কোন রকম ফুস্কুড়ির সাথে এ জাতীয় লক্ষ্ণ থাকেলে শিশুর খোস-পাঁচড়া, চুলকনী রোগ আছে বুঝতে হবে।

(শিক্ষক) — শিশুকে চিকিৎসার জনা পাঠিয়ে দিয়ে তার পরিবারের সব সদস্যকেই চিকিংসার আওতায় আসার এবং ব্যক্তিগত স্বাস্থ্য রক্ষার জন্য প্রয়োজনীয় উপদেশ দিতে হবে।

জনের মত অথবা পুঁজসহ

এই জাতীয় লক্ষণ দেখা দিলে জীবাণু প্রতিরোধী ওবুধ-এর শিশু পাইওডেরমা-র ভগছে বুৰাতে হবে।

माशास्या हिकिस्मा **जिला**स स्याउ रहत । (শিক্ষক) — সব শিশুকে ব্যক্তিগত সাস্থবিধি মেনে চলার উপদেশ দিন।

শিশুর দাঁতে কোন রকম দাগ বা ছাপ, রক্ত ক্ষরণ

চুলকনী জাতীর কিছু

এই জাতীয় কিছু ধরা পছলে বুঝতে হবে যে শিশুর দাঁতে সনস্যা আছে ৷

দন্ত চিকিৎসকের কাছে পারিয়ে দিতে

(শিক্ষক) — যথায়খ পথা গ্রহণ করা দাঁত পরিস্কার রাখা, চিনি দিয়ে তৈরী খাবার না খাওয়া, এই সৰ বিষয়ে শিশুদের পরামর্শ দিতে হবে।

विष

É 1 :

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কুল স্বাস্থ্য অভিযানে নিম্নোক্ত রোগগুলির উপর বিশেষ

শুরুত্ব দেওয়া হবে

- বভাৱতা
- ভিটামিন 'এ' অভাব জনিত রোগ।
- আয়োডিন অভাব জনিত রোগ।
- माम वा पूराकानी।
- পাঁচড়া বা পুঁজ বিশিষ্ট চুলকানী জনিত কত।
- শিশুকর দৃষ্টিশক্তি জনিত ক্রটি (প্রতিস্ববণ দোযা)।
- कान मिल श्रेष श्रेष्ट्रा।

ভবিষ্যতের সুনামরিক করবে, এই মহান রতে আমরা নিয়োজিত। <mark>এগিয়ে এনেছে। প্রতি মু</mark>হূর্তে নাগরিক পরিদেবা সরবরাহ করার পাশাপাশি শিশুমের সার্বজনীন শিক্ষা ও স্বাস্থ্যের অধিকারকে সুনিক্তিত করতে আসানসোল পোর নিগম ১) ১৮৮১ চিনার ত্রানের পরিমিত থাকালেও, সাধ আনক। সুল পড়্যাদের

ডাঃ রবি ইন্দর সিং (ছাই.এ.এস.) অতিরিক্ত জেলা শাসক, আসানসাল

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Sec. Sec.

মুখ্য প্রশাসনিক আধিকারিক আসানসোল পোরানগম

আর.সি.এইচ (উপ) প্রকল্প প্রকল্প মহানিদেশক धामनलाल

> শ্রী পামল কুমার মুখাজী "प्राव्यानाटनाला (नीर्वानेश्रेप অসিনিসেধ (SEED)

> > অভিযান শুরু করেছি। প্রাথমিক স্কুল শিক্ষক, পচুয়াদের অভিভাবকবৃদ্ধ ও সচেতন করে তোলা যাবে। দেখা যায়, শ্রেণীকক্ষের পেছনের বেঞ্চে বসা কোন এই কৰ্মসূচী দিয়ে গঠন করানো যাবে, অন্যদিকে অভিভাৰক, শিক্ষাক্ষীদের স্বাস্থ কর্মসূচী সংগঠিত করানো হবে। একদিকে যেমন শিশু পড়য়াদের স্বাস্থ্য বুনিয়াদ জার সিএইচ (উপ) প্রকল্পের চিকিৎসক, প্যারাসেডিকালি স্টাঞ্চ ও শ্বাস্থ্য কর্মদের শ্বুলোর ৩৭ হাজার পাতুয়া র স্বাস্থ্য বুনিয়াদ গড়ে তোলার লক্ষ্যে আমরা স্কুল স্বাস্থ্য থাকার কারণে। দিনের বেলায় কোন শিশু খেলাধূলা করলেও রাতে হোচট খায় হয়েছে বা দৃষ্টিপত্তি কমে আসতে — এটা জানতে পারা হায় না সতেনতা কম চৌপ ছোট করার জন্য বকাবকি শুনতে হয়। আসলে যে ওর চৌঝে যে পাওয়ার তাকে সামনের দিকের আসনে বসতে বলেন। আবার অসেক সময় সংশ্লিত ছাত্রতে ছাত্র ক্লাকবোর্ডের লেখা পড়ছে চোখ ছোট ছোট করে। মাস্টার মশাই বা শিক্ষক সনন্বমে এই অভিযান চালানো হবে। প্রতিটি স্কুলে নিয়মিতভাবে এই স্কুল স্বাস্থ্য ব্রতিকানা ব্রোগ সঙ্গক্ষে সচেতনতা বাছাতে গারলে এই সমস্যা শুরুতেই নেটানে প্রাথমিক বিদ্যালয়ের জন্য বিশেষ স্বাস্থ্য পরীক্ষা আসানসোল পৌরনিগম এলাকার প্রায় ২০০টি প্রাথমিক ও জুনিয়ার বৈসিক

ভবিষ্যতের সুনাগরিক। কথাতেই আছে — "চাইন্ড ইজ দ্য কাদার অফ এ মান" মানসিক ও সামাজিক স্বাস্থ্যের সূবম বিকাশ। আজকের শিশু আগারী দিনের পিতা শিক্ষা ও উন্নত স্বাস্থ্য পরিসেবা সাংবিধানিক দায়বন্ধতার মধ্যে পড়ে। স্বাস্থ্য বলতে কেবল শারিরীক স্বাস্থ-ই নয়, আনাদের লক্ষ্য প্রভাগের প্রতিটি শিশুর শারিরীক স্কুল কেলথ প্রোগ্রানের ওরুত্ব ও যোভিকতা অপরিসীম। সকল শিশুর জন

আর.সি.এইচ (উপ) প্রকল্প, আসানসোল আসানসোল পৌরনিগম

PROPOSAL FOR SCHOOL HEALTH PROGRAMME IN 6 (SIX) IDENTIFIED MUNICIPALITIES UNDER U.H.I.P.

I. Rationale of School Health Programme: School Health Programme is an important component of UHIP. School Health Programme is virtually non existent in different Schools in Urban areas. More particularly, the Students of Primary and Junior High Schools located within or nearer to the slums are deprived of this important health care services though the boys and girls of those schools are vulnerable to multiple ailments most of which are preventable. No justification is probably necessary for implementation of the programme.

However, the accrual of benefits will be primarily in the following broad areas:-

- Early detection of deviations and management will save the child from defects and disabilities.
- A carefully designed comprehensive health education component can prevent certain adverse behaviours including tobacco use; drug use, unhealthy dietary practices, unsafe sexual behaviour and physical inactivity. It will help to practice a Healthy life style in future destined to percolate to other members of the community.
- Investment in School Health Programme is the most efficient and cost effective way to improve the Students' health culminating in the overall improvement of the National Health Status and it would also boost up the academic performance of the students. Besides, the students, teachers and other staff of the Schools will also get health benefit.
- II. In the above context 6 (six) Municipalities viz., Bhadreswar, Madhyamgram, Naihati, New Barrackpore, North Barrackpore and South Dum Dum have been identified to undertake the School Health Programme with the E.C. assisted fund.
- III. Identification of Schools: Each municipality has got different categories of Schools viz., Primary, Junior High, Madhyamik, and Higher Secondary Schools. The Schools are being run by the municipality, State Govt., NGOs. At this initial phase it has been proposed that the said programme should be launched at the Primary Schools run either by the Municipality or by the State Govt.. The Primary School run by NGOs have been excluded for the present. It is also proposed that Primary Schools located within or nearer to the slums should be given the priority. It has been decided that 20 such Schools will be identified in each ULB in consultation with the Chairpersons.
- IV. Ideally the School Health Programme has got multiple components viz., Promotive, Curative, Rehabilitative, Environmental (Physical and Psychological) and Referral services. At the initial phase all the components can not be implemented due to constraint of the resources (money and manpower) both of the local bodies and the policy implementers. Moreover, it is still not clear whether (i) after withdrawal of external assistance, the proposed organizational activities can be sustained by the local bodies with their own resources; (ii) alternatively whether the District Health authorities will take up the responsibility.
- V. The following strategy is suggested for implementation of the programme.
 - 1. Formation of a team for the School Health Services. The team will be composed of
 - (i) Medical Officer (preferably lady Medical Officer)
 - (ii) . Ophthalmic Assistant
 - (iii) Dental Hygienist or ANM or GNM

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- Medical Officer to be engaged should preferably be a Part-time Medical Officer of UHIP. It is advantageous to engage a PTMO of the Project as because he/she is well versed with the activities of the UHIP alongwith the referral centres, availability of logistics and the reporting system under MIES. It is envisaged that the working environment with a PTMO for the programme will be much better than an outside doctor. Similarly involvement of Sr. Nursing Personnel, Second Tier Supervisor of the ULB will greatly help in coordinating and reporting the programme activities.
- Ophthalmic Assistant (O.A.):- The prevalence of the diseases, defects and deviations of Eye is widely prevalent amongst the School children. Early detection and correction of such conditions of Eye will effectively reduce the disability. In each School the assessment of Eye condition of each children is time consuming. The ophthalmic assistant is competent enough to screen these cases for specialized opinion at referral infrastructures (ESOPD).
- Dental Hygienist or ANM or GNM:- Similar to Eye condition prevalence
 of Dental conditions such as caries and pariodontal ailments is high in
 School children. A Dental hygienist or ANM or GNM is competent to
 screen those cases and also impart health education for maintenance of
 dental hygiene. Cases necessitating Specialised opinion will be refereed by
 the Doctor to the ESOPD.
- Second Tier Supervisor She will coordinate the programme of the team maintain all reords and render necessary assistance to the Tem-members.
- It is suggested that the above named members of the team may be paid on daily visit basis in the following manner:-
- Medical Officer @ Rs. 150.00 per day
- Ophthalmic Assistant @ Rs. 100.00 per day
- Dental Hygienist or ANM or GNM @ Rs. 100.00 per day
- · Second Tier Supervisor @ Rs. 75.00 per day

2. Proposed coverage of Schools by the team :-

- Periodicity of visit: Each Primary School will be visited once in a year.
- Visit to each Primary School will be of three days' duration.
- All the Boys and Girls of the School should undergo health appraisal.
- 3 days, visit to each School will be necessary for a comprehensive health appraisal of the students of a School.
- Health appraisal of 20 such Schools in each ULB is to be done within l(one) year.

3. School Health records:-

- i. For each student a separate card duly authenticated by the Chairperson of theULB and Head Teacher of the School would be there for recording the health status. The said card will be retained by a teacher selected for the purpose.
- ii. The deviation observed in respect of student and referred to ESOPD should accompany the Health Card also.

- iii. One copy of the said health card will also be retained by the Medical Officer of the Team for purpose of reporting the netivities to the local bodies and Headquarters.
- VI. Referral Services: A School Health Programme can not function without a strong referral back-up. Each of these identified local bodies have got adequate infrastructures for a strong back-up referral system. The ailments viz., Eye, Ear, Dental, Skin and deficiency diseases require Specialized care. The students with such detection of diseases and deviations will be referred to the ESOPDs. For supply of common drugs not available with the team members during their visit local HAUs may supply the same. Under this system specific days and hours are to be fixed up at those clinics at HAU and ESOPD when the referred students can attend. The clinic hours should be exclusively for the School Boys and Girls.

However, the Chairperson will decide whether they will charge the Registration fees for such attendants in the ESOPD for Specialised Care. But it is suggested that it should be made free both Registration and supply of essential drugs. In absence of such arrangement, probably a large number of referred students will not attend the facility. Correction of deviations such as Squint etc. requiring surgical interventions, Dental caries and ear problems should also be arranged free of cost. The correction of error of refraction may require glasses which may also be provided free of cost of such expenditure is considered by the Local bodies difficult to afford, District Health and Family Welfare Samity may be approached.

- VII. Logistic support: Each team should be equipped minimum with the following equipment and drugs.
 - a) Equipment :
 - i) Weighing Machine
 - ii) Height measurement stand
 - iii) Stethoscope
 - iv) Kidney Tray
 - v) Tongue Spatula
 - vi) Torch light
 - vii) Child BP Instrument
 - viii) Auroscope
 - ix) Nasal Speculum &
 - x) Vision testing chart
 - xi) Book for testing the colour vision.
 - xii) Register and Form for each School.
 - xiii) One Stretcher
 - b) Drugs :-
- i) Analgesics
- ii) Anthelmentics
- iii) Vitamins such as Vit. B, C, A
- iv) Iron and Folic Acid Tablet
- v) Common Drugs for treatment of skin ailment.
- vi) Antigens D.T. and T.T.
- vii) *Other essential drugs

- * For such drugs, cases will be referred to School Health Clinic either at HAU or at ESOPD.
- c) First Aid Box :- Each school should be provided with a First Aid Box with the following contents:
 - i) Gauge
 - ii) Bandage
 - iii) Cotton
 - iv) Povidone Iodine ointment (5%)
 - v) Adhesive Plaster
 - vi) Wooden Splint
 - vii) Scissors
 - viii) ORS packets

The contents will be replaceable. The said box will remain in custody of a teacher who is trained on First Aid.

VIII. Training of teachers and team members of the School Health Programme -

- a) Training of teachers The teachers of the school play a vital role in the School Health Programme.
 - i) All teachers are to be trained adequately to identify and refer the students for treatment. The teachers during the morning prayer also identifies the children having any deviations viz. Redness of Eyes, Watering of Eyes, Rashes on the skin, Injuries, Abnormal postures, Diarrhoea Head ache, Symptoms of acute Cold and cough, disinclination to play, unusually flashed face & Skin conditions like Scabies Ringworm & Pediculosis and status of Personal Hygiene etc.. Students with such ailments will require treatment either at HAU or at ESOPD so they are to be referred by the teacher.
 - ii) One of the teachers should be identified to actively help the school health team for its functioning on the day of the visit. The said teachers will keep ready the records of students who have shown deviations earlier during daily inspection.
 - iii) Each teacher of the school should be trained on sign symptoms of different common ailments alongwith First Aid. A two days' training arranged locally may be adequate. Training on First Aid should be arranged separately and to be conducted by the team from St. John's Ambulance Association. The said training will include application of splints, bandaging of different injuries, resuscitation in drowning and transportation of patients with injuries etc..
- b) Training of health team members All members of the team require two days training programme to orient them to the activities including the reporting system. The team members should also attend the First Aid training programme which will be arranged for the teachers also.

IX. Follow up of the Students having ailments :-

The cases requiring follow-up will have to be informed by the STS to the FTS so that necessary follow-up may be made during the Home visit by the HHWs and in case of urgency repeated visits are to be given to the said student. In case no improvement seems to have occurred the student would be referred either to the Subcentre or to the HAU/ ESOPD.

X. Budgetary Provision: A budgetary provision amounting Rs. 2,93,800.00 during this financial year has been made against the 6(six) identified municipalities. The budgetary provision has been made on the following heads:

	TOTAL	-	2,93,800,00
1,	Contingent Expenditure	-	3,000.00
7		-	10,800.00
6.	Transport Cost		
5.	Printing of School Health Cards		1,00,000.00
4.	Teachers' Training	-	6,000.00
3.	Drugs	-	15,000.00
	7 - 4	-	6,000.00
2.	*Equipment		
1.	Honorarium	_	1,53,000.00

XI. Indicators for monitoring: - Baseline Survey in true sense has not been made to assess the load of disease or deviations/ defects of the School Children particularly the Primary School situated within or nearer to the Slums. However, each municipality has the data on some ailments derived through a survey conducted by the teachers a couple of years ago. In the above circumstances it will not be feasible to compare the performance with the baseline data. Initial health appraisal results can be taken as baseline data. The following indicators are proposed to be followed in assessing the impact of the inputs.

Objectively verifiable Indicators	Desired Outputs
 x% of School going children suffering from defective vision. x% of children suffering from problems ear, nose, throat and dental. x% of children suffering from skin diseases. x% of children suffering from anaemia. x% of children suffering from Vit. B complex deficiencies. 	 The magnitude of the morbid conditions will be reduced. Change of health habits for a healthy life style.
O x% of children suffering from other systemic diseases. O x% of children suffers from mal nutrition.	
O x% of children suffers from normal growth. O x% of children having mental deviation. O x% of the children does not maintain personal hygiene.	

- XII. Sustenance of the School Health Programme: It has been stated earlier that on withdrawal of the E.C. assisted fund whether it will be feasible for the local bodies to sustain the programme activities with their own resources. Though substantial help will be incoming from the District Health Authorities in terms of logistics (drugs and equipment) training etc. but the funds required for the manpower may be a problem. To overcome the fund problem the following avenues may be explored for fund generation:
 - A token amount of Rs. 2/- per year may be levied for each student coming under purview of this Programme.
 - Fund may also be generated by approaching the benevolent persons of the locality to contribute fund for the programme.
 - Medical of the locality may help by contributing necessary drugs that remain surplus to them.
 - The Education Department may make some provision of fund for the School Health Services.
 - The District Health & Family Welfare Samity will be a great help for fund generation to run the programme.
- XIII. Administration of the Programme at the Municipality level: For effective implementation of the programme it requires a separate committee to look after the organizational aspects, supervision and monitoring. The committee may consist of the following members:

i)	Chairperson	- Chairman of the Commit
ii)	Councillor-in-Charge (Health)	
iii)	* Sub-Inspector of Primary Schools	- Member
iv)	Health Officer	- Member
v)	Executive Officer	- Member
	* Urban Health Organiser	- Member
vii)	1 (one) representative 6	- Convenor
viii)	1 (one) representative from the Prim	ary School Teacher-Member
ix)	- (· · · · · · · · · · · · · · · · · ·	ate of Candenda a
x)	- (one) representative from the Distri	ct H&FW Deptt Member
^)	Asstt. Health Officer	- Member

^{**} Asstt. Health Officer will act as Convenor if till date UHO has not been engaged.

(SCHOOL HEALTH SERVICE doc)

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Information regarding collection of Registration fees © Rs. 2/- from the beneficiaries and opening of Health Development Fund account.

Sl. No.	Name of the Municipal Corporation/ Municipality	Whether introduced Registration fees @ Rs. 2/- from the beneficiaries	Whether open an account in the Name of Health Development Fund	Total amount deposited upto 31.07.03 (Rs.)
1.	Uttarpara Kotrung	Yes	C.A. No.3-1/16, UCO Bank, Uttarpara Bazar Branch	
2.	Chandannagar	Yes	S.B.A. No. 9437, UBI, Kolisani Branch	28,000.00
3.	Maheshtala	Yes	C.A. No. 01000050089, SBI, Batanagar Branch	
4.	Bansberia	Yes	C.A. No. 374, UBI, Bansberia Branch	
5.	Gayeshpur	Yes	C & I -53037, SBI, Gayeshpur Branch	
6.	Rajarhat Gopalpur	Yes .	CD 100345, UBI, Kaikhali Branch	
7.	New Barrackpore	Yes	SB 317497, UBI, New Barrackpore Branch	11,47,091.00
8.	Naihati	Yes	(CD 57- ESOPD CD-56, Mat. Home) Bhatpara-Naihati Co-op Bank. CA 813 - RDC, Allahabad Bank.	
9.	Bhadreswar	Yes	CA 178764, UBI, Bhadreswar	
10.	Madhyamgram	Yes	SB 10604, Allahabad Bank Madhyamgram	7,82,000.00
11.	Serampore	Yes	8624, Bank of Baroda, Serampore Branch (Health Development Fund)	3,39,919.00
12.	Panihati	Yes	SB 162883, UTI, Panihati Branch	
13.	Budge Budge	Yes	C.A73, Kanara Bank, Budge Budge Branch	
14.	North Barrackpore	Yes	C.A. 01100050720, SBI, Barrackpore Branch	
15.	Rajpur Sonarpur	Yes	C.A. No. 628, UBI, Rajpur Branch(H.D.Fund) 411/91, UBI, Rajpur Branch(Matrisadan Fund)	1,56,600.00 2,26,675.52
16.	Rishra	No	C.A. No. 8, Allahabad Bank, Rishra Branch	
17.	Titagarh	No	C.A. No. 259, Central Bank of India, Titagarh Branch	
18.	Bally	No	S.B.A. No. 6929, UCO Bank, Liluah Branch	

(Contd...)

Sl. No.	Name of the Municipal Corporation/ Municipality	Whether introduced Registration fees @ Rs. 2/- from the beneficiaries	Whether open an account in the Name of Health Development Fund	Total amount deposited upto 31.07.03 (Rs.)
19.	Bhatpara	No	A/c. No. 01100050109 SBI, Kakinara Branch	3,54,615.00
20.	Barrackpore	No	313, State Co-operative Bank, Barrackpore	
21.	Uluberia	No	CA 6549, Allahabad Bank, Uluberia Branch	
22.	Konnagar	No	CA 24, Allahabad Bank, Konnagar	
23.	North Dum Dum	No	CA 44, PNB, North Dum Dum	
24.	Hooghly Chinsurah	No	CA 626, PNB, Chinsurah	
25.	Garulia	No	CA -56, PNB, Syamnagar Branch	
26.	Dum Dum	No	CA 15233, UCO Bank, Cantonment Branch	
27.	Kamarhati	No	CA 20903, Bank of India, Kamarhati Branch	
28.	Pujali	Yes	A/c. No. 20099 with Allahabad Bank, Budge Budge	2,000.00
29.	Kanchrapara	No	No	
30.	Khardah	No	C&I/C/19, SBI, Khardah Branch	1,000.00
31.	Baranagar	No	No	
32.	Barasat	No	No	
33.	Halisahar	No	No	
34.	Kalyani	No	SB A/c. 01000050124 of SBI, Kalyani	4,18,394.00
35.	South Dum Dum	No -	C.A. No. 205666, UCO Bank, Dum Dum	1,95,000.00
36.	Howrah	No	No	
37.	Kolkata	No	No	
38.	Baidyabati	No	No	
39.	Bidhannagar	Yes	S.B. A/c. No. 0110004824, SB of Bikaneer & Jaipur, Saltlake Branch	36,000.00
40.	Champdani	Yes	S.B. A/c. No. 15601, BOI, Champdani	
41.	Baruipur	No	`No	

Synopsis: 1. Health Development Fund already opened – 33 Municipalities 2. Collection of beneficiary charges @ Rs. 2/- per month – 18 Municipalities.

(Information regarding collection of Registration fees.doc)

List of nominated persons of Health & Family Welfare Committee of different Corporations / Municipalities

Sl. No.	Name of the Municipality / Corporation	Name of the Nominated Person
1.	Madhyamgram	Dr. K. L. Mukherjee, DCOH, IPP-VIII, KMDA
2.	Bhadreswar	-Do-
3.	Baranagar	Dr. P. N. Chakraborty, ACOH, IPP - VIII, KMDA
4.	Kalyani	-Do-
5.	Titagarh	Dr. P. K.Chatterjee, ACOH, IPP - VIII, KMDA
6.	Bidhannagar	Dr. B. N. Tripathy, ACOH, IPP - VIII, KMDA
7.	Bansberia	Dr. P. N. Chakraborty, ACOH, IPP - VIII, KMDA
8.	Chandannagar Municipal Corporation	Dr. N. K. Dutta, Programme Administrator, HPU KMDA
9.	Halisahar	Dr. P. K.Chatterjee, ACOH, IPP - VIII, KMDA
10.	Garulia	Dr. S. S. Chandra, Programme Administrator CUDP-III, KMDA
11.	Champdany	Dr. N. K. Dutta, Programme Administrator, HPU KMDA
12.	Khardah	Dr. P. K.Chatterjee, ACOH, IPP - VIII, KMDA
13.	Pujali	Dr. S. S. Chandra, Programme Administrato CUDP-III, KMDA
14.	Gayeshpur	Dr. N. K. Dutta, Programme Administrator, HPU KMDA
15.	Hooghly Chinsurah	Dr. Chaitali Mukherjee, ACOH, IPP - VII KMDA
16.	New Barrackpore	Dr. N. K. Dutta, Programme Administrator, HPU KMDA
17.	Rishra	Dr. Chaitali Mukherjee, ACOH, IPP - VII KMDA
18.	Serampore	Dr. Chaitali Mukherjee, ACOH, IPP - VII KMDA
19.	Maheshtala	Dr. S. S. Chandra, Programme Administrato CUDP-III, KMDA
20.	Naihati	Dr. P. K.Chatterjee, ACOH, IPP – VIII, KMDA
21.	Dum Dum	Dr. B. N. Tripathy, ACOH, IPP - VIII, KMDA
22.	Kamarhati	Shri N. K. Ghosal, Project Officer, IPP-VII KMDA
23.	South Dum Dum	Dr. Chaitali Mukherjee, ACOH, IPP-VIII, KMD/
24.	Panihati	Dr. P. K. Chatterjee, ACOH, IPP-VIII, KMDA
25.	Rajpur Sonarpur	Nomination is being processed
26.	North Dum Dum	Nomination is being processed
27.	Barrackpore	Nomination is being processed

(list of nominated persons of Health.doc)

R.C.H SUB PROJECT, ASANSOL. School Health Programme

1) Total No. of Students	:	181
2) Total No. of Students Enrolled	:	35915
3) Total No. of Students Examined		32814
4) Total No. of Students Treated		12262
5) Total No. of Students Referred		1388
6) Total No. of Health Check Up(s) Session(s)	:	750

- 7) Total No. of awareness Session(s) conducted for Teacher: 4
 - A) No. of Teacher attained

: 389

- B) Topic discussed:
 - a) Health-Study
 - b) Healthy-Environment
 - c) Physical Capability: Personal Health of Student
 - d) Vaccination in proper time: B.C.G, D.P.T, Polio, Mea seals.
 - e) To encourage art of living.
 - f) Yearly Health Check-up and send for treatment as directed.
- 8) Total No. of awareness Session Conducted for Guardians :
 - A) No. of Guardians attained

21492

- B) Topic discussed:
 - a) Students must bathe everyday.
 - b) Students must brush teeth every morning.
 - c) Nutritious food habit.
 - d) To take clean water and to be protected water borne disease.
 - e) To remove garbage and maintain sanitation.
 - f) To take iodine salt.
 - g) Avoid nail biting.
 - h) Think better for the society.

U. Finin

Health Officer
Asansol Municipal Corporation

The Level Street

RCH Sub Project, Asansol

School Health Programme

of The die to the transfer to the total of total of the t	J Form we headly church in	5) Total No. of Student Reffered	3) Total No. of Student Exmained 4) Total No. of Student Treated	2) Total No. of Student enrolled	1) Total No. of School Covered within Assusol Municipal Corporation
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RCH Sub Project Asansol

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PRIMARY SCHOOL HEALTH CHECK UP PROGRAMME 1ST LEVEL SCREEN REPORT

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Health Officer
Asansol Municipal Corporation

PRIMARY SCHOOL HEALTH CHECK UP PROGRAM WINE 1ST LEVEL SCREEN I REPORT

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Health Officer Asansol Municipal Corporation

PRIMARY SCHOOL HEALTH CHECK UP PROGRAMME 1ST LEVEL SCREEN REPORT

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W. Mark

Health Officer

Asansol Municipal Corporation

PRIMARY SCHOOL HEALTH CHECK UP PROGRAMME 1ST LEVEL SCREEN REPORT

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Health Officer Asansol Municipal Corporation

PRIMARY SCHOOL HEALTH CHECK UP PROGRAMINE 1ST LEVEL SCREEN REPORT

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Health Officer

Asansol Municipal Corporation

School Health Programme

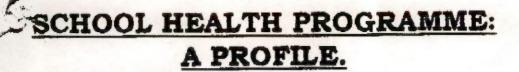
It is a well accepted fact that HEALTH and EDUCATION are complimentary to each other. So to impart proper education, due care should be given to health.

R.C.H sub Project, under the Asansol Municipal Corporation has been serving the community since 1998. According to the felt need of the community, it has been decided that School Health Programme will be implemented within the project area. All the students (Approx 36000) of 181 primary schools within the Asansol Municipal Corporation area have been included in this programme.

Activities of the Programme at a glance :-

- 1. Primary Health Checkup of the students:-Each and every student will be examined by a doctor as per a fixed schedule within the school premises. It is appreciated that an effective examination of a primary school student is only possible in the presence of the guardians. Hence they will be informed in advance, to facilitate a direct interaction between the doctor and the guardian. Specific topics will be taken up during these sessions to enhance health awareness among the guardians and teachers who are the main custodians of the students.
- 2.Health Cards: A health card ,customized for this programme has been prepared, which will be issued to every student through the respective school teachers. Apart from clinical findings of the doctors, the card will contain all relevant basic information, which will serve for future reference and also for referral services.
- 3. A booklet on health education has been published, which will be distributed to all the guardians and teachers of the primary schools. This booklet has been specially designed to highlight the expected role to be played by the guardians and teachers in maintaining proper health and hygiene of the students.

FAX NO, : 03412202491



1. Jurisdiction.

Primary Schools within Asansol Municipal Corporation.

Comprises of Two Circles

(a) ASANSOL CIRCLE

(b) HIRAPUR CIRCLE.

2. No. of Schools.

(a) ASANSOL CIRCLE: - 100 (One hundred)

(b) HIRAFUR CIRCLE :- 093 (Ninety three)

Total: 193 (One hundred Ninety three)

3. No. of Students.

(a) ASANSOL CIRCLE:-18873

(b) HIRAPUR CIRCLE: 18183

Total: 37056

4. No. of Teachers.

(a) ASANSOL CIRCLE: -424

(b) HIRAPUR CIRCLE :- 370

Total: 794

METHODOLOGY:

A health card will be issued to every student. The said card consists of : ~

- (a) General information: To be filled in by the teacher in consultation with the guardian
- (b) Specific health information: To be filled in by a doctor after examination of the student.

A medical team will be sent to each school as per a pre fixed programme. The team will consist of : -

- (a) A Doctor
- (b) A Nuros.

et . .

(c) Two RCH health workers.

Examination of the students, in batches consisting of 60 (skrty) students, will be conducted by the Medical team. The findings will be stored in the health cards, which will be kept with the school authority.

Referral services will also be provided through the Referral Units (ESOFD) of RCH Sub-Project, Asansol and the State Health Department (S. D. Hospital).

Contd... Page 2

Page - 02

The Guardian / parents of the school children will also be called at the time of Heulth Check up of the students.

In addition, a booklet in Bengali is being prepared which will be giving the 'do's' & 'don'ts with respect to health & hygiene.

The Management & Supervising Cell will monitor the overall progress of the programme. Regular field visits will be paid to various schools.

COST INVOLVEMENT:

It is proposed that the RCH Project from its IEC component will fund the programme.

COST COMPONENTS:

a) Logistic Support: [Printing of Health cards, Referral cards, IEC materials, procurement of measuring tapes etc. * Rs. 85,000=00 (provisional)

b) Session fees:

1. Doctors Rs. 200=00 per No. of session + Rs. Sessions 50=00 as 617 Rs. 1,54,250=00

Mobility
Assitance.

2. Nurse Rs. 50=00 per 617 Rs. 30,850=00 session.

d) Fees to supervisors:

e) IEC:

1) Sundries:

10,000=00 (provisional)

Commence of the same

36,700=00

50,000=00 ---

35,000=00

Total: Rs. 4,01,800=00

Rupees (Four lakh One thousand Eight hundred) only

Atn: Dr. Mrs. Sibani Goswani Angest Officer - SUSA FAX NO: (033) 23593184 Special emphasis will be given to the following during the health check up sessions:-

- 1. Diseases of the eyes .
- 2. Diseases of the ears.
- 3. Diseases of the teeth & gum.
- 4. Diseases of the skin.
- 5. Rheumatic fever.
- 6. Mental health.
- 7. Nutritional status
- 8. physical disability.

Referral Services:- According to the need ,cases will be referred to either the S.D.Hospital ,Asansol or to the ESOPD of RCH sub Project for better evaluation and management.

Expected Outcome:-

1. Early detection and treatment of preventable diseases.

2. Containment of communicable diseases among the school children.

 Effective health care delivery by the teachers and guardians – specially personal health & hygiene of the students.

Attn: Dr. Mrs. Sibani Goswanie Project Officer - SUDA.

Health Offices

Health Corporation

SCHOOL HEALTH PROGRAMME

		Name of School	Kon				
	DOCIOLS INSTITUTE		Srtrength	AUGUST S	SEPTEMBER 2003		The second secon
I.		U.G.M. Kgirls FP School.	290	7,8,14,21,	*	7.00 am to 10.00 am	
	Dr. S. K. Bodia	Ward No-14 Rahmonia FP School	329		4,5,11,12,18,19	7.00 am to 10.00 am	
	(Asansol Circle Dr.D.D.Mukherjee.	Ward No-2/ Tulsirani FP School	498	1,4,5,11,	1,28	7.00 am to 10.00 am	
i james	(Hirapur Circle) Dr. Ajay Bhattacharya	Ward No-10 Monimala FP School	489	5	3,4,	7.00 am to	
1	(Hirapur Circle) Dr. A. Banerjee.	Kumarpur FP School	137	-		7.00 am to 10.00 am	
	(Hirapur Circle)	Ward No-02 Gurunarrak Mission PP School	493	11,14,18,2 025,29	1,4,9,11	7.00 am to	
	Dr.K.M. Thakkar.	Kaji Najnul FP School	328	5,7,14,21, 26,28	•	3.00 pm to	
	(Asansol Circle)	Adarsha Bidyalay FP School	172	2,4,9		3.00 pm	
		Humdard FP School	103	11,16	-	3.00 pm	
	Dr.Kalpana Sannyal	Durga Vidyalay, GT Road	108	11,14		3.00 pm to	
1 444	(Asansol Circle)	Rabbani FP School	122	1,4		3.00 pm to	
		RK, Mission FP School Unit	150		1,4,8,12,15,19	3.00 pm	
		Ward No-31 Gujrati Vidyalay . GT Road.	119	18,21			
7.	Dr.Z.Haque. (Asansol Circle)	A.K. Azad FP School Ward No-28	907	4,6,11,13,	1,3,8,10,15,17,2	3.00 pm to 3.00 pm (e.27.00 am to 10 am.	

29 M90 to 2003 82 . euh

FAX NO. : 03412202491

בצמא : כבס הפהאפסר-אטאוכוף סספרא.

পুতি
সৃধী, "সকলের জন্য শিক্ষা ও স্বাস্থ্য" এই অঙ্গীকারের কথা শ্মরণ করে আসানসোল পৌরনিগম কর্তৃপক্ষ প্রাথমিক বিদ্যালয়ের ছাত্র-ছাত্রীদের স্বাস্থ্যপরীক্ষা কর্মসূচী শুরু করেছে। আসানসোল ও হীরাপুরের প্রায় ১৭০ টি প্রাথমিক বিদ্যালয়ের প্রায় ৩৭ হাজার ছাত্র-ছাত্রীকে এই কর্মসূচীর আওতায় আনা হবে। দারিদ্র-
সীমার নীচে বসবাসকারী পরিবারের পভুয়ারা অপুষ্টিজনিত অসুখে ভোগে। সামগ্রিক স্বাস্থ্য সচেতনতার অভাবে এই সব ছাত্র-ছাত্রীদের অনেকেই চোখের দৃষ্টিশক্তি জনিত সমস্যা, এমন কি দাঁত ও চামড়ার অসুখে ভোগে।
পৌরনিগমের অধীন আর.সি.এইচ্. প্রকল্পের চিকিৎসকগণের ও স্বাস্থকর্মীদের সহযোগিতায় এই বিদ্যালয়ে স্বাস্থ্য কর্মসূচী রূপায়িত হচ্ছে। আর.সি.এইচ্. প্রকল্পের চিকিৎসকগণ, প্রাথমিক বিদ্যালয়ের কোন ছাত্র-ছাত্রীর জটিল রোগ ধরা পড়লে, তাকে উন্নত চিকিৎসার জন্য হাসপাতালে পাঠানোর ব্যবস্থা
করবেন। আসানসোল সৌরনিগম তার সীমিত সামর্থের মধ্যে প্রতি মুহুর্তে মৌলিক নাগরিক পরিষেবার কাজ অব্যাহত রেখেও প্রাথমিক বিদ্যালয়ের ছাত্র-ছাত্রীদের জন্য স্বাস্থ্যপরীক্ষা কর্মসূচী শুরু করেছেন। ভেবে দেখুন, আপনার শিশুটির স্বাস্থ্য পরীক্ষার এমন সুযোগ হারাবেন না। আমরা এই মহান ব্রতে এগিয়ে এসেছি, আপনিও এগিয়ে আসুন।
धनानां म र —
প্রধান শিক্ষক / শিক্ষিকা
স্কুলঃ স্বাস্থ্য পরীক্ষার স্থান
তারিখ
সময়

RCH SUB PROJECT ASANSOL MUNICIPAL CORPORATION

PERFORMANCE REPORT ON SCHOOL HEALTH PROGRAMME <u>UPTO SEPTEMBER -2003</u>

A: IEC

SL.NO.	ACTIVITY	PLANNED	ACHIVED
1.	Meeting with School teachers, RCH workers, Community people.	6	3
2.	Printing of health cards	40,000	40,000
3.	Printing of information booklet & Leaflets.	40,000	20,000
4.	Distribution of Health cards	5000	5000
5.	Distribution of information booklet & Leaflets.	5000	5000

B: HEALTH CHECK UP

SL.NO.		PLANNED	ACHIVED
1.	No. of Sessions	617	53
2.	No. of School	181	14
3.	No. of Children	37056	4403

C: Out of 4403 Children examined ,7 were found to have heart ailments. These children have been referred to ESOPD for further treatment .12 Children were found to have RTI and approx 1200 were found to be suffering from anemia. These children were managed by the attending doctors on the day of health check up

Strotogy: - i) Interatification of School mainly brimary school nearesto the Stumbs to be identified with appropria . no of students need examination cheekup.

2) Formation of Terra comprising of

a) MO-1 & opthalmic Tech-1

e) Nurse - 1 (treferably for Girls School)

d) Health womes (HHW/Fts) -1

or the Schools under the each Municipality

South a series of absorption available prove and published Series

3. Solvetion of one Teacher from the each colectified 30 hol.

4. Training of Schrol Health Team (thus forms)
along with The Selected teachers in on different aspects of School Health service.

a) Tig for 2 days duration will be conducted by the respective H.O (Fraine in S.H) of MAU!

ESOPO note the municipality!

5. a) Required Logistic Support the forvided for the Team. Couchas! - () Weight Hochins (2) Height Mensurement Stand (3) Stethesope, (1) Diagnostie Set 5) Killing Tray (61 Traybe Spatule (7) Torch light

8) Examination Table, Madrees, Both Bed Short, Polling 9) Screen & Strand. 10) Child BP Instrument.

11) Register for each School.

4) Firemeint Support for contingent emprenditue may be provided.

6. Each identified School At be veseted once in 6 months,

7. Defected cares e specific active to will be referred to The tesopo sospective Esopo for further event received speciality,

8) Periodical Jollows Chackers will be conducted by the Same team willisten ullistens the SHW of the SHW of the Short

particular Polark.

9. DEC Activities! Propagouda Gorap mostly
Wilk par guardian, Molivation by The HKH Ms.,
Active participation/involvement of The Councillar, et.

NG 05 ete.

SCHOOL HEALTH PROGRAMME (UNDER UHIP)

HEALTH EXAMINATION REPORT

1.	MUNICIPALITY	HAU No.		
2.	District			
	No of Cub contra			
4.	No. of School examined	ar mendi ku percelikani ayi mir i - gi - gi - gi		
5.	Data			
6.	No. of student examined		OF THE PROPERTY OF THE PROPERT	
7.	No. of students having health problems			
8.	Anaemia		-4	
	Worm Infestation .			
	Night Blindness			
	. Ear Discharge			
	. Scabies/Impetigo			
13	. Pyoderma			
	Eve Problem	and the same of th		
15	. Dental Problem			
	. Heart/Lungs/Liver/Spleen			
17	. Physical defects/Disability			
18	. Mental retardation			
1	moter tent of the	(SC	HOOLHEALTH PROC	iRAMMF.doe

প্রাথমিক বিদ্যালয় স্বাস্থ্য — কার্যক্রম

জেলা — বিবরণ পত্র

জেলা	
কতণ্ডলি বিদ্যালয় পরিদর্শন করা হয়েছেডার সংখ্যা	
উপকেন্দ্রের সংখ্যা	
প্রাথমিক সাস্থ্যকেন্দ্র	
তারিখ	
যে-সব শিশুদের পরীক্ষা করা হয়েছে তার মোট সংখ্যা	
শারীরিক বা স্বাস্থ্য সম্পর্কিত	
সমস্যা রয়েছেএমন শিশুদের সংখ্যা	
রম্ভণশ্বতা	
আন্ত্রিক-কৃমি	
রাডকানা রোগ	
कर्नकथ्र	
বোসপাঁচড়া	
পাইওডেরমা (পুঁজবিশিষ্ট ফোঁড়া)	
চোৰ	
দাঁত	
খন্যান্য	

প্রাথমিক বিদ্যালয় স্বাস্থ্য কার্যক্রম

হিসাব রাখার তালিকা (শ্বন্ধ্বিক্রিক)

			William		*****************			
শকেন্দ্ৰ			******		***************			**********
থমিক স্বা	স্থাকেন্দ্ৰ							
बला।								

রিপশ্রমের	তাারশ				***************************************			
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Dungtorwe of Health Secrices Bieto Family Walfare Bursen

No. of student with health problem detected

Char of W B. 02/01/108. L HELATTI CHECK UP PROGRAMME FOR RURAL AREAS FOR THE PERIOF FROM 25.11.2002 TO 30.11.2002

HOWRAH DISTRICT

DISTRICT COMPILATION REPORT:	HOWRAHDISTRICT
No. of BLOCKS No. Block Primary Health Centres	14
No. of Sub-Centres	14 418
No. of Primary Schools No. of Sishu Siksha Kendra	1635
TO O' O'STRING NETURN	266
No. student enrolled	2.22.22
No. of student examined	2,82,250

Health Problem Identified

No. of cases i	dentified	Dames
Anaemia	50,174	Percengate 37.49
Worm infestation	54,761	40.92
Night blindness	1.725	1.28
Ear discharge	5,730	4.28
Scabies	8,634	6.45
Pyoderma	2,465	1.84
Еуе	3,967	2.96
Dental	50,887	38.03
Others	11,162	8.34

DY. Chief Medical Officer of Health - III HOWRAH

CHIEF-MEDICAL OFFICER OF HOWRAH

Memo No. CMOHUSHI 583 Copy to:

dated, the

2,00,668

1,33,798

1. Ato Director of Health Services (FW) & S.F.W.O., W.B. 2. Asst. Director of Health Services (School Health), W.B.

3. Sabhadhipati, Howrah Zilla Parishad

4. District Magistrate, Howrah

5. Chariman, Dist. Pry. Council, Howrnh

6. D.I. OF SCHOOLS (PRY.), Howrah

7. Karmadhyaksha (J.O.P.S.S.), Howrah Zilla parishad,

DY. Chief Medical Officer of Health - If1 HOWRAH

SPECIAL SCHOOL HEALTH CHECK UP PROGRAMME 2002 FOR THE PERIOD FROM 25.11.2002 TO 30.11.2002 HOWRAH DISTRICT

		3.10	70	No of vicitor	vicitori	Shicker	Students	- Students with				income :	Design Frederic Resignation	2012			
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		School		School					4 75.0	tire	62	101	208	33	287	584	484
wi	Bally Japacha	8	13	83	13	8,800	7,727	5,800	1,192	4.431	3 5	374	322	128	374	3334	725
0	Doming	153	15	153	15	27,100	18,791	10,841	3,583	200	B	200	Ana	182	475	3949	1209
1 6	Cartrail	4.55	20	115	3.8	23,200	15,075	8,768	8.308	4,558	101	449		4.50	988	9896	E.
1	2000		0.00	8	36	24 800	15 349	8.787	3,588	3.442	109	381	28	?	33		
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	1	422	10	133	<u>م</u>	21,650	14,951	10,222	3,054	4.328	R	395		7.6	¥ 0. *	2250	6.5
23		3		4.00	a v	24 250	12086	0.630	4 085	4.77	141	433	923	1)	3	200	
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1	Tour Co	0/ ()	O.	60 CD	O	19,450	11,775	7,310	2.677	2,931	168	231	000	285	375	2534	200
14.		100	100	100	27	21 200	16,825	11,295	2,559	2,850	239	441	200	767	130	2000	300
7	Shampur - 1	3			1	040 %0	16 207	11769	2 759	6.679	217	678	33	The state of the s	200	725	2
14	Shyampur - II	(C)	17	0	21	002717	20000	4 22 708	50 174	54 781	1725	5730	B634	2465	39-57	50887	11152
		1635	266	1535	7000	7,82,250	COO.00.7	20212									

CHIEF MEDICAL OFFICER OF HEALTH
HOWRAH

DY. CEIE MEDICAL OFFICER OF HEALTH - III HOWRAH

PRIMARY SCHOOL HEALTH CHECK-UP PROGRAMME

Sub-Centres/CP / PH C. / B.P. I.C. 1"LEVEL SCREEN REPORT

/200 Dated:

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PRIMARY SCHOOL HEALTH CHECK-UP PROGRAMME 2nd LEVEL (1st REFERRAL) REPORT

P.H.C. / B.P.H.C. / RH

Dated:

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Other

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উদ্বোধন করবেন শ্রী নিরুপম মেন

মাননীয় মন্ত্রী, শিল্প ও বাণিজ্য, শিল্প অধিগৃহ সংস্থা ও শিল্প পুনগঠন, পরিকল্পনা ও উন্নয়ন, উত্তরবঙ্গ উন্নয়ন ও পশ্চিমাঞ্চল উন্নয়ন বিষয়ক দপ্তর, পশ্চিমবঙ্গ সরকার

প্রধান অতিথি হিসাবে উপস্থিত থাকবেন শ্রী বংশগোপান চৌধুরী

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মাননীয় সভাধিপতি, জেলা পরিষদ, বর্ধমান

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মাননীয় জেলাশাসক, বর্ধমান

खी मन्य घरक,

মাননীয় বিধায়ক, হীরাপুর

ত্রী কন্যান বন্দোপাশ্যায়,

মাননীয় বিধায়ক, আসানসোল

অনুষ্ঠানটিতে সভাপতিত্ব করবেন শ্রী শ্যামন কুমার মুশোদাশ্যায়

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ত্রী মনোজ আগরশুয়ান, আই. এ. এস.

মাননীয় জেলাশাসক্, বর্ধমান

खी मलय घरक,

মাননীয় বিধায়ক, হীরাপুর

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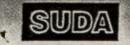
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মাননীয় মেয়র, আসানসোল পৌরনিগম

ड: त्विटेग्त भिं, जाहे. a. a.म.

অতিরিক্ত জেলাশাসক, আসানসোল, প্রকল্প নির্দেশক, আর.সি.এইচ্. (উপ) প্রকল্প ও মখ্য নিবাহী আধিকারিক, আসানসোল সৌরনিমগম



STATE URBAN DEVELOPMENT AGENCY

HEALTH WING "ILGUS BHAVAN"

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

Ref No. SUDA-120/96(Pt-IV)/155

From : Project Officer

Health, SUDA

To

: The Project Director

RCH-Sub Project Asansol & ADM Asansol.

Sub: Implementation of School Health Programme by RCH-Sub Project Asansol.

Sir,

The undersigned is directed to convey concurrence of the Competent Authority on launching of School Health Programme under RCH-Sub Project Asansol as described in your communication bearing memo no. 03/RCH / AMC dt. 24.02.2003.

The required fund for the purpose is ready for release. You are requested kindly to arrange for collection of the same through your authorized representative.

The expenditure in this regard is to be booked under the sub-head "Innovative" and SOE submitted in due course.

Thanking you.

Yours faithfully,

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SUDA-120/96(Pt-IV)/155(1)

C.C

06.05.2003

Mayor, Asansol Municipal Corporation for favour of kind information and necessary action.

SUDA-120/96(Pt-IV)/155(2)

C.C

Finance Officer, Health Wing, SUDA

Project Officer

roject Officer

06.05.2003

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Tel/Fax No.: 359-3184

Sub: Launching of School Health Programme under RCH-Sub Project Asansol

Asansol Municipal Corporation submitted a proposal on above during early February, 2003. They were requested to send a self contained proposal spelling out the objective, strategy, beneficiaries etc. The reply of the same has been received by this office on date.

The said programme aims at regular medical check up of the primary school students, majority located in the urban pockets of economically under privileged. The beneficiaries will be borne from the BPL families and catering 193 schools & 37056 students.

The methodology comprises of issuing Health Card to each of the students containing general information (to be filled-in by the Teacher in consultation with the guardian), and specific health information (to be filled-in by the Doctor after examination.). The Medical Team will consist of a Doctor, a Nurse and two RCH Health Workers. Referral services will be provided through the referral units (ESOPDs of RCH-Sub Project) and State Health Dept. (SD Hospital).

A booklet in Bengali will be prepared giving the DO's & DON'Ts in respect of Health and Hygiene.

The cost components totals Rs.4,01,800/- (Rupees Four Lakhs One Thousand Eight Hundreds) giving the scatter on logistic support, session-fees for professional, mobility support etc.

The said programme may be implemented under RCH-Sub Project as an Innovative one. The expenditure may be booked against the sub-head "Innovative" where there is fund provision.

Submitted for favour of kind perusal and clearance.

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Sicretary, Madeft

faxe faction 1.5.03

M/C

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FROM ADM ASANSOL

FAX NO. : 253019



C/P. (3) . 20 2003 02:00AM P1

2 0 MAR 2003

R.C.H SUB PROJECT,

ASANSOL.

RAL PA

Momo No: 03. / R.C. H. / AMC.

Dated 24/02/03.

To
The Adviser (Health),
State Urban Development Agency
"LGUS BHAVAN", HC BLOCK, Sector III
Bidhan Nagar,
Kolkata 700 091.

Sub. School Health Programme:

Sir,
With reference to our previous discussion on the above subject, we intend to launch
the School Health Programme by the end of this month

The programme entails regular medical checkup of all the primary school's students. As most of the said schools are located in the urban pockets of economically underprivileged, it is expected that the beneficiaries will be from the B.P.L. families. This programme will cater to 193 schools & 37056 students.

As such, it is deemed necessary to implement the programme at an early date.

A detailed resume of the programme along with financial involvement is given herewith. I shall be thankful if you place the requisite fund for the same.

Yours faithfully

Project Director, RCH Sub Project, Asansol.

St

Additional District Magistrate, Asansol.

SCHOOL HEALTH PROGRAMME: A PROFILE.

1. Jurisdiction. Primary Schools within Asansol Municipal Corporation.

Comprises of Two Circles (a) ASANSOL CIRCLE

(b) HIRAPUR CIRCLE.

2. No. of (a) ASANSOL CIRCLE: - 100 (Cine mindred)
Schools. (b) HIRAPUR CIRCLE: - 093 (Ninety three)
Total: 193 (One hundred Ninety three)

3. No. of (a) ASANSOL CIRCLE :- 1887 (b) HIRAPUR CIRCLE :- 18183 (b) HIRAPUR CIRCLE :- 18183 (c) 3705.6

4. No. of (a) ASANSOL CIRCLE: 424
Teachers: (b) HIRAPUR CIRCLE: 370
Total: 794

METHODOLOGY:

A health card will be issued to every student. The said card solessis of : ~

- (a) General information: To be filled in by the teacher in consultation with the guardian
- (h) Specific health information: To be filled in by a Judor after examination of the student.

A medical team will be sent to each school as per a pre-fixed programme. The team will consist of : -

- (a) A Doctor
- (b) A Nurea.
- (c) Two RCH health workers

Examination of the students, in batches consisting of 60 (sixty) students, will be conducted by the Medical team. The findings will be stored in the health, can'ts, which will be kept with the school authority.

Referral services will also be provided through the Referral Units (ESOPD) of RCH Sub-Project, Asansol and the State Health Department (S. D. Hospital) Fuge - 02

The Guardian / parents of the school children will also be adled at the time of Health Check-up of the students

In addition, a bookset in Benguh is being prepared which this be giving the 'do's' & 'don'ts with respect to health & hygiene.

The Management & Supervising Cell will monitor the overall progress of the programme. Regular field visits will be paid to vanous schools.

COST INVOLVEMENT:

It is proposed that the RCH Project from its IEC component unil fund the programme.

COST COMPONENTS:

a) Logistic Support. [Printing of Health cards, Referral cards, IEC materials, procurement of measuring tapes etc. = Rs. 85,000=00 (provisional)

b) Session fees

Doctors		No. of		
	session + Rs	Sessions		
	50=00 as	617	Rs.	1,54,250=00
	Mobilitu			-,,-
	Doctors	Mobility	Session + Rs Sessions 50=00 as 617 Mobility	Session + Rs Sessions 50=00 as 617 Rs.

2. Nurse Rs. 50=00 per 617 Rs. 30,850=00 session

-	Hiring of vehicle	10,000=00	(provisional)
-	Fees to supervisors	36,700=00	
e)	IEC:	50,000=00	
1)	Sundries:	35,000=00	

Total: Rs. 4,01,800=00

Rupees (Four lakh One thousand Eight hundred) only



STATE URBAN DEVELOPMENT AGENCY

HEALTH WING "ILGUS BHAVAN"

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

Ref N	lo	

Date

SUDA-120/96 (Pt. IV)/71

14.02.2003

From: Adviser (Health)

SUDA

To : Project Director

RCH-Sub Project Asansol & ADM Asansol

Sub: Implementation of School Health Programme by RCH-Sub Project Asansol.

Sir,

Reference is invited to your communication under memo no.12/CS/RCH/AMC dt. 04.02.2003 on the above subject.

You are requested to send a self contained narration regarding the said programme spelling out the objective, strategy, beneficiaries, service components, modus operandi, action plan, and parameters for impact assessment.

Yours faithfully.

Adviser (Health), SUDA

SUDA-120/96 (Pt. IV)/71(1)

14.02.2003

CC

Mayor, Asansol Municipal Corporation for favour of kind information.

Adviser (Health), SUDA

Office of the Project Director, RCH Sub Project, Asansol

YP.Q

- 4 FEB 2003

Memo No. 12/CS/RCH/AMC

Date 4/2/03.

To
The Advisor (Health)
State Urban Development Authority.
Sector III, H.C Block,
Salt Lake City,
Kolkata- 91.

FANN. 9533-23593184.

sub : Implementation of School Health Programme by RCH Sub Project, Asansol

Sir,

Your notice is invited on the aforementioned subject. It is felt that before scheme enters into the maintenance phase, some innovative scheme be undertakto add value to our services.

In view of the above, we intended to implement School Health Programme in the Primary Schools within the project area. As such fund may please be placed as in the requisition sent herewith

Yours faithfully,

Project Director, RCH Sub Project, Asansol & Addl. District Magistrate,

Asansol.

-- Pary

A requisition of Fund regarding School Health programme (Innovative Scheme) is submitted to the authority

Particulars of School and Student strength as follows:

<u>Sl. No.</u>	Circle	No. of schools.	Student Strength
1.	Asansol.	100	18,873 nos
2.	Hirapur (Excluding 04 nos	89	17,888 nos
	Schools in Kulti)		36,761 nos

To conduct the programme following Funds are required.

- a) Fees to Doctors. @ Rs. 200=00 (Two hundred) per session +50 mobility assistance.
- b) Fees to Paramedicals @ Rs. 50=00 (Fifty) per session
- c) Fees for Supervision @ Rs. 600-00 (Six hundred) per session
- d) Hiring charge of vehicle: as per ULB rate.
- e) Logistic support
- 1) Sundries.
- g) I.E.C / Publicity

As per opinion of Part Time Medical Officers & Private Doctors, it has been resolved that 60 (Sixty) numbers of students (approx) will be examined in one session.

Revised provisional expenses may be as follows:-

To cover-up the entire programme [36,761 nos student \div 60] =612 nos sessions required

1)	I.E.C / Publicity	Rs	20,280=00 35,000=00
	(for printing of Health Cards / Referral Cards / leaflets/Stationeries) Sundries.	Rs	
e)	Logistic support.	Rs	10,000=00 (provisional) 65,000=00 (provisional)
d)	Car hiring charges.	Rs	36,720=00
c)	l'ees for Supervision [612 session x 50.00]	Rs	30,600=00
a)	Fees to Doctors [612 sessions X RS. 250.00] Fees to Paramedicals. [612 session X 50.00]	Rs	1,53,400=00

Rupees Three lakh Fifty thousand only.