছাসেবী স্বাস্হ্যকর্মী স্কীম

	মিউনিসিপ্যালিটি / কর্পোরে	র্টের মাসসাল ানের নাম পন্টার নং, এইচ. এ. ইউ. নং,
		>লা এপ্রিল এর গণনা অনুযায়ী বিবরণ ঃ
5.	মোট পরিবার	২. মোট জনসংখ্যা ৩. মোট প্রজননশীল দম্পতির সংখ্যা
8.	মোট শিশু	a. মোট শিশু
	(১ বছরের নীচে)	(১ থেকে < ৫ বছর)

-		সম্পাদিত কার্যাবলী					
ক্রমিক নং	পরিষেবা	কেবল মাত্র উল্লিখিত মাসে	মোট সংখ্যা (এপ্রিল, থেকে				
5.	গর্ভবতীর পরিষেবা						
5.5	কতজন গর্ভবতী মায়ের নাম নথিভুক্ত করা হয়েছে						
	ক) নতুন (i) ১২ সপ্তাহের আগে	What has been sent to					
	(ii) ১২ সপ্তাহের পরে						
	(খ)পুরানো						
5.2	কতজন গর্ভবতী মায়ের অন্ততপক্ষে ৩ বার চেক-আপ হয়েছে						
5.0	কতজন গর্ভবতী মা ঝুঁকি সম্পন্ন নির্ণীত হয়েছেন						
	ক) কতজন পরিষেবা পেয়েছেন						
	খ) কতজনকে রেফারেল কেন্দ্রে পাঠানো হয়েছে						
\$.8	কতজন গর্ভবতী মাকে টি. টি. দেওয়া হয়েছে						
	ক) টি. টি ১ম ডোজ						
	খ) টি. টি ২য় ডোজ						
	গ) বৃষ্টার ডোজ		Williams Start				
5.0	কতজন গর্ভবতী মা অ্যানিমিয়ার চিকিৎসা পেয়েছেন						
3.6	কতজন গর্ভবতী মা অ্যানিমিয়ানিবারক ফলিফার বড়ি পেয়েছেন						
2.	প্রসব সংক্রান্ত পরিষেবা						
2.5	মোট প্রসবের সংখ্যা						
	ক) স্বাভাবিক						
	খ) ফরসেপ্স						
	গ) সিজার		THE THE WAY IN THE				
2.2	কোথায় প্রসব হয়েছে						
	ক) বাড়িতে প্রসবের সংখ্যা						
	খ) হাসপাতালে প্রসবের সংখ্যা						
2.0	প্রসবের সময় মায়ের বয়স						
	ক) ২০ বছরের নীচে						
	খ) ২০ বছর ও উর্দ্ধে						
₹.8	প্রসবকালীন জটিলতার জন্য কতজনকে সরকারী / বেসরকারী হাসপাতাল / নার্সিংহোমে / মাতৃসদনে পাঠানো হয়েছে						

	A STATE OF THE PARTY OF THE PARTY.	UTO PER INCIDENT	সম্পাদি	ত কাৰ্যাবলী		
ক্রমিক নং	পরিষেবা	কেবল মাত্ৰ ই	উল্লিখিত মাসে	মোট সংখ্যা (এপ্রিল,থেকে		
		ছেলে	মেয়ে	ছেলে	মেয়ে	
૭ .	গর্ভের পরিণতি					
0.5	প্রসবের সংখ্যা					
	ক) কয়টি জীবিত সন্তান হয়েছে					
	খ) ক্য়টি মৃত সন্তান হয়েছে	100	4			
0.2	জন্মক্রম অনুযায়ী প্রসবের সংখ্যা (৩.১ এর ক)					
	ক) ১ম					
	খ) ২য়					
- de	গ) ৩য় ও উর্কে	a culty				
0.0	নবজাতকের জন্মকালীন ওজনের হিসাব (৩.১ এর ক)					
	ক) কতজন ২.৫ কেজির নীচে					
	খ) কতজন ২.৫ কেজি ও তার বেশি		1.45			
	গ) কতজন নবজাতকের জন্মকালীন ওজন নেওয়া হয়নি			1000		
৩.8	বুঁকি সম্পন্ন নবজাতক					
	ক) কতজন পরিষেবা পেয়েছে					
	খ) কতজনকে রেফারেল কেন্দ্রে পাঠানো হয়েছে			TO FEBRUARY	Se de	
8	প্রসৃতির পরিষেবা					
8.5	কতজন প্রসৃতির ৩ বার চেক আপ হয়েছে					
8.2	জটিলতার জন্য কতজন প্রসৃতিকে রেফার করা হয়েছে			- 1.3.3		
æ.	মাতৃ (প্রসৃতি) মৃত্যুর সংখ্যা					
	ক) গর্ভবতী অবস্হায়					
	খ) প্রস্বকালে			No.	s Lips	
4	গ) প্রসবের পর ৬ সপ্তাহের মধ্যে			romosiu 20	Election 1	
& .	আর. টি. আই. / এস. টি. আই.	ছেলে	মেয়ে	ছেলে	মেয়ে	
৬.১	কতজন সনাক্তকরণ হয়েছে				100	
5. 2	কতজনকে চিকিৎসা দেওয়া হয়েছে			Single Late	N. A.	

Called Sub-		সম্পাদিত কার্যাবলী									
পরি	ষেবা	কেব	ল মাত্র উ	ট ল্লিখি ত	মাসে	phire.	(এপ্রিল		সংখ্যা	থেকে)
৭. টীকাকরণ ও রোগ নিবা	রক										
পরিকল্পিত সেশনের সংখ	m .								1917		
রপায়িত সেশনের সংখ্যা						4					
অন্যান্য জায়গায় টীকাকর	ণ সেশনের সংখ্যা										
		১ বছরে	রর নীচে	১ বছরে	রর উর্কে	১ বছে	রর নীচে	মোট	১ বছরে	র উর্দ্ধে	মোট
		ছেলে	त्यदश	ছেলে	মেয়ে	ছেলে	মেয়ে		ছেলে	মেয়ে -	
বি. সি. জি.						7 3	T KUS	Chris			
	ডি. পি. টি. ১ম ডোজ										
ডি. পি. টি.	ডি. পি. টি. ২য় ডোজ										
	ডি পি টি ৩য় ডোজ		2111			164	1536)				
	ও পি ভি '০' ডোজ										
ও. পি. ভি.	ও. পি. ভি. ১ম ডোজ						1024				
9. 17. 10.	ও. পি. ভি. ২য় ডোজ	2.33									
	ও. পি. ভি. ৩য় ডোজ	2500									
	হেপা ১ম ডোজ										
হেপাটাইটিস বি	হেপা ২য় ডোজ		13								
	হেপা ৩য় ডোজ		500								
হামের টীকা						gillins.	do ma	767314			
পূৰ্ণটীকাপ্ৰাপ্ত শিশু	(বি.সি.জি. + ৩য় ডোজের							- Tra			
(১ বছরের নীচে)	ও.পি.ভি. ও ডি.পি.টি. + হাম)	1360	7 85								
ভিটামিন 'এ'	১ম ডোজ	11-11									
১৮ মাস-এর বেশী বাচ্চা	ক) ডি. পিঁ. টি. বৃঃ										
	খ) ও. পি. ভি. বৃঃ										
	২য় ডোজ										
ভিটামিন 'এ'	৩য় ডোজ									100	
	৪র্থ ডোজ								500		
	৫ম ডোজ			urillise)	ear)					D. II	
৫ বছরের বেশী বাচ্চা	ক) ডি. টি১								2.65		
	খ) ডি. টি২				7924						
১০ বছরের বেশী বাচ্চা	ক) টি. টি১										
	খ) টি. টি২								1972	18	DC.
১৬ বছরের বেশী বাচ্চা	ক) টি. টি১										
	খ) টি. টি২										
আই এফ এ পেয়েছে এমন	। ৫ বছরের নীচে বাচ্চার সংখ্যা			4							3
নীকাকরণের প্রতিকৃল প্রতিত্তি											
১) টীকাকরণের জন্য মৃত											
	য় অ্যাব্সেস্ হওয়ার সংখ্যা					Factor	3 2 3	YAUR IN	()		
৩) অন্যান্য জটিলতার সং						500		- bar			

ক্রমিক			সম্পাদিত কার্যাবলী							
न१	পরিষেবা	কেবল	মাত্র উট্টি	রখিত মাসে	(এপ্রি	মোট সংখ্যা (এপ্রিল, থেকে)				
ъ.	শৈশবকালীন (৫ বছরের নীচে) টীকা প্রতিরোধক রোগের পরিসংখ্যান									
	(১) ডিপথেরিয়া	ছেলে	মেয়ে	যোট	ছেলে	মেয়ে	যোট			
	ক) আক্রান্ত									
	খ) মৃত									
	(২) পোলিও মায়েলাইটিস									
	ক) আক্রান্ত									
	খ) মৃত					100				
	(৩) নিপ্তনেটাল টিট্টেনাস (০ - ২৮ দিন বয়স)									
	ক) আক্রান্ত	10 24	RE THE							
	খ) মৃত	-47-271								
	(৪) টিটেনাস (নিওনেটাল ব্যতীত)									
	ক) আঞান্ত			0.00						
	খ) মৃত									
	(৫) হুপিং কাশি									
	ক) আক্রান্ত									
	খ) মৃত	2000				-				
	(৬) হাম									
	ক) আক্রান্ত									
	খ) মৃত	4	195 Pa	177914						
۲.5	অন্যান্য বিশেষ সংক্রামক ব্যাধির পরিসংখ্যান									
	(১) ম্যালেরিয়া									
	ক) আক্রান্ত									
	খ) মৃত		2 16	- 64 55		450	II a			
	(২) টি. বি.									
	ক) আক্রান্ত									
	খ) মৃত									
	७) कुछ									
	ক) আক্রান্ত		100000							
	খ) মৃত			N. F. B. L. S.	1					
à .	এ. আর. আই ৫ বছরের নীচে (নিউমোনিয়া)									
	ক) আক্রান্ত		21111111111							
	খ) কেট্রাইমক্সাজোল দ্বারা চিকিৎসিত			The lot		- 37				
	গ) মৃত			5 8 11 11		43500				
30.	ডাইরিয়া - ৫ বছরের নীচে									
	ক) আক্রান্ত									
	খ) ও. আর. এস. দ্বারা চিকিৎসিত	4				ATT CALL				
	গ) মৃত									
>>.	বাচ্চার মৃত্যুর পরিসংখ্যান									
	ক) ১ সপ্তাহ বয়সের নীচে									
	খ) ১ সপ্তাহ থেকে ১ মাস বয়সের নীচে			To open		Des				
	গ) ১ মাস থেকে ১ বছরের বয়সের নীচে	EIK M	WS JANS	Professional Control		No. of				
	ঘ) ১ থেকে ৫ বছর বয়সের নীচে			Tighted						

			अल्ह	পাদিত কার্যাবলী	মোট সংখ্যা
ক্রমিক নং	পরিষেবা	প্রজননশীল দশ্পতি যাঁরা আগেই সুরক্ষিত হরেছেন তার সংখ্যা (পূর্ববর্তী বছরের ৩১শে মার্চ পর্যন্ত)	নতুন গ্রহণকারীর সংখ্যা	যাঁরা ব্যবহার করা ছেড়ে দিয়েছেন অথবা যেসব প্রজননশীল দম্পতির বয়স পেরিয়ে গেছে তার সংখ্যা	সংখ্যা সহ)
		(季)	(খ)	(গ)	(ক + খ - গ
32.	জন্ম নিয়ন্ত্রণ পদ্ধতি গ্রহণের পরিষেবা				
52.5	পুরুষের স্হায়ী পদ্ধতি				
	ক) কনভেন্শনাল				
	थ) ता ऋग्रानात्रान				
52.2	মহিলার স্থায়ী পদ্ধতি				
	ক) অ্যাবডোমিনাল				
	খ) ল্যাপারোস্কপিক				
32.0	আই. ইউ. ডি. পরানোর মোট সংখ্যা				
\$2.0.5	এরূপ কতজনকে ফলো-আপ করা হয়েছে তার সংখ্যা				The state of
52.0.2	জটিলতার সংখ্যা				
\$2.8	প্রচলিত জন্ম নিয়ন্ত্রণ পদ্ধতি ব্যবহারের সংখ্যা				
L	ক) ওরাল পিল কতজন ব্যবহার করেছেন				
	খ) নিরোধ কতজন ব্যবহার করেছেন		124		
32.0	বিভিন্ন পরিকল্পনা পদ্ধতি ব্যবহার দ্বারা সংরক্ষিতের মোট সংখ্যা (১২.১ + ১২.২ + ১২.৩ + ১২.৪)				
\$2.6	কতজন প্রজননশীল দম্পতি পরিবার স্হায়ী পরিকল্পনা পদ্ধতি গ্রহণ করেছেন		কেব	ল মাত্ৰ উল্লিখিত মাসে	মোট সংখ্যা (এপ্রিল, খেকে)
\$2.6.5	যাদের জীবিত দৃটি সন্তান আছে তার সংখ্যা		8		64617
12.6.2	যাদের জীবিত তিন ও উর্দ্ধে সম্ভান আছে তার সংখ্যা				
52.9	প্রচলিত পরিবার পরিকল্পনা পদ্ধতির বিতরণের সংখ্যা				
32.9.5	ওরাল পিল বিতরণের সংখ্যা				
32.9.2	কন্ডোম বিতরণের সংখ্যা				
30.	গর্ভপাত (অ্যাবোরশন্)				
	ক) স্বতঃস্ফৃত অ্যারোরশন্				Name of the last o
1	খ) এম. টি. পি.র সংখ্যা				
	গ) মৃত্যু			CERTIFICATION OF THE PARTY OF T	100000000000000000000000000000000000000
>8.	মৃত্যুর পরিসংখ্যান				
	ক) মাতৃ (প্রসৃতি) মৃত্যুর সংখ্যা (ক্রমিক নং - ৫)				in the same of the
	খ) বাচ্চার মৃত্যুর পরিসংখ্যান (ক্রমিক নং - ১১)				
	গ) অন্যান্য মৃত্যু (ক্রমিক নং ৫ ও ১১ ছাড়া)				
\$8.5	মোট মৃত্যুর সংখ্যা = ক্রমিক নং ১৪ (ক + খ + গ)				The state of
•0.0		অনুষ্ঠিত হ	য়েছিল	উপ	ন্থিতি
>4.	আই. সি. সির কার্যক্রম	বিষয়	সংখ্য		মেয়ে
	ক) দলভিত্তিক আলোচনা		1, 1,		
	থ) জনশিক্ষা প্রচলিত পদ্ধতি			M. D.W. SETS	
	গ) অন্যান্য (বিশেষভাবে উল্লেখ করুন)				

প্রথম সারির পরিদর্শিকার স্বাক্ষর তারিখ ঃ



Memo No. CMU-94/2004(Pt. IV)/ち96(40)

Dt. .. 08.06.2006

From: A.K. Matilal

Project Manager, CMU

To : The Mayor / Chairman

Sub.: Re-orientation training for grass root level health functionaries i.e. HHWs, FTSs and STSs on re-designed Family Schedule and HMIS under Health component of KUSP.

Sir,

You may be aware that retraining of the grass root level health functionaries is one of the approved activities to strengthen the existing community based health care programmes at your ULB.

With the completion of trainers training for Health Officer &/or Asstt. Health Officer of your ULB, the re-orientation training for grass root level health functionaries on re-designed Family Schedule and HMIS are to be organized at each HAU level, which is to be completed by July, 2006.

Unit cost for each HAU level training is as under:

Description	Unit Cost Per Head (Amount in Rs.)	Estimated Total Expenditure (In Rs.)
Training material i.e. folder, pen, writing pad and Xerox copy of the training material.	30.00	Rs. 30/- x (Not exceeding) 50 participants * = Rs. 1500/-
Tea & tiffin	30.00	Rs. 30/- x (Not exceeding) 50 participants* x 3 days = Rs. 4500/-
Fee to internal faculty member (HO / AHO / MO and others)	200.00	Rs. 200/- x 2 faculties x 3 days = Rs. 1200/-
Contingency i.e. hiring of Overhead projector, cost of transparency sheet and OH marker, etc.	-	Rs. 200/- per day x 3 days = Rs. 600/-
	TOTAL	Rs. 7,800/-

^{*} Participants will be based on actual no. but not exceeding 50 nos. per HAU at a time.

Contd. to P-2.



The Planning and Implementation of the re-training programme are to be done by the Health Officer & / or Asst. Health Officer of your ULB with prior intimation to the undersigned so that an Expert from CMU be detailed to attend the training at each HAU level for monitoring and supervision time to time.

On the basis of above, you may please arrange to start the programme at the earliest. The implementation of activities under Health component of KUSP is of vital importance and will be considered as one of the indicators towards good initiative of the ULB for assessment of overall performance.

Expenditure incurred for the purpose may be met out of KUSP fund already available with you. The expenditure may be booked under the A/C head "Support to Health sector – Re-training of grass root level health functionaries".

HAU-wise Pre & Post evaluation compiled sheet for each of the participants and a Report on the said training is to be forwarded to this office by 10th of the following month.

You are requested to submit the Statement of Expenditure (SOE) and Utilisation Certificate (UC) at monthly interval through the Accounting Support Agency.

Project Manager, CMU

Dt. .. 08.06.2006

Memo No. CMU-94/2003(Pt. IV)/ 596(40) (1(40)

Copy forwarded for information and necessary action to:

1. Health Officer &/or Asstt. Health Officer,

..... Municipality.

Project Manager, CMU
Dt. .. 08.06.2006

Memo No. CMU-94/2003(Pt. IV)/ 596 (40) 12 (7)

Copy forwarded for kind information to:

- 1. Secretary, MA Dept.
- 2. PS to MIC, MA & UD
- 3. Directorate of Local Bodies
- 4. Financial Advisor, CMU
- 5. Accounts Officer, CMU
- 6. Health Expert, CMU
- 7. Accounting Support Agency

Memo No. CMU-94/2003(Pt. IV)/ 596 (40) (3 (2)

Copy forwarded for information to:

- 1. OSD, UHIP, KMDA
- 2. Dy. Chief of Health, UHIP, KMDA

Project Manager, CMU Dt. .. 08.06.2006



Memo No. CMU-94/2003(Pt. IV)/926

Dt. .. 07.07.2006

AHn: Ho , Modly augum Hol.

From: Arnab Roy

Project Director, CMU

To : The Chairman

Madhyamgram Municipality

Sir.

You may be aware that training programme for grass root level health functionaries on redesigned Family Schedule and HMIS are in progress in different ULBs.

It will be appreciated if you could allow Smt. Alo Bose, STS of your municipality to impart training to grass root level functionaries of Rajarhat Gopalpur Municipality during 10-12 July, 2006.

Thanking you.

Yours faithfully,

Project Director, CMU

Dt. .. 07.07.2006

Memo No. CMU-94/2003(Pt. IV)/926/1(1)

Copy forwarded for kind information to:

Health Officer, Madhyamgram Municipality.

Project Director, CMU



010

Memo No. CMU-94/2003(Pt. IV)/587(11)

Dt. .. 06.06.2006

From : A.K. Matilal

Project Manager, CMU

To : The Mayor / Chairman

...... Municipal Corporation / Municipality

Sub.: Work Plan for FY 2006-07 in connection with training, IEC & procurement under Health component of KUSP.

Sir,

Enclosed kindly find herewith the work plan for FY 2006-07 in connection with training, IEC & procurement under Health component of KUSP.

For each of the training programme, necessary approval will be accorded by this office in due course time to time.

With regard to IEC, necessary approval has been accorded through this office memo no. CMU-94/2003(Pt. IV)/588(11) dt. 06.06.2006.

Work plan for 2006 – 07 with regard to procurement will be applicable to those ULBs who could not yet submit proposal for refurbishment of Sub-Centres including essential furniture & equipment and procurement of computer.

You are requested kindly to look into the matter towards implementation of the said work plan in schedule time.

Yours faithfully,

Enclo. : As stated.

Project Manager, CMU

Memo No. CMU-94/2003(Pt. IV)/587(11)/1(11)

Dt. .. 06.06.2006

Copy forwarded for information and necessary action to:

1. Project Director, IPP-VIII (Extn.) / RCH Sub-Project, Asansol

Project Manager, CMU
Contd. to P-2.

- 2 -

Memo No. CMU-94/2003(Pt. IV)/587(11)/2(11)

1. Health Officer / Asstt. Health Officer,

Dt. .. 06.06.2006

Copy forwarded for information and necessary action to:

	Municipal	Corporation	/ Municipality

Project Manager, CMU

Memo No. CMU-94/2003(Pt. IV)/587(11)/3(4)

Dt. .. 06.06.2006

Copy forwarded for kind information to:

- 1. Directorate of Local Bodies
- 2. Director, SUDA
- 3. Financial Advisor, CMU
- 4. Accounts Officer, CMU

Project Manager, CMU

on constitution of the fit to be

Work Plan for FY 2006 - 2007 for HHW Programme under Health Component - KUSP For 10 IPP-VIII (Extn.) and 1 RCH Sub-Project, Asansol, Non-KMA ULBs

	Brief description of objective	Process for imprementation	
Training		Training of grace root level functionaries will	July - Sept., 06
Training on STDs / HIV / AIDS	 Decentralizing STD / HIV / AIDS control programme to field level. Integration with National Programmes. Preventing socially weaker groups for becoming vulnerable to HIV infection. Promoting better understanding of HIV infection among people. 	be imparted by HO / AHO at HAU level for two days. Monitoring & supervision of training by CMU.	
Training on HMIS & Family Schedule	Strengthening capacity of health functionaries in respect of systematic data collection, entry, compilation and	Training of trainers (Medical Professionals) by CMU.	May - June, 06
	preparation of fortnightly and monthly report.	 Training of grass root level functionaries will be imparted by trainers (HO / AHO) at HAU / HP level for three days. Monitoring & supervision of training by CMU. 	June – July, 06
Training on RCH & Family Planning	Strengthening of services for reproductive & child health and family planning.	 Training of grass root level functionaries will be imparted by trainers (HO / AHO) at HAU / HP level for three days. Monitoring & supervision of training by CMU. 	Aug Sept., 06
National Health	Updating knowledge on National Health Programmes. Strengthening capacity for implementation of National	Trainers training for 1 day by CMU	Sept. – Oct., 06
riogianines	Health Programmes at grass root level, data compilation and reporting.	3 days training at each HAU / HP level by CMU and ULB.	Oct., 06 – Jan., 07

	Work Details	Brief description of objective	Process for implementation	
	LE.C.		Jonesian will be organised at block	April. 06 - March. 07
	Group discussion at block level with female and male members of the community.	Enhancing awareness on different health issues, availability and accessibility of primary health care services. Community participation.	Uroup discussion will be be be monthly. Will be facilitated by FTS and supervision & monitoring by HO / AHO. No. of participants per group not exceeding 30.	
			Will lift and	Nov., 06 - Feb., 07
	Baby Show	Making every child count. Healthy and fully immunized baby. Sensitising mother / family towards better rearing of	One show per HAU / Hr per year - Oc organisms of the ULB.	0 to 1 Jon 0
		Cillia.	2 programmes per HAU / HP per year be organised	June, vo - Jan, v
	Awareness through deployment of folk media.	care, safe behaviour, attitude and practice.	by ULB.	
-	Procurement		GIII	Apr Sept., 06
9	Refurbishment of Sub- Centre (SC) for 5 Non-KMA ULBs who could not yet submit the proposal.	Providing better services. Strengthening of primary health care services.	By ULB.	



KOLKATA URBAN SERVICES FOR THE POOR MANAGEMENT

Memo No. CMU-94/2003(Pt. IV)/586(11)

010

Dt. .. 06.06.2006

From: A.K. Matilal

Project Manager, CMU

To

: The Mayor / Chairman

...... Municipal Corporation / Municipality

ID IPP VIN ULBO & IRCH ULB

Sub.: Trainers training for Health Officer, Asst. Health Officer & one other resource person on re-designed Family Schedule and HMIS under Health component of KUSP.

Sir.

You may be aware that different Family Schedule and HMIS format are being used for various community based Health programmes like CUDP III, IPP-VIII implemented in KMA ULBs. To maintain uniformity, Family Schedule and HMIS format have been re-designed in consultation with HO & AHO of some of the ULBs and KMDA, taking into consideration of the report required by the Dept. of Health & Family Welfare. You have already received the said Family Schedule and HMIS format.

For this purpose, a Trainers training programme for Health Officer / Asstt. Health Officer and one other resource person who is directly dealing with the preparation of HMIS monthly report (not exceeding 2 participants from each ULB), is scheduled on 15.06.2006 at 12-00 noon at the conference hall, SUDA, ILGUS Bhavan, Salt Lake. The participants may be requested to go through the already available re-designed Family Schedule and HMIS formats so that they are ready with the queries, if any, for discussions in the said session.

The trainers of the ULB will impart three days training on the same subject to the HHWs, FTSs and STSs at each HAU / HP level which will be monitored and supervised by an Expert from CMU time to time.

Hence, you are requested to instruct your HO / AHO & one other resource person to participate in the said Trainers training programme. The training for grass-root level functionaries be completed for all the HAUs / HPs by July, 2006.

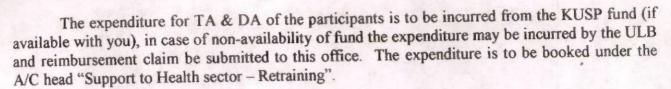
The approved rate for the said training along with item wise break up for training at each HAU level will be communicated to you shortly.

Dr. Shibani Goswami, Health Expert, CMU & Project Officer, Health, SUDA may be contacted for further information, if necessary.

You are requested to confirm the participation of HO / AHO and other resource person through Fax (033 2337 7318) by 12th June, 2006. If any accommodation for the participants is required at ILGUS hostel, is also to be intimated.

Contd. to P-2.





Thanking you.

Yours faithfully,

Project Manager, CMU

Memo No. CMU-94/2003(Pt. IV)/586(11)/1(11)

Dt. .. 06.06.2006

Copy forwarded for information and necessary action to:

Memo No. CMU-94/2003(Pt. IV)/586(11)/2(11)

Dt. .. 06.06.2006

Copy forwarded for information and necessary action to:

1. Health Officer / Asstt. Health Officer,

Project Manager, CMU

Memo No. CMU-94/2003(Pt. IV)/586(11)/3(4)

Dt. .. 06.06.2006

Copy forwarded for kind information to:

- 1. Directorate of Local Bodies
- 2. Director, SUDA
- 3. Financial Advisor, CMU
- 4. Accounts Officer, CMU



Memo No. CMU-94/2003(Pt. IV)/ 584 (40)

Dt. .. 05.06.2006

From: A.K. Matilal

Project Manager, CMU

To : The Mayor / Chairman

...... Municipal Corporation / Municipality

Sub.: Work Plan for FY 2006-07 in connection with training, IEC & procurement under Health component of KUSP.

Sir,

Enclosed kindly find herewith the work plan for FY 2006-07 in connection with training, IEC & procurement under Health component of KUSP.

Regarding restructuring of blocks at ULB, necessary guideline will be issued later on.

For each of the training programme, necessary approval will be accorded by this office in due course time to time.

With regard to IEC, necessary approval has been accorded through this office memo no. CMU-94/2003(Pt. IV)/559(40) dt. 05.06.2006.

Work plan for 2006 2007 with regard to procurement applicable to those ULBs who could not yet submit proposal for refurbishment of Sub-Centres including essential furniture & equipment and procurement of computer.

You are requested kindly to look into the matter towards implementation of the said work plan in schedule time.

Yours faithfully,

Endo: 4

Project Manager, CMU

Dt. .. 05.06.2006

Memo No. CMU-94/2003(Pt. IV)/ 584 (49)/1(46)

Copy forwarded for information and necessary action to:

1. Health Officer &/or Asstt. Health Officer,

...... Municipality.

Project Manager, CMU

Contd. to P-2.



- 2 -

Memo No. CMU-94/2003(Pt. IV)/ 584 (40) / 2(7)

Dt. .. 05.06.2006

Copy forwarded for kind information to:

- 1. Secretary, MA Dept.
- 2. Directorate of Local Bodies
- 3. Director, SUDA
- 4. Financial Advisor, CMU
- 5. Accounts Officer, CMU
- 6. Health Expert, CMU
- 7. Accounting Support Agency

Memo No. CMU-94/2003(Pt. IV)/584 (40) |3 (2)

Copy forwarded for information to:

- 1. OSD, UHIP, KMDA
- 2. Dy. Chief of Health, UHIP, KMDA

Project Manager, CMU

Dt. .. 05.06.2006

Work Plan for FY 2006 - 2007 for HHW Programme under Health Component - KUSP

Time Lian	May - Dec., 06	4.7	June - Aug., 06	May - June, 06	May – June, 06	July - Aug., 06	Sept Oct., 06	Sept Dec., 06	May - Oct., 06
Process for implementation	Guideline will be issued by CMU. Re-structuring by ULB		Training of grass root level functionaries will be imparted by HO / AHO at HAU level for two days. Monitoring & supervision of training by CMU.	Training of trainers (Medical Professionals) by CMU – in two batches, one day for each batch.	Training of grass root level functionaries will be imparted by trainers (HO / AHO) at HAU level for three days. Monitoring & supervision of training by CMU.	Training of grass root level functionaries will be imparted by trainers (HO / AHO) at HAU level for three days. Monitoring & supervision of training by CMU.	Traincrs training for 1 day by CMU	3 days training at each HAU level by CMU and ULB.	Training of Medical Professionals of 10 ULBs by AIIH & PH. Training of grass root level functionaries by trainers concerned and CMU, supervised by AIIH & PH.
	• •		• •	•			•	•	• •
Brief description of objective		The second secon	Decentralizing STD / HIV / AIDS control programme to field level. Integration with National Programmes. Preventing socially weaker groups for becoming vulnerable to HIV infection. Promoting better understanding of HIV infection among people.	Strengthening capacity of health functionaries in respect of systematic data collection, entry, compilation and preparation of formightly and monthly report.		Strengthening of services for reproductive & child health and family planning.	Updating knowledge on National Health Programmes. Strengthening capacity for implementation of National	Health Programmes at grass root level, data compilation and reporting.	Capacity building of health functionaries for providing support to adolescents in respect of knowledge on physiological, emotional changes, reproductive health, hygicne and sanitation - Piloting at 10 ULBs.
Work Details	Re-structuring of blocks at ULBs	Training	Training on STDs / HIV / AIDS	Training on HMIS & Family Schedule		Training on RCH & Family Planning	On National Health Programmes		Training on Adolescent care.

Si. No.	vi) Tra	vii) Re Or	3, LE	G 5 8	(i) Ba	III) Av	4. Pr	D Pr	323	(iii
Work Details	Training on vector control	Re-orientation for PTMOs & Urban Health Improvement Organisers (UHIOs)	LE.C.	Group discussion at block level with female and male members of the community.	Baby Show	Awareness through deployment of folk media.	Procurement	Printing of training manual.	Refurbishment of Sub- Centre (SC) for 13 KMA &	Procurement of Computer
	•	•		• •		•		• •	• •	•
Brief description of objective	Prevention of vector borne communicable diseases	Re-orientation in KUSP objectives, health components, community based primary health care.		Enhancing awareness on different health issues, availability and accessibility of primary health care services. Community participation.	Making every child count. Healthy and fully immunized baby. Sensitising mother / family towards better rearing of child	Promoting awareness of community on preventive health care, safe behaviour, attitude and practice.		Same as above. Enhancing capacity building of grass root level health functionaries.	Providing better services. Strengthening of primary health care services.	To computerise health data received from the grass root level health functionaries compilation & premaration of monthly reports.
Process 10r implementation	Module be developed and training be imparted by AIIH & PH	1 day training in 5 batches by CMU.	Joseph Parket Land	 Group discussion will be organised at otock level by the HHW concerned bi-monthly. Will be facilitated by FTS and supervision & monitoring by HO / AHO. No. of participants per group not exceeding 30. Total blocks 4750 - KMA ULBs and 1476 - Non-KMA ULBs. 	One show per HAU per year - be organised by the ULB.	2 programmes per HAU per year be organised by ULB.		By CMU.	By ULB.	By ULB.
July - Doc 0k	A A A A A A A A A A A A A A A A A A A	Aug Scpt., 06	April 06 - March 07		Nov., 06 - Feb., 07	June, 66 - Jan., 64	30 07	July - Sept., 00	Apr. – Sept., 06	By Aug. 00



KOLKATA URBAN SERVICES FOR THE POOR

Memo No. CMU-94/2003(Pt. IV)/ 584(40)

Dt. .. 05.06.2006

From: A.K. Matilal

Project Manager, CMU

To: The Mayor / Chairman

Sub.: Work Plan for FY 2006-07 in connection with training, IEC & procurement under Health component of KUSP.

Sir,

Enclosed kindly find herewith the work plan for FY 2006-07 in connection with training, IEC & procurement under Health component of KUSP.

Regarding restructuring of blocks at ULB, necessary guideline will be issued later on.

For each of the training programme necessary approval will be accorded by this office in due course time to time.

With regard to IEC necessary approval has been accorded through this office memo no. CMU-94/2003(Pt. IV)/559(40) dt. 05.06.2006.

Work plan for 2006 & 2007 with regard to procurement applicable to those ULBs who could not yet submit proposal for refurbishment of Sub-Centres including essential furniture & equipment and procurement of computer.

You are requested kindly to look into the matter towards implementation of the said work plan in schedule time.

Yours faithfully, a

Enclo: #

Project Manager, CMU

Dt. .. 05.06.2006

Memo No. CMU-94/2003(Pt. IV)/ 584 (40) 11 (40)

Copy forwarded for information and necessary action to:

1. Health Officer &/or Asstt. Health Officer,

..... Municipality.

1

Project Manager, CMU

Contd. to P-2.

Memo 100, CMU-14/2003 pr.14/2004 (-1)

ne under Health Component - KUSP
ealth
H
under
2007 for HHW Programme
3
H
or
2007 £
FY
for
an
P
Work Plan for FY 2006

Work Details	Brief description of objective	Process for implementation	THE LIGHT
Re-structuring of blocks at ULBs		Guideline will be issued by CMU. Re-structuring by ULB	May - Dec. 06
			70 000
Training on STDs / HIV / AIDS	 Decentralizing STD / HIV / AIDS control programme to field level. Integration with National Programmes. Preventing socially weaker groups for becoming vulnerable to HIV infection. Promoting better understanding of HIV infection among people. 	 Training of grass root level functionaries will be imparted by HO / AHO at HAU level for two days. Monitoring & supervision of training by CMU. 	June - Aug. vo
Training on HMIS & Family Schedule	Strengthening capacity of health functionaries in respect of systematic data collection, entry, compilation and	 Training of trainers (Medical Professionals) by CMU – in two batches, one day for each batch. 	May - June. 06
	preparation of total gains and another property.	 Training of grass root level functionaries will be imparted by trainers (HO / AHO) at HAU level for three days. Monitoring & supervision of training by CMU. 	May – June, 06
Training on RCH & Family Planning	Strengthening of services for reproductive & child health and family planning.	 Training of grass root level functionaries will be imparted by trainers (HO / AHO) at HAU level for three days. Monitoring & supervision of training by CMU. 	July - Aug., 06
National Health	Updating knowledge on National Health Programmes. Standard Region of National	Trainers training for 1 day by CMU	Sept Oct., 06
Fiogrammes	Health Programmes at grass root level, data compilation and reporting.	3 days training at each HAU level by CMU and ULB.	Sept Dec., 06
Training on Adolescent care.	Capacity building of health functionaries for providing support to adolescents in respect of knowledge on physiological, emotional changes, reproductive health, hygiene and sanitation - Piloting at 10 ULBs.	 Training of Medical Professionals of 10 ULBs by AIIH & PH. Training of grass root level functionaries by trainers concerned and CMU, supervised by AIIH & PH. 	May - Oct., 06

(iii)	E)	5	4	(III	=)	હ	vii)	s _i	No.
Procurement of Computer	Refurbishment of Sub- Centre (SC) for 13 KMA & 5 Non-KMA ULBs	Printing of training manual.	Procurement	Awareness through deployment of folk media.	Baby Show	Group discussion at block level with female and male members of the community.	LE.C.	Re-orientation for PTMOs & Urban Health Improvement Organisers (UHIOs)	Training on vector control measures	Work Details
•	• •	• •		•	• • •	• •		• O 70	•	
To computerise health data received from the grass root level health functionaries compilation & preparation of monthly reports.	Providing better services. Strengthening of primary health care services.	Same as above. Enhancing capacity building of grass root level health functionaries.		Promoting awareness of community on preventive health care, safe behaviour, attitude and practice.	Making every child count. Healthy and fully immunized baby. Sensitising mother / family towards better rearing of child.	Enhancing awareness on different health issues, availability and accessibility of primary health care services. Community participation.		Re-orientation in KUSP objectives, health components, community based primary health care.	Prevention of vector borne communicable diseases	Brief description of objective
	By ULB.	Dŷ CMO.	D. OMI	 2 programmes per HAU per year be organised by ULB. 	One show per HAU per year - be organised by the ULB.	 Group discussion will be organised at block level by the HHW concerned bi-monthly. Will be facilitated by FTS and supervision & monitoring by HO / AHO. No. of participants per group not exceeding 30. Total blocks 4750 - KMA ULBs and 1476 - Non-KMA ULBs. 		I day training in 5 batches by CMU.	Module be developed and training be imparted by AIIH & PH	Process for implementation
	By Aug. 06	Anr - Scot 06	July - Sept. 06	Julic, OO Jan., Or	Nov., 00 - 100 07	No. Of Ech 07	April 06 - March 07	Aug Sept., vo	July - Dec., 06	linerian



Memo No. CMU-94/2003(Pt. IV)/558(20)

Dt. .. 05.06.2006

From: A.K. Matilal

Project Manager, CMU

To: The Mayor / Chairman

...... Municipal Corporation / Municipality

Sub.: Trainers training for Health Officer, Asst. Health Officer & one other resource person on re-designed Family Schedule and HMIS.

Sir,

You may be aware that different Family Schedule and HMIS format are being used for various community based Health programmes like CUDP III, IPP-VIII implemented in KMA ULBs. To maintain uniformity, Family Schedule and HMIS format have been re-designed in consultation with HO & AHO of some of the ULBs and KMDA, taking into consideration of the report required by the Dept. of Health & Family Welfare. You have already received the said Family Schedule and HMIS format.

For this purpose, a Trainers training programme for Health Officer, Asstt. Health Officer and one other resource person who is directly dealing with the preparation of HMIS monthly report (not exceeding 3 participants from each ULB), is scheduled on 09.06.2006 at 2-00 pm at the conference hall, SUDA, ILGUS Bhavan, Salt Lake. The participants may be requested to go through the already available re-designed Family Schedule and HMIS formats so that they are ready with the queries, if any, for discussions in the said session.

The trainers of the ULB will impart three days training on the same subject to the HHWs, FTSs and STSs at each HAU level which will be monitored and supervised by an Expert from CMU time to time.

Hence, you are requested to instruct your HO, AHO & one other resource person to participate in the said Trainers training programme. The training for grass-root level functionaries be completed for all the HAUs by July, 2006.

The approved rate for the said training along with item wise break up for training at each HAU level will be communicated to you shortly.

Dr. Shibani Goswami, Health Expert, CMU may be contacted for further information, if necessary.

Thanking you.

Yours faithfully,

Project Manager, CMU Contd. to P-2.



Memo No. CMU-94/2003(Pt. IV)/558(20)/1(20)

Dt. .. 05.06.2006

Copy forwarded for information and necessary action to:

Health Officer &/or Asstt. Health Officer,
 Municipality.

Project Manager, CMU

Dt. .. 05.06.2006

Memo No. CMU-94/2003(Pt. IV)/558(20)/2(5)

Copy forwarded for kind information to:

- 1. Secretary, MA Dept.
- 2. PS to MIC, MA & UD
- 3. Directorate of Local Bodies
- 4. Director, SUDA
- 5. Health Expert, CMU

any & hance

Project Manager, CMU

Memo No. CMU-94/2003(Pt. IV)/558(20)/3(1)

Dt. .. 05.06.2006

Copy forwarded for kind information to:

 OSD, UHIP, KMDA with the request to intimate Dr. S.K. Ghosh, Dy. COH, UHIP, KMDA accordingly for his participation in the said training programme.

Letter bearing memo no. CMU-94/2003(Pt. IV)/558(20) dt. 05.06.2006 with regard to trainers training to be held on 09.06.2006 at 2.00 P.M. at ILGUS Bhavan.

- 1. Bhatpara
- 2. Garulia
- 3. Kamarhati
- 4. New Barrackpore
- 5. North Barrackpore
- 6. Baruipur
- 7. Pujali
- 8. Bally
- 9. Mowrah
- 10. Vluberia
- 11. Gayeshpur
- 12. Kalyani
- 13. Baidyabati
- 14. Bansberia
- 15. Bhadreswar
- 16. Chandannagar
- 17. V Champdani
- 18. | Hooghly Chinsurah
- 19. Konnagar
- 20. Uttarpara Kotrung V



Memo No. CMU-94/2003(Pt. IV)/557(20)

Dt. .. 05.06.2006

From: A.K. Matilal

Project Manager, CMU

To : The Mayor / Chairman

...... Municipal Corporation / Municipality

Sub.: Trainers training for Health Officer, Asst. Health Officer & one other resource person on re-designed Family Schedule and HMIS.

Sir,

You may be aware that different Family Schedule and HMIS format are being used for various community based Health programmes like CUDP III, IPP-VIII implemented in KMA ULBs. To maintain uniformity, Family Schedule and HMIS format have been re-designed in consultation with HO & AHO of some of the ULBs and KMDA, taking into consideration of the report required by the Dept. of Health & Family Welfare. You have already received the said Family Schedule and HMIS format.

For this purpose, a Trainers training programme for Health Officer, Asstt. Health Officer and one other resource person who is directly dealing with the preparation of HMIS monthly report (not exceeding 3 participants from each ULB), is scheduled on **08.06.2006 at 2-00 pm** at the conference hall, SUDA, ILGUS Bhavan, Salt Lake. The participants may be requested to go through the already available re-designed Family Schedule and HMIS formats so that they are ready with the queries, if any, for discussions in the said session.

The trainers of the ULB will impart three days training on the same subject to the HHWs, FTSs and STSs at each HAU level which will be monitored and supervised by an Expert from CMU time to time

Hence, you are requested to instruct your HO, AHO & one other resource person to participate in the said Trainers training programme. The training for grass-root level functionaries be completed for all the HAUs by July, 2006.

The approved rate for the said training along with item wise break up for training at each HAU level will be communicated to you shortly.

Dr. Shibani Goswami, Health Expert, CMU may be contacted for further information, if necessary.

Thanking you.

Yours faithfully,

up to Manlal

Project Manager, CMU Contd. to P-2.



Memo No. CMU-94/2003(Pt. IV)/557(20)/1(20)

Dt. .. 05.06.2006

Copy forwarded for information and necessary action to:

Health Officer &/or Asstt. Health Officer,
 Municipality.

Project Manager, CMU

Dt. .. 05.06,2006

Memo No. CMU-94/2003(Pt. IV)/557(20)/2(5)

Copy forwarded for kind information to:

- 1. Secretary, MA Dept.
- 2. PS to MIC, MA & UD
- 3. Directorate of Local Bodies
- 4. Director, SUDA
- 5. Health Expert, CMU

Project Manager, CMU

Memo No. CMU-94/2003(Pt. IV)/557(20)/3(1)

Dt. .. 05.06.2006

Copy forwarded for kind information to:

 OSD, UHIP, KMDA with the request to intimate Dr. S.K. Ghosh, Dy. COH, UHIP, KMDA accordingly for his participation in the said training programme.

886 8 John D

Letter bearing memo no. CMU-94/2003(Pt. IV)/557(20) dt. 05.06.2006 with regard to trainers training to be held on 08.06.2006 at 2.00 P.M. at ILGUS Bhavan.

- 1. Barrackpore
- 2. Bidhannagar
- 3. Baranagar
- 4.

 Barasat
- 5. Dum Dum
- 6. Halisahar
- 7. Kanchrapara
- 8. Khardah
- 9. Madhyamgram
- 10. Naihati
- 11. North Dum Dum
- 12. Panihati
- 13. X Rajarhat Gopalpur 🗡
- 14. × South Dum Dum ×
- 15. Titagarh
- 16. Budge Budge
- 17. ~ Maheshtala ~
- 18. Rajpur Sonarpur Do Fase
- 19. Rishra
- 20. Serampore

			Work Plan	& Bu	dget for	06-07				, cM	3
			2012				2006-2007			2007-2008	Total
No.	Head of Accoun	ts	Expenditure	Provision in Project	1st. Qtr.	Upto 2nd. Qtr.	Upto 3rd. Qtr.	Upto	Provision in Project	Provision in Project	Provision for Project Period
V	Health										
5	Support to Health Sector										
	10.00 10 1	KMA			11.93			11.93			
a.	Francis on HMIS and Family Schedule for grass root level			-			ė.				
	functionaries	Non-KMA		-	1.86	3.74	•	3.74			
		КМА			5.78	11.63		11.63			
b.	Training on Adolescent care	Non-KMA			9,00	10,604		0.00			
	On community mobilization	КМА			15.00			15.00			
¢.	and gender empowerment	Nos-KMA			0,00	0,00		0,0			
	Training on STD / HIV /	KMA			1,50	5.51		5.51			
d,	AIDS for grass root level functionaries	Non-KMA			80,00	1.73		1.73			
	On National Health	KMA				3.50	11.93	11.93			
e.	Programmes	Non-KMA					2.00	3.74			
		KMA				10,00		10,00			
ſ.	Discutation on Urban Health	Non-KMA									
		KMA		1		£0,00	20,00	20,00			
g.	Training on Vector Control : Measures	Non-KMA									
h.	Re-training for HO, AHO), PTMO and of	therx						1		
-		KMA	T	I		11.05	0,10	0.10			
l.	On National Health Programmer	Non-KMA					0.05	0.05			
11.	Re-orientation for PTMOs and UBIOs					9,12		0.12			
111.	For HO and AHO on Family	KMA			0.10			0.10			
101.	Schedule & HMIS	Non-KMA			6.10			0.10			
i.	I.E.C.										
i.	Group discussion at block fevel with female and male members community - 1 such	KMA			19.68	21.36	32.04	42.72			
	discrimion per block by monthly	Nan-KMA			3.33	6.66	9,99	13.32			
16.	Baby alion - Eshow per HAD per year	KMA Nos-KMA			-	1	7.65	15.30 4,80			
	An areness through	KMA		1	2.45			4.90			
101.	deployment of folk media · 2 programmer per HAU per	Nan-KMA			0,78			1.56			
	year Development of IFC materials	20-7301	-	+	+	20,00		50,00	-	+	

Compilation & printing of i. training maining Nee-KMA 0.60 0,60 4. Returbalment of Substitution (a) \$0,000 KMA 75.00 £20.00 120,00 New-KMA 24.59 24.50 23.60 KMA 23.60 III. Procurement of Computer Non-KMA Hiring charges for professionals of CMU (Doctor = 6, Nutristionast = 6, Statistician = 2 fe, & Computer Assit: -1) for monitoring & supervision of health activities at 40 KMA and 11 Non-KMA VI.Bs 1.53 6.12 10.71 15.30 Sub TOTAL 5 140.6 270.7 96.9 413.88

Procurement

KMA

1.60

1.60

Training need in connection with Health Component of KUSP for the period January, 06 to June, 06

Time Plan	Jan. – Mar., 06	Feb Mar., 06	Jan. – June, 06	Feb Mar., 06	Mar May, 06	Apr May, 06	Apr June, 06	Apr. – May, 06	May - June, 06	June, 06
Trainer	State AIDS Cell, Dept. of Health & Family Welfare.	Medical Professionals of ULBs and CMU.	Consultant engaged by DFID and CMU.	CMU.	Medical Professionals of ULBs and CMU.	Dept. of Health & Family Welfare.	Medical Professionals of ULBs and CMU.	CMU.	ALL India Institute of Hygiene & Public Health (AIIH & PH)	Medical Professionals concerned & CMU and supervised by AIIH & PH.
Training for	Medical Professionals of ULBs.	Grass root level functionaries i.e. HHWs, FTSs, STSs.	Health functionaries, slum based natural leaders, community organizer, members of CDS / NHC / NHG.	Medical Professionals.	Grass root level functionaries i.e. HHWs, FTSs, STSs.	Medical Professionals.	Grass root level functionaries i.e. HHWs, FTSs, STSs.	PTMOs and UHIOs.	Medical Professionals of 10 ULBs.	Grass root level functionaries i.e. HHWs, FTSs, STSs of 10 ULBs.
Brief description of objective	 Decentralizing STD / HIV / AIDS control programme to field level. Integration with National Programmes. Preventing socially weaker groups for becoming vulnerable to HIV infection. Promoting better understanding of HIV infection among people. 		 Capacity building of health functionaries, slum based natural leaders, community organizer, members of CDS / NHC / NHG in communication skills towards community mobilization. Enhancing capacity in respect of social mapping, resources mapping, identification of potentials and recognition, group formation and activation, self esteem arousal, participatory planning and implementation by community - Piloting at 5 slums. 	Strengthening capacity of health functionaries in respect of systematic data collection, entry, compilation and preparation of fortnightly and monthly report.		Updating knowledge on National Health Programmes. Strengthening capacity for implementation of National Health Programmes at grass root level, data compilation and reporting.		Strengthening of primary health care services.	Capacity building of health functionaries for providing support to adolescents in respect of knowledge on physiological, emotional changes, reproductive health, hygiene and sanitation - Piloting at 10 ULBs.	
Training Details	Training on STDs / HIV / AIDS		Training on Community mobilization and gender empowerment.	Training on HMIS & Family Schedule		Training on National Health Programmes		Re-orientation in KUSP objectives, health components, community based primary health care	Training on Adolescent care.	
SI. No.	-i			e,		4		si,	9	

Work Plan for FY 2006 - 2007 for HHW Programme under Health Component - KUSP

(Amount in lakhs)	Cost for KMA 153 HAUS = 5.51 Cost for NKMA 48 HAUS = 1.73 Total cost = 7.24	Cost for KMA & Non- KMA 0.10 each Total 0.20	Cost for KMA 153 HAUS = 11.93 Cost for NKMA 48 HAUS = 3.74 Total Cost = 15.67
3		•	
Unit Cost Break up (Amount in Rs.)	Training material @ Rs. 30/- x 50 participants = Rs. 1500/- Tea & tiffin @ Rs. 30/- x 50 x 1 day = Rs. 1500/- Faculty Fees @ Rs. 200/- x 2 nos. x 1 day = Rs. 400/- Contingency @ Rs. 200/-		 Training material @ Rs. 30/- x 50 participants = Rs. 1500/- Tea & tiffin @ Rs. 30/- x 50 x 3 days = Rs. 4500/- x 2 nos. x 3 days = Rs. 1200/- Contingency @ Rs. 200/- x 3 days = Rs. 1200/- Toal Unit cost 7800/-
Time Plan	June-Aug., 06 – 40 KMA ULBs. July-Sept., 06 – 11 Non-KMA ULBs.	April-May,06	AprJune, 06 40 KMA ULBs. May-July, 06 11 Non-KMA ULBs.
Process for implementation	Training of grass root level functionaries will be imparted by HO / AHO at HAU level for one day. Monitoring & supervision of training by CMU.	Training of trainers (Medical Professionals) by CMU – in two batches, one day for each batch.	Training of grass root level functionaries will be imparted by trainers (HO / AHO) at HAU level for three days. Monitoring & supervision of training by CMU.
	•	•	•
Brief description of objective	Decentralizing STD / HIV / AIDS control programme to field level. Integration with National Programmes. Preventing socially weaker groups for becoming vulnerable to HIV infection. Promoting better understanding of HIV infection among people.	Strengthening capacity of health functionaries in respect of systematic data collection, entry, compilation and preparation of fortnightly and monthly report.	
Work Details	Training on STDs / HIV / AIDS	Training on HMIS & Family Schedule	
SI.	i	2	

Total Cost (Amount in lakhs)	• Cost for KMA & Non-KMA 0.05 each Total 0.15	• Cost for KMA 153 HAUS = 11.93 • Cost for Non-KMA 48 HAUS = 3.74 • Total Cost = 15.67	• Total Cost = 10.00
Unit Cost Break up (Amount in Rs.)	• @ Rs. 5000 per batch	• Faculty Fee @ Rs. 200/- x 2 x 3 days = 1200/- • Training material @ Rs. 30/- x 50 = 1500/- • Tea & tiffin @ Rs. 30/- x 50 x 3 = 4500/- • Contingency @ Rs. 200/- x 3 days = 600/- • Total Unit cost 7800/-	
Time Plan	• SeptOct., 06	• SeptDec.,06 - 40 KMA ULBs. • OctJan., 07 - 11 Non- KMA ULBs	July - Aug., 06 - 40 KMA ULBs.
Process for implementation	Trainers training for 1 day by CMU	3 days training at each HAU level by CMU and ULB.	Orientation for elected representatives, Ward Committee members, CDS Members, Sanitary Inspectors & others by AIIH & PH. Module on urban health matter be developed by AIIH & PH.
Brief description of objective	Updating knowledge on National Health Programmes. Strengthening capacity for implementation of National Health Programmes at grass root level, data compilation and reporting.		First hand knowledge on urban health matters, roles & responsibilities.
Work Details	On National Health Programmes		Orientation on Urban Health
No.	ಲ		÷

Total Cost (Amount in lakhs)	Total Cost= 11.63	 Total Cost = 20.00 	Total Cost= 15.00	• Cost for KMA ULBs = 0.12 • Total Cost = 0.12
Unit Cost Break up (Amount in Rs.)				• Faculty Fee @ Rs. 500/- x 2 = 1000/- • Training material @ Rs. 40/- x 40 = 1600/- • Tea & tiffin @ Rs. 30/- x 40 = 1200/- • Contingency Rs. 200/- • Total Unit cost 4000/-
Time Plan	May – Oct., 06	July-Dec., 06	Confd. upto June, 06	AugSept.,06 - 3 batches of KMA ULBs
Process for implementation	Training of Medical Professionals of 10 ULBs by AIIH & PH. Training of grass root level functionaries by trainers concerned and CMU, supervised by AIIH & PH.	Module and training be imparted by AIIH & PH	• Training for health functionaries, slum based natural leaders, members of CDS & others functionaries.	CMU.
Brief description of objective	Capacity building of health functionaries for providing support to adolescents in respect of knowledge on physiological, emotional changes, reproductive health, hygiene and sanitation - Piloting at 10 ULBs.	Prevention of vector borne communicable diseases	 Capacity building of health functionaries, slum based natural leaders, community organizer, members of CDS / NHC / NHG in communication skills towards community mobilization. Enhancing capacity in respect of social mapping, resources mapping, identification of potentials and recognition, group formation and activation, self esteem arousal, participatory planning and implementation by community - Piloting at 5 slums. 	я
Work Details	Training on Adolescent care.	Training on vector control measures	Training on Community mobilization and gender empowerment.	Re-orientation for PTMOs & Urban Health Improvement Organisers (UHIOs)
SI.	vi	9		ဆ

Total Cost (Amount in lakhs)		For KMA ULBs = 42.72 For Non- KMA ULBs = 13.32 Total Cost = 56.04	Cost for KMA = 15.30 Cost for Non-KMA = 4.80 Total Cost = 20.10	Cost for KMA = 4.90 Cost for Non-KMA = 1.56 Total Cost = 6.46
- 2			• • •	
Unit Cost Break up (Amount in Rs.)		5/- each for 30 participants = 150/- per group	Rs. 10,000/- per show.	• Fee for each folk group - Rs. 900/- • Contingency i.e. hiring of mike, dari etc Rs 700/- • Total unit cost Rs. 1600/-
				G &
Time Plan		April - March.	Nov Jan. for both 153 KMA HAUS and 48 Non- KMA HAUS.	June - Jan. both KMA & Non-KMA HAUs.
		•	•	•
Process for implementation		Group discussion will be organised at block level by the HHW concerned bimonthly. Will be facilitated by FTS and supervision & monitoring by HO / AHO. No. of participants per group not exceeding 30. Total blocks 4750 - KMA ULBs and 1476 - Non-KMA ULBs.	One show per ULB per year be organised by the ULB.	2 programmes per HAU per year be organised by ULB.
<u>a</u>		• • •	•	•
Brief description of objective		Enhancing awareness on different health issues, availability and accessibility of primary health care services. Community participation.	Making every child count. Healthy and fully immunized baby. Sensitising mother / family towards better rearing of child.	Promoting awareness of community on preventive health care, safe behaviour, attitude and practice.
		* 9 ·	• • •	•
Work Details	Group discussion at block level with female and male members of the community.		Baby Show	Awareness through deployment of folk media.
)=(

SI. No.	Work Details		Brief description of objective	Process for implementation		Time Plan		Unit Cost Break up mount in Rs.	(An	Amount in lakhs)
(iv)	Development of I.E.C. materials i.e. leaflet, pictorial calendar, translit box, exhibition set etc.	•	Enhancing awareness on health, gender, HIV / AIDS issues.	By CMU.	•	July - Jan.	•	Cost will involve Professional fees for development of materials, field testing, printing & distribution to the community through ULB.	•	for KMA & Non- KMA = 50.00
10.	Procurement		The second secon							
(3)	Printing of training manual.		Same as above. Enhancing capacity building of grass root level health functionaries.	By CMU.	•	July - Sept.	•	Rs. 20/- per book (Requirement for KMA & Non-KMA are 8000 & 3000	•	Cost for KMA = 1.60
								respectively)	•	Cost for Non- KMA = 0.60
									•	Total Cost $= 2.20$
(E)	Refurbishment of Sub- Centre (SC)	• •	Providing better services. Strengthening of primary health care services.	By ULB.	•	Apr Sept.	•	@ Rs. 50000/- per sub-centre		KMA 120.00 Non-KMA
									•	24.50 Total Cost = 144.50
(iii)	Procurement of Computer	•	To computerise health data received from the grass root level health functionaries compilation & preparation of monthly reports.	By ULB.	•	By Aug., 06	•	@ Rs. 59000/- per ULB	•	= 23.60
(iv)	Hiring charges for professional for CMU	•	on of activities under	By CMU	•	June -Mar		@ 12000/- per month per head for 6 Doctors @ 10000/- per month per head for 6 Nutritionist @ 8000/- per month per head for 2 health Statistician @ 5000/- per month per head for 1 Computer Asst. Cost involvement per month Rs. 1.53 lakhs	•	= 15.30
			GRAND TOTAL	TAL						413.88

Arnab Roy, IAS
Project Director

Memo No.CMU- 168 2004 3337 (12)

Date: 15-03-2006

To:

- 1) Project Manager, CMU
- 2) Shri T K Mitra, CMU
- 3) Shri G C Sarker, CMU
- 4) Shri Saikat Sengupta, CMU
- 5) Shri Jayanta Kr Chakrabarti, CMU
- 6) Shri Atanusasan Mukhopadhyay, CMU
- 7) Shri Saibal Thakurata, CMU
- 8) Shri Samir Kumar Pal, CMU
- 9) Shri D K Dutta, CMU
- 10) Shri Sujay Mitra, CMU
- 11) Shri Subir Bhattacharyya, CMU
- 12) Dr S Goswami, CMU

Sub: Work Plan and Budget for 2006-07

Sir/Madam,

As you might be aware we have to finalise our Work Plan and Budget for 2006-07. Accordingly, I am enclosing a format which was used last year for preparing the Work Plan and Budget. You are requested to fill up the format for your area of work and submit it to Shri Subir Bhattacharyya, Financial Adviser, within 22nd March 2006. Shri Subir Bhattacharyya is requested to compile the Work Plan and Budget and forward it to the Project Manager for further action.

If there are omissions and additions to the format, please alter the format as required.

Yours faithfully,

(Arnab Roy)

Project Director, CMU, KUSP

Encl: As stated above

ILGUS BHAVAN, HC BLOCK, SECTOR 3, BIDHANNAGAR, KOLKATA - 700 106
PH.: 033-2337 8723/6226, 2334 2660, 2358 6403/5767, FAX: 033-2337 7318/6229
E-mail: kuspcmu@vsnl.net, Website: www.changekolkata.org

			Total of									2	2006-2007									2007-2008	
St. No.	Head of Accounts	- Expenditure	8	noisiven¶ in Project	Apr.	May	June	iat. Orr.	July	Aug.	Sept.	Upto 2nd. Qir.	Oct.	Nov.	Dec.	Upto 3rd. Qtr.	Jan.	Feb.	Mar.	Upto	noizivor¶ 139ler¶ ni	Provision in Project	for Praject Period
A	Capacity Building																						
1	GIS & MIS																						
44	Preparation of Base Map & GIS by Survey of India	ISC CMU																					
Ä	Payment to eCrov. Foundation.	ISC CMU													111								
SUB-TOTAL_1	TAL1				0.0	0.0	0.0	0.0	0.0	99	0.0	000	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
2.i.	Capacity Suilding for ULBs																						
4	Appointment of Engineers	OD CMU						0.0				0.0				0.0				0.0			
۵	Placement of Professional in ULBs (CA inter or M. Com)	ULB						99				0.0				0.0				0.0			
ú	Placement of Urban Planner in ULBs							٥				0.0											
Ą	Placement of Computer Professional in ULBs							•				0.0											
ü	Providing Software & Hardware	ISC CMU	-					0.0				0.0				0.0				0.0			
-	Спечансе Маладетен							0.0				0.0				0.0				0.0			
5.0	Strengthoning UPE Cell							0.0				0.0				0.0				0.0			
4	Capacity Building for CDS and NHC		-					0.0				0.0				0.0				0.0			
12	Expoure programme for Ward Committoe members							0.0				0.0				0.0				0.0			
	Support for Display Board at own ward office							0.0				0.0				0.0				0.0			
,si	Support for data entry under resource mobilization							0.0				0.0				0.0				0.0			
-	Development of Citizen's Chartor							0.0				0.0				0.0				0.0			
É	Organization of study visit within KMA ULBs for capacity building							0.0				0.0				0.0				0.0			
e	Organization of study visit to APUSP for the elected representative of ULBs and support organizations.							0.0				g.				0.0				0.0			
0	Strengthening Standing Committees (including Municipal Accounts Committee)							0.0				0.0				0.0				0.0			

		,	Total of 2005-2006	Je Jou								20	2006-2007									2007-2008	Total
_	Hend of Accounts	Action	Expenditure	noisivor¶ Issior¶ ni	Apr.	May	June	.ng .nt	July	Aug	Sept.	Upto 2nd. Qtr.	Oet.	Nev.	Dec.	Upto 3rd. Qir.	Jan.	Feb.	Mar.	Upto 4th. Qir.	noisivorq 120jorq ni	Provision in Project	Period
proved	Improved inter departmental coordination and procedural development: Sudy to be undertaken							979				0.0	B.		7775	99				000			
pacity	Capacity Building for Municipal Furthonnies							0.0				0.0				0.0				0.0			
pport	Support for office equipments for better communication under Capacity Building.							0.0				0.0			900	0.0				970			
pacity iic con	Capacity Building for Municipal personnel on basic computer skill development							0.0				0.0			5/1	000				0.0			
uipme for Ca	Equipment support for attendance manaement under Capacity building							0.0				0.0				0.0				0.0			
ninary road fo	Sponsoring CMU and other officials for attending seminars and training programmes within India & abroad for Capacity Building							979		-		9			AUNI RUNI	0.0				9			
CHITAC	Construction of ward offices							0.0				0.0				0.0				0.0			
Training				-								979			529								3
mpeti	Competition among ULBs											970			964		1	1	1	1			
chase	Purchase of Equipments for Support Organisations											0.0											
Parch B-1)	Capacity Building for Support Agencies Car (SUDA-1, MED-4, ILGUS-1, (DLB-1)	OD CMU						0.0				0.0				0.0				90			
	SUB-TOTAL_2				0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	000			
velo	Development & Insplementation Accounting System	ng Systen																					
parat	Preparation of Draft Manual	ISC						0.0				0.0				0.0				0.0			
MA I	Approval for draft mannual by MA Department	ISC						0.0				0.0				0.0				0.0			
TARCO IND	Engagement of Agency to programme manage the entire implementation process	ISC CMU						9				0.0				0.0				0.0			
a klde	Supply of Hardware	CMU						0.0				0.0				0.0				0.0			
parat	Preparation of Accounting Software	CMU						970				0.0				0.0				0.0			
1 Ac	Start Accrual Based Double Entry System	CMU						970				0.0				0.0				979			
	SUB-TOTAL_3							0.0				000				0				0			
	Sub TOTAL. A				0.0	000	0.0	000	9	9	99	000	0.0	0.0	0.0	0.0	0.0	000	000	0.0	0.0	0.0	00

+			Tota	lof	-								7005.3007									2007-2008	Total
(uo	2005-2006	2006												4			-		13		Parition
St. No.	Head of Accounts	S	Expenditure	noisivorq IssierA ni	Apr.	May	June	14L Qu.	July	Aug.	Sept.	Upto 2nd. Qtr	Oct.	Nov.	Dec.	Upto 3rd. Qir	Jan.	Feb.	Mar.	Upto 4th. Qtr	oiziver¶ rejer¶ ni	Provision in Project	Period
B. Ecc	Economic Development	ıt																					
4 Eco	Economic Development																			6			
A. Asse	Assessment of SJSRY	18C DFID						0.0				0.0				0.0				0.0			
b. Loca	Local Economic Development Intervestion		eru eru				7/4	0.0				0.0				0.0				0'0			
	Sub TOTAL B					0.0	000	0.0	000	0.0	000	0.0	0.0	000	0.0	0.0	0.0	9	0.0	0.0	8		
C. He	Health																						
5 Sup	Support to Health Sector																						
a. FW	Constitution of Municipal Level Health & PW Committee	Health &						0.0				0.0				0.0				0.0			
b. Res	Restructuring of Blocks of ULBs							0.0				0.0				0.0				0'0			
C. STS	Re-orientation training for HHWs, FTSs, STSs / ANMs	fs, FTSs.						000				0.0				0.0				0.0			
d. Trai	Trainers training by CMU on food & nutrition and growth monitoring of under 5 children	od & of under 5		0				00				3				0.0				0.0			
	Training at HAU level by trainers on food & nutrition	KNA						0.0				0.0				0.0				0.0			
e. and	and growth monitoring of under 5 children	Non-KMA						0.0				0.0				0.0				0.0			
	ining on STD / HIV /	KMA						0.0				0.0				0.0				0.0			
. An	AIDS	Non-KMA						0.0				0.0				0.0				0.0			
-		KNA						99				99				0.0				0.0			
an Tra	Training on Adolescent care	Nee-EMA						99				000				979				0.0			
1		KNA						070				0.0				0.0				0.0	+		
4	and gender empowerment	Non-IDMA						0.0				0.0				0.0				0.0			
		KNA						0.0				0.0				0.0				0.0			
. H	HMIS and Family Schedule	Non-KMA						0.0				000				0.0				0.0		- Indiana	
	National Health	KNA						0.0				0.0				0.0				000			
J. Pro	Programmes	New-CMA						000				0.0				0.0				0.0			+

	Action Action	133forf ni	Y Pri	May	.HQ.Ntl 6.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0	Aper	Yes.	Sept.	Upto 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Oct.	Dec.	Opposite the second of the sec	Jau. Fe	Feb. Mar.	Upto	noiziven¶ Insien¶ ni	Provision in Project	Period
	others				0.0				0.0 0.0 0.0 0.0 0.0 0.0 0.0			90 90 90 90			-			
					0.0				0.0 0.0 0.0 0.0 0.0			0.0 0.0 0.0 0.0 0.0 0.0 0.0				-		
					0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0				000 000 000 000 000			00 00 00 00			0.0			
					0.0				9 9 9 9			00 00 00 00			0.0			
					0.0				9 9 9 9			00 00 00			0.0			
					90 90 90				0.0			0.0 0.0			0.0			
					0.0				9, 9, 9,			90 90			0.0			
					90 90				0.0			0.0			0.0			
					90 90				0.0			0.0						
					0.0				0.0			0.0			0.0			
					0.0							+			0.0			
					0.0				0.0			0.0			0.0			
					0.0				0.0			0.0			0.0			
					-				0.0			0.0			0.0			
					0.0				0.0			0.0			0.0			
					0.0				0.0			0.0			0.0			
					0.0				0.0			0.0			0.0			
Procurement Provision of Uniform to					000				0.0			0.0			0.0			
Provision of Uniform to																		
					0.0				0.0			0.0			0.0			
HHW, FTS & STS Non-KMA					0.0				0.0			0.0			0.0			
Provesion of Kit has with					0.0				0.0			0.0			0.0			
ii. contents Non-KMA					0.0				0.0			0.0			0.0			
Demino of ormark monitorino					0.0				0.0			0.0			0.0			
iii card by CMU Non-KMA					0.0				0.0			0.0			0.0			
					0.0				0.0			0.0			0.0			
machine with jacket by CMU Non-KMA					0.0				0.0			0.0			0.0			
Development of training mannual for grass v , root level functionaries by CMU in consultation with AIIH & PH					0.0				0.0			0.0			0.0			

Head of Accounts Printing of trainning mannual Development of Family Schedule & HMIS format by CMU Proteing of Family Schedule & HMIS format by CMU Proteing of Family Schedule & HMIS format by CMU Proteing of Family Schedule & HMIS format by CMU Proteing of Family Schedule & HMIS format by CMU Proteing of Family Schedule & HMIS format by CMU Refumishment of Sub-Centre (### 1000	dia di se di															u		
of training mannal Non-EMA property of Family Schedule & HMIS by CMU ROAN go of Family Schedule & HMIS by CMU ROAN Non-EMA Non-EMA Non-EMA I charges for professionals of CMU on of furniture & Non-EMA I charges for professionals of CMU on of Non-EMA I charges for professionals of CMU on of Non-EMA I when-EMA Sub TOTAL 5 Sub TOTAL 5 Sastructure "Manicipal Infrastructure of hamiltoning the section of hamiltoning the section of hamiltoning the section of hamiltoning the section hamiltoning the section of hamiltoning the section hamiltoning and for intra-municipal structure & community needs	d	Project A	r. May	June	Ist. Qer.	July	Aug. Sept.	Upto Ind. Otr.	061.	Nov.	Dec	Upto 3rd. Qtr.	Jau.	Feb. M	Mar. Upto	Ath. Ott. Provision	Provision in Project	Prior
of trainning mannual Non-KMA present of Family Schedule & HMIS by CMU gof Family Schedule & HMIS format ishment of Sub-Centre boo con of lumiture & KMA non of lumiture & KMA I Non-KMA I Non-KMA ULBs Sub TOTAL 5 Sastructure "Municipal Infrastructure ** "Admicipal Infrastructure ** "Admicipal Infrastructure with necessary augmentation in bool infrastructure & community needs structure & community needs		ni ni			0.0			0.0				0.0	-	-	0.0	+		
poment of Family Schedule & HMIS by CMU gof Family Schedule & HMIS format ishment of Sub-Centre Nas-KMA non of fumiture & Nas-KMA non of fumiture & Nas-KMA non of fumiture & Nas-KMA tot - 6, Nutritionarie - 3, & Nas-KMA tot - 6, Nutritionarie - 3, & Nus-KMA sab TOTAL 5 astructure Mannicipal Infrastructure & Scommunity needs structure & community needs structure & community needs structure & community needs structure & community needs					0.0			0.0				0.0	-		0.0	-		
by CMU g of Family Schedule & KMA formal ishment of Sub-Centre KMA Non-KMA to de furniture & KMA Non-KMA to de furniture & KMA Sub TOTAL Smithtican - 2 & KMA Non-KMA Non-KMA Sub TOTAL 5		-			0.0			0.0				0.0			0.0			
formal Name of Sub-Centre KAA Name KAAA Non-Centre KAAA Name KAAA Name KAAA Name KAAA Name KAAA ULBs Sub TUTAL 5 Substitution - 2 & Name KAAA ULBs Sub TUTAL 5 **Sub TU		-	-		00	-	-	0.0				0.0			0.0			
ishment of Sub-Centre NAM Nam-KMA Nam-KMA Nam-KMA I charges for professionals of CMU or -6, Nutritionaris -3, Sustitician -2 & ton-6, Nutritionaris -3, Sustitician -2 & ton-6, Nutritionaris -3, Sustitician -2 & ton-KMA I Non-KMA I Non-KMA Sub TOTAL					9 9	+		0.0	-			0.0			0	0.0		
ishment of Sub-Centre Naw-KMA Non-KMA nent (if required) for ientres nent (if required) for ientres nent (if required) for Non-KMA nent (if required) for Non-KMA I Non-K	-	-			9 0	1		0.0				0.0			0	0.0		
nen of furniture & KMA nent (if required) for Non-KMA to e., Nutritionsis 3, Sanistician - 2 & non-6, Nutritionsis 3, Sanistician - 2 & Non-KMA I Non-KMA					0.0			0.0				0.0			•	0.0		
on of furniture & NMA nent (if required) for entres charges for professionals of CMU or - 6, Nutritionist - 3, Smithtician - 2 & vision of health activities at 40 KMA i Non-KMA ULBs Sub TOTAL 5 Sub TOTAL 5 Sastructure	1	+	-	-	0.0		-	0.0				0.0			0	0.0		
contes charges for professionals of CMU or - 6, Nutritionist - 3, Smithtighn - 2 & or - 6, Nutritionist - 3, Smithtighn - 2 & resion of bealth activities at 40 KMA 1 Non-KMA ULBs Sub TOTAL					9		-	0.0				0.0			•	0.0		
charges for professionals of CMU or - 6, Nutritionist - 3, Statistician - 2 & user Assat 1) for monitoring & vision of health activities at 40 KMA 1 Non-KMA ULBs Sub TUTAL5 3.84 TUTAL5 3.84 TUTAL5 3.85 Tuture -Municipal Infrastructure -Muni					000	+	1		-	-								
Sub TOTAL					93			0.0	q			3				00		
Sall 1914	-	-	0.0	99	90	0.0	0.0	0.0	0.0 0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0		
ASULUCTURE Municipal Infrastructure five Fund for intra-municipal structure & community needs structure with necessary augmentation in														-	-	-	-	-
-Municipal Infrastructure five Fund for intra-municipal structure & community needs structure with necessary augmentation in	-	-	-	-	00	-		0	0.0			0.0				0.0		-
structure & community needs structure & community needs	0	+	+	-			-	'		-		00				0.0		
level infrastructure with necessary augmentation in					00				9									-
	city system						-	-								0.0		
Developing manual for infrastructure works ISC CMU					0.0		1		0.0	-	-	0.0		+	-	0.0		
Shun Lovel Infrastructure					0.0		-	+	+	+	+	000	00	90	0.0	-		-
SUB-TOTAL_8			0.0 0.0	0.0	0.0	0.0	00	000	0.0 0.0	0.0	0.0	20	2					
Trans-municipal infrastructure (WB Municipal Development Fund)	nent Fund)						-	-								00		
Donign of inter-municipal infrastructure works KMDA					0.0				0.0	-		0.0			+			+
Challenge Fand					0.0				0.0			0.0			1	80	00	-
D	0.0	0.0	0.0 0.0	0 0.0	0.0	0.0	000	0.0	0.0 0.0	0.0	0.0	000	0.0	0.0	no.	0.0		-

	March Marc			-	Total of	Jo !								200	2006-2007					-	-	1	1	5007-1007	Total Provision
Contact Note Cont	Control that present that (24) Column Colu	9	•	Action	2005- Expenditure	8		May	June	int. Que.	July	Aug	Sept.	2nd. Qur.				Jed. Qir.				4th. Qir.	in Project		Fage place
Figure 10 Color Co	Particular Coult	1												-	-			-	-	-	-	-	-		
The Coulombin of the County of	This College									0.0				970				0'0			-	0.0			
This could be previously Paris P	This Coult	1000		CMU						979				0.0				3.0			1	0.0			
State Counting to Accommodation State	State Council but Assumentation State									0.0				0.0				0.0	-	-	+	0.0	1	1	
The control of the	Technical Equipment of Counciliant Agencia Councilia Councilia Councilia Councilia Cou									0.0				0.0				-	-	+	-	000	1	1	
Technical Experient Countinants in Continue Statement of Experient Countinants in Continue Statement of Experient and Countinue Statement of Experient Annual Statement of Experient Annual Statement of Experient Annual Statement of Experient Annual Statement of Countinue Statement Annual Annua	Technical Experient Countrient of Countrient						0.0	0.0	000	0.0	0.0	0.0	0.0	000	0.0	0.0	-	-	-	-	0.0	00			
Equipment of Control and Conclusions for Charles Conclusions Conclu	Equipment of Control set Cold	1 64														-		-	-	-	-	-	-		
Engineerial Commission Appeals Continuous of Commission Appeals Continuous of Commission Appeals Continuous of Commission Appeals Continuous of Commission Appeals Continuous Superprint Appeals Continuous Superpr	Programment of Communication Apparent of Controller State			U ISCOM	2					979				000				979				0.0			
Experience of Accouncia Support Agency Correct Council Accouncia Support Agency Council Support Agenc	Proposition of Accouncies Support Agency Conf. Part C			ISC CM	2					00				0.0				0.0				000			
Provincement Agreement A	Provisional Agency Provisi	B (4)	10000	CARD						979		-		0.0				0.0				0.0			
Sub-Total Library Approximation Approximation Approximation from word in Conting Supernorm Agency Sub-Total Library Library Canal Library Library Canal Lib	Substitutionary Agency Apparent Agency App	S 44								0.0				0.0		1		0'0		1	1	000			
Notational control of the control of	Stub-TotAL_112 G.0.		1							0.0				0.0				0.0			1	0.0	1		
Monitoring CMU Quality Support Agency CMU Quality Support Agency	Mostificating CAM Ga		sub-total_12			- 0	0.0			3	90	3	0.0	99	99	0.0	000	0.0	0.0	9	0.0	000			
Equipment of Quality Support Agency	Englishment of Challity Support Agency CAM D																								
Final parameter of Exement Audit SC CMU SUB-TOTALL 13	Fingagement of Excernal Audit SC CMU SU SUB-TOTALL I S		1	CM	7					0.0				0.0				0.0				0.0			
Preparation of containing frame work ISC CMU Q.0	Proposition of constituting, evaluation frame work ISC CMU G.0			ISCO	NA.					0.0				0.0				0.0				0.0			
SUB-TOTAL-13 SUB-T	SUB-TOTAL_13 Sub-T	F 64		nork ISC CI	MU					0.0				0.0				0.0				0.0			
E 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.	Sub Total. E 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0	- 1		-			00	+	+	0.0	8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
	Planning			-	0.0	0.0				0.0	9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3

.

			I OUR OF									2006-2007	0.5								9007-1007	Lotal
St. No. Head of Accounts		Action Action	8	noitivon¶ tosijon¶ ni	Apr. M	May June		.ng.asi	July Aug.	E. Sept.	otqU	2nd. Qtr.	Nev.	Dec.	Upto 3rd. Qir.	Jan.	Feb.	Mar.	Upto	noizivor¶ rosjor¶ ni	Provision in Project	Francision fo
14 Howrah rejuvenation and dev plan and preparation of Urban Stratigy	dev plan and	preparation	of Urban	Stratigy	1																	
Howrah Rejuvenation & Development Plan		MAD					d	0.0			0.0		-		0.0				979			
Preparation of West Bengal Urban Stratigy		MAD				1/4	6	0.0			0.0	*			0.0				0.0			
SUB-TOTAL_14		000		0.0	0.0	0.0 0.0		0.0	0.0 0.0	000	000	000	0.0	0.0	0.0	0.0	000	0.0	000			
15 Poverty Survey & Impact Study	Study	0.0					•	9			0.0	-			0.0				0.0	0.0		
16 DDP / ADP Preparation			1		100																	
Preparation of Guideline	2	ISC					•	0.0			0.0				0.0				0.0			
Slam level Socio-Economie & Base Line Survey 1SC CML	Line Survey 1SC	CMU					9	0.0			0.0		DE N		0.0				0.0			
Participatory poverty assessment	ISC	ISCCMU					0	0.0			0.0				0.0				0.0		8-4	
Preparation of Infrastructure Mapping, Design & Estimating	ut. Design & 15C	ISC CMU						0.0			8				0.0				0.0			
Proparation of Financial Leveraging & Improvement Plan (FLIP)		ISC CMU					•	0.0			0.0				0.0				3		1	
Preparation of State of Environment Assessment Report	-	BSC WBPCB					-	970			979				979				0.0			
Preparation of DDP & ADP	ISC	ISC CMU ULB						0.0	-		0.0				0.0				0.0			
Awareness Campaign							-	0.0			0.0											
Problem identification from Citizen & Ward Committee								0.0			0.0											
Quick Slum Survey								0.0			970											
Stum Micro-Planning								0.0			0.0				970							
зив-тотиг-16		0.0			0.0	0.0	0.0	0.0	000	0.0 0.0	000 00	0.0	000	00	0.0	000	0.0	0.0	8			
17 Design of West Bengal Municipal Development Fund		ISC KMDA	•	00'0				979			0.0			-	0.0				970		0.0	1
Sub TOTAL F		0.0		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0 0.0	0.0	0.0	0.0	0.0	99	99	0.0	0.0	0.0	0.0	0.0
GRAND TOTAL		0.0		0.0	0.0	0.0	0.0	0.0	000	0.0	0.0 0.0	0 00	0.0	0.0	0.0	0.0	0.0	000	0.0	000	0.0	0.0

424 Final Account not yet ready

A proposal for allotment of Rs. 20 crore for the year 05-06 is lying with DFID



STATE URBAN DEVELOPMENT AGENCY

HEALTH WING "ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

Ref No.SU.DA-Health/DFID/04/23(22)

010

Date ...19.05.2006

From: Dr. Shibani Goswami

Project Officer Health Wing, SUDA

To

: The Mayor / Chairman

Alipurduar / Balurghat / Burdwan / Darjeeling / Durgapur / English Bazar / Jalpaiguri / Kharagpur / Raiganj / Siliguri / Asansol / Cooch Behar / Jangipur / Berhampur / Suri / Bolpur / Krishnagar / Kalna / Purulia / Bankura / Bishnupur /

Medinipur Municipal Corporation / Municipality

Sub: Spreading message against Practice of Sex Selection and Female Foeticide.

Sir / Madam,

You may be aware that female ratio in the age group of 0-6 years is declining fast. This is more severe in urban areas of majority of States and in the relatively affluent regions like Punjab, Haryana, Himachal Pradesh, Gujrat, Maharashtra, Delhi, Chandigarh etc. The Govt. of India has expressed great concern in the matter. In this connection, a Brief Note on Prenatal Sex Determination & Female Foeticide is enclosed for your kind perusal.

As desired by the Ministry of Health & Family Welfare and Ministry of Urban Employment & Poverty Alleviation, GOI, you are requested to help spread the message against the Practice of Sex Selection and Female Foeticide in whatever manner is feasible, particularly through the health programmes being implementing in your ULB and take further necessary action to stop the menance.

This issue may also be highlighted during group discussion conducted at various level under IEC Programme towards dissemination of message.

A feed back in this regard may kindly be granted.

Thanking you.

Yours faithfully

Enclo.: As stated.

SUDA-Health/DFID/04/23(22)/1(22)

19.05.2006

Health Officer / Asstt. Health Officer,

...... Municipal Corporation / Municipality.

C-Dr. Goswami\DFID\DFID - ULBS.doc

Tel/Fax No.: 359-3184

- 2 -

SUDA-Health/DFID/04/23(22)/2(22)

CC

Project Director, Municipal Corporation / Municipality.

Project Officer

19.05.2006

SUDA-Health/DFID/04/23(22)/3(2)

CC

1. Jt. Secretary, Dept. of Municipal Affairs.

2. Director, SUDA

19.05.2006

Project Officer

Brief Note on Prenatal Sex Determination and Female Foeticide

The era of technology for prenatal sex determination (SDT) is traced back to 1970. But the initial method gave way to relatively safer non-invasive technique i.e. Ultrasonography. Very soon Ultrasound Clinics mushroomed all over India particularly in North India, leading to female foeticide in great number. Eventually, there was public outcry against the deplorable practice for female feticide. 1991 census showed further decline in female: male ratio i.e. 927 females to 1000 males. Govt. of India enacted PNDT (Prenatal Diagnostic Techniques – Regulation and Prevention of Misuse) Act. 1994. This Act provided for regulation of the use of Prenatal Diagnostic Techniques for the purpose of detecting genetic disorder and for prevention of misuse of such technique for the purpose of Prenatal Sex Determination leading to Female Feticide.

Ban on sex determination technique could not pull the rein on occurrence of female foeticide as would be seen in the results of 2001 census which revealed a sex ratio of 933 females: 1000 Males, which indicated failure to improve much above the previous census data of 1991 in this respect. The situation in North India was the worst where the ratio was 727: 1000. To control the situation strict enforcement of PNDT Act. was contemplated by the State Govts. in North India with numerous raids on Ultrasound Clinics and cancellation of registration of many such clinics.

A study on Sex Determination Test and Practice of Female Foeticide was conducted in North India during 2002 – 2003. Overall 1162 women aged between 15 years – 29 years were screened in 11 villages having a population of 16475. The salient findings of the study are as under:

- 200 women (17.2%) were enlisted as pregnant. Of them 59% were aged 21 25 years. 13% were aged less than 20 years.
- Literacy rate was 73%.
- Living in joint family 74%.
- Caste-wise, 1/4th were Hindu high caste, 65% were Hindu-backward or low caste.
- 134 cases (67%) reported test done during pregnancy. 45 cases had Ultrasound test done.
- 23 cases (13%) confessed test done for sex determination.
- 95% had knowledge of Ultrasound test is being done for sex determination.
- 83% opined Sex Determination Test (SDT) practice is not good.
- Two cases of female foeticide was done out of three cases where sex of foetus was declared as female.

Some observations on response about status of daughter in the family:

- Problems of parents for going out at night leaving behind the daughter at home.
- Daughters need more careful rearing lest they go astray.

Contd. to P-2.

d) To ensure that all the States / UT appropriate authorities furnish quarterly returns to CSB (Central Supervisory Board) giving a report on the implementation and working of the Act.

From all above, it can be concluded that -

i) Female / male ratio is fast declining.

C ,44

- ii) If this trend persists it is likely to cause social crisis in due to imbalance in female: male ratio in the population profile.
- iii) Prenatal Sex Determination and Sex Selection is a crime punishable under law.
- iv) 'Son Syndrome' is a misconception and the idea should be discouraged and totally discarded Proper education should be given and people should be motivated for the purpose.
- v) Do not neglect female child. They are valuable assets of the society.
- vi) Now a days every one is equal. Sons and daughters have equal rights in eyes of law.
- vii) Realisation of value of daughters by their own families is the need for the hour.
- viii) Inhuman attitude and behaviour of some section of public society towards girl child should be removed and a change should be brought in through KABP exercise.
- ix) Strict enforcement of PNDT Act. 1994 should be ensured at all levels.
- x) Adequate supervision and vigilance on Ultrasound Clinics, nursing home, private institutions etc. be carried out by the competent authorities / ULBs to prevent illegal prenatal sex determination and female feticide.
- xi) Errant doctors and clients be punished as per law.
- xii) Public awareness campaign against practice on prenatal determination of sex and female foeticide be organized by ULBs through suitable advertisement in the print, leaflets, hoardings, electronic media etc.
- xiii) Various IEC programmes on the subject be organized under overall supervision of HO / AHO of the ULBs under the ongoing community based health programmes at different levels like at project block level by HHWs in group meetings; at Sub-Centre level by FTSs and MOs; at different Ward levels by Ward Councillors, members of the Ward Committees and UHIOs.
- xiv) CDS of the ULBs be involved in awareness campaign.
- xv) Suitable local NGOs & CBOs be also entrusted for wide publicity in the matter.
- xvi) Chairpersons of ULBs may also organize several public meetings in groups involving both APL & BPL population for effective generation of awareness on dangerous practice of Prenatal Sex Determination and Female Foeticide keeping in view the provisions of PNDT Act. and directions of the Supreme Court.

Reference:

- 1. Indian Journal of Community Medicine, Jan. to March, 2006
- 2. Journal of Indian Medical Association, Kolkata, Jan., 02, Dec., 03 & May, 05.



15. 2

215

2 16

r July-December, 2005......4,03,133

Ø Siliguri 23,467

ইন্টারনেট সংস্করণ: htt

68850,

টা পর্যস্ত) ২৩০০০৩৩৭



কলকাতা, রবিবার ২৩ এপ্রিল ২০০৬, ৯ বৈশাখ ১৪১৩

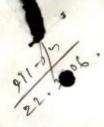
দেশজুড়ে পুরুষের তুলনায় নারীর সংখ্যা

দ্রুত কমছে

সমৃদ্ধ দন্ত, নয়াদিল্লি, ২২ এপ্রিল: দেশে নারী ও পুরুষের সংখ্যার অনুপাতের ফারাক উদ্বেগজনকভাবে বেড়ে চলেছে। দেশজুড়ে নারীর সংখ্যা পুরুষের তুলনায় কমছে ক্রুতহারে। কন্যাসন্তানের সংখ্যা এভাবে কমে যাওয়ার প্রবণতা বিহার, উত্তরপ্রদেশ, রাজস্থান, পাঞ্জাবে সবচেয়ে বেশি হলেও কোনও রাজ্যকেই সার্বিক ক্রিনচিট দেওয়া যাচ্ছে না। ফলে সমস্যাটা দেশজুড়েই। কেন্দ্রীয় স্বাস্থ্যমন্ত্রক সমস্ত রাজ্যকে বিশেষ সতর্কবার্তা দিয়ে জানিয়েছে এই সমস্যা ঠেকাতে প্রত্যেক রাজ্যকেই উদ্যোগী হতে হবে। স্বাস্থ্যমন্ত্রকের নির্দেশ, রাজ্যের রোগনির্ণয় কেন্দ্র এবং বেসরকারি নার্সিং হোমগুলির রিভিউ করা হোক এবং শুধু 'লিঙ্গ নির্ধারণ নিষিদ্ধ' এই নির্দেশ জারির মধ্যে সীমাবদ্ধ না থেকে রাজ্য সরকার বিশেষ নজরদারিরও ব্যবস্থা চালু করুক।

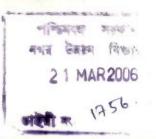
ষাস্থ্যমন্ত্রক সূত্রে জানা গিয়েছে, ৬ বছর বয়স পর্যন্ত শিশুকন্যার সংখ্যা গত বছরগুলিতে পুত্রসন্তানের তুলনায় অত্যন্ত দ্রুতহারে কমে গিয়েছে। ১৯৯০ সালের হিসেবে দেশে নারী ও পুরুষের আনুপাতিক হার ছিল এক হাজার পুরুষ প্রতি ৯২৭জন নারী। এই সংখ্যা পরবর্তী সময়ে কিছুটা বাড়লেও ২০০১ সালের হিসেবে কন্যাসন্তান কমে যাওয়ার প্রবণতা ফের ধরা পড়ে। এবং তারপর থেকে নিয়মিত রিভিউতে দেখা যাছে সেই প্রবণতার কোনও পরিবর্তন তো হচ্ছেই না, উলটে কয়েকটি রাজ্যে পরিস্থিতি উদ্বেগজনক। স্বাস্থ্যমন্ত্রক সূত্রে জ্বানা গিয়েছে, ন্যাশনাল ইশপেকশন অ্যান্ড মনিটরিং কমিটিকে নির্দেশ দেওয়া হয়েছে বিভিন্ন রাজ্যে বিশেষ পরিদর্শন এবং জেলাভিত্তিক তদন্ত করার জন্য। পাশাপাশি রাজ্য সরকারকে বলা হচ্ছে যেসব জেলায় নারী-পুরুষের অনুপাতের বৈষম্য অস্বাভাবিক, সেখানে স্থানীয় প্রশাসনের সাহায্যে নার্সিং হোম এবং রোগনির্ণয় কেন্দ্রগুলির উপর জেরদার নজ্বনারি চালু করতে। জেলাশাসকদের আলাদা করে বলা হয়েছে তাঁরা নিজেদের জেলায় লিঙ্গ নির্ধারণ সংক্রান্ত আইন রেগানির্ণয় কেন্দ্রগুলি ঠিকঠাক মেনে চলছে কিন তা নিয়িমিত খতিয়ে দেখার একটি পরিকাঠামো তৈরি করুক। সেইমতো রিপোর্ট পাঠানো হোক রাজ্য সরকারের কাছে।

স্বাস্থ্যমন্ত্রক থেকে জানানো হয়েছে, দেশে লক্ষ্যণীয়ভাবে নারী নাগরিক তথা শিশুকন্যার সংখ্যা এভাবে কমতে থাকলে সামাজিক ভারসাম্যে সংকট উপস্থিত হবে। তাই কন্যান্রূল হত্যা রোধ করতে এবং কন্যাসন্তানের প্রতি সমাজের কিছু অংশের অনৈতিক মনোভাব দূর করার জন্য নারী ও শিশুকল্যাণ মন্ত্রক, জাতীয় মহিলা কমিশন এবং ইন্ডিয়ান কাউন্সিল অব মেডিকেল রিসার্চকে একযোগে প্রকল্প রচনার দায়িত্ব দেওয়া হয়েছে।









K

हाउसिंग एण्ड अर्बन डेवलपमेंट कॉर्पोरेशन लिमिटेड (भारत सरकार का उपक्र)

15 एन, लिन्डसे स्ट्रीट, कोलकाता - 700 087, Tele. : 2252-6140 / 0774 / 0775, फेक्स : 033-2252-5511, ई-मेल : kro@hudco.org Housing & Urban Development Corporation Ltd. (A Govt. of India Enterprise)

15N, Lindsay Street, Kolkata - 700 087, Tele.: 2252-6140 / 0774 / 0775, Fax: 033-2252-5511, E-mail: kro@hudco.org

NO.: KRO-HQ/Guide-P(H)/6972

The Secretary to the Government of West Bengal

Urban Development Department "NAGARAYAN". DF-8, Sector-I (behind Bikash Bhawan), Salt Lake City Kolkata - 700 064.

March 16, 2006

Sevarens campaign through hatlet may be arranged.

Madam.

The Secretary, Ministry of Urban Employment & Poverty Alleviation (UE&PA). Government of India through her letter dt.14.02.2006 addressed to HUDCO had expressed her concern regarding declining female ratio in the age group of 0-6 years. It was indicated in her letter that the problem was more severe in urban areas of majority of the states and in the relatively affluent regions like Punjab, Haryana, Himachal Pradesh, Gujarat, Maharashtra, Delhi, Chandigarh etc.

As desired by the Ministry of Health & Family Welfare through the Ministry of Urban Employment & Poverty Alleviation, it is requested to help spread the message against the practice of sex selection in whatever manner is feasible through programmes being implemented by your organisation.

Thanking you,

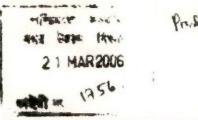
Yours faithfully,

(Ritabrata Ghosh) Assistant Chief (Projects)

Gran Development Dept 22.3.07

21.7.06





K O L K A

हाउलिंग एण्ड अर्बन डेयलपमेंट कॉर्पोरेशन सिनिटेड (भारत सरकार का प्रवक्त)

15 ਇਸ, ਗਿਵਲੇ ਦੁੰਦ, ਵੀਜਕਾਜ਼ - 700 087, Tele.: 2252-6140/0774/0775, ਪੈਕਸ : 033-2252-5511, ਵੀਜੰਗ : kro@hudoo.org Housing & Urban Development Corporation Ltd. (A Govi. of India Enterprise)

15N, Lindsay Street, Kolkata - 700 087, Tele.: 2252-6140 / 0774 / 0775, Fax: 033-2252-5511, E-mail: kro@hudco.org

NO .: KRO-HQ/Guide-P(H)/697.2.

March 16, 2008

The Secretary to the Government of West Bengal Urban Development Department "NAGARAYAN", DF-8, Sector-I (behind Bikash Bhawan), Salt Lake City Kolkata - 700 064.

J5(SB)

Madarn,

The Secretary, Ministry of Urban Employment & Poverty Alleviation (UE&PA), Government of India through her letter dt.14.02.2006 addressed to HUDCO had expressed her concern regarding declining female ratio in the age group of 0-6 years. It was indicated in her letter that the problem was more severe in urban areas of majority of the states and in the relatively affluent regions like Punjab, Haryana, Himachal Pradesh, Gujarat, Maharashtra, Delhi, Chandigarh etc.

As desired by the Ministry of Health & Family Welfare through the Ministry of Urban Employment & Poverty Alleviation, it is requested to help spread the message against the practice of sex selection in whatever manner is feasible through programmes being implemented by your organisation.

Thanking you.

Yours faithfully,

(Ritabrata Ghosh)

Assistant Chief (Projects)

which are

he

ett programa

AL PARAMETER MISS PARE

3/3/06

प्रिक्तिका कार्यात्म । स्वतिका एक अर्थन केस्पर्यन्त प्रिक्तिकान विभिन्देह, स्वति अस्त, अस्ति केस्त, स्विती रेस, वह विभी-110 001, 🕿 (011) 2464-9610-27, फैस्स : (011) 2462-5308 Regd. Office : Housing & Urban Development. Corp. Ltd. HUDCO Bhawan, India Habitai Centre, Lodhi Road, New Delhi-110 003, 🟚 : (011) 2484-9610-27, Fax: (011) 2462-5308



Fax 10 - 2241 - 2888 URBAN SERVICES FOR THE POOR ANAGEMEN

Memo No. CMU-94/2003(Pt. IV)/3307

From: Arnab Rov

Project Director, CMU

Attn: Dr. Rawt, App. 2 Hard.
Depr. of Epidermiology

To

: Prof. Indira Chakraborty, Director

All India Institute of Hygiene & Public Health

110, C.R. Avenue Kolkata - 700 073.

Training of Elected Representatives, Ward Committee Members &

Sanitary Inspectors of 40 Urban Local Bodies of Kolkata Metropolitan

Area on Urban Health matters under KUSP.

Dear Madam.

You may be aware that Kolkata Urban Service for the Poor (KUSP) is being implemented in 38 municipalities and in two Municipal Corporations of greater Kolkata Metropolitan Area (KMA) excepting Kolkata Municipal Corporation. The KUSP is aiming to reach urban services to 2.5 million BPL populations living in the slums of these municipalities. Apart from strengthening physical infrastructure, KUSP is also focusing on municipal capacity building. The component of health is also a major intervention aiming towards strengthening of existing health care services of the Urban Local Bodies.

The Urban Local Bodies at present provide primary health care services through a band of community based female honorary health workers at the door-step of the beneficiaries which is being supported by clinic services run through Sub-Centres. One Sub-Centre covers 5,000 BPL population. This primary health care service delivery is supported by referral services either from The ULBs also take care of the municipal maternity home or nearest Govt. hospitals. implementation of National Health Programmes along with Deptt. of Health & Family Welfare as well as public health issues.

As one of the objectives of KUSP is to support the Urban Local Bodies, it has been decided that the elected Representatives, Ward Committee Members, the Sanitary Inspectors & staff will be sensitized and oriented on Urban Health matters. We feel that your esteemed Institute may help in designing the course curriculum and conducting the sessions. There are 1033 nos. of elected Representatives and the total nos. of Ward Committee Members may be taken as 10370 while the total no. of Sanitary Inspectors & staff in 40 KMA ULBs is around 100.

In this regard Preliminary discussion was held amongst Shri D.K. Dutta, Adviser, KUSP and Dr. S. Goswami, Health Expert, CMU and Dr. D.K. Raut, Prof. & Head, Deptt. of Epidemiology, AIIH & PH on 23.02.2006. It may be mentioned here that the training of Health Officer & Asstt. Health Officer of Urban Local Bodies in Public Health & Management had already been conducted by your Institute in three batches where Dr. D.K. Raut was the course Co-ordinator. The whole programmes were highly appreciated by the participants.

Contd. to P-2.



You are requested kindly to look into the matter for further necessary action. We are accordingly looking forward for a detail proposal in this regard from your end, both technical &

Thanking you.

Yours faithfully,

Memo No. CMU-94/2003(Pt. IV)/3307/1(1)

Copy forwarded for kind information and necessary action to:

Dr. D.K. Raut, Prof. & Health, Deptt. of Epidemiology, AHH & PH.

Memo No. CMU-94/2003(Pt. IV)/3307/2(1)

Copy forwarded for kind information to:

Shri D.K. Dutta, Training Advisor, KUSP.

Project Director, CMU
Dt. .. 13.03.2006

Project Director, CMU

Dt. .. 13.03.2006

Project Director, CMU



We may go ahead with poreparatory works. The file may be placed again in May

8/3

Sri D.K. Dutta

Talked with PD today. He said to

go ahead with the programme save e encycl

scor, 3 & 144

Hence a copy of this note aing with a copy of

Hence a copy of this note aing with a copy of

Training plan cise sent to sim of tanusarhan

Training plan cise sent to sim of tanusarhan

Mukhippadlyny, Shir saital pulse thakuds. Shir Jayanda

Mukhippadlyny, Shir saital pulse thakuds. Shir Jayanda

Chakuborly. Dr S gowami, Shir Suray, Mihr,

Chakuborly. Dr S gowami, Shir Suray, Mihr,

Shir gipel Sankar & Shir Retan Chaudhing all of CMU

sun gipel Sankar & Shir Retan Chaudhing all of CMU

and JD. 9'cu: for fairer or recoray achons

A copy also is given to P.M of conu.

To S. gorwam.



A training plan under KUSP for this year has been worked out in consultation with the key persons of CMU including the PM as well as the JD. ILGUS. That is placed below.

Preliminary discussions have already been with some of the organisations viz. AIIHPH, IPHE etc. On approval the calendar etc. are to be finalized.

It is further to suggest in this connection that in respect of training on Accounting etc. the trainers may be selected from out of the officers of CA firms so long engaged in updating municipal accounts.

As regards the training of Ward Committee members (58-4) engaging Shri Amal Kumar Das, recently retired as the DDLB may be thought of within the parameters of TAG recommendations.

PM

P.D Shey kiedly See for appound.

On 212/06.

A.

may be

The power approved exapt for Nos 3 2 14. This will

be given by Agency engaged by CMB for CMS

2 e-governance.

Regarding '11' we may get the training

done by shortlisted firms who have done

the basic training at ULBS. The same

module may be followed.

module may be followed:

"x' - Faculty may be decoded when

"x' - Faculty may be decoded when

"x' - Faculty may be decoded when

the training is arganised.

The training is arganised.

The training plan with

modification as suggested above may k officered

to now.

14 12003 (PE-11) 1252 243

Discourse of the said

Sevetary.

Arnab Roy, IAS
Project Director

Memo No.CMU-146/2004(Pt-II)/2080(40).

Date: 16-02-2006

Sub: Proposed allocation of funds in KUSP ULBs from 2007-2008 to 2011-2012

Sir/Madam,

As you are aware, the KUSP programme design conceives of centrally driven programme implementation for the first three years and thereafter implementation of the programme by the ULBs as per their Draft Development Plan.

It has been felt necessary to inform all the ULBs about the fund which will be available to them from KUSP from the 4th year (2007-08 onwards) so that financial planning in the Draft Development Plan can be made accordingly.

For this purpose, Govt. of West Bengal and DFID have agreed on principles of allocation of available fund to the KUSP ULBs from 2007-08 onwards.

I am enclosing the availability of funds under 7 heads namely:

- 1) Intra Municipal Infrastructure
- 2) Economic Development
- 3) Capacity Building
- 4) Slum Level
- 5) Support to Health Centre
- 6) Technical Expertise
- Poverty and Impact Study.

These funds will be available from 2007-08 onwards provided the Funding Block for KUSP programme is removed by DFID India.

For each of these heads, the majority of the funds will be allotted on the basis of population according to 2001 Census. A portion of the fund has been kept aside for allotment to a limited number of ULBs according to performance in some specific areas which is detailed in the enclosed proposed allotment.

-continued-

Training Plan under KUSP for the year 2006-07

7	0	5	4	ω	N	_	No.
Orientation on duties & responsibilities, attitude development, expectations –	asic	Urban Health & Sanitation.	Duties, responsibilities of including basics of Municipal function, Capacity Building	Computer training- Application of GIS/Autocad/ Surveying System	Introduction to New Accounting Manual & Double Entry Accounting.	Orientation on KUSP & other Dev. Programmes & Draft Development Plan	Торіс
NHG/SHG/RCVs		Councillors, Ward Committee/CDS Members.	Ward Committee Members	Technical Personnel of ULBs as also of Support Organisations who have basic knowledge in Computer.	Personnel engaged in Accounts of the ULBs including Cashier (except Accountant)	Officials from support organisations	Target Group
	6 days	½ day	1 day		3 days	3 days x	Duration
14	40		60	Ch	20	3 x 2	No. of Courses Batches
12000	15000	8000	6000	120	2	100	ted No. of Participants
ILGUS/CMU	ILGUS/CMU (E.E.)	CMU/ILGUS (Dr. SGoswami)	CMU & ILGUS (Jayanta Chakrabarti)	CMU/ILGUS	Mukhupadhyay)/ILGUS	ILGUS / ATI	To be organised by

15.	14.		3	12.	=======================================			10.	.0		φ	NO.	S
Urban Health & Sanitation	Training on GIS and Satellite Imaging	(Financial)	Training on Urban Plans, Admn & Management	Access to Urban Services & Poverty Alleviation Programme	Basic Computer Training	of processes, etc.	License & Service charges, maintenance of record, issue	Resource mobilisation including assessment of tax,	Office maintenance including Budget & Plan	Engg. & Management	P.H. Engg. Project (Water Supply, Sewerage, Drainage, Solid Waste Management -		Topic
Sanitary Inspectors and Paramedical staff	CMU key persons		CMU key persons	TPO & CO	Support Organisations		relevant Deptt. of the ULBs	Standing Committee Members and staff of	tant & Sectional Heads of ULBs	OCALO A COMP	Engineers of ULBs & those upto E.E. of Support Organisations		Target Group
				2 days	days	2		2 days		1 day	2 days		Duration
a	0			O	1 0	00		0	0	00	o	Batches	No. of Courses
200	300			5	150	200		100	200	200	001	Partici- pants	No. of
Centrally at AllHPH	CMU (Dr. S. Goswami)/ILGUS	CMU/ILGUS	CMU/ILGUS	(SujoyMiha)	ATI	CMU/ILGUS		CMU/ILGUS	CVB	CMU/ILGUS	(Ratan Chaudhury)		To be organised by

Page No.2



It is important to note that this allotment will be available only if Funding Block is removed by DFID after the mid term evaluation. The mid term evaluation criteria has already been intimated to you vide CMU Memo No.CMU-164/2004(Pt-II)/827(40) dated 20-09-2005 (copy enclosed).

Even if Funding Block for the KUSP programme is removed, an individual ULB has to meet the mid term evaluation criteria before funds are released to the individual ULB.

You are requested to now take necessary action for preparation of DDPs taking into account the expected fund flow from KUSP. Municipal Affairs Department has been approached for letting ULBs know the approximate funds which can be made available to them from the Government from 2007-08 onwards for helping ULBs in preparing the financial plan for DDP. You may also contact Municipal Affairs Department for an idea of the fund flow from Government of West Bengal expected from 2007-08 onwards.

Thanking you,

Yours faithfully,

(Arnab Roy)

Project Director, CMU, KUSP

Encl: (1) A copy of letter No.CMU-164/2004(Pt-II)/827(40) dt.20-09-2005

Date: 16-02-2006

(2) Allotment of funds (7 Nos.)

Memo No.CMU-146/2004(Pt-II)/2080(40)/1(20).

Copy (along with copy of enclosures) for kind information to:

- 1) Secretary, Municipal Affairs Dept.
- 2) PS to MIC, Municipal Affairs Dept.
- 3) Director of Local Bodies
- 4) Director, SUDA
- 5) Chief Engineer, MED
- 6) Joint Director, ILGUS
- 7) Project Manager, CMU
- 8) Financial Adviser, CMU
- 9) Engineering Expert-1, CMU10) Engineering Expert-2, CMU
- 11) Municipal Finance Expert, CMU
- Urban Planner, CMU
- 13) OD Expert, CMU



Page No.3

- 14) Poverty Monitoring Expert, CMU
- 15) Health Expert, CMU
- 16) Procurement Expert, CMU
- 17) Training Adviser, CMU
- 18) Economist, CMU
- 19) Accounts Officer, CMU
- 20) Consultant (HDRP), CMU

Project Director, CMU, KUSP

Memo No.CMU-146/2004(Pt-II)/2080(40)/2(3).

Date: 16-02-2006

Copy (along with copy of enclosures) for kind information to:

- 1) Mr Andrew Kenningham, DFID India
- 2) Shri Shouvik Dutta, DFID India
- 3) Ms. Debashree Mukherjee, DFID India

Project Director, CMU, KUSP

Project Director

Date: 20-09-2005

Arnab Roy, IAS

Memo No.CMU- 164/2009 [Pt-II) [827 (40)

Sub: KUSP 3rd Year Funding Review - Indicators for External Evaluation in April 2007

Sir/Madam,

As you might be aware there is a funding block in the KUSP programme at the end of 3 years. An evaluation will be held in April 2007. The findings of the evaluation team will determine whether funding in the KUSP programme continues after 2007.

I am enclosing the indicators for the external evaluation in April 2007 which have been jointly agreed by Government of West Bengal and DFID India. You are requested to take all possible steps to ensure that the indicators are satisfactorily implemented in your ULBs before December 2006. I would request you to pay special attention on the following:

- Preparation of good quality DDP latest by December 2006.
- Introduction of accrual based double entry accounting system within December 2006. 2)
- Increasing spending for service delivery to the poor and maintenance of assets in slums to be 3) reflected in your budgets for the year 2005-06 and 2006-07.
- In the slums taken up for infrastructure work, please ensure the following: 4)
 - a) Access from all houses by all weather roads.
 - b) Drainage to reduce water logging.
 - Water supply of good regularity and quality.
 - d) Increasing number of house connections for water supply in the slums taken up for infrastructure development.
 - e) Total sanitation i.e. access to toilets for all slum dwellers.
 - Satisfactory maintenance of public toilets wherever constructed.

-continued-

LuttPD) and (5)/p-8.6



Page No.2

- 5) Own source of revenue by total revenue should show at least 10% improvement each year from 2004-05.
- 6) DDPs should incorporate local economic development plan.
- 7) Fully resourced asset management plan and maintenance arrangements should be in place for all slums taken up under KUSP programme before December 2006.

I hope you will give particular attention to the above so that the Mid Term Indicators are satisfactorily met during the external evaluation.

If you require any clarification please contact the undersigned.

Yours faithfully,

(Arnab Roy)

Project Director, CMU, KUSP

Encl: As stated above.

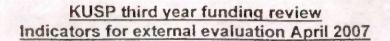
Memo No.CMU- 164 2004 (Pt-11) 1827 (40) 1 (14)

Copy (along with enclosures) to:

- 1. Secretary, Municipal Affairs Dept.
- 2. PS to MIC, Municipal Affairs Dept.
- 3. Director of Local Bodies
- 4. Chief Engineer, MED
- 5. Director, SUDA
- 6. Joint Director, ILGUS
- 7. Project Manager, CMU
- 8. Engineering Expert, CMU
- 9. Municipal Finance Expert, CMU
- 10. OD Expert, CMU
- 11. Health Expert, CMU
- 12. Urban Planner, CMU
- 13. Economist, CMU
- 14. Financial Adviser, CMU

Project Director, CMU, KUSP

Date: 20-09-2005



A Background

- 1. At design stage GoWB and DFID agreed to an externally evaluated funding review being carried out on the programme and on the slum infrastructure works. The outcome of both reviews will determine whether DFID will recommend to the DFID Director of Asia that funding continues. The extracts from the Project Memorandum below refer.
 - "3.3.11 In addition to funds linked to DDPs, ULBs would be eligible for funds for slum infrastructure (with limited rehabilitation of municipal networks). After the third year of implementation, to receive such funds, ULBs will have to demonstrate, through an external evaluation, that they meet a minimum standard relating to the management of slum infrastructure. KUSP will also support an incentive fund recently started by GoWB that seeks to reward ULBs for improved performance. After the initial stages of implementation, the incentive fund facility would be further refined on the basis of lessons learnt, including from well known good practices such as the "citizens report card system" in Bangalore. Allocations for slum level infrastructure and support to the incentive fund represent about 33% and 6% of the project budget.
 - 3.3.12 GoWB and DFID have agreed to a "funding review" at the end of three years from the start of the programme. At this stage the project's performance—will be evaluated by an external agency against indicators to be developed by CMU and agreed between GoWB and DFID during the first six months of implementation. The preparation of good quality DDPs for at least 12 municipalities will be a key indicator. Subject to a satisfactory outcome of the evaluation, DFID will recommend funding of the remainder of the project to Director Asia. If the outcome of the evaluation is not satisfactory, funding for all items will cease except for slum level infrastructure (and associated supervision costs). Approximately, disbursement of 75% of project funds will depend on the satisfactory outcome of the "funding review" and slum infrastructure management evaluations."
- 2. The purpose of setting goals and having an external review and possible spending block is to help ensure that the programme lives up to its potential and strives to deliver. It should not be seen as a way of setting impossible targets that aim to crush the programme.
- 3. To this end, detailed discussions were held with CMU officials and within the DFID KUSP team leading to agreement over the following set of indicators. The aim was to use indicators that are close to those that have previously been agreed, are easily measurable and cover items that KUSP is providing resources towards during the first 3 years.

B. Agreed Indicators

4. The indicators below have been agreed between the DFID Task team and the CMU and are based on Log-frame indicators.

(i) Funding Review indicators

A Same with the same of the sa

Indicator FR1 - At least 12 ULBs prepare good quality draft development plans as per guidelines by no later than December 2006 and are approved by KMPC by March 2007.

Indicator FR2 - Modern accounting systems introduced in 30 ULBs by March 2007. Updated accounts and balance sheets available in at least 30 ULBs by April 2007.

Indicator FR3 - ULBs' actual expenditures reflect increased spending for service delivery to the poor and maintenance of assets in slums in at least 30 ULBs by April 2007.

Indicator FR4 - Slums prioritised before the next set of slums are chosen in all ULB's, with respect to infrastructure deficiency indicators and poverty indicators and determine allocation accordingly.

Indicator FR5 - Infrastructure needs (in slums taken up under KUSP) met as indicated below in 50% of slums by April 07:

(i) Access from house to local roads by all weather roads.

(ii) Reduced incidence of water logging caused by local drainage problems

(iii) Potable water supplied to the satisfaction (appropriate regularity and quantity) of slum dwellers (of quality as available in the local aquifer unless it is served by surface supply water).

(iv) An increasing number of households supplied water through house connections.

(v) Total sanitation (complete access to toilets - no open defecation).

(vi) All public toilets adjacent to slum settlements maintained to the satisfaction of users

Indicator FR6 – All demonstrate increasing financial viability as evidenced by Own source/Total revenue (in revenue account), improving by at least a 10% improvement by the end of year 3.

Indicator FR7 - DDPs of ULBs incorporate local economic development plan in at least 12 ULBs by December 2006.

(ii) Review of Management of Slum Infrastructure
Indicator MS1 Fully resourced ULB level asset management plans and corresponding
local management structures in place and functioning in at least 50% of settlements
covered under SIP. Plans to be in place by 12 months from completion of construction
works for respective projects. Evidence should be provided of implementation of such
plans in slum works that took place in the first two years of the programme.

Allocation of Funds to ULBs from 4th Year 2007-2008 to 2011-2012

1. Intra-Municipal Infrastructure

Principle of allotment

i. 80% of total fund available on the basis of population (2001 census)

: Assured Allotment

ii. 10% of total fund equally available to first 12 ULBs whose DDPs are approved

: shown as 'A'

iii. 10% of total fund equally available to first 12 ULBs who switchover to accrual based accounting: shown as 'B'

(Rs. in Lakh)

	Name of ULB	Population 2001	Allotme	ent of Fund in Year 2007-20	08 to 2011-2012
	Total Fund A	vailable		Rs. 9730 lakh	
st. No.	Allotment 7	Type	Assured (Rs. in Lakh)	A (available to 12 ULBs as per ii above)	B (available to 12 ULBs as per iii above)
1	Baidyabati	108231	107.92	81.08	81.08
2	Bally	261575	260.82	81.08	81.08
3	Bansberia	104453	104.15	81.08	\$1.08
4	Baranagar	250615	249.90	81.08	81.08
5	Barasat	231515	230.85	31.08	81.08
6	Barrackpore	144331	143.92	81.08	81.08
7	Baruipur	14964	44.84	81.08	81.08
8	Bhadreswar	105944	105.64	81.08	81.08
9	Bhatpara	441956	440.69	81.08	81.08
10	Bidhannagar	167848	167.37	81.08	81.08
11	Budge Budge	75465	75.25	\$1.08	81.08
12	Champdani	103232	102.94	81.08	\$1.08
13	Chandadannagar MC	162166	161.70	81.08	81.08
14	Dum Dum	101319	101.03	81.08	81.08
15	Garulia	76309	76.09	81.08	81.08
16	Gayeshpur	55028	54.87	81.08	81.08
17	Halisahar	124479	124.12	81.08	81.08
18	Hooghly-Chinsurah	170201	169.71	81.08	81.08
19	Howrah M. C.	1008704	1005.81	81.08	81.03
20	Kalvani	81984	81.75	81.08	81.08
21	Kamarhati	314334	313.43	81.08	81.08
22	Kanchrapara	126118	125.76	81.08	81.08
23	Khardah	116252	115.92	81.08	81.08
24	Konnagar	72211	72.00	81.08	31.08
25	Madhyaingram	155503	155.06	81.08	81.08
26	Maheshtala	389214	388.10	81.08	31.08
27	Naihati	215432	214.81	81.08	81.08
28	New Barrackpur	33183	82.94	81.08	81.08
29	North Barrackpur	123523	123.17	31.08	81.08
30	North Dum Dum	220032	219.40	81.08	81.08
31	Panihati	348379	347.38	81.08	81.08
32	Pujali	33863	33.77	81.08	81.08
33	Rajarhat Gopalpur	271781	271.00	81.08	\$1.08
34	Rajpur-Sonarpur	336390	335.42	81.08	81.08
35	Rishra	113259	112.93	81.08	81.08
16	Serampur	197955	197.39	81.08	81.08
37	South Dum Dum	392150	391.02	81.08	81.08
38	Fitagarli	124198	123.84	81.08	81.08
341	Uluberia	202095	201.52	81.08	81.08
-4()	Untarpara-Kotrang	150204	149.77	81.08	81.08
	TOTAL	7806395	7784.00	973.00	973.00

Disclaimer: a. Funds will be available as above only if Funding - Block is removed by DFID i.e. Mid term evaluation criteria is successfully met

b. For a particular ULB, even if Funding Block for KUSP is removed, the ULB has to fulfil Mid term evaluation criteria by itself to be eligible for funds

Allocation of Funds to ULBs from 4th Year 2007-2008 to 2011-2012 2.- Economic Development

Principle of allotment

i. 80% of total fund available on the basis of population (2001 census)

ii. 10% of total fund equally available to first 10 ULBs in whose budget for 2005-06 and 2006-07 there is maximum amount earmarked for service delivery to the poor and maintenance of assets in slums

iii. 10% of total fund equally available to first 10 ULBs in formation of SHGs

: Assured Allotment

: shown as 'A'

: shown as 'B'

	Name of ULB	Population 2001	Allotmer	nt of Fund in Year 2007-2008	3 to 2011-2012
SI, No.	Total Fund A	vailable		Rs. 2828 lakh	
	Allotment ?	Гуре	Assured (Rs. in Lakh)	A (available to 10 ULBs as per ii above)	B (available to 10 ULBs as per iii above)
1	Baidyabati	108231	31.37	28.28	28.28
2	Bally	261575	75.31	28.28	28.28
3	Bansberia	104453	30.27	28.28	28.28
4	Baranagar	250615	72.63	28.28	28.28
5	Barasat	231515	67.10	28.23	28.28
6	Barrackpore	144331	41.83	28.28	28.28
7	Baruipur	44964	13.03	28.28	28.28
S	Bhadreswar	105944	30.70	28.28	28.28
9	Bhatpara	441956	123.08	28.28	28.28
10	Bidhannagar	167848	48.64	28.28	28.28
11	Budge Budge	75465	21.37	28.28	28.28
12	Champdani	103232	29.92	28.28	28.28
13	Chandadannagar MC	162166	47.00	28.28	28.28
14	Dum Dum	101319	29.36	28.23	28.28
15	Garulia	76309	22.12	28.28	28.28
16	Gayeshpur	55028	15.95	28.28	28.28
17	Halisahar	124479	36.08	28.28	28.28
18	Hooghly-Chinsurah	170201	49.33	28.28	28.28
19	Howrah M. C.	1008704	292.34	28.28	28.28
20	Kalyani	81984	23.76	28.28	28.28
21	Kamarhati	314334	91.10	28.28	28.28
22	Kanchrapara	126113	36.55	28.28	28.28
23	Khardah	116252	33.69	28.28	28.28
24	Konnagar	72211	20.93	28.28	28.28
25	Madhyamgram	155503	45.07	28.28	28.28
36	Maheshtala	389214	112.30	28.28	28.28
27	Naihati	215432	62.44	28.28	28.28
28	New Barrackpur	83183	24.11	28.28	28.28
29	North Barrackpur	123523	35.80	28.28	28.28
30	North Dum Dum	220032	63.77	28.28	28.28
31	Panihati	348379	100.96	28.28	28.28
32	Pujali	33863	9.81	28.28	28.28
33	Rajarhat Gopalpur	271781	78.77	28.28	28.28
34	Raipur-Sonarpur	336390	97.49	28.28	28.28
35	Rishra	113259	32.82	28.28	28.28
30	Serampur	197955	57.37	28.28	28.28
17	South Dum Dum	392150	113.05	28.28	28.28
38	l'Hagarh	124198	35 99	28.28	28.28
34)	Uluberia	202095	58 57	28.28	28.28
40	Guarpara-Kotrang	150204	43.53	28.28	28.28
	TOTAL	7806395	2262.40	282.80	282.80

Disclaimer: a. Funds will be available as above only if Funding - Block is removed by DFID i.e. Mid term evaluation criteria is successfully met

b. For a particular ULB, even if Funding Block for KUSP is removed, the ULB has to fulfil Mid term evaluation criteria by itself to be eligible for funds

Allocation of Funds to ULBs from 4th Year 2007-2008 to 2011-2012

3. Capacity Building

Principle of allotment

- i. 20% of total fund kept earmarked for Capacity Building of Support Organisations
- ii. 70% of total fund available on the basis of population (2001 census)
- iii. 10% of total fund equally available to the first 10 ULBs (or lower) who have increased own source of revenue by more than 10% in each of last of 2 years i.e. 2005-06 and 2006-07

: Assured Allotment

: shown as 'A'

51. No.	Name of ULB	Population 2001	Allotment of Fund in Year 2007-2008 to 2011-2012		
	Total Fund: Rs.2940.00 lakh		Fund Available: Rs. 2352 lakh		
	Allotment Type		Assured (Rs. in Lakh)	(available to 10 ULBs as per iii above)	
1	Baidyabati	108231	28.53	29.40	
2	Bally	261575	58.96	29.40	
3	Bansberia	104453	27.54	29.40	
-6	Baranagar	250615	66.07	29.40	
5	Barasat	231515	61.03	29.40	
7	Barrackpore	144331	38.05	29.40	
7	Baruipur	44964	11.85	29.40	
5	Bhadreswar	105944	27.93	29.40	
9	Bhatpara	441956	116.51	29.40	
iù	Bidhannagar	167848	44.25	29.40	
11	Budge Budge	75465	19.89	29.40	
12	Champdani	103232	27.22	29.40	
13	Chandadannagar MC	162166	42.75	29.40	
14	Dum Dum	101319	26.71	29.40	
15	Garulia	76309	20.12	29.40	
16	Gayeshpur	55028	14.51	29.40	
17	Halisahar	124479	32.82	29.40	
13	Hooghly-Chinsurah	170201	44.87	29.40	
19	Howrah M. C.	1008704	265.92	29.40	
20	Kalyani -	81984	21.61	29.40	
21	Kamarhati	314334	82.87	29.40	
22	Kanchrapara	126118	33.25 ,	29.40	
23	Khardah	116252	30.65	29.40	
24	Konnagar	72211	19.04	29.40	
24	Madhyamgram	155503	41.00	29.40	
20	Maheshtala	389214	102.61	29.40	
27	Naihati	215432	56.79	29.40	
28	New Barrackpur	83183	21.93	29.40	
29	North Barrackpur	123523	32.56	29.40	
30	North Dum Dum	220032	58.01	29.40	
21	Panihati	348379	91.84	29.40	
32	Pujali	33863	8.93	29.40	
33	Rajarhat Gopalpur	271781	71.65	29 40	
34	Rajpur-Sonarpur	336390	38.68	29.40	
3.5	Rishra	113259	29.86	29.40	
10	Scrampur	197955	52.19	29.40	
:-	South Dum Dum	392150	103.38	29.40	
38	Litagarh	124198	32.74	29.40	
39.	1. luberia	202095	53.28	29.40	
2()	(Uttarpara-Kotrang	150204	39 60	29.40	
	TOTAL	7806395	2058.00	294.00	

Disclaimer: a. Funds will be available as above only if Funding - Block is removed by DFID i.e. Mid term evaluation criteria is successfully met

> b. For a particular ULB, even if Funding Block for KUSP is removed, the ULB has to fulfil Mid term evaluation criteria by itself to be eligible for funds

Allocation of Funds teULBs from 4th Year 2007-2008 to 2011-2012

4. Slum Level Infrastructure

Principle of allotment

- i. 43% to 'A' category slums
- ii. 32% to 'B' category slums
- iii. 15% to 'C' category slums
- iv. 8% to 'D' category slums
- v. 2% to 'E' category slums

Assured (Approximate)

Actual Fund allotment will be made calculating the no. of families in each category in each ULB discounting the slums covered in first three years

SI. No.	Name of ULB	Allotment of Fund in Year 2007-2008 to 2011-2012 Rs. 11907 lakh		
51. No.	Total Fund Available			
-		Assured (Rs. in Lakh)		
	Allotment Type	(Approximate)		
1	Bajdyabati	56.31		
2	Bally	224.20		
3	Bansberia	105.58		
4	Barajagar	320.04		
5	Barasat	203.42		
6	Barrackpore	352.07		
7	Baruipur	49.60		
8	Bhadreswar	198.14		
9	Bhatpara	672.36		
10	Bidhannagar	317.31		
11	Budge Budge	- 40.68		
12	Champdani	257.79		
13	Chandadannagar MC	162.99		
14	Dum Dum	121.50		
15	Garulia	50.97		
16	Gayeshpur	119.16 258.49		
17	Halisahar			
18	Hooghly-Chinsurah	243.60 1369.79		
19	Howrah M. C.	436.23		
20	Kalyani	301.97		
21	Kamarhati	120.21		
22	Kanchrapara	113.40		
23	Khardah	79.16		
24	Konnagar	120.73		
25	Madhyamgram	1543.22		
26	Maheshtala	130.47		
27	Naihati	163.97		
28	New Barrackpur	31.55		
29	North Barrackpur	507.77		
30	North Dum Dum	280.09		
31	Panihati	42.35		
32	Pujali	394.83		
33	Rajarhat Gopalpur	721.29		
34	Rajpur-Sonarpur	202.43		
35	Rishra	181.84		
36	Serampur	384.20		
37	South Dum Dum	238.49		
38	Titagarh	661.17		
39	Uluberia Uttarpara-Kotrang	127.60		
40	Uttarpara-Kotrang TOTAL	11907.00		

Disclaimer: a. Funds will be available as above only if Funding - Block is removed by DFID i.e. Mid zerm evaluation criteria is successfully met

b. For a particular ULB, even if Funding Block for KUSP is removed, the ULB has to fulfil Mid term evaluation criteria by itself to be eligible for funds

Allocation of Funds to ULBs from 4th Year 2007-2008 to 2011-2012 5. Support to Health Sector

Principle of allotment

i. 90% of total fund available on the basis of population (2001 census)

ii. 10% of total fund equally available to first 10 ULBs in performance in Health Sector to be judged on a few simple parameters

: Assured Allotment

: shown as 'A'

St. No.	Name of ULB	Population 2001	Alforment of Fund in Year 2007-2008 to 2011-2012		
	T-4-1 17 1 4 21 1.1		Rs. 1750 lakh		
	Allotment Type		Assured (Rs. in Lakh)	A (available to 10 ULBs as per ii abo	ive)
1	Baidyabati	108231	21.84	17.50	1
2	Bally	261575	52.77	17.50	
3	Bansberia	104453	21.07	17.50	
4	Baranugar	250615	50.56	17.50	
5	Barasat	231515	4 6.71	17.50	
6	Barrackpore	144331	29.12	17.50	
7	Baruipur	44964	9.07	17.50	
8	Bhadreswar	105944	21.38	17.50	
9	Bhatpara	441956	89.17	17.50	
10	Bidhannagar	167848	33.36	17.50	
11	Budge Budge	75465	15.23	17.50	
12	Champdani	103232	20.83	17.50	
13	Chandadannagar MC	162166	32.72	17.50	
14	Dum Dum	101319	20.44	17.50	
15	Garulia	76309	15.40	17.50	
16	Gaveshpur	55028	11.10	17.50	
17	Halisahar	124479	25.11	17.50	
18	Hooghly-Chinsurah	170201	34.34	17.50	
19	Howrah M. C.	1008704	203.51	17.50	
20	Kalyani	31984	16.54	17.50	
21	Kamarhati	314334	63.42	17.50	
22	Kanchrapara	126118	25.45	17.50	
23	Khardah	116252	23.45	17.50	
24	Konnagar	72211	14.57	17.50	C 10
25	Madhyamgram	155503	31.37	17.50	
26	Maheshtala	389214	78.53	17.50	
27	Naihati	215432	43.47	17.50	31.475
28	New Barrackpur	33183	16.78	17.50	
20	North Barrackpur	123523	24.92	17.50	
30	North Dum Dum	220032	44.39	17.50	42
31	Panihati	348379	70.29	17.50	
32	Pujali	33863	0 33	17.50	
33	Rajarhat Gopalpur	271781	54 83	17.50	
34	Rajpur-Sonarpur	336390	57 87	17.50	
35	Rishra	113259	22.85	17.50	
1(1	Serampur	197955	39.94	17.50	
17	South Dum Dum	392150	79.12	17.50	
:8	Titagarh	124198	25.06	17.50	
312	Uluberia	202095	40.77	17.50	
40	Uttarpara-Kotrang	150204	30 30	17.50	
	TOTAL	7806395	1575.00	175.00	

Disclaimer: a. Funds will be available as above only if Funding - Block is removed by DFID i.e. Mid term evaluation criteria is successfully met

> h. For a particular ULB, even if Funding Block for KUSP is removed, the ULB has to fulfil Mid term evaluation criteria by itself to be eligible for funds

Allocation of Funds to ULBs from 4th Year 2007-2008 to 2011-2012

6. Technical Expertise (Consultancy)

Principle of allotment

i. 50% of total fund kept earmarked for central expenditure

ii. 40% of total fund available on the basis depopulation (2001 census)

iii. 10% of total fund equally available to the first 10 ULBs who have increased house water connections in slums

: Assured Allotment

: shown as 'A'

(Rs. in Lakh)

	Name of ULB	Population 2001	Allotment of Fund in Year 2007-2008 to 2011-2012			
	Total Fund: Rs.700.00 lakh		Fund Available: Rs. 350 lakh			
I. No.	Allotment Type		Assured (Rs. in Lakh)	A (available to 10 ULBs as per jii above)		
1	l aidyabati	108231	3.88	7.00		
2	■ally	261575	9.38	7.00		
3	Tansberia	104453	3.75	7.00		
4	Baranagar	250615	8.99	7.00		
5	Barasat	231515	8.30	7.00		
6	Вагтаскроге	144331	5.18	7.00		
7	Вагиіриг	44964	1.61	7.00		
8	Bhadreswar	105944	3.80	7.00		
9	Bhatpara	441956	15.85	7.00		
10	Bidhannagar	167848	6.02	7.00		
11	Budge Budge	75465	2.71	7.00		
12	Champdani	103232	3.70	7.00		
13	Chandadannagar MC	162166	5.82	7.00		
14	Dum Dum	101319	3.63	7.00		
15	Garulia	76309	2.74	7.00		
16	Gayeshpur	55028	1.97	7.00		
17	Halisahar	124479	4.46	7.00		
18	Hooghly-Chinsurah	170201	6.10	7.00		
19	Howrah M. C.	1008704	36.18	7.00		
20	Kalyani	81984	2.94	7.00		
- 21	Kamarhati	314334	11.27	7.00		
22	Kanchrapara	126118	4.52	7.00		
23	Khardah	116252	4.17	7.00		
24	Konnagar	72211	2.59	7.00		
25	Madhyamgram	155503	5.58	7.00		
26	Maheshtala	389214	13.96	7.00	+	
27	Naihati	215432	7.73	7.00		
28	New Barrackpur	83183	2.98	7.00		
29		123523	4.43	7.00		
30		220032	7.89	7.00		
31		348379	12.50	7.00		
32		33863	1.21	7.00		
33		271781	9.75	7.00		
34		336390	12.07	7.00		
35		113259	4.06	7.00		
36		197955	7.10	7.00		
31		39215€	14.07	7.00		
35		12419	4.45	7.00		
31		202095	7.25	7.00		
40		150204	5.39	7.00		
	TOTAL	7806395	280.00	70.00		

Disclaimer: a. Funds, "ill be available as above only if Funding - Block is removed by DFID i.e. Mic. erm evaluationcriteria is successfully met

b. For a particular ULB, even if Funding Block for KUSP is removed, the ULB has to fulfil Mid term culvation criteria by itself to be eligible for funds

Allocation of Funds to ULBs from 4th Year 2007-2008 to 2011-2012

7. Poverty Survey and Impact Study

(Rs. in Lakh)

Principle of allotment

i. Fund available on the basis of population (2001 census)

: Assured Allotment

	Name of ULB		Allotment of Fund in Yea 2007-2008 to 2011-2012	
Sl. No.	Total Fund Available		Rs. 35 lakh	
	Allotment Type		Assured	
			(Rs. in Lakh)	
1	Baidvabati	108231	0.49	
2	Bally	261575	1.17	
3	Bansberia	104453	0.47	
4	Baranagar	250615	1.12	
5	Barasat	231515	1.04	
7	Barrackpore	144331	0.65	
	Baruipur	44964	0.20	
8	Bhadreswar	105944	0.48	
9	Bhatpara	441956	1.98	
10	Bidhannagar	167848	0.75	
11	Budge Budge	75465	0.34	
12	Champdani	103232	0.46	
13	Chandadannagar MC	162166	0.73	
14	Dum Dum	101319	0.45	
15	Garulia	76309	0.34	
16	Gayeshpur	55028	0.25	
17	Halisahar	124479	0.56	
18	Hooghly-Chinsurah	170201	0.76	
19	Howrah M. C.	1008704	4.52	
20	Kalyani	81984	0.37	
21	Kamarhati	314334	1.41	
22	Kanchrapara	126118	0.57	
23	Khardah	116252	0.52	
24	Konnagar	72211	0.32	
25	Madhyamgram	155503	9.70	
26	Maheshtala	389214	1.75	
27	Naihati	215432	0.97	
28	New Barrackpur	83183	0.37	
20	North Barrackpur	123523	0.55	
30	North Dum Dum	220032	0.99	
31	Panihati	348379	1.56	
32	Pujali	33863	0.15	
33	Rajarhat Gopalpur	271781	1.22	
34	Raipur-Sonarpur	336390	1.51	
35	Rishra	113259	0.51	
36	Serampur	197955	0.89	
37.	South Dum Dum	392150	1.76	
38	Fitagarh	124198	0.50	
39	Uluberia	202095	0.91	
40	Uttarpara-Kotrang	150204	0.67	
	TOTAL.	7806395	35.00	

Disclaimer: a. Funds will be available as above only if Funding - Black is removed by DFID i.e. Mid term evaluation criteria is successfully met

b. For a particular ULB, even if Funding Block for KUSP is removed, the ULB has to fulfil Mid term evaluation criteria by itself to be eligible for funds



Date..17.01.2005

From: Arnab Roy

Project Director, CMU

To: Mayor / Chairperson

All 40 ULBs under KUSP

Sub: Activities approved by DFID under

Health component of KUSP in the 1st year.

Sir,

You are aware that activities under KUSP funded by DFID have already been initiated in 40KMA ULBs.

DFID so far has agreed to support the following activities in the 1st year under Health component of KUSP in order to strengthen existing HHW services in 40 KMA and 21 Non-KMA ULBs; i.e.

- Provision of uniform to HHWs, FTSs & STSs / ANMs,
- · Provision of HHW Kit bag along with contents,
- · Re-training of Health care providers,
- · I.E.C. activities.

Provision of Uniform and HHW Kit bag may probably be one time supply from DFID fund. The ULBs are required to agree to continue with this type of subsequent supply, if needed from their own resources only. Hence, you are requested to indicate willingness / otherwise to enable this office to process the said activities. Approved samples and necessary fund will be provided to the ULBs to undertake the procurement accordingly from their end.

Details regarding re-training and I.E.C. will be intimated to you in due course. An early reply will be highly appreciated.

(Arnab Roy)

Project Director, CMU

Memo No.CMU-94/2003/532(40)/(5)

CC

1. Project Manager, CMU, KUSP

- 2. Technical Advisor, CMU, KUSP
- 3. Procurement Expert, CMU, KUSP
- 4. Financial Advisor, SUDA.

5. Health Expert, CMU, KUSP

Date..17.01.2005



Memo No.CMU-94/2003/532(40)

Date.. 17.01.2005

From:

Arnab Roy

Project Director, CMU

To

THE CHAIRMAN

BOLPUR MUNICIPALITY

P.O. : BOLPUR DIST. : BIRBHUM PIN. : 731 123.

Sub: Activities approved by DFID under Health component of KUSP in the 1st year.

Sir,

You are aware that activities under KUSP funded by DFID have already been initiated in 40KMA ULBs.

DFID so far has agreed to support the following activities in the 1st year under Health component of KUSP in order to strengthen existing HHW services in 40 KMA and 21 Non-KMA ULBs; i.e.

- Provision of uniform to HHWs, FTSs & STSs / ANMs,
- Provision of HHW Kit bag along with contents,
- Re-training of Health care providers,
- I.E.C. activities.

Provision of Uniform and HHW Kit bag may probably be one time supply from DFID fund. The ULBs are required to agree to continue with this type of subsequent supply, if needed from their own resources only. Hence, you are requested to indicate willingness / otherwise to enable this office to process the said activities. Approved samples and necessary fund will be provided to the ULBs to undertake the procurement accordingly from their end.

Details regarding re-training and I.E.C. will be intimated to you in due course.

An early reply will be highly appreciated.

(Amab Roy)

Project Director, CMU

Memo No.CMU-94/2003/532(40)/(5)

CC

1. Project Manager, CMU, KUSP

- 2. Technical Advisor, CMU, KUSP
- 3. Procurement Expert, CMU, KUSP
- 4. Financial Advisor, SUDA.
- 5. Health Expert, CMU, KUSP

Project Director, CMU

Date..17.01.2005

Date.. 17.01.2005

Memo No.CMU-94/2003/532(40)/(5)/(3)

Copy for kind information

- 1. Secretary, M.A Department
- 2. P.S. to M.I.C., M.A Department
- 3. Mr. Sudipto Mukherjee, DFID



URBAN SERVICES

Memo No.CMU-94/2003/532(40)

Date..17.01.2005

From :

Arnab Roy

Project Director, CMU

To

LV

THE CHAIRMAN

JANGIPUR MUNICIPALITY

P.O. : RAGHUNATHPUR

DIST.: MURSHIDABAD

PIN. : 742 225

Sub: Activities approved by DFID under

Health component of KUSP in the 1st year.

Sir.

You are aware that activities under KUSP funded by DFID have already been initiated in 40KMA ULBs.

DFID so far has agreed to support the following activities in the 1st year under Health component of KUSP in order to strengthen existing HHW services in 40 KMA and 21 Non-KMA ULBs; i.e.

- Provision of uniform to HHWs, FTSs & STSs / ANMs,
- Provision of HHW Kit bag along with contents,
- Re-training of Health care providers,
- I.E.C. activities.

Provision of Uniform and HHW Kit bag may probably be one time supply from DFID fund. The ULBs are required to agree to continue with this type of subsequent supply, if needed from their own resources only. Hence, you are requested to indicate willingness / otherwise to enable this office to process the said activities. Approved samples and necessary fund will be provided to the ULBs to undertake the procurement accordingly from their end.

Details regarding re-training and I.E.C. will be intimated to you in due course.

An early reply will be highly appreciated.

(Amab Roy)

Project Director, CMU

Date..17.01.2005

Memo No.CMU-94/2003/532(40)/(5)

CC

1. Project Manager, CMU, KUSP

- Technical Advisor, CMU, KUSP
 Procurement Expert, CMU, KUSP
- 4. Financial Advisor, SUDA.
- 5. Health Expert, CMU, KUSP

Project Director, CMU

Date..17.01.2005

Memo No.CMU-94/2003/532(40)/(5)/(3)

Copy for kind information

- 1. Secretary, M.A Department
- 2. P.S. to M.I.C., M.A Department
- 3. Mr. Sudipto Mukherjee, DFID



Date.. 17.01.2005

From :

Arnab Roy

Project Director, CMU

To

1 1 1

THE CHURNAN

BISHNUPUR MUNICIPALITY

P.O. : BISHNUPUR

DIST. : B. UNKURA

PIN. : 722 122.

Sub: Activities approved by DFID under

Health component of KUSP in the 1st year.

Sir.

You are aware that activities under KUSP funded by DFID have already been initiated in 40KMA ULBs.

DFID so far has agreed to support the following activities in the 1st year under Health component of KUSP in order to strengthen existing HHW services in 40 KMA and 21 Non-KMA ULBs; i.e.

- Provision of uniform to HHWs, FTSs & STSs / ANMs,
- Provision of HHW Kit bag along with contents,
- Re-training of Health care providers,
- I.E.C. activities.

Provision of Uniform and HHW Kit bag may probably be one time supply from DFID fund. The ULBs are required to agree to continue with this type of subsequent supply, if needed from their own resources only. Hence, you are requested to indicate willingness / otherwise to enable this office to process the said activities. Approved samples and necessary fund will be provided to the ULBs to undertake the procurement accordingly from their end.

Details regarding re-training and I.E.C. will be intimated to you in due course.

An early reply will be highly appreciated.

(Arnab Roy)

Project Director, CMU

Date..17.01.2005

Memo No.CMU-94/2003/532(40)/(5)

CC

1. Project Manager, CMU, KUSP

- Technical Advisor, CMU, KUSP
 Procurement Expert, CMU, KUSP
- 4. Financial Advisor, SUDA.
- 5. Health Expert, CMU, KUSP

Project Director, CMU

Date..17.01.2005

Memo No.CMU-94/2003/532(40)/(5)/(3)

Copy for kind information

- 1. Secretary, M.A Department
- 2. P.S. to M.I.C., M.A Department
- 3. Mr. Sudipto Mukherjee, DFID



Date..17.01.2005

From :

Arnab Roy

Project Director, CMU

To

THE CHAIRMAN

SURI MUNICIPALITY

P.O. : SURI

DIST.: BIRBHUM PIN.: 731 101.

Sub: Activities approved by DFID under

Health component of KUSP in the 1st year.

Sir,

You are aware that activities under KUSP funded by DFID have already been initiated in 40KMA ULBs.

DFID so far has agreed to support the following activities in the 1st year under Health component of KUSP in order to strengthen existing HHW services in 40 KMA and 21 Non-KMA ULBs; i.e.

- Provision of uniform to HHWs, FTSs & STSs / ANMs,
- Provision of HHW Kit bag along with contents,
- Re-training of Health care providers,
- I.E.C. activities.

Provision of Uniform and HHW Kit bag may probably be one time supply from DFID fund. The ULBs are required to agree to continue with this type of subsequent supply, if needed from their own resources only. Hence, you are requested to indicate willingness / otherwise to enable this office to process the said activities. Approved samples and necessary fund will be provided to the ULBs to undertake the procurement accordingly from their end.

Details regarding re-training and I.E.C. will be intimated to you in due course.

An early reply will be highly appreciated.

(Amab Roy)

Project Director, CMU

Memo No.CMU-94/2003/532(40)/(5)

CC

1. Project Manager, CMU, KUSP

2. Technical Advisor, CMU, KUSP

- 3. Procurement Expert, CMU, KUSP
- 4. Financial Advisor, SUDA.
- 5. Health Expert, CMU, KUSP

Project Director, CMU

Date..17.01.2005

Date..17.01.2005

Memo No.CMU-94/2003/532(40)/(5)/(3)

Copy for kind information

1. Secretary, M.A Department

2. P.S. to M.I.C., M.A Department

3. Mr. Sudipto Mukherjee, DFID



Date..17.01.2005

From :

Arnab Roy

Project Director, CMU

To

131

THE CHAIRMAN

BANKURA MUNICIPALITY

P.O. : BANKURA DIST. : BANKURA PIN. : 722 101.

Sub: Activities approved by DFID under

Health component of KUSP in the 1st year.

Sir.

You are aware that activities under KUSP funded by DFID have already been initiated in 40KMA ULBs.

DFID so far has agreed to support the following activities in the 1st year under Health component of KUSP in order to strengthen existing HHW services in 40 KMA and 21 Non-KMA ULBs; i.e.

- Provision of uniform to HHWs, FTSs & STSs / ANMs,
- Provision of HHW Kit bag along with contents,
- Re-training of Health care providers,
- I.E.C. activities.

Provision of Uniform and HHW Kit bag may probably be one time supply from DFID fund. The ULBs are required to agree to continue with this type of subsequent supply, if needed from their own resources only. Hence, you are requested to indicate willingness / otherwise to enable this office to process the said activities. Approved samples and necessary fund will be provided to the ULBs to undertake the procurement accordingly from their end.

Details regarding re-training and I.E.C. will be intimated to you in due course.

An early reply will be highly appreciated.

(Amab Roy)

Project Director, CMU

Date..17.01.2005

Memo No.CMU-94/2003/532(40)/(5) CC

1. Project Manager, CMU, KUSP

- 2. Technical Advisor, CMU, KUSP
- 3. Procurement Expert, CMU, KUSP
- 4. Financial Advisor, SUDA.
- 5. Health Expert, CMU, KUSP

Project Director, CMU

Date.. 17.01.2005

Memo No.CMU-94/2003/532(40)/(5)/(3)

Copy for kind information

- 1. Secretary, M.A Department
- 2. P.S. to M.I.C., M.A Department
- 3. Mr. Sudipto Mukherjee, DFID



SERVICES FOR THE

Memo No.CMU-94/2003/532(40)

Date.. 17.01.2005

From :

Arnab Roy

Project Director, CMU

To

THE CHAIRMAN

KOCHBIHAR MUNICIPALITY

P.O. : KOCHBIHAR DIST.: KOCHBIHAR

PIN: : 736 101.

Sub: Activities approved by DFID under

Health component of KUSP in the 1st year.

Sir.

You are aware that activities under KUSP funded by DFID have already been initiated in 40KMA ULBs.

DFID so far has agreed to support the following activities in the 1st year under Health component of KUSP in order to strengthen existing HHW services in 40 KMA and 21 Non-KMA ULBs; i.e.

- Provision of uniform to HHWs, FTSs & STSs / ANMs,
- Provision of HHW Kit bag along with contents,
- Re-training of Health care providers,
- I.E.C. activities.

Provision of Uniform and HHW Kit bag may probably be one time supply from DFID fund. The ULBs are required to agree to continue with this type of subsequent supply, if needed from their own resources only. Hence, you are requested to indicate willingness / otherwise to enable this office to process the said activities. Approved samples and necessary fund will be provided to the ULBs to undertake the procurement accordingly from their end.

Details regarding re-training and I.E.C. will be intimated to you in due course.

An early reply will be highly appreciated.

(Amab Roy)

Project Director, CMU

Memo No.CMU-94/2003/532(40)/(5)

CC

1. Project Manager, CMU, KUSP

- 2. Technical Advisor, CMU, KUSP
- 3. Procurement Expert, CMU, KUSP
- 4. Financial Advisor, SUDA.
- 5. Health Expert, CMU, KUSP

Project Director, CMU

Date..17.01.2005

Date..17.01.2005

Memo No.CMU-94/2003/532(40)/(5)/(3)

Copy for kind information

- 1. Secretary, M.A Department
- 2. P.S. to M.I.C., M.A Department
- 3. Mr. Sudipto Mukherjee, DFID



Memo No.CMU-94/2003/532(40)

Date..17.01.2005

From:

Arnab Roy

Project Director, CMU

To

THE CHAIRMAN

BAHARAMPUR MUNICIPALITY

P.O. BAHARAMPUR DIST. MURSHIDABAD

PIN. : 742 149.

Sub: Activities approved by DFID under Health component of KUSP in the 1st year.

Sir,

You are aware that activities under KUSP funded by DFID have already been initiated in 40KMA ULBs.

DFID so far has agreed to support the following activities in the 1st year under Health component of KUSP in order to strengthen existing HHW services in 40 KMA and 21 Non-KMA ULBs; i.e.

- Provision of uniform to HHWs, FTSs & STSs / ANMs,
- Provision of HHW Kit bag along with contents,
- Re-training of Health care providers,
- I.E.C. activities.

Provision of Uniform and HHW Kit bag may probably be one time supply from DFID fund. The ULBs are required to agree to continue with this type of subsequent supply, if needed from their own resources only. Hence, you are requested to indicate willingness / otherwise to enable this office to process the said activities. Approved samples and necessary fund will be provided to the ULBs to undertake the procurement accordingly from their end.

Details regarding re-training and I.E.C. will be intimated to you in due course.

An early reply will be highly appreciated.

(Amab Roy)

Project Director, CMU

Memo No.CMU-94/2003/532(40)/(5)

CC

1. Project Manager, CMU, KUSP

- 2. Technical Advisor, CMU, KUSP
- 3. Procurement Expert, CMU, KUSP
- 4. Financial Advisor, SUDA.
- 5. Health Expert, CMU, KUSP

Project Director, CMU

Date..17.01.2005

Date..17.01.2005

Memo No.CMU-94/2003/532(40)/(5)/(3)

Copy for kind information

- 1. Secretary, M.A Department
- 2. P.S. to M.I.C., M.A Department
- 3. Mr. Sudipto Mukherjee, DFID



Date..17.01.2005

From :

Arnab Roy

Project Director, CMU

To

IV

THE CHAIRMAN

MEDINIPUR MUNICIPALITY

P.O. : MEDINIPUR

DIST.: WEST MEDINIPUR

PIN. : 721 101.

Sub: Activities approved by DFID under

Health component of KUSP in the 1st year.

Sir,

You are aware that activities under KUSP funded by DFID have already been initiated in 40KMA ULBs.

DFID so far has agreed to support the following activities in the 1st year under Health component of KUSP in order to strengthen existing HHW services in 40 KMA and 21 Non-KMA ULBs; i.e.

- Provision of uniform to HHWs, FTSs & STSs / ANMs,
- Provision of HHW Kit bag along with contents,
- Re-training of Health care providers,
- I.E.C. activities.

Provision of Uniform and HHW Kit bag may probably be one time supply from DFID fund. The ULBs are required to agree to continue with this type of subsequent supply, if needed from their own resources only. Hence, you are requested to indicate willingness / otherwise to enable this office to process the said activities. Approved samples and necessary fund will be provided to the ULBs to undertake the procurement accordingly from their end.

Details regarding re-training and I.E.C. will be intimated to you in due course.

An early reply will be highly appreciated.

(Arnab Roy)

Project Director, CMU

Date..17.01.2005

Memo No.CMU-94/2003/532(40)/(5)

CC

1. Project Manager, CMU, KUSP

- 2. Technical Advisor, CMU, KUSP
- 3. Procurement Expert, CMU, KUSP
- 4. Financial Advisor, SUDA.
- 5. Health Expert, CMU, KUSP

Project Director, CMU

Date..17.01.2005

Memo No.CMU-94/2003/532(40)/(5)/(3)

Copy for kind information

- 1. Secretary, M.A Department
- 2. P.S. to M.I.C., M.A Department
- 3. Mr. Sudipto Mukherjee, DFID



Memo No.CMU-94/2003/532(40)

Date..17.01.2005

From :

Arnab Roy

Project Director, CMU

To

THE CHAIRMAN

PURULIA MUNICIPALITY

P.O. : PURULIA DIST. : PURULIA PIN. : 723 101.

Sub: Activities approved by DFID under

Health component of KUSP in the 1st year.

Sir,

You are aware that activities under KUSP funded by DFID have already been initiated in 40KMA ULBs.

DFID so far has agreed to support the following activities in the 1st year under Health component of KUSP in order to strengthen existing HHW services in 40 KMA and 21 Non-KMA ULBs; i.e.

- Provision of uniform to HHWs, FTSs & STSs / ANMs,
- Provision of HHW Kit bag along with contents,
- Re-training of Health care providers,
- I.E.C. activities.

Provision of Uniform and HHW Kit bag may probably be one time supply from DFID fund. The ULBs are required to agree to continue with this type of subsequent supply, if needed from their own resources only. Hence, you are requested to indicate willingness / otherwise to enable this office to process the said activities. Approved samples and necessary fund will be provided to the ULBs to undertake the procurement accordingly from their end.

Details regarding re-training and I.E.C. will be intimated to you in due course.

An early reply will be highly appreciated.

(Amab Roy)

Project Director, CMU

Memo No.CMU-94/2003/532(40)/(5)

CC

1. Project Manager, CMU, KUSP

- 2. Technical Advisor, CMU, KUSP
- 3. Procurement Expert, CMU, KUSP
- 4. Financial Advisor, SUDA.
- 5. Health Expert, CMU, KUSP

Er.

Project Director, CMU

Date..17.01.2005

Date..17.01.2005

Memo No.CMU-94/2003/532(40)/(5)/(3)

Copy for kind information

- 1. Secretary, M.A Department
- 2. P.S. to M.I.C., M.A Department
- 3. Mr. Sudipto Mukherjee, DFID



Memo No.CMU-94/2003/532(40)

Date..17.01.2005

From :

Arnab Roy

Project Director, CMU

To

THE CHAIRMAN

KRISHNAGAR MUNICIPALITY

P.O. : KRISHNAGAR

DIST.: NADIA PIN.: 741 101.

Sub: Activities approved by DFID under

Health component of KUSP in the 1st year.

Sir.

You are aware that activities under KUSP funded by DFID have already been initiated in 40KMA ULBs.

DFID so far has agreed to support the following activities in the 1st year under Health component of KUSP in order to strengthen existing HHW services in 40 KMA and 21 Non-KMA ULBs; i.e.

- Provision of uniform to HHWs, FTSs & STSs / ANMs,
- Provision of HHW Kit bag along with contents,
- Re-training of Health care providers,
- I.E.C. activities.

Provision of Uniform and HHW Kit bag may probably be one time supply from DFID fund. The ULBs are required to agree to continue with this type of subsequent supply, if needed from their own resources only. Hence, you are requested to indicate willingness / otherwise to enable this office to process the said activities. Approved samples and necessary fund will be provided to the ULBs to undertake the procurement accordingly from their end.

Details regarding re-training and I.E.C. will be intimated to you in due course.

An early reply will be highly appreciated.

(Amab Roy)

Project Director, CMU

Date..17.01.2005

Memo No.CMU-94/2003/532(40)/(5)

CC

1. Project Manager, CMU, KUSP

- 2. Technical Advisor, CMU, KUSP
- 3. Procurement Expert, CMU, KUSP
- 4. Financial Advisor, SUDA.
- 5. Health Expert, CMU, KUSP

Project Director, CMU

Date..17.01.2005

Memo No.CMU-94/2003/532(40)/(5)/(3)

Copy for kind information

- 1. Secretary, M.A Department
- 2. P.S. to M.I.C., M.A Department
- 3. Mr. Sudipto Mukherjee, DFID



Memo No.CMU-94/2003/532(40)

Date..17.01.2005

From :

Arnab Roy

Project Director, CMU

To

THE CHAIRMAN

KALNA MUNICIPALITY

P.O. KALNA DIST. BURDWAN PIN. 713 130.

Sub: Activities approved by DFID under

Health component of KUSP in the 1st year.

Sir,

You are aware that activities under KUSP funded by DFID have already been initiated in 40KMA ULBs.

DFID so far has agreed to support the following activities in the 1st year under Health component of KUSP in order to strengthen existing HHW services in 40 KMA and 21 Non-KMA ULBs; i.e.

- Provision of uniform to HHWs, FTSs & STSs / ANMs,
- Provision of HHW Kit bag along with contents,
- Re-training of Health care providers,
- I.E.C. activities.

Provision of Uniform and HHW Kit bag may probably be one time supply from DFID fund. The ULBs are required to agree to continue with this type of subsequent supply, if needed from their own resources only. Hence, you are requested to indicate willingness / otherwise to enable this office to process the said activities. Approved samples and necessary fund will be provided to the ULBs to undertake the procurement accordingly from their end.

Details regarding re-training and I.E.C. will be intimated to you in due course.

An early reply will be highly appreciated.

(Amab Roy)

Project Director, CMU

Memo No.CMU-94/2003/532(40)/(5)

CC

1. Project Manager, CMU, KUSP

- 2. Technical Advisor, CMU, KUSP
- 3. Procurement Expert, CMU, KUSP
- 4. Financial Advisor, SUDA.
- 5. Health Expert, CMU, KUSP

Project Director, CMU

Date..17.01.2005

Date..17.01.2005

Memo No.CMU-94/2003/532(40)/(5)/(3)

Copy for kind information

- 1. Secretary, M.A Department
- 2. P.S. to M.I.C., M.A Department
- 3. Mr. Sudipto Mukherjee, DFID



Memo No. CMU-94/2003(Pt. III)/1154

Dt. .. 23.11.2005

From: Arnab Roy

Project Director, CMU

0/5

To

: The Mayor

Howrah Municipal Corporation

Sub. : Re-training to grass root level functionaries on RCH & Family Planning under Health component of KUSP.

Sir,

It is seen from the pre- & post evaluation score sheet that two HHWs namely Ruby Das & Begam Husna Banu secured very poor marks in both the evaluation tests.

As the re-orientation training is towards strengthening of service delivery by the grass root level functionary, it is quite necessary that the HHWs should posses adequate knowledge on the subject. Hence it is requested that more close attention should be given to these HHWs by HO / AHO of your ULB so that attain the require standard for effective delivery service, described under job responsibility of HHW.

Thanking you.

Yours faithfully,

Project Director, CMU

Memo No. CMU-94/2003(Pt. III)/1154/1(1)

Dt. .. 23.11.2005

Copy forwarded for information and necessary action to:

1. Health Officer and Asstt. Health Officer, Howrah Municipal Corporation.



Memo No. CMU-94/2003(Pt. HI)/1155/1(2)

Dt. .. 23.11.2005

Copy forwarded for information to:

1. Secretary, Municipal Affairs Dept.,

2. PS to MIC, Municipal Affairs Dept.,



Memo No. CMU-94/2003(Pt. III)/1155

Dt. .. 23.11.2005

From: Arnab Roy

Project Director, CMU

To

The Chairman

Titagarh Municipality

Sub.: Re-training to grass root level functionaries on RCH & Family Planning under Health component of KUSP.

Sir,

The above mentioned training have already been conducted at HAU-3 during 17-19.11.2005. It is seen from the pre- & post evaluation score sheet that the following HHWs secured very poor marks in both the evaluation tests.

Total Marks-26

Name of HHW	Pre-evaluation Score	Post-evaluation Score
Krishna Das	00	00
Sadhana Roy	62	04
Lilabati Devi	02	(06)
Khusida Begum	04	10
Salaha Khatoon	04	10
Kakoli Sadhukhan	11	10 ½
Supriya Devi	03	04
Putul Singh	00	02
Anita Das	07	31/2

As the re-orientation training is towards strengthening of service delivery by the grass root level functionary, it is quite necessary that the HHWs should posses adequate knowledge on the subject. Hence it is requested that more close attention should be given to these HHWs by HO / AHO of your ULB so that they attain the required standard for effective delivery of services, described under job responsibility of HHW.

Thanking you.

Yours faithfully,



Memo No. CMU-94/2003(Pt. III)/1155/1(1)

Dt. .. 22.11.2005

Copy forwarded for information and necessary action to:

1. Health Officer and Asstt. Health Officer, Howrah Munici pality

Project Manager, CMU



Memo No. CMU-94/2003(Pt. III)/1155/1(1)

Dt. .. 23.11.2005

Copy forwarded for information and necessary action to:

1. Health Officer and Asstt. Health Officer, Titagarh Municipality.

Project Director, CMU

Memo No. CMU-94/2003(Pt. III)/1155/1(2)

Dt. .. 23.11.2005

Copy forwarded for information to:

1. Secretary, Municipal Affairs Dept.,

2. PS to MIC, Municipal Affairs Dept.,



Memo No. CMU-94/2003(Pt. III)/1155

Dt. .. 23.11.2005

From: Arnab Roy

Project Director, CMU

To: The Chairman

Titagarh Municipality

Sub.: Re-training to grass root level functionaries on RCH & Family Planning under Health component of KUSP.

Sir,

The above mentioned training have already been conducted at HAU-3 during 17-19.11.2005. It is seen from the pre- & post evaluation score sheet that the following HHWs secured very poor marks in both the evaluation tests.

Total Marks-26

Name of HHW	Pre-evaluation Score	Post-evaluation Score
Krishna Das	00	00
Sadhana Roy	61/2	04
Lilabati Devi	02	06
Khusida Begum	04	10
Salaha Khatoon	04	10
Kakoli Sadhukhan	11	10 ½
Supriya Devi	03	04
Putul Singh	00	02
Anita Das	07	3½

As the re-orientation training is towards strengthening of service delivery by the grass root level functionary, it is quite necessary that the HHWs should posses adequate knowledge on the subject. Hence it is requested that more close attention should be given to these HHWs by HO / AHO of your ULB so that they attain the required standard for effective delivery of services, described under job responsibility of HHW.

Thanking you.

Yours faithfully,



Memo No. CMU-94/2003(Pt. III)/1155/1(1)

Dt. .. 22.11.2005

Copy forwarded for information and necessary action to:

1. Health Officer and Asstt. Health Officer, Howrall Municipal Corporation.

Project Manager, CMU



KOLKATA URBAN SERVICES FOR THE POOR MANAGEMENT UNIT CHANGE

Memo No. CMU-94/2003(Pt. III)/1154

Dt. .. 23.11.2005

From: Arnab Roy

Project Director, CMU

: The Mayor

Howrah Municipal Corporation

Sub. : Re-training to grass root level functionaries on RCH & Family Planning under Health component of KUSP.

Sir,

It is seen from the pre- & post evaluation score sheet that two HHWs namely Ruby Das & Begam Husna Banu secured very poor marks in both the evaluation tests.

As the re-orientation training is towards strengthening of service delivery by the grass root level functionary, it is quite necessary that the HHWs should posses adequate knowledge on the subject. Hence it is requested that more close attention should be given to these HHWs by HO / AHO of your ULB so that attain the require standard for effective delivery service, described under job responsibility of HHW.

Thanking you.

Yours faithfully,

Project Director, CMU

Memo No. CMU-94/2003(Pt. III)/1154/1(1)

Dt. .. 23.11.2005

Copy forwarded for information and necessary action to:

1. Health Officer and Asstt. Health Officer, Howrah Municipal Corporation.