

IN THE HIGH COURT OF ORISSA: CUTTACK

I.A No. 6754 Of 2022

(Arising out of W.P.(C) PIL No. 13403 of 2015)

Bijay Bihari Pradhan ... Petitioner

-Versus-

State of Odisha & Others ... Opp. Parties

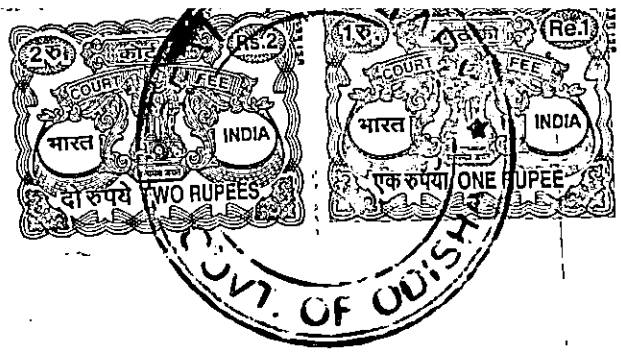
I N D E X

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Cuttack

Dtd.10/02/2023

Shashi Kumar
ADDL. GOVT. ADVOCATE



IN THE HIGH COURT OF ORISSA: CUTTACK

I.A No. 6754 Of 2022

(Arising out of W.P.(C) PIL No. 13403 of 2015)

Bipin Chandra Pradhan ... Petitioner

-Versus-

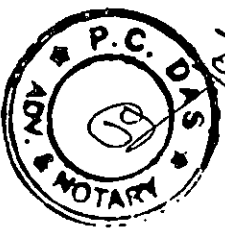
State of Odisha & Others ... Opp.Paries

**REPLY TO I.A. NO.6754 OF 2022 ON BEHALF
OF OPP. PARTY NO.1 - COMMISSIONER-CUM-
SECRETARY TO GOVT. HEALTH & FAMILY
WELFARE DEPARTMENT ODISHA :**

here
I, Dr. Ajit Kumar Mohanty, aged about 62 years,
Son of late Bhabagrahi Mohanty, at present
working as Special Secretary (PH) to Government,
Health & Family Welfare Department, Odisha, Loka
Seva Bhawan, Bhubaneswar, Dist.: Khurda, do hereby
solemnly affirm and state as follows :

1. That, I am working as Special Secretary (PH) to
Government, Health & Family Welfare Department,
Odisha w.e.f. 07.05.2020 and have been duly
authorised by the Commissioner-cum-Secretary to
Government, Health & Family Welfare Department,

Ajit Kumar Mohanty



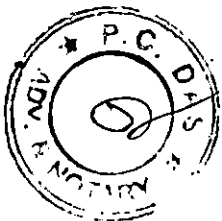
Government of Odisha to swear this Affidavit on her behalf.

2. That, I have gone through the copy of the I.A. No.6754 of 2022 along with the Annexures annexed thereto and understood the contents and purport thereof. I am otherwise acquainted with the facts of the present facts of the case and competent to swear this Affidavit by virtue of my Office. The averments / assertions / allegations made and contentions raised in the I.A. which are not specifically dealt with and / or denied, are deemed to have been denied.

3. That, the Interim Application as laid is not maintainable either in facts or in law but wholly misconceived. The answering Opp. Party craves leave to explain further in this regard at the time of hearing.

4. That, in reply to the averments made by the petitioner in Paragraph – 1 of the I.A, it is humbly submitted that the Government is taking all steps like Active case detection through different campaigns, free treatment and DPMR (Disability Prevention and Medical Rehabilitation) Services of leprosy patients, under National Leprosy Eradication Programme (NLEP).

5. That, the averments made in Paragraph – 2 of the I.A. needs no reply from this deponent.



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D. S. Prasad

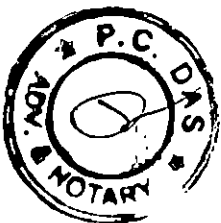
6. That, in reply to the averments made in Paragraph - 3 of the I.A, it is humbly submitted that the Deputy Director General (Leprosy), Ministry of Health & FW, Govt. of India vide D.O. No.719/DDG(L)/2002-Lep, dtd. 06.05.2002 regarding integration of Leprosy Services with General Health Care Services (GHS) at functional as well as structural level.

Copy of the D.O dtd. 06.05.2002 is filed here with and annexed as Annexure - A.

As per the UOI No.89/F, dtd.30.04.2014 of Finance Dept, Govt. of Odisha relating to the minutes of the meeting chaired by the Additional Chief Secretary, Finance Department in presence of Principal Secretary, Health & FW Dept, MD, NHM and other officials, it has been decided that the MPW(M) leprosy will not be filled up henceforth and will be converted to MPHW (Male).

Copy of the UOI dtd.30.04.2014 is filed herewith and annexed as Annexure - B.

In 2005-06, National Rural Health Mission (NRHM) was launched by Govt of India in which all programmes like leprosy, TB, Malaria, Dengue, Maternal Health, Child Health, and Immunization, etc.



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Dr. P. K. Das

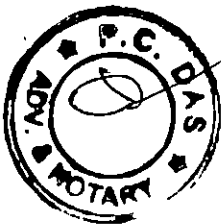
came under one umbrella for effective implementation of different programmes.

Multi skilling of technical persons are encouraged for optimum and effective use of technical manpower like Health Worker (Male & Female), Laboratory Technicians, Physiotherapists so that similar type of health care services can be provided to many patients.

The NLEP was also integrated with general health care system in 2002-03 as per Govt. of India guidelines, so that more number of health personnel that starting from ASHA, Health Worker (Male & Female), Health Supervisor (Male & Female), Community Health Officers and Doctors are involved in Leprosy case detection, treatment, follow up and counselling.

It is further submitted that the State Govt. vide Order No.44260/H, dtd.22.11.2001 abolished the post of Para Medical Workers (PMW), Leprosy Assistant and Non-Medical Supervisors (NMS) which was intimated to SSEPD vide letter No.25776/H, dtd.14.09.2021 and vacant posts were not filled up as NLEP was integrated with General Health Care System and in the field ASHA, Multi Purpose Health Worker (Male and Female), Multi Purpose Health Supervisor

Dr. J. K. Verma



(Male and Female) trained on NLEP are effectively managing the programme.

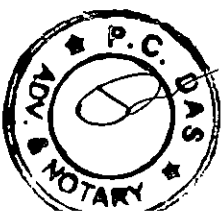
Copy of the letter dtd.14.09.2021 is filed herewith and annexed as Annexure - C.

7. That, in reply to the averments made in Paragraph - 4 of the I.A, it is submitted as follows :

a) From 2002-03 to 2020-21, all parameters of NLEP are in sustained declining phase which is mentioned below :

Year	New Leprosy cases detected	ANCDR per 1,00,000 population	Prevalence Rate per 10,000 population	Grade-II Disability amongst new cases
2002-03	38349	101.20	7.3	659
2019-20	10077	21.3	1.45	200
2020-21	6148	12.9	1.1	178
2021-22	5729	11.8	0.89	164

So, all the parameters like ANCDR (Annual New Case Detection Rate) has come down from 101.20 (2002-03) to 11.8 (2021-22). Total No. of New Leprosy Cases Detected has declined from 38349 (2002-03) to 5729 (2021-22), Prevalence Rate has come down from 7.3 (2002-03) to 0.89 (in 2021-22).



P.C. DAS

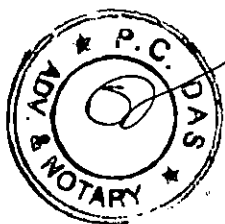
The gradual decline of leprosy – new leprosy case detected and prevalence rate per 10000 population has already been highlighted in the table annexed at Para no. 7 (a) and Para no. 8.

b) So far as increase in MB (Multi Bacillary) leprosy cases is concerned, it is submitted that MB cases are diagnosed as per the following criteria:

Sl No.	Characteristics	PB (Paucibacillary)	MB (Multibacillary)
1.	Skin lesions	1-5 patches	6 patches or more
2.	Involvement of peripheral trunkal nerve	No nerve/ only one nerve involvement	More than one nerve involvement
3.	Skin smear	Negative at all sides	Positive in any site

- Usually MB and PB Leprosy diagnosis are clinically made by the doctors.
- Nerve thickening examination is a subjective issue. In last few years, more Dermatologists / Skin specialists and Medical Colleges / tertiary health care institutions are diagnosing the leprosy cases with more accuracy.
- Due to newer technology, increased awareness and regular drive to detect new cases which were

Dr. P. K. Das

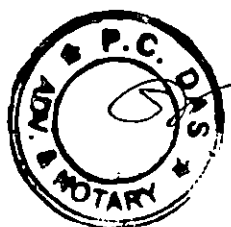


missed earlier are diagnosed now a days. So MB Leprosy cases are increasing in number.

- Immunity status of the patient also plays a major role in MB cases.
- So increase in MB Cases and ensuring them complete free treatment with MDT (Multi Drug Therapy with three drugs regimen) for 12 months will cure the disease instead of under diagnosis as PB Leprosy where treatment is for six (6) months in MDT two drugs regimen.

8. That, in reply to the averments made in Paragraph - 5 of the I.A, it is humbly submitted that after integration of NLEP with General Health Care System, there is sustained decline in all parameters of NLEP in Pre-Covid and Covid period which are mentioned below.-

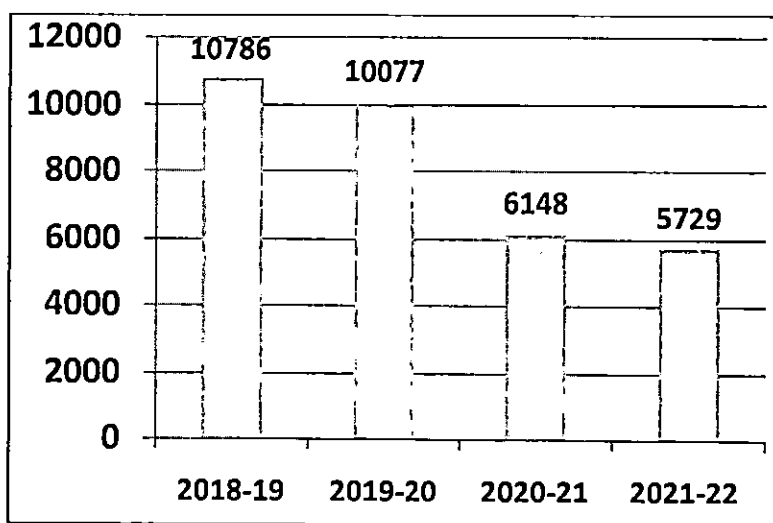
Year	PR per 10,000 population	ANCDR per 100000 pop.	Child leprosy Cases	No. of Grade-II Disability cases	Remark
2002-03	7.3	101.2	6131 (16%)	659	Pre Covid period
2019-20	1.45	21.3	681 (6.8%)	200	Pre Covid period
2020-21	1.1	12.9	422(6.9%)	178	Covid period
2021-22	0.89	11.8	392 (6.8%)	164	Covid period



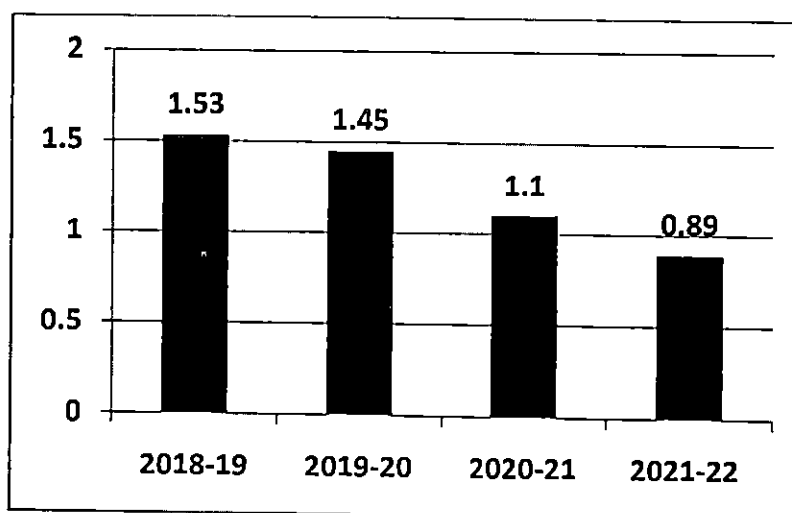
Dy. P.C. D.S. Adv. Rotary

Annual New Case Detection Rate (ANCDR), Prevalence Rate (PR), Grade - 2 Disability numbers and Children affected in Leprosy are declining which suggest that there is effective implementation of the Leprosy eradication programme

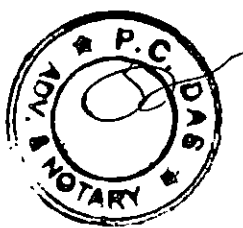
New Leprosy case detection:



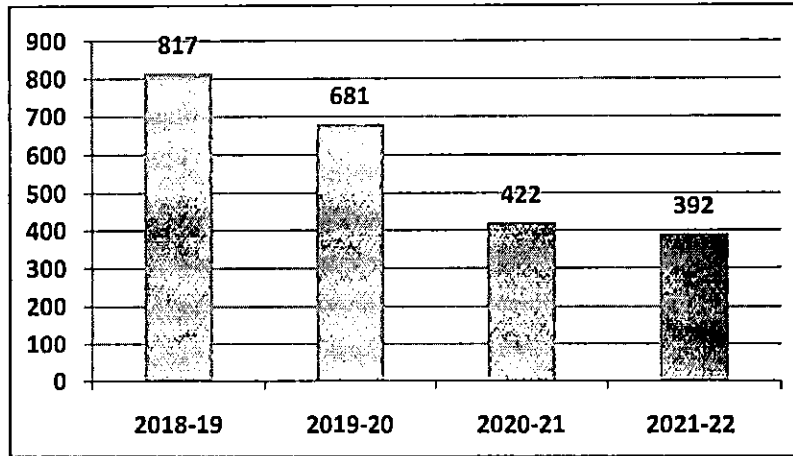
Prevalence rate / 10,000 population:



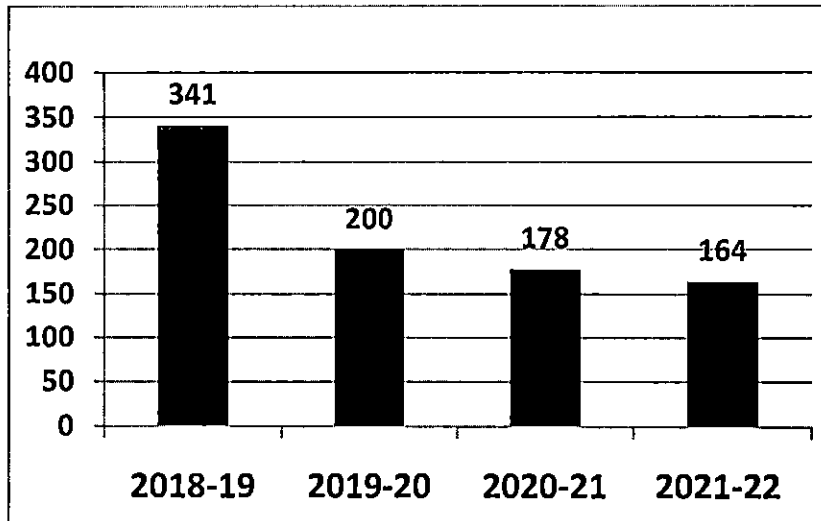
Signature
Digitally signed by P.C. Das



Child New Leprosy Case detection:



Grade II Disability among new cases:

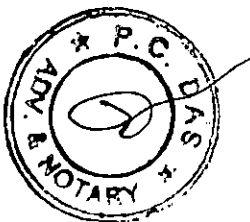


*h
AA*

Dr. J. K. ...

As per the minutes of the meeting held on 03.04.2014 under the Chairmanship of Addl. Chief Secretary, Finance with Principal Secretary, Health & FW Dptt. the post of MPW/PMW will not be filled up henceforth and will be converted to MPHWH (Multi Purpose Health Worker) Male.

Copy of the Minutes of Meeting dtd. 03.04.2014 is filed herewith and annexed as Annexure – D.

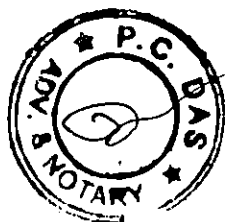


11. That, in reply to the averments made in Paragraphs - 9 & 10 of the I.A, it is humbly submitted that as per the minutes of the meeting held on 03.04.2014 under the Chairmanship of Addl. Chief Secretary, Finance with Principal Secretary, Health & FW Dptt., the post of MPW/PMW will not be filled up henceforth and will be converted to MPH (Multi Purpose Health Worker) Male.

12. That, in reply to the averments made in Paragraph - 11 of the I.A, it is humbly submitted that the compliance regarding filling up of 182 PMWs and fund utilization has been submitted by AD(Admin.), NHM, Odisha to DPH, Odisha which states that funds sanctioned for Para Medical Worker (PMW) under NHM PIP 2013-14 for 184 PMWs were not diverted for any other purpose, rather the amount available was much less than the sanctioned amount for the year 2013-14.

Copy of letter No.357, dtd.09.01.2023 is filed herewith and annexed as Annexure - F.

13. That, in reply to the averments made in Paragraph - 12 of the I.A, it is humbly submitted that DPMR Clinic have been integrated as per Govt. letter No.20501/H, dtd.16.09.2022 to provide service to leprosy patients and Lymphatic



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Filariasis which is being managed by trained technical staffs and physiotherapists for optimum and effective use of technical manpower.

14. That, in reply to the averments made in Paragraph - 13 of the I.A, it is humbly submitted that the Govt. is taking all steps to make the people/ community aware against stigma and discrimination towards leprosy through Electronics and Print media as well as by involving all key Departments like School & Mass Education, Panchayatiraj, Women & Child Development, SSEPD. Gram Sabhas are arranged in every village, debates, poster campaign, rallies are organised in schools to make people aware against stigma and discrimination relating to leprosy.

15. That, in reply to the averments made in Paragraph - 14 of the I.A, it is humbly submitted that the BNLWs (Block Nodal Leprosy Workers) are trained on NLEP. They help in implementation of the programme along with MPHWS (Female), ASHA, Community Health Officer (CHO) and Medical Officer. The suspected cases are brought to the Health Institutions by ASHA and Health Worker and confirmed by the Medical Officer. The Opp. Parties are taking all steps under NLEP.

16. That, the averments made in Paragraphs - 15 to 18 of the I.A. needs no reply from this deponent.

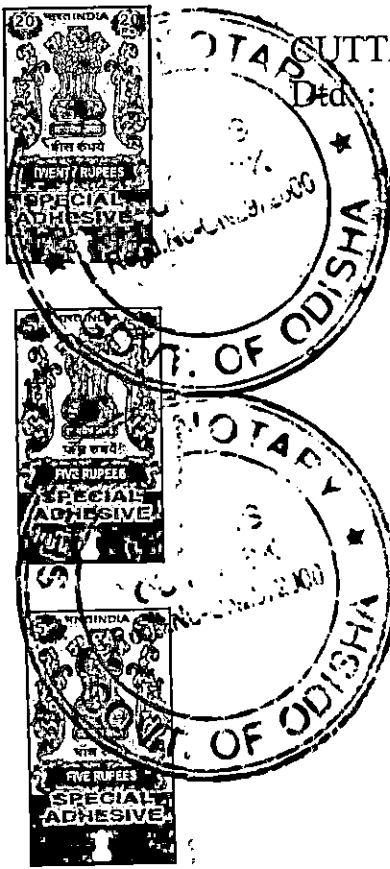


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17. That, the facts stated in the aforementioned Paragraphs are true to the best of my knowledge and based on Official records.

Identified by:
Advocate's Clerk,
Advocate General's Office

[Signature]
DEPONENT
10.02.2023
Special Secretary (PH)
H B F. W. Deptt.

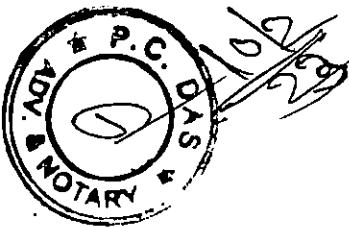


SUTTACK
Dtd: 10.02.2023

Certified that cartridge papers are not available.

[Signature]
ADDL. GOVT. ADVOCATE

The above named deponent
Solomnly affirm on... 10/2/23
.....being identified
by... *[Signature]*



14 Feb



Ministry of Health & Family Welfare

Dr. Ashok Kumar, M.D.
Dy. Director General (Leprosy)

IMMEDIATE

E-mail: dg1@nb.nic.in
Gram: HOS-110011

स्वास्थ्य सेवा महानिदेशालय
निर्माण भवन, नई दिल्ली-110011
Dte. GENERAL OF HEALTH SERVICES
Nirman Bhawan, New Delhi-110011
DO no.719/DDG(L)/2002-Lep
Dated 6th May 2002

Sub-NLEP-Integration of leprosy services with primary/general health care services (GHS)- Regarding

Dear MS Gupta,

You are aware that 2nd NLEP Project with World Bank assistance has prioritised ~~decentralisation~~ and institutional development and integration of leprosy services with GHS at functional as well as structural level by the end of the project i.e March 2004, besides undertaking various other activities like disability care and prevention, IEC, training, strengthening the surveillance etc. With regard to decentralisation all the states have constituted the state level leprosy societies which have taken up the responsibilities of the management of funds as well as ensuring efficient planning, implementation and supervision of the project.

World Bank has very recently informed that they will be undertaking 2nd NLEP Supervision Mission from 20th to 31st May 2002. During this mission, status as well as action plan with regard to integration of leprosy services with GHS will also be reviewed in detail besides other issues. In this connection, please find enclosed herewith a check list which indicates the (i) activities/action to be taken, (ii) status as on 1st April, 2002 and (iii) action plan to accomplish the activities with regard to aforesaid integration in your state/UT. We will appreciate if you kindly arrange to send us the information on above items (ii) & (iii) against each of the activity/action listed in the enclosed check list, to reach us by 20th May, 2002. This will enable this directorate to share the information with World Bank's Supervision Mission scheduled during 20-31 May 2002

With kind regards,

Yours sincerely,
(Signature)
(Dr. Ashok Kumar) 6/5/2

Encl.(as mentioned)

Ms.Meena Gupta
Commissioner-cum-Secretary
Health &FW Deptt.
Orissa Secretariat
Bhubaneshwar-751 001

True copy attested

Under Secretary to Govt.
Health & F.W. Deptt.

Lev
to
6/5/2

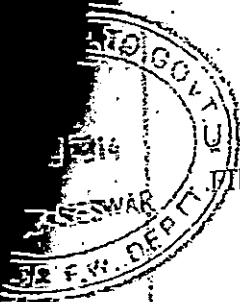
ingent
B

Ms. Meena

Ms. Meena

20.5.2002
4.25 PM

NOTE SHEET



O.I.No. 89 /F, Dt. 30/4/2014
FIN-SOS 3-ESTT-0130-2012

Enclosed please find the Minutes of the meeting held on 03.04.2014 at 3.30PM in Finance Department Conference Hall under the Chairmanship of Additional Chief Secretary, Finance to assess the shortfall of funds to meet the requirement of remuneration for the newly created 10301 posts of paramedics under National Health Mission, Odisha duly approved by the Addl. Chief Secretary, Finance.

[Signature]
(G. Nandi) 29.4.2014
Deputy Secretary to Govt.
Finance Department.

Health & F.W. Department
(Kind Attention:
Sri P.K. Mohapatra, Principal Secretary to Govt.)

A-1 (HKD) / ND, NHM

True copy attested
[Signature]

Under Secretary to Govt.
Health & F.W. Deptt.

-16-

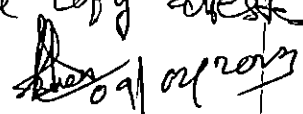
(12)

Minutes of the meeting to assess the shortfall of funds to meet the salary requirement ^{of remuneration} for the newly created 10301 posts of paramedics under Department H&FW

A meeting was held on 03.04.2014 at 3.30 PM in Finance Department Conference Hall under the Chairmanship of Additional Chief Secretary, Finance in presence of Principal Secretary, H & FW Department, MD, NHM and other officials from Finance and Health & Family Welfare Department. The meeting was held to review the actual shortfall of funds under NHM to meet salary requirement for the newly created 10301 posts of paramedics during the year 2013-14 and also to review regarding availability of funds under NHM in subsequent years i.e. 2014-15 and onwards.

After detailed discussion, following decisions were taken.

1. All 10301 paramedic post created in 2013-14 will be considered as contractual sanctioned post under NHM. These posts will be filled up by the year 2016-17 as per approval in NHM PIP of respective years.
2. Staff Nurse : All posts of Staff nurse created will be supported by NHM in phased manner as per PIP approval. However, the remuneration of 597 staff nurses engaged during the year 2013-14 will be paid by NHM as funds for 730 staff nurses has already been allocated by GOI in supplementary NHM PIP 2013-14.
3. MPHM (F)/ANM : It was decided that for the year 2013-14, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS towards payment of remuneration to 1111 additional ANMs (who have already been engaged out of total sanctioned contractual post of 5164 MPHWF) as there is no fund available with NHM for the current year. Moreover, for the year 2014-15, proposal will be placed in PIP to sanction at least 1111 ANMs who have already been engaged in 2013-14. However, proposal will also be placed before GOI in NHM PIP for sanction of 5164 MPHWF/ANMs required as per IPHS norm and time to care approach, in phased manner by 2016-17. Based on approval of GOI, required number of ANMs will be engaged in such years.
4. Laboratory Technician: It was decided that, Finance Department, Govt. of Odisha will provide grants-in-aid to OSH&FWS towards payment of remuneration to 105 LTs for the year 2013-14 which is already filled up out of 270 sanctioned contractual posts for the year 2013-14 and remaining 165 posts may be filled up during the year 2014-15. Accordingly grant-in-aid will be provided to OSH&FWS.

True copy attested

Under Secretary to Govt.
Health & F.W. Deptt.

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Radiographer: It was decided that, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS for payment of remuneration to 48 Radiographers who have already been engaged out of 99 sanctioned posts during the year 2013-14 and remaining 51 post may be filled up during the year 2014-15. Accordingly, grant-in-aid will be provided to OSH&FWS.

- 6. MPHW(M) : With regard to MPH(M) the entire cost of 991 newly created contractual post will be met out of State budget. For the year 2013-14, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS for payment of remuneration to 255 MPH(M), who have already engaged out of 991 sanctioned post. Further, it was decided that, no new recruitment will be made in current year i.e. 2014-15, as all 603 MPW(M) working under NVBDCP, out of World Bank supported project will be adjusted as contractual MPH(M) under State budget against 326 vacant post of MPH(M) under Leprosy. Accordingly, the post of MPW(M) under Leprosy will not be filled up henceforth and will be converted to MPH(M). However, the remuneration of rest 277 MPH(M) of NVBDCP (603-326=277) will be met out of State budget. Accordingly, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS towards payments of remuneration to all MPH(M). For better convergence of all National Health Programmes, these MPH(M) will be placed at Sub Centres to look after all programmes including Leprosy and Malaria.

The meeting ended with vote of thanks to the chair and participants.

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(P.K. Mohapatra)
Principal Secretary to Govt.
Health & Family Welfare Department
Government of Odisha

Handwritten signature of U.N. Behera.

25/11/2014.
(U.N. Behera)
Additional Chief Secretary,
Finance Department
Government of Odisha

True copy attested

Handwritten signature and date 25/11/2014.
Under Secretary to Govt.
Health & F.W. Deptt.



GOVERNMENT OF ODISHA
HEALTH & FAMILY WELFARE DEPARTMENT

No. 25776 H. Date. 14.09.2021
File No HFW-MSIII-PG-0006-2020
From

Mamata Barik, OAS
Joint Secretary to Government

B
P.K. Senapati
18/9/2021

To
The Commissioner-cum- Secretary to Govt.
Social Security & Empowerment of Persons with Disabilities Deptt.

Sub: Filling up of posts of Para Medical Workers, Non Medical Supervisors and support staff (Dressers and Attendants etc.) trained in Leprosy.

Ref- Your letter No.6982, dtd.06.08.2019

Sir,

In inviting a reference to the subject cited above, I am to inform you that the posts of PMW and Leprosy Asst. and NMS have been abolished vide Govt. Order no 44260/H dated 22.11.01. At present, this programme is being implemented as ACDRS in the field by ASHA and supported by MPW (M&F), MPHS and confirmed by M.O. It no more runs as a vertical programme as per GOI guideline under NLEP and has been integrated to primary health care system. Hence, as per present scenario, the process of filling of the posts, which are already abolished does not arise.

This is for information and necessary action.

Yours faithfully,

[Signature]
14.9.2021
Joint secretary to Government

✓
15.4.7.194 (11)
18/9/2021

342
18/9/21

True copy attested

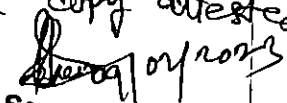
[Signature]
Under Secretary to Govt.
Health & F.W. Deptt.

Minutes of the meeting to assess the shortfall of funds to meet the salary ^{of remuneration} requirement for the newly created 10301 posts of paramedics under H&FW Department.

A meeting was held on 03.04.2014 at 3.30 PM in Finance Department Conference Hall under the Chairmanship of Additional Chief Secretary, Finance in presence of Principal Secretary, H & FW Department, MD, NHM and other officials from Finance and Health & Family Welfare Department. The meeting was held to review the actual shortfall of funds under NHM to meet salary requirement for the newly created 10301 posts of paramedics during the year 2013-14 and also to review regarding availability of funds under NHM in subsequent years i.e. 2014-15 and onwards.

After detailed discussion, following decisions were taken.

1. All 10301 paramedic post created in 2013-14 will be considered as contractual sanctioned post under NHM. These posts will be filled up by the year 2016-17 as per approval in NHM PIP of respective years.
2. Staff Nurse : All posts of Staff nurse created will be supported by NHM in phased manner as per PIP approval. However, the remuneration of 597 staff nurses engaged during the year 2013-14 will be paid by NHM as funds for 730 staff nurses has already been allocated by GOI in supplementary NHM PIP 2013-14.
3. MPHM (F)/ANM : It was decided that for the year 2013-14, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS towards payment of remuneration to 1111 additional ANMs (who have already been engaged out of total sanctioned contractual post of 5164 MPHWF) as there is no fund available with NHM for the current year. Moreover, for the year 2014-15, proposal will be placed in PIP to sanction at least 1111 ANMs who have already been engaged in 2013-14. However, proposal will also be placed before GOI in NHM PIP for sanction of 5164 MPHWF/ANMs required as per IPHS norm and time to care approach, in phased manner by 2016-17. Based on approval of GOI, required number of ANMs will be engaged in such years.
4. Laboratory Technician: It was decided that, Finance Department, Govt. of Odisha will provide grants-in-aid to OSH&FWS towards payment of remuneration to 105 LTs for the year 2013-14 which is already filled up out of 270 sanctioned contractual posts for the year 2013-14 and remaining 165 posts may be filled up during the year 2014-15. Accordingly grant-in-aid will be provided to OSH&FWS.

True copy attested

Under Secretary to Govt.
Health & F.W. Deptt.

TH (6)

Radiographer: It was decided that, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS for payment of remuneration to 48 Radiographers who have already been engaged out of 99 sanctioned posts during the year 2013-14 and remaining 51 post may be filled up during the year 2014-15. Accordingly, grant-in-aid will be provided to OSH&FWS.

6. MPHW(M) : With regard to MPH(M) the entire cost of 991 newly created contractual post will be met out of State budget. For the year 2013-14, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS for payment of remuneration to 255 MPH(M), who have already engaged out of 991 sanctioned post. Further, it was decided that, no new recruitment will be made in current year i.e. 2014-15, as all 603 MPW(M) working under NVBDCP, out of World Bank supported project will be adjusted as contractual MPH(M) under State budget against 326 vacant post of MPH(M) under Leprosy. Accordingly, the post of MPW (M) under Leprosy will not be filled up henceforth and will be converted to MPH (M). However, the remuneration of rest 277 MPH (M) of NVBDCP (603-326=277) will be met out of State budget. Accordingly, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS towards payments of remuneration to all MPH(M). For better convergence of all National Health Programmes, these MPH(M) will be placed at Sub Centres to look after all programmes including Leprosy and Malaria.

The meeting ended with vote of thanks to the chair and participants.

(P.K. Mohapatra)
Principal Secretary to Govt.
Health & Family Welfare Department
Government of Odisha

(U.N. Behera)
Additional Chief Secretary,
Finance Department
Government of Odisha

True copy attested

Under Secretary to Govt.
Health & F.W. Deptt.

Annexure-E
ADPHO (Sep)

COLLECTOR & DISTRICT MAGISTRATE
ANGUL
21 SEP 2022
RECEIVED



Government of Odisha
Health & Family Welfare Department

Chief Dist. Medical & Public Health Officer
No. 8866
Dt. 26/9/22

Forwarded
23/9/22

CDM & PHO

23/9

Dated 16/09/2022

DLC/PMW

26.9.22

No. 20501 /H&FW
DPH-MF-MISC-0026-2022

Subject: Integration of Disability Prevention & Medical Rehabilitation (DPMR) under National Leprosy Eradication Programme (NLEP) and Morbidity Management & Disability Prevention (MMDP) under Elimination of Lymphatic Filariasis (ELF) under the nomenclature of "Integrated DPMR Clinic"

CDM & PHO

MW

Government have been pleased to approve the integration of Disability Prevention and Medical Rehabilitation (DPMR) activities under National Leprosy Eradication Programme (NLEP) and Morbidity Management and Disability Prevention (MMDP) under Elimination of Lymphatic Filariasis (ELF) of NVBDCP under the nomenclature of "Integrated DPMR Clinic". The integration of both the programmes have been approved as there are similarities in management of disabilities of both the diseases. The integration will also help in minimising the overlapping of activities of both the diseases and will help the beneficiaries in accessing better services and optimum utilization of health care services by trained manpower through a single window. Henceforth the DPMR clinics will be known as "Integrated DPMR Clinic" and will provide disability prevention and morbidity management services to patients suffering from Leprosy & Lymphoedema respectively.

83/7

22/09/22

All the districts need to take appropriate action for integrating both services within one month of issue of this order. The guidelines of integration are enclosed herewith for reference and immediate action. The action taken report in this regard needs to be submitted to the Director of Public Health, Odisha.

DLC
Give copy
to ADPHO (VBD)
26.9.22

Memo No 20502 /H&FW
Copy forwarded to MD, NHM, Odisha for information.

16/9/2022

Principal Secretary to Govt.

Dated 16/09/2022

Special Secretary (PH) to Govt.

Memo No 20503 /H&FW
Copy forwarded to DHS (O)/DPH(O) / D SIH & FW(O) / Director, Capital Hospital, BBSR/ Director, RGH, Rourkela for information and necessary action.

Dated 16/09/2022

Special Secretary (PH) to Govt.

Dated 16/09/2022

Memo No 20504 /H&FW
Copy forwarded to all Collectors & DM/all CDM, & PHOs for information and necessary action.

Special Secretary (PH) to Govt.

Dated 16/09/2022

Memo No 20505 /H&FW
Copy forwarded to P.S. to Hon'ble Minister, H & FW, Odisha for kind information of Hon'ble Minister.

Special Secretary (PH) to Govt.

True copy attested

Under Secretary to Govt.
Health & F.W. Deptt.



Mission Directorate
National Health Mission, Odisha
Department of Health & Family Welfare,
Government of Odisha

AB
Court Matter
Urgent

Letter No:- OSH & FWs/857
File No:- 508/2022

Date:- 09.09.23

From

Sri Arun Kumar Biswal, OAS (SAG),
Additional Director, Administration, NHM, Odisha.

To


The Director of Public Health, Odisha.

Sub: W.P.(C) PIL No. 13403/2015- Bipin Bihari Pradhan- Vrs- State of Odisha and Others.
Ref: Your L.No. 6963/ Lep cell 1/19 dtd. 14.12.2022.

Sir,

With reference to the letter on the subject cited above, I am directed to enclose herewith the compliance report as per Para- 2 & 3 of the Order dtd. 07.12.2022 of the Hon'ble High Court passed in W.P.(C) PIL No. 13403/2015 filed by Bipin Bihari Pradhan - Vrs- State of Odisha and Others for information and necessary action.

Encl: As above

Yours faithfully,

09.09.23

Additional Director, Administration
NHM, Odisha.

Memo No:- 358

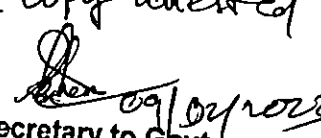
Date:- 09.09.23

Copy along with the compliance report as per Para- 2 & 3 of the Order dtd. 07.12.2022 of the Hon'ble High Court passed in W.P.(C) PIL No. 13403/2015 filed by Bipin Bihari Pradhan are forwarded to Joint Secretary to Government, Health and Family Welfare Department, Govt. of Odisha for information and necessary action.


09.09.23

Additional Director, Administration
NHM, Odisha.

True copy attested


09/09/2022
Under Secretary to Govt.
Health & F.W. Deptt.

Compliance Report as per Para-2 & 3 of the Order dtd. 07.12.2022 of the Hon'ble High Court passed in W.P.(C) PIL No. 13403/2015 filed by Bipin Bihari Pradhan.

Para 2:

With regard to the diversion of funds sanctioned for Para Medical Workers (PMW) under NHM PIP 2013-14, it is to state that the sanctioned funds for 184 PMWs were not diverted for any other purpose. Under NRHM, funds have been released to State by Govt. of India as a pool fund to take up all activities as per the approved NHM Programme Implementation Plan. Based on available funds and as per the priority of the State, the activities are taken up. It is to mention that only Rs. 391.97 lakhs were available including opening balance towards NLEP as against total approved budget of Rs. 707.03 lakhs during the year 2013-14, as a result of which, there were shortage of funds of Rs. 315.06 lakhs which was needed to take up all activities approved under NLEP. Due to such shortage of funds, the allocated fund towards PMW for an amount of Rs. 264.00 lakhs was not available with the State and therefore there was no scope of any diversion of such fund for any other purpose. However, as per NHM norms, the unspent balance of previous year is carried forward to the next year and treated as available fund for the current year and being utilized for the approved activities only.

Para 3:

Provision for treatment to the Persons affected by Leprosy is being provided by General Health Care System including trained Medical Officers (MBBS & AYUSH), MPHWS (Male & Female), Community Health Officers, Physiotherapist and ASHA.

True copy attested

[Signature]
Under Secretary to Govt.
Health & F.W. Deptt.

The following health staffs/ personnel have been trained by NLEP to take care of the leprosy patients and to follow up and conduct counselling:-

Sl No	Type of health Personnel	Trained on NLEP
1	Multi Purpose Health Worker (Male)	3,218
2	Multi Purpose Health Worker (Female)	7,224
3	Community Health Officer (CHO)	4,009 Training going on and will be completed by March 2023
4	ASHA	48,011
5	Medical Officers (MBBS)	4,991
6	Medical Officer (AYUSH)	2,852
7	Physiotherapist	76

The details regarding utilization of funds approved under NHM for free treatment of leprosy patients & training of staffs on NLEP from 2013-14 onwards are as follows:-

Year	Expenditure for Treatment of Leprosy patients in Rs.	Expenditure for Training of staffs in Rs.
2013-14	56,87,524.00	10,50,586.00
2014-15	51,71,647.00	17,04,166.00
2015-16	82,96,694.00	26,34,163.00
2016-17	60,89,645.00	29,44,424.00
2017-18	47,87,085.00	30,71,061.00
2018-19	49,86,848.00	15,43,512.00
2019-20	25,10,841.00	13,19,175.00
2020-21	56,11,808.00	1,36,606.00
2021-22	41,07,000.00	6,17,000.00
2022-23 (Nov 22)	14,15,246.00	6,45,870.00
Total	4,86,64,338.00	1,56,66,563.00

True copy attested
 02/02/2023
 Under Secretary to Govt,
 Health & F.W. Deptt.

Schemehfwdeft1@gmail.com.

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SCANNED

**COMPUTERISED FILING COUNTER
ORISSA HIGH COURT,CUTTACK
ACKNOWLEDGEMENT SLIP**

Seat No : 105

**Branch No : WRIT BRANCH (DIVISION
BENCH-1)**

Receipt No : 11039/2023

Date Of Receiving : 10/02/2023

Time : 11:42:40 AM

Case No : WP(C) 13403/2015

Received From : Respondent

Filed By: ADDL.GOV.T.ADVOCATE

Document(s) Filed :

67- AFFIDAVIT -e-Filing hard copy(Govt.)



1st

IN THE HIGH COURT OF ORISSA: CUTTACK

WP(C) No.13403 of 2015



Bipin Bihari Pradhan ... Petitioner

-Versus-

State of Orissa & others ... Opp. Parties

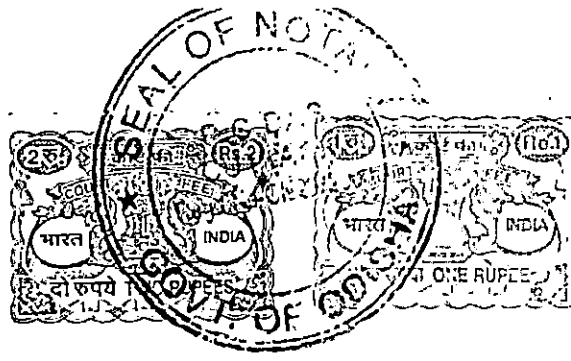
I N D E X

Sl. No.	Description of documents	Pages
1.	Affidavit on behalf of Commissioner-cum-Secretary to Government, Health & Family Welfare Department, Odisha in compliance of Order dtd. 07.12.2022.	1 - 12
2.	<u>Annexure - A.</u> Copy of letter No.68, dtd.03.01.2023	13-15
3.	<u>Annexure - B.</u> Copy of the D.O. No. Z28013/3/2019-Lep, dtd. 10 th January 2023	16
4.	<u>Annexure - C.</u> Copy of the proceeding of the said meeting dtd.01.01.2023	17-19

CUTTACK

Date : 09.02.2023

Shashi Kumar
ADDL. GOVT. ADVOCATE



IN THE HIGH COURT OF ORISSA: CUTTACK

WP(C) No.13403 of 2015

Bipin Bihari Pradhan ... Petitioner

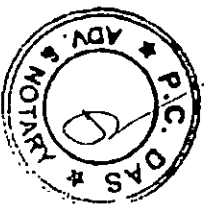
-Versus-

State of Orissa & others ... Opp. Parties

**AFFIDAVIT ON BEHALF OF COMMISSIONER-
CUM-SECRETARY TO GOVT. HEALTH &
FAMILY WELFARE DEPARTMENT ODISHA
IN COMPLIANCE OF ORDER DTD.07.12.2022 :**

I, Dr. Ajit Kumar Mohanty, aged about 62 years,
Son of late Bhabagrahi Mohanty, at present
working as Special Secretary (PH) to Government,
Health & Family Welfare Department, Odisha, Loka
Seva Bhawan, Bhubaneswar, Dist.: Khurda, do hereby
solemnly affirm and state as follows :

1. That, I am working as Special Secretary (PH) to
Government, Health & Family Welfare Department,
Odisha and have been duly authorised by the
Commissioner-cum-Secretary to Government, Health
& Family Welfare Department, Government of Odisha
to swear this Affidavit on her behalf.



9/2/23

[Handwritten signature]
Ajit Kumar Mohanty

2. That, this Hon'ble Court in Paragraphs – 3 & 4 of the Order dtd. 07.12.2022 directed as follows:-

“xxx xxx xxx

3. *Mr. Muduli, learned Additional Government Advocate states that a further affidavit will be filed specifically dealing with the issue of availability of Trained medical staff as well as Para Medical Workers for providing treatment to the persons affected by leprosy. The details regarding utilization of funds sanctioned by the Government of India from financial year 2013-14 onwards for the purpose of providing the above treatment as well as training, be also indicated in the said affidavit.*

4. *Another meeting of the Monitoring Committee shall be held in the month of January 2023, where the above issue will be specifically addressed. The Minutes of the meeting be placed before the Court, along with an affidavit, on the next date.*

xxx xxx xxx”

3. That, in compliance of the Order dtd. 07.12.2022, this Compliance Affidavit is being filed.

Availability of trained Medical Staff & Para Medical Workers for providing treatment to the persons affected by Leprosy :

4. That, it is humbly submitted that after integration of National Leprosy Elimination Programme (NLEP) with General Health Care system

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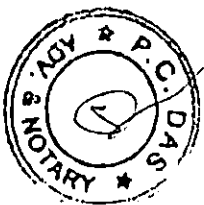
as per Govt. of India guideline, the Leprosy screening and treatment etc. are being carried out as a part of Comprehensive Health Care like other Govt. programmes provided to the patients by the Medical Officers, AYUSH Medical Officers, Multi Purpose Health Workers (MPHW) (Male & Female), ASHA & other medical staffs. After suspects are identified by the ASHA, they are screened by MPHW (M / F) and brought to the nearest health facilities to be examined by the Medical Officer. After confirmation of leprosy by the Medical Officer, 1st dose of Multi Drug Therapy (MDT) is administered in presence of health personnel. The rest of the MDT pack is handed over to the patient after counselling. The follow-up and care are done by the ASHA, MPHW (Male & Female). The CHOs (Community Health Officers) supervise the overall care of the patient under the supervision of the Medical Officers.

5. That, it is humbly submitted that provision of treatment to the persons affected by Leprosy is being provided by General Health Care System including trained Medical Officers (MBBS & AYUSH), MPHW (Male & Female), Community Health Officers, Physiotherapist and ASHA. The detail of the training under NLEP & utilization of funds for treatment of leprosy patients & training of staffs on NLEP from 2013-14 to November 2022 are mentioned below:



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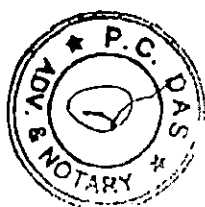
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A. The following health staffs/ personnel have been trained on NLEP to take care of the leprosy patients and do follow up and counselling:-

Sl No	Type of health Personnel	Trained on NLEP
1.	Multi Purpose Health Worker (Male)	3,218
2.	Multi Purpose Health Worker (Female)	7,224
3.	Community Health Officer (CHO)	4,009 Training going on and will be completed by March 2023
4.	ASHA	48,011
5.	Medical Officers (MBBS)	4,991
6.	Medical Officer (AYUSH)	2,852
7.	Physiotherapist	76

The health personnel are also being imparted sensitization training on NLEP time and again. Training is an ongoing process. All category of health service providers are trained regularly on NLEP and other programmes.



Dr. P. Das

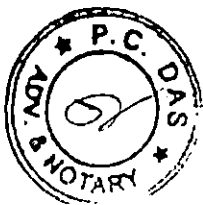
B. For Reconstructive Surgery (RCS), hands on training have been given to 17 numbers of Surgeons. Two (2) Surgeons are regularly conducting such Surgery. This year, five (5) more Surgeons are being given hands on training on RCS.

C. For every Block, one AYUSH Medical Officer has been given training and declared as Leprosy Nodal Officer (LNO) for the Block. Similarly, one Multi Purpose Health Worker (MPHW) has been declared as Block Nodal Leprosy Worker (BNLW) to coordinate NLEP activities in the Block and also to provide treatment and care of the patient.

One AYUSH Medical Officer has been engaged as District Leprosy Consultant (DLC) in 17 high endemic districts and were given all training for diagnosis, treatment and follow up.

Utilisation of fund sanctioned by the Government of India from the Financial Year 2013-14 for providing treatment to the persons affected with leprosy and training :

6. That, the details regarding utilization of funds approved under NHM for free treatment of leprosy



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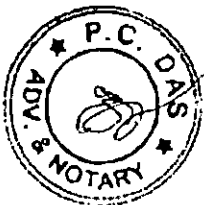
patients & training of staffs on NLEP from 2013-14 onwards are provided herein below:-

Year	Expenditure for Treatment of Leprosy patients in Rs.	Expenditure for Training of staffs in Rs.
2013-14	56,87,524.00	10,50,586.00
2014-15	51,71,647.00	17,04,166.00
2015-16	82,96,694.00	26,34,163.00
2016-17	60,89,645.00	29,44,424.00
2017-18	47,87,085.00	30,71,061.00
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2021-22	41,07,000.00	6,17,000.00
2022-23 (Nov 22)	14,15,246.00	6,45,870.00
Total	4,86,64,338.00	1,56,66,563.00

In addition to the funds utilized for leprosy patients under NHM, State Govt. under NIRAMAYA is also providing free treatment and medicines for leprosy patients for other diseases.

7. That, the following activities are also undertaken under NLEP for management of persons affected with Leprosy:

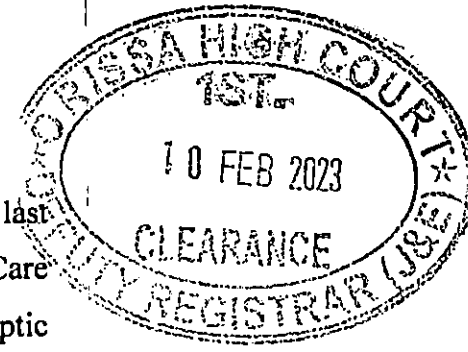
A. Disability Prevention & Medical Rehabilitation (DPMR) Activities: 7913



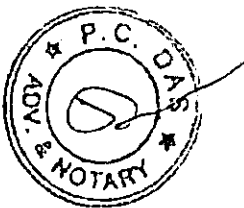
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number of Self Care Ulcer kits distributed last year (2021-22) and training on Ulcer Care provided. Tub, mug, towel, soap, antiseptic ointment, antiseptic liquid, white petroleum jelly, foot scrapper under Self Care Ulcer kits are being provided to the beneficiaries. Training of Self Care practices demonstrated and monitored during follow up visits. Management of wound / ulcer and nerve impairment are taken care of. Support with MCR (Micro Cellular Rubber) footwear provided to the needy beneficiaries (7604 pairs distributed in 2021-22).

B. Reconstructive Surgery(RCS): Rs. 8000/- is provided for loss of wages to RCS beneficiary for each surgery and Rs.1500/- for mobility support (to & fro) to RCS beneficiary to come to the Health Institution for each surgery. Rs. 5000/- is also provided for procurement of Medicines/ Consumables not available under Niramaya. Hands on training provided to 5 surgeons. RCS Surgery done in 12 High endemic and also in Leprosy Home & Hospital Districts (DHH Bolangir, Boudh, Dhenkanal, Ganjam, Jharsuguda, Koraput, Mayurbhanj, Nabarangpur, Nuapada, Sambalpur, Sonepur, Leprosy Home & Hospital, Cuttack). RCS Team with physiotherapist move from district to



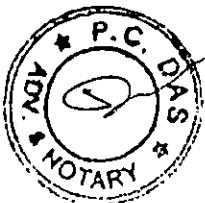
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district. Provisions are being made to conduct RCS Surgery in all 30 District Head Quarter Hospital, RGH Rourkela and PGIMR Capital Hospital, Bhubaneswar for the benefit of the patients. The instruction of MD, NHM, Odisha to the Director PGIMER & Capital Hospital, Bhubaneswar/Director, Capital Hospital and all CDM & PHOs vide Letter No.68, dtd.03.01.2023 (**Annexure – A**). In the mean time, the Deputy Director General, Director General of Health Services, GoI vide D.O. No.Z28013/3/2019-Lep, dtd. 10th January 2023 has instructed the States to consider the revised welfare allowance of Reconstructive Surgery under NLEP from Rs. 8000/- to Rs. 12000/- while submitting PIP/Supplementary PIP in future which has been approved by the Mission Steering Group of NHM in its 7th Meeting held on 7th September, 2022.

Copy of the D.O. No. Z28013/3/2019-Lep, dtd. 10th January 2023 is filed herewith and annexed as **Annexure - B**.

It is further submitted that Reconstructive Surgery(RCS) can also be availed free of cost in empanelled private hospitals under Biju Swasthya Kalyan Yojana (BSKY). Under BSKY, 96.5 lakh beneficiary families of the



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State are covered for cashless treatment including RCS in the empanelled private hospitals.

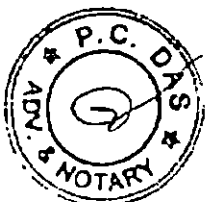
C. Services provided in Leprosy Colonies: Health team consisting of Medical Officer, Health Worker and Dresser make their visits to the Leprosy Colonies once in a week and provide ulcer care and treatment for minor ailments. 1012 visits have been made to all Leprosy Colonies and 3087 Ulcer kits, 1376 MCR footwear have been distributed. All treatment of minor ailments have been provided to the inmates. Instructions have been issued to all CDM&PHOs Vide letter No. 411 , dtd. 27.10.21 to provide regular health care services in all the Leprosy Colonies.

D. Trends in Key NLEP Indicators: Regarding incidence of Leprosy cases in the State, it is mentioned here that in the year 2018-19, 10786 nos. of new cases were detected annually. Since 2019-20, there is a sustained decline in new leprosy cases from 10786 in 2018-19 to 10077 in 2019-20, 6148 in 2020-21, 5729 in 2021-22 & 5585 till Dec., 2022.

So also there are declining in Annual New Case Detection Rate (ANCDR), Prevalence Rate

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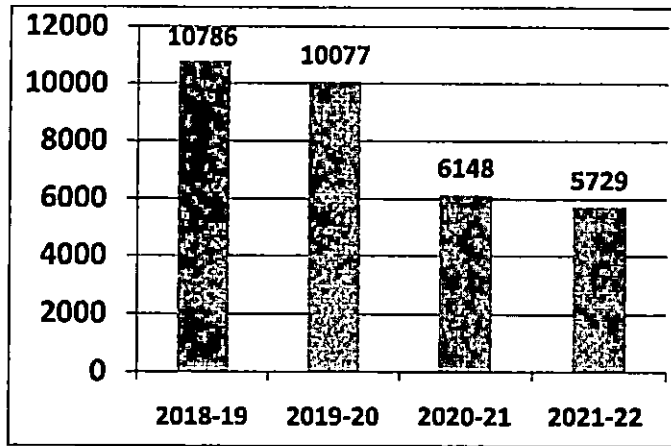
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(PR), Grade 2 Disability numbers and Children affected in Leprosy. All these declining parameters suggest that the case load in the State of Odisha is in downward trend.

Graphical presentations of the above indicators are given below:

New Leprosy case detection:



Prevalence rate / 10,000 population:

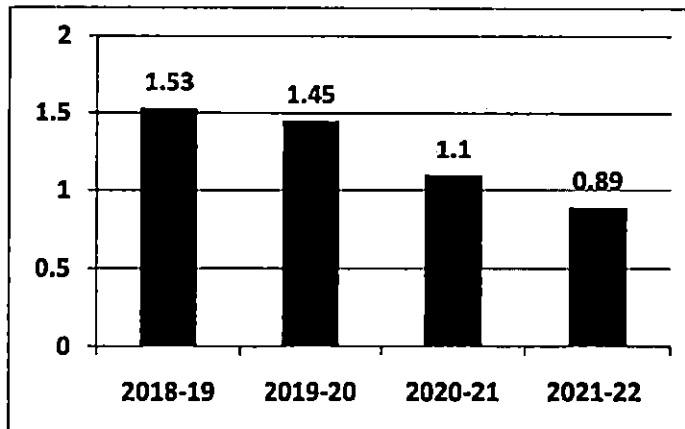
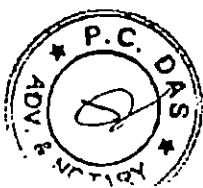
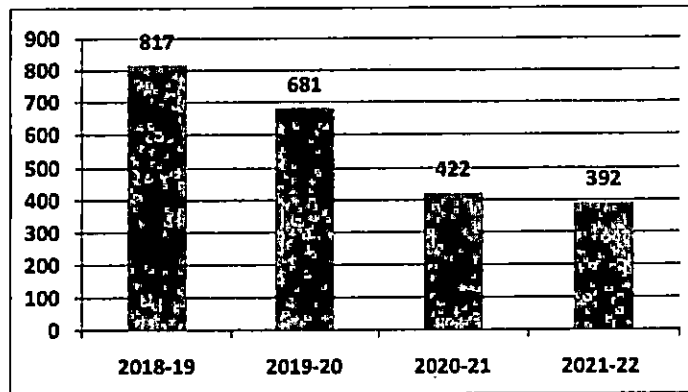
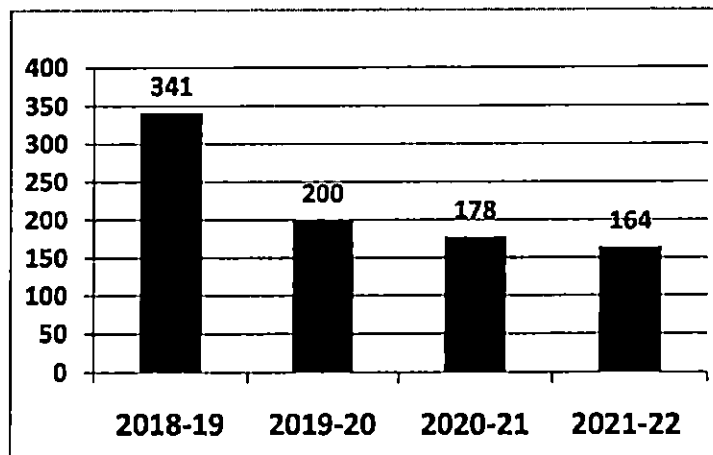
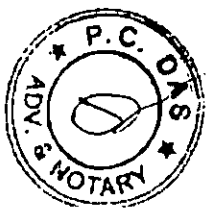


Fig. 1. Number of new cases



Child New Leprosy Case detection:**Grade II Disability among new cases:**

8. That, it is humbly submitted that the sanctioned funds for 184 Nos. of Para Medical Workers (PMW) under NHM Programme Implementation Plan (PIP) 2013-14 was not diverted for any other purpose. It is humbly submitted that under National Rural Health Mission (NRHM) for the year 2013-14, funds have been released to the State by Govt. of India as a pool fund to take up all activities as per the approved NHM Programme Implementation Plan. Based on available



Digitally signed by P. C. DAS

funds and as per priority of the State, the activities are taken up. In the year 2013-14, only Rs.391.97 lakhs was available including opening balance towards NLEP against the total approved budget of Rs.707.03 lakhs, as a result, there was shortage of funds to the tune of Rs.315.06 lakhs to take up all activities approved under NLEP. Due to shortage of required fund, the allocated fund towards engagement of PMWs for an amount of Rs.265.00 lakhs was not available with the State and hence there was no scope of diversion of such fund for any other purpose.

9. That, it is submitted that the meeting of the Monitoring Committee has been conducted on 01.01.2023 at 10.30 A.M. by the SSE & PD Department. The proceeding of the said meeting is filed herewith and annexed as Annexure - C.

10. That, the facts stated in the aforementioned Paragraphs are true to the best of my knowledge and based on Official records.

Identified by:

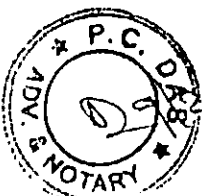
A.K. Mohanty
DEPONENT

Advocate's Clerk,
Advocate General's Office
CUTTACK

Date : 20.02.2023

Certified that cartridge papers are not available.

h
ADDL. GOVT. ADVOCATE



The above named deponent *A.K. Mohanty*
Solomnly affirm on..... *12/23*
.....being identified
by..... *S.P.*



Mission Directorate
National Health Mission, Odisha
Department of Health & Family Welfare,
Government of Odisha

Letter No: OSH&FWS/ 68 /

Date: 02.01.23

From

32/13
Dr. Brundha D, IAS
Mission Director, NHM, Odisha

To

The Director, PGIMR & Capital Hospital, Bhubaneswar
The Director RGH, Rourkela
The CDM & PHO (all Districts)

Sub : Conducting Reconstructive Surgery (RCS) of Grade-II Disability leprosy cases in all
DHH, PGIMR & Capital Hospital & RGH Rourkela

Ref : NHM PIP 2022-23 and 2023-24

Sir/Madam,

It is to be stated that as per the mandate there should be zero backlog of RCS (Reconstructive Surgery) cases of eligible and willing Grade-II disability cases in all districts of Odisha.

In approved NHM PIP 2022-23 and 2023-24 the following provisions have been made for Reconstructive Surgery:-

- 1) Rs. 8000/- (Rupees eight thousand) is provided to the patient in phases for loss of wages per RCS for undergoing surgery (FMR. 1.2.3.1, Sl. No. 70).
- 2) Rs. 1500/- (Rupees fifteen thousand) is provided to the patient for to & fro journey per RCS to the health institution for RCS (FMR. FMR. 1.2.3.1, Sl. No. 70).
- 3) Mobility and other support to the RCS surgeon (FMR. Sl.No-86).
- 4) Mobility & other contingency support for hands on training to Doctors (Surgeon/ Orthopedic Specialist/ Plastic surgeon) assisting the RCS Surgeon. (FMR. 9.5.13.1, Sl. No. 72).
- 5) Rs.5000/- (Rupees five thousand) for medicines & consumables for the medicines and consumables not available in the hospital per RCS.(FMR.9.5.13.1 Sl.No.70)
- 6) Rs. 500 /- (Rupees five hundred) as incentive to the ASHA for motivating the eligible G2D leprosy patient and completeing the surgery. (Sl. No. 72 (New Activity)).

At present Reconstructive Surgery is being conducted in 12 (twelve) Govt Health Institutions i.e. DHH Bolangir, Boudh, Dhenkanal, Ganjam, Jharsuguda, Koraput, Mayurbhanj, Nabarangpur, Nuapada, Sambalpur, Sonepur, Leprosy Home & Hospital, Cuttack. Patients are being referred to

True copy attested

[Signature]

Under Secretary to Govt.
Health & F.W. Deptt.

Annex Building of SHH&FW, Unit-8, Nayapalli, Bhubaneswar-751012
Tel-0674-2392480/88 E-mail: missiondirector@nic.in Web: www.nhm.orissa.gov.in



Mission Directorate
National Health Mission, Odisha
Department of Health & Family Welfare,
Government of Odisha

other districts for Reconstructive Surgery which is demotivating the patients for RCS. There are also coordination problems when a patient is referred from one district to another district.

The district NLEP unit / ADPHO (Leprosy) will intimate the number of eligible and willing patients to undergo Reconstructive surgery and the date to State NLEP unit for coordinating with RCS surgeon. Preferably a specialist in surgery/ Orthopaedics/ Plastic Surgery of the same district to be directed for hands on training in assisting the RCS Surgeon and do the post operative care of the patient after surgery.

It is therefore requested that henceforth Reconstructive Surgery will be conducted in all district Head Quarter Hospitals, PGIMR & Capital Hospital, Bhubaneswar and RGH Rourkela and indoor beds will be provided to the RCS patients during pre & post operative period for successful implementation of NLEP activities and for the benefit of the patients.

Yours faithfully,

[Signature]
Mission Director,
NHM, Odisha

Memo No. 69

Date. 03.01.23

Copy forwarded to the Addl. DHS (Leprosy), Odisha for information.

[Signature]
Mission Director,
NHM, Odisha

Memo No. 70

Date. 03.01.23

Copy forwarded to all ADPHO (Leprosy) for information and they are requested to ensure that all pending RCS cases of their districts are completed in time.

[Signature]
Mission Director,
NHM, Odisha

Memo No. 71

Date. 03.01.23

Copy forwarded to the DPM (all districts) for information and they are requested to coordinate with district NLEP unit so that all pending RCS cases are completed, indoor beds, physiotherapist and OT with required instruments are available in time

[Signature]
Mission Director,
NHM, Odisha

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[Signature]
Under Secretary to Govt.
Health & F.W. Deptt.

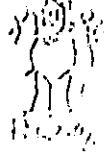
DISTRICT WISE ACHIEVEMENTS OF RCS: 2022-23

Sl.No	District	Due for RCS	Conducted	% of Achievement
1	Bhuvaneswar	2	4	200
2	Nayagarh	2	4	200
3	Cuttack	8	10	125
4	Bhadrak	5	5	100
5	Jajpur	6	6	100
6	Kalahandi	2	2	100
7	Keonjhar	1	1	100
8	Mayurbhanj	19	12	63.2
9	Jharsuguda	7	4	57.1
10	Balangir	9	5	55.6
11	Nowrangpur	12	5	41.7
12	Ganjam	21	8	38.1
13	Sundargarh	8	3	37.5
14	Koraput	17	6	35.3
15	Baragarh	54	18	33.3
16	Sonepur	15	5	33.3
17	Boudh	14	4	28.6
18	Nuapada	12	3	25.0
19	Sambalpur	12	3	25.0
20	Jagatsinghpur	5	1	20.0
21	Puri	6	1	16.7
22	Angul	8	0	0.0
23	Balasore	1	0	0.0
24	Deogarh	0	0	0.0
25	Dhenkanal	7	0	0.0
26	Gajapati	0	0	0.0
27	Kendrapara	1	0	0.0
28	Khurda	2	0	0.0
29	Malkangiri	15	0	0.0
30	Phulbani	0	0	0.0
31	Rayagada	5	0	0.0
	Total	276	110	39.9

True copy attested
for 2023

Under Secretary to Govt,
Health & F.W. Deptt.

Dr. Sudarsan Mandal, MD
Deputy Director General
Directorate General of Health Services



Tel.: 011-23061803
E-mail: mandals.aiihph@gov.in
sudarsannrs.1962@gmail.com

भारत सरकार
Government of India
स्वास्थ्य एवं परिवार कल्याण मंत्रालय
Ministry of Health & Family Welfare
निर्माण भवन, नई दिल्ली-110011
Nirman Bhawan, New Delhi-110011

DO. No Z-28013/03/2019-Lep
Dated the 10th January 2023

Dear Sir/Madam,

National Leprosy Eradication Programme primarily focuses upon prevention of the disabilities caused due to leprosy and to conduct Reconstructive Surgeries (RCS) for eligible Grade 2 Disability (G2D) cases. As you all are aware, in order to encourage the eligible G2D cases for the Reconstructive Surgery (RCS), conducted in the recognized Government Hospitals or NGO based hospitals, welfare allowance of Rs. 8,000/- is being provided to the eligible patients for one month (1 week preoperative + 1-week intra-operative + 15day post-operative).

In this context, Mission Steering Group of NHM in its 7th Meeting held on 7th September 2022 has approved the revised welfare allowance of patients for Reconstructive Surgery under NLEP from 8,000/- to Rs 12,000/.

In this regard, the States/UTs may consider the revised welfare allowance of Reconstructive Surgery while submitting PIP/Supplementary PIP in future. I hope this revised rate will help in clearing the backlog of Reconstructive Surgery.

With warm regards,

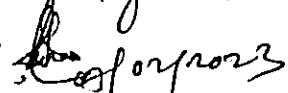

(Dr Sudarsan Mandal) 10/01/23

To,
Mission Director (NHM) of All States/UTs

Copy To:

- 1) Sr. PPS to Secretary (HFW), MoHFW, GoI
- 2) ACS(H)/PHS(H)/Sec(H) of All States/UTs
- 2) PSO to DGHS, Dte.GHS, MoHFW, GoI
- 3) Sr. PPS to AS&MD (NHM), MoHFW, GoI
- 4) PPS to Addl.DGHS, Dte.GHS, MoHFW, GoI
- 5) PPS to JS(Leprosy), MoHFW, GoI
- 6) S.I.O of All States/UTs

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Under Secretary to Govt.
Health & F.W. Deptt.

**MINUTES OF 4th MEETING OF THE MONITORING COMMITTEE ON
LEPROSY MATTERS**

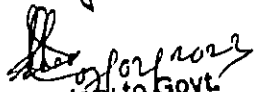
The 4th Meeting of the Monitoring Committee was held on 04.01.2023 at 10:30 AM. Commissioner-cum-Secretary, SSEPD Department Health & Family Welfare Department, Members of the Committee, and Officers of SSEPD and H&FW Department were present in the meeting.

Initiating the discussion, Commissioner-cum-Secretary, SSEPD Department made a brief presentation on the order Dt. 07.12.2022 passed by Hon'ble High Court of Orissa in WP (C) No.13403/2015 (Bipin Bihari Pradhan Vrs State and others) and requested the Director Health, H & FW Department to update the committee on the status of trained Para medical staff and Health Workers, engaged for treatment of persons affected by Leprosy as per orders passed by Hon'ble Court.

Participating in the discussion Shri B.P. Tripathy, Advocate enquired about the numbers of Para medical staff and Health workers available in the State and action taken by H&FW Department to train them for exclusive treatment of persons affected by Leprosy and staying in the Leprosy colonies. He also wanted to know the steps taken by the Department to check spread of Leprosy and to reduce the increasing numbers of leprosy case in the State. Shri Tripathy also raised about the engagement of 184 Leprosy trained para medical staff.

Commissioner-cum-Secretary, H&FW Department in response informed the committee that soon after launching of National Health Mission all health care professionals have been trained for detection and treatment of all communicable diseases including Leprosy. At present, there are 3218 MPHWS (Male), 7224 MPHWS (Female), 865 MPHMS (Male), 755 MPHMS (F), 4009 CHO, 48011 ASHA, 4991 Doctors (MBBS), 1385 Ayush MO & 98 Physiotherapists trained for the purpose. Thereafter, Director H&FW department made a presentation and highlighted the following:

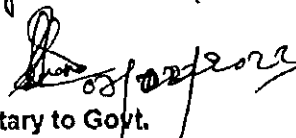
1. NLEP programme is implemented as ASHA Based Surveillance for Leprosy Suspects (ABSULS) & Active Case Detection and Regular Surveillance (ACD & RS). Under these programmes, training is given to ASHA, Health Workers for the detection of new cases which are confirmed by Medical Officers and drugs provided through the health workers and CHOs. The cases are followed up by MOs who deal with any adverse effects and reactions. Deformities and disabilities are taken care through physiotherapy, RCS & ulcer care. Every year, new staff inducted to the system are trained for leprosy. In the current financial year i.e., in 2022-23, 350 Doctors (MBBS) and 421 Ayush MOs have been trained. The above programme is a budgeted programme.

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Health & F.W. Deptt.

2. There is provision for two rounds of training of trainers to create 67 Master trainers for all 30 districts to carry forward the training activities.
3. Seven trained surgeons in 12 high-burden districts like Bolangir, Boudh, Dhenkanal, Ganjam, Jharsuguda, Koraput, Mayurbhanj, Nabarangpur, Nuapada, Sonpur, & Leprosy Home & Hospital Cuttack are regularly conducting reconstructive surgery (RCS) to the deformed limbs of the cured leprosy persons. The RCS surgery has also been included as a package in the empanelled private hospitals for BSKY beneficiaries.
4. 7913 Ulcer kits have been distributed in the Disability Prevention & Medical Rehabilitation (DPMR) clinics in 2022. The kit includes tub, mug, towel, soap, foot scraper, antiseptic ointment and white petroleum jelly for ulcer care and the persons are given training for self-care practices.
5. Out of the total patients, 98% of patients do not have any deformity/ulcer and are treated with six months of Multi Drug Therapy (MDT), provided through MPHW(M) & MPHW(F), and CHO. The remaining 2% have a neurological deficit, deformity or ulcers which are taken care by ulcer kits, DPMR clinics, physiotherapy, and RCS. Most of the treatment is home-based to prevent discrimination, stigma & for mainstreaming of these patients.
6. Health teams consisting of Medical Officers, health workers and dressers are visiting the leprosy colonies once in a week to follow up leprosy patients and cured leprosy patients and also to provide treatment for minor ailments. So far, 1012 visits have been made to the leprosy colonies and 3087 ulcer kits and 1376 MCR foot wears have been distributed.
7. Due to these efforts, in the last three years from 10,077 cases in 2019-20, there is a sustained decline of new cases detected such as in 2020-21 it was 6148 and in 2021-22 it was 5729. There is also decline of the disease prevalence rate per 10,000 population i.e., from 1.45 to 0.89 during the above period. There is also a decline of absolute number of Grade-2 deformity (G2D) from 200 cases in 2019-20 to 178 in 2020-21 and 164 in 2021-22.
8. The Commissioner-cum-Secretary, further added that Government is encouraging home-based treatment for leprosy affected persons as the disease is curable. Keeping the patients in isolation in the colonies is inhuman and derogatory which will spread a message that the disease is not curable and will encourage social stigma for the patient.
9. Further, she added that the persons staying in the colonies are cured of Leprosy and needs rehabilitation.

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Page 2 of 3



Under Secretary to Govt.
Health & F.W. Deptt.

- 10. Shri Tripathy suggested for training of Health workers in remote areas and Commissioner-cum-Secretary, Health clarified that all Paramedical staff and Health workers working from village level to district level are trained to treat the patients suffering from communicable diseases including Leprosy.

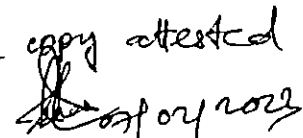
Commissioner-cum-Secretary, SSEPD Department requested all Collectors to instruct their ADMs to visit the Leprosy colonies regularly to monitor the progress of development and rehabilitation.

1. Collector, Jajpur informed that they have identified 2 patches of land to relocate the families living in the colony and are persuading the inhabitants to relocate as the land on which they are living is of Jungle Kisam. But they are not willing for relocation. However, District Administration is continuously counselling the inhabitants of the colony for relocation. The Commissioner-cum-Secretary, SSEPD Department advised to continue the process and plan for packages of rehabilitation to motivate the inhabitants.
2. ADM, Puri informed that they have conducted a survey in the Sanjayjee colony and have found that out of the 30-family living in the colony, 9 families consisting of 27 members have no living member affected/ cured of leprosy. Similarly, 13 families consisting of 14 members are rehabilitated in the Niladri Nilaya Rehabilitation Home. The District Administration is planning to rehabilitate the remaining 8 families in a suitable location.
3. Collector, Bargarh has informed that District Administration have taken up meetings in the colony and planned for rehabilitation of the inhabitants of the colony. Pucca house have been sanctioned in favour of 28 cured leprosy persons and rest eligible CLPs will be covered. Further, livelihood programmes have also been taken up to improve the living condition of the inhabitants of the colony.
4. DSSO, Jharsuguda informed that housing and livelihood activities have been taken up in the Leprosy colony.

Commissioner-cum-Secretary, SSEPD Department advised other districts to visit and monitor the progress of development of the colonies. In case the colonies located in railway lines, forest land steps may be taken to relocate them to with proper rehabilitation.

The meeting ended with a vote of thanks to all participants.


Commissioner-cum-Secretary

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Under Secretary to Govt.
Health & F.W. Deptt.

SCANNED

**COMPUTERISED FILING COUNTER
ORISSA HIGH COURT,CUTTACK
ACKNOWLEDGEMENT SLIP**

Seat No : 105

**Branch No : WRIT BRANCH (DIVISION
BENCH-1)**

Receipt No : 11296/2023

Date Of Receiving : 10/02/2023

Time : 03:19:53 AM

Case No : WP(C) 13403/2015

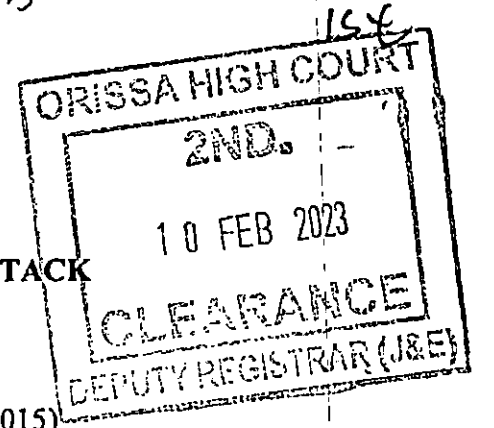
Received From : Respondent (1)

Filed By: ADDL.GOV.T.ADVOCATE

Document(s) Filed :

68- Reply To M.c -e-Filing hard copy(Govt.) --- (Misc Case No- 6754/2022)

DB



IN THE HIGH COURT OF ORISSA: CUTTACK

I.A No. 6754 Of 2022

(Arising out of W.P.(C) PIL No. 13403 of 2015)

Bipin Bihari Pradhan ... Petitioner

-Versus-

State of Odisha & Others ... Opp. Parties

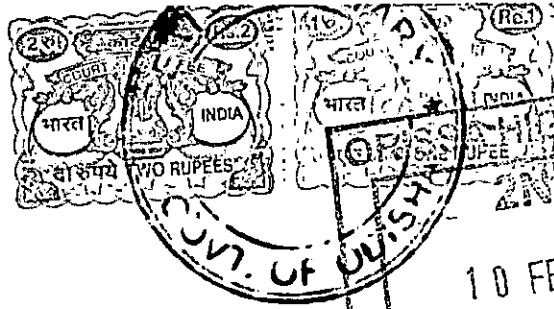
I N D E X

Sl. No	Description of Documents	Pages
1	Reply to I.A. No.6754 of 2022 on behalf of Opp. Party No.1 - Commissioner-cum-Secretary to Govt. Health & Family Welfare Department Odisha	1-13
2	<u>Annexure – A</u> Copy of the D.O dtd. 06.05.2002	14
3	<u>Annexure – B</u> Copy of the UOI dtd.30.04.2014	15-17
4	<u>Annexure – C</u> Copy of the letter dtd.14.09.2021.	18
5	<u>Annexure – D</u> Copy of the Minutes of Meeting dtd. 03.04.2014	19-20
6	<u>Annexure – E</u> Copy of the letter dtd.16.09.2022	21
7	<u>Annexure – F</u> Copy of letter No.357, dtd.09.01.2023	22-24

Cuttack

Dtd.10/02/2023

Shashi Kant Tripathy
ADDL. GOVT. ADVOCATE



OFFICE OF THE DEPUTY REGISTRAR (JUDICIAL)
HIGH COURT
2ND.
10 FEB 2023
CLEARANCE
DEPUTY REGISTRAR (JUDICIAL)

IN THE HIGH COURT OF ORISSA: CUTTACK

I.A No. 6754 Of 2022

(Arising out of W.P.(C) PIL No. 13403 of 2015)

Bipin Bihari Pradhan ... Petitioner

-Versus-

State of Odisha & Others ... Opp.Paries

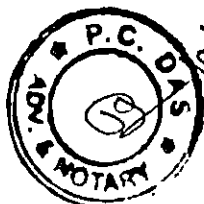
**REPLY TO I.A. NO.6754 OF 2022 ON BEHALF
OF OPP. PARTY NO.1 - COMMISSIONER-CUM-
SECRETARY TO GOVT. HEALTH & FAMILY
WELFARE DEPARTMENT ODISHA :**

I, Dr. Ajit Kumar Mohanty, aged about 62 years, Son of late Bhabagrahi Mohanty, at present working as Special Secretary (PH) to Government, Health & Family Welfare Department, Odisha, Loka Seva Bhawan, Bhubaneswar, Dist.: Khurda, do hereby solemnly affirm and state as follows :

1. That, I am working as Special Secretary (PH) to Government, Health & Family Welfare Department, Odisha w.e.f. 07.05.2020 and have been duly authorised by the Commissioner-cum-Secretary to Government, Health & Family Welfare Department,

hsc

Dr. Ajit Kumar Mohanty



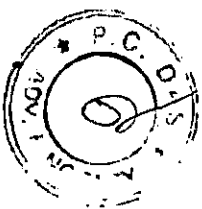
Government of Odisha to swear this Affidavit on her behalf.

2. That, I have gone through the copy of the I.A. No.6754 of 2022 along with the Annexures annexed thereto and understood the contents and purport thereof. I am otherwise acquainted with the facts of the present facts of the case and competent to swear this Affidavit by virtue of my Office. The averments / assertions / allegations made and contentions raised in the I.A. which are not specifically dealt with and / or denied, are deemed to have been denied.

3. That, the Interim Application as laid is not maintainable either in facts or in law but wholly misconceived. The answering Opp. Party craves leave to explain further in this regard at the time of hearing.

4. That, in reply to the averments made by the petitioner in Paragraph – 1 of the I.A, it is humbly submitted that the Government is taking all steps like Active case detection through different campaigns, free treatment and DPMR (Disability Prevention and Medical Rehabilitation) Services of leprosy patients, under National Leprosy Eradication Programme (NLEP).

5. That, the averments made in Paragraph – 2 of the I.A. needs no reply from this deponent.



[Handwritten signature]
D. C. Das

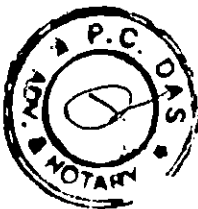
6. That, in reply to the averments made in Paragraph - 3 of the I.A, it is humbly submitted that the Deputy Director General (Leprosy), Ministry of Health & FW, Govt. of India vide D.O. No.719/DDG(L)/2002-Lep, dtd. 06.05.2002 regarding integration of Leprosy Services with General Health Care Services (GHS) at functional as well as structural level.

Copy of the D.O dtd. 06.05.2002 is filed here with and annexed as Annexure - A.

As per the UOI No.89/F, dtd.30.04.2014 of Finance Dept, Govt. of Odisha relating to the minutes of the meeting chaired by the Additional Chief Secretary, Finance Department in presence of Principal Secretary, Health & FW Dept, MD, NHM and other officials, it has been decided that the MPW(M) leprosy will not be filled up henceforth and will be converted to MPHW (Male).

Copy of the UOI dtd.30.04.2014 is filed herewith and annexed as Annexure - B.

In 2005-06, National Rural Health Mission (NRHM) was launched by Govt of India in which all programmes like leprosy, TB, Malaria, Dengue, Maternal Health, Child Health, and Immunization, etc.



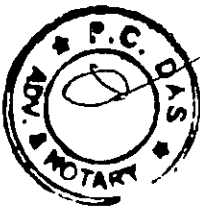
Dr. K. Ganesan

came under one umbrella for effective implementation of different programmes.

Multi skilling of technical persons are encouraged for optimum and effective use of technical manpower like Health Worker (Male & Female), Laboratory Technicians, Physiotherapists so that similar type of health care services can be provided to many patients.

The NLEP was also integrated with general health care system in 2002-03 as per Govt. of India guidelines, so that more number of health personnel that starting from ASHA, Health Worker (Male & Female), Health Supervisor (Male & Female), Community Health Officers and Doctors are involved in Leprosy case detection, treatment, follow up and counselling.

It is further submitted that the State Govt. vide Order No.44260/H, dtd.22.11.2001 abolished the post of Para Medical Workers (PMW), Leprosy Assistant and Non-Medical Supervisors (NMS) which was intimated to SSEPD vide letter No.25776/H, dtd.14.09.2021 and vacant posts were not filled up as NLEP was integrated with General Health Care System and in the field ASHA, Multi Purpose Health Worker (Male and Female), Multi Purpose Health Supervisor



Dr. P. C. Das

(Male and Female) trained on NLEP are effectively managing the programme.

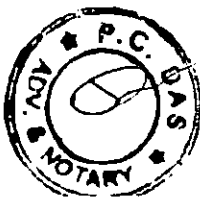
Copy of the letter dtd.14.09.2021 is filed herewith and annexed as Annexure - C.

7. That, in reply to the averments made in Paragraph - 4 of the I.A, it is submitted as follows :

a) From 2002-03 to 2020-21, all parameters of NLEP are in sustained declining phase which is mentioned below :

Year	New Leprosy cases detected	ANCDR per 1,00,000 population	Prevalence Rate per 10,000 population	Grade-II Disability amongst new cases
2002-03	38349	101.20	7.3	659
2019-20	10077	21.3	1.45	200
2020-21	6148	12.9	1.1	178
2021-22	5729	11.8	0.89	164

So, all the parameters like ANCDR (Annual New Case Detection Rate) has come down from 101.20 (2002-03) to 11.8 (2021-22). Total No. of New Leprosy Cases Detected has declined from 38349 (2002-03) to 5729 (2021-22), Prevalence Rate has come down from 7.3 (2002-03) to 0.89 (in 2021-22).



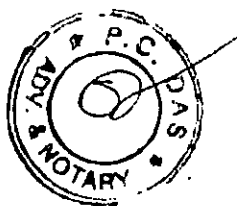
Dr. P. S. Kumar

The gradual decline of leprosy – new leprosy case detected and prevalence rate per 10000 population has already been highlighted in the table annexed at Para no. 7 (a) and Para no. 8.

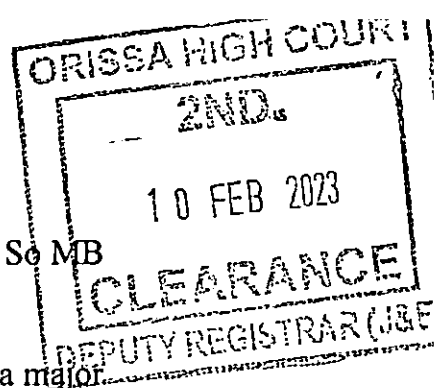
b) So far as increase in MB (Multi Bacillary) leprosy cases is concerned, it is submitted that MB cases are diagnosed as per the following criteria:

Sl No.	Characteristics	PB (Paucibacillary)	MB (Multibacillary)
1.	Skin lesions	1-5 patches	6 patches or more
2.	Involvement of peripheral trunkal nerve	No nerve/ only one nerve involvement	More than one nerve involvement
3.	Skin smear	Negative at all sides	Positive in any site

- Usually MB and PB Leprosy diagnosis are clinically made by the doctors.
- Nerve thickening examination is a subjective issue. In last few years, more Dermatologists / Skin specialists and Medical Colleges / tertiary health care institutions are diagnosing the leprosy cases with more accuracy.
- Due to newer technology, increased awareness and regular drive to detect new cases which were



Dr. P. C. Das

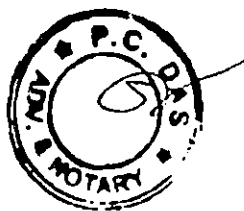


missed earlier are diagnosed now a days. So MB
Leprosy cases are increasing in number.

- Immunity status of the patient also plays a major role in MB cases.
- So increase in MB Cases and ensuring them complete free treatment with MDT (Multi Drug Therapy with three drugs regimen) for 12 months will cure the disease instead of under diagnosis as PB Leprosy where treatment is for six (6) months in MDT two drugs regimen.

8. That, in reply to the averments made in Paragraph - 5 of the I.A, it is humbly submitted that after integration of NLEP with General Health Care System, there is sustained decline in all parameters of NLEP in Pre-Covid and Covid period which are mentioned below.-

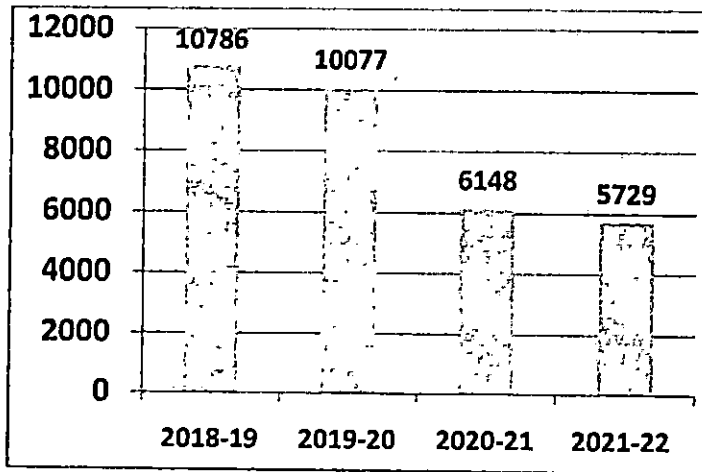
Year	PR per 10,000 population	ANCDR per 100000 pop.	Child leprosy Cases	No. of Grade-II Disability cases	Remark
2002-03	7.3	101.2	6131 (16%)	659	Pre Covid period
2019-20	1.45	21.3	681 (6.8%)	200	Pre Covid period
2020-21	1.1	12.9	422(6.9%)	178	Covid period
2021-22	0.89	11.8	392 (6.8%)	164	Covid period



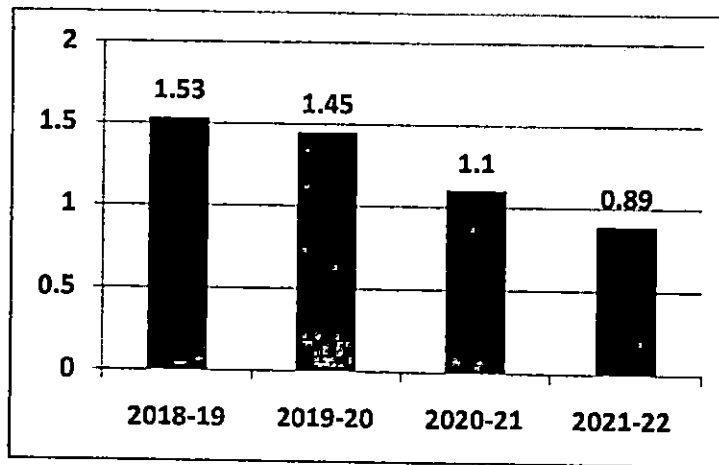
Dr. P. K. Mishra

Annual New Case Detection Rate (ANCDR), Prevalence Rate (PR), Grade - 2 Disability numbers and Children affected in Leprosy are declining which suggest that there is effective implementation of the Leprosy eradication programme

New Leprosy case detection:

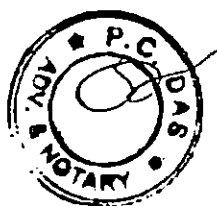


Prevalence rate / 10,000 population:

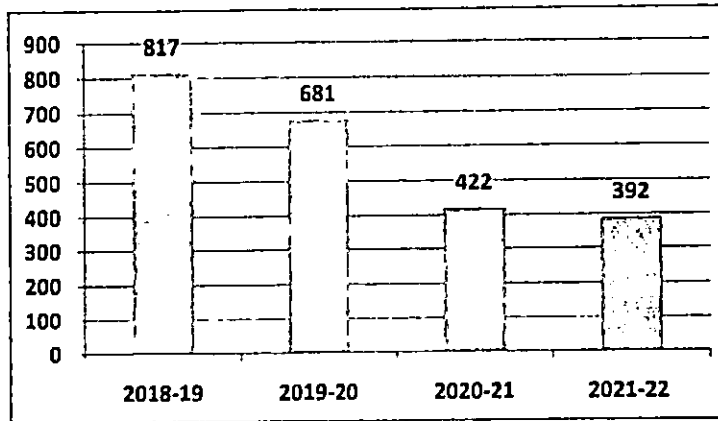


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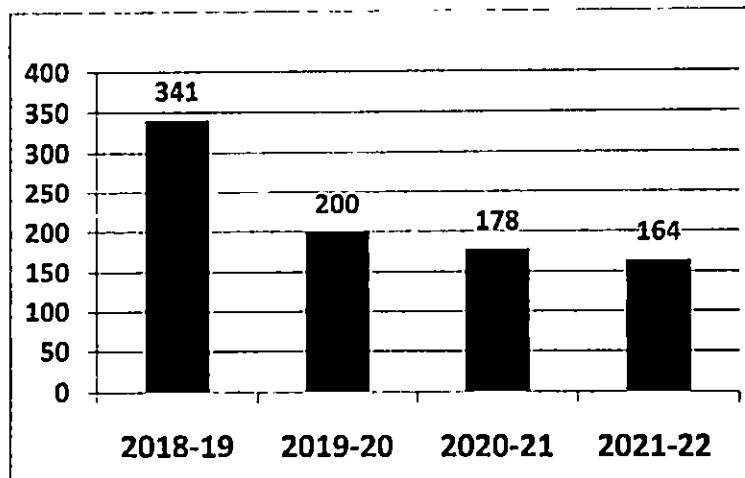
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Child New Leprosy Case detection:



Grade II Disability among new cases:

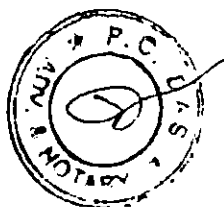


*h
AR*

D.J. Khanna

As per the minutes of the meeting held on 03.04.2014 under the Chairmanship of Addl. Chief Secretary, Finance with Principal Secretary, Health &FW Dptt. the post of MPW/PMW will not be filled up henceforth and will be converted to MPHWP (Multi Purpose Health Worker) Male.

Copy of the Minutes of Meeting dtd. 03.04.2014 is filed herewith and annexed as **Annexure – D.**

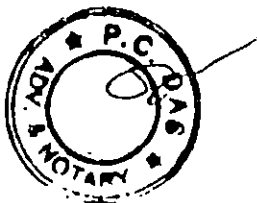


9. That, in reply to the averments made in Paragraph - 6 of the I.A, it is humbly submitted that the DPMR (Disability Prevention and Medical Rehabilitation) Clinics have been launched since 2006-07 in all District Head Quarter Hospitals (DHHs), Sub Divisional Hospitals (SDHs), Community Health Centers (CHCs). At present 386 DPMR Clinics are functioning all over the State which are providing all types of services like counselling, supply of medicines, Ulcer dressings, Physiotherapy etc. Tub, Mug, Towels, Medicines, Micro Cellular Rubber Footwear are supplied to each leprosy patient who need it free of cost in DPMR Clinics. Trained technical manpower are managing the DPMR clinics and providing the Health Care Services.

Govt vide letter dtd.16.09.2022 have declared them as Integrated DPMR Clinics to provide service to leprosy patients as well as Lymphatic Filariasis as both the diseases have many common features and the services of the same trained technical staffs can be provided to similar type of patients.

Copy of the letter dtd.16.09.2022 is filed here with and annexed as Annexure - E.

10. That, the averments made in Paragraphs – 7 & 8 of the I.A. needs no reply from this deponent.



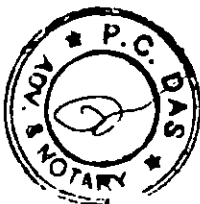
P.C. DAS
 ADV. & NOTARY

11. That, in reply to the averments made in Paragraphs - 9 & 10 of the I.A, it is humbly submitted that as per the minutes of the meeting held on 03.04.2014 under the Chairmanship of Addl. Chief Secretary, Finance with Principal Secretary, Health &FW Dptt., the post of MPW/PMW will not be filled up henceforth and will be converted to MPHWH (Multi Purpose Health Worker) Male.

12. That, in reply to the averments made in Paragraph - 11 of the I.A, it is humbly submitted that the compliance regarding filling up of 182 PMWs and fund utilization has been submitted by AD(Admin.), NHM, Odisha to DPH, Odisha which states that funds sanctioned for Para Medical Worker (PMW) under NHM PIP 2013-14 for 184 PMWs were not diverted for any other purpose, rather the amount available was much less than the sanctioned amount for the year 2013-14.

Copy of letter No.357, dtd.09.01.2023 is filed herewith and annexed as Annexure - F.

13. That, in reply to the averments made in Paragraph - 12 of the I.A, it is humbly submitted that DPMR Clinic have been integrated as per Govt. letter No.20501/H, dtd.16.09.2022 to provide service to leprosy patients and Lymphatic



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Filariasis which is being managed by trained technical staffs and physiotherapists for optimum and effective use of technical manpower.

14. That, in reply to the averments made in Paragraph - 13 of the I.A, it is humbly submitted that the Govt. is taking all steps to make the people/ community aware against stigma and discrimination towards leprosy through Electronics and Print media as well as by involving all key Departments like School & Mass Education, Panchayatiraj, Women & Child Development, SSEPD. Gram Sabhas are arranged in every village, debates, poster campaign, rallies are organised in schools to make people aware against stigma and discrimination relating to leprosy.

15. That, in reply to the averments made in Paragraph - 14 of the I.A, it is humbly submitted that the BNLWs (Block Nodal Leprosy Workers) are trained on NLEP. They help in implementation of the programme along with MPHWS (Female), ASHA, Community Health Officer (CHO) and Medical Officer. The suspected cases are brought to the Health Institutions by ASHA and Health Worker and confirmed by the Medical Officer. The Opp. Parties are taking all steps under NLEP.

16. That, the averments made in Paragraphs - 15 to 18 of the I.A. needs no reply from this deponent.



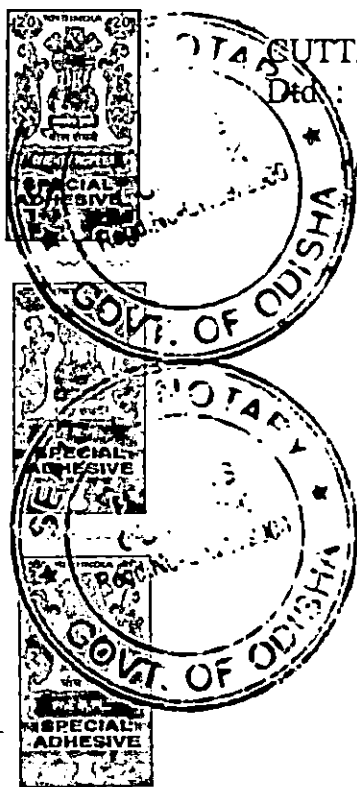
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ORISSA HIGH COURT
2ND.
10 FEB 2023
CLEARANCE
DEPUTY REGISTRAR (L&T)

17. That, the facts stated in the aforementioned Paragraphs are true to the best of my knowledge and based on Official records.

Identified by:
Advocate's Clerk,
Advocate General's Office

[Signature]
DEPONENT
10.02.2023
Special Secretary (PH)
+1 P.F.W. Deptt.

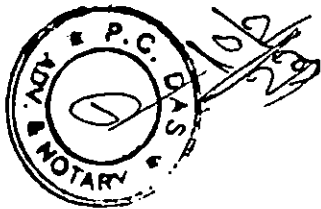


CUTTACK
Dtd: 10.02.2023

Certified that cartridge papers are not available.

[Signature]
ADDL. GOVT. ADVOCATE

The above named deponent
Solomnly affirm on... 10/2/23
.....being identified
By... *[Signature]*



Lepros



Ministry of Health & Family Welfare

Dr. Ashok Kumar, M.D.
Dy. Director General (Leprosy)

IMMEDIATE

E-mail: lepro@nb.nic.in
Gram: 2002.5.11.1000

स्वास्थ्य सेवा महानिदेशालय
निर्माण भवन, नई दिल्ली-110011
Dte. GENERAL OF HEALTH SERVICES
Nirman Bhawan, New Delhi-110011
DO no.719/DDG(L)/2002-Lep
Dated 6th May 2002

Sub: NLEP - Integration of leprosy services with primary/general health care services (GHS)- Regarding

Dear MS Gupta,

You are aware that 2nd NLEP Project with World Bank assistance has prioritised ~~decentralisation and institutional development~~ and integration of leprosy services with GHS at functional as well as structural level by the end of the project i.e March 2004, besides undertaking various other activities like disability care and prevention, IEC, training, strengthening the surveillance etc. With regard to decentralisation all the states have constituted the state level leprosy societies which have taken up the responsibilities of the management of funds as well as ensuring efficient planning, implementation and supervision of the project.

World Bank has very recently informed that they will be undertaking 2nd NLEP Supervision Mission from 20th to 31st May 2002. During this mission, status as well as action plan with regard to integration of leprosy services with GHS will also be reviewed in detail besides other issues. In this connection, please find enclosed herewith a check list which indicates the (i) activities/action to be taken, (ii) status as on 1st April, 2002 and (iii) action plan to accomplish the activities with regard to aforesaid integration in your state/UT. We will appreciate if you kindly arrange to send us the information on above items (ii) & (iii) against each of the activity/action listed in the enclosed check list, to reach us by 20th May, 2002. This will enable this directorate to share the information with World Banks Supervision Mission scheduled during 20-31 May 2002

With kind regards,

Yours sincerely,
(Signature)
(Dr. Ashok Kumar) 6/5/2

Leave
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K...
14/5

urgent
B
M...
H... 20.5.2
u. 25.2.2

Encl.(as mentioned)

(Signature)
Ms.Meena Gupta
Commissioner-cum-Secretary
Health &FW Deptt.
Orissa Secretariat
Bhubaneshwar-751 001

True copy attested
(Signature)
09/05/2002
Under Secretary to Govt.
Health & F.W. Deptt.

NOTE SHEET



O.I.No. 89 /F. Dt. 30/4/2014
PIN-SOS 3-ESIT-0130-2012

Enclosed please find the Minutes of the meeting held on 03.04.2014 at 3.30PM in Finance Department Conference Hall under the Chairmanship of Additional Chief Secretary, Finance to assess the shortfall of funds to meet the requirement of remuneration for the newly created 10301 posts of paramedics under National Health Mission, Odisha duly approved by the Addl. Chief Secretary, Finance.

[Signature]
(G. Nandi) 29.4.2014

Deputy Secretary to Govt.
Finance Department.

Health & F.W. Department

(Kind Attention:

Sri P.K. Mohapatra, Principal Secretary to Govt.)

[Signature] (HKD) / *[Signature]* NS, NHM

True copy attested

[Signature]

Under Secretary to Govt.
Health & F.W. Deptt.

-16-

(H&FW) N
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Minutes of the meeting to assess the shortfall of funds to meet the salary requirement ^{of remuneration} for the newly created 10301 posts of paramedics under (H&FW) Department)

A meeting was held on 03.04.2014 at 3.30 PM in Finance Department Conference Hall under the Chairmanship of Additional Chief Secretary, Finance in presence of Principal Secretary, H & FW Department, MD, NHM and other officials from Finance and Health & Family Welfare Department. The meeting was held to review the actual shortfall of funds under NHM to meet salary requirement for the newly created 10301 posts of paramedics during the year 2013-14 and also to review regarding availability of funds under NHM in subsequent years i.e. 2014-15 and onwards.

After detailed discussion, following decisions were taken.

1. All 10301 paramedic post created in 2013-14 will be considered as contractual sanctioned post under NHM. These posts will be filled up by the year 2016-17 as per approval in NHM PIP of respective years.
2. Staff Nurse : All posts of Staff nurse created will be supported by NHM in phased manner as per PIP approval. However, the remuneration of 597 staff nurses engaged during the year 2013-14 will be paid by NHM as funds for 730 staff nurses has already been allocated by GOI in supplementary NHM PIP 2013-14.
3. MPHM (F)/ANM : It was decided that for the year 2013-14, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS towards payment of remuneration to 1111 additional ANMs (who have already been engaged out of total sanctioned contractual post of 5164 MPHWF) as there is no fund available with NHM for the current year. Moreover, for the year 2014-15, proposal will be placed in PIP to sanction at least 1111 ANMs who have already been engaged in 2013-14. However, proposal will also be placed before GOI in NHM PIP for sanction of 5164 MPHWF/ANMs required as per IPHS norm and time to care approach, in phased manner by 2016-17. Based on approval of GOI, required number of ANMs will be engaged in such years.
4. Laboratory Technician: It was decided that, Finance Department, Govt. of Odisha will provide grants-in-aid to OSH&FWS towards payment of remuneration to 105 LTs for the year 2013-14 which is already filled up out of 270 sanctioned contractual posts for the year 2013-14 and remaining 165 posts may be filled up during the year 2014-15. Accordingly grant-in-aid will be provided to OSH&FWS.

True copy attest
[Signature]

Under Secretary to Govt.
Health & F.W. Deptt.

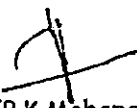
- 17 -


(11) 69

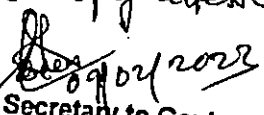
Radiographer: It was decided that, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS for payment of remuneration to 48 Radiographers who have already been engaged out of 99 sanctioned posts during the year 2013-14 and remaining 51 post may be filled up during the year 2014-15. Accordingly, grant-in-aid will be provided to OSH&FWS.

6. MPHW(M) : With regard to MPH(M) the entire cost of 991 newly created contractual post will be met out of State budget. For the year 2013-14, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS for payment of remuneration to 255 MPH(M), who have already engaged out of 991 sanctioned post. Further, it was decided that, no new recruitment will be made in current year i.e. 2014-15, as all 603 MPW(M) working under NVBDCP, out of World Bank supported project will be adjusted as contractual MPH(M) under State budget against 326 vacant post of MPH(M) under Leprosy. Accordingly, the post of MPW(M) under Leprosy will not be filled up henceforth and will be converted to MPH(M). However, the remuneration of rest 277 MPH(M) of NVBDCP (603-326=277) will be met out of State budget. Accordingly, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS towards payments of remuneration to all MPH(M). For better convergence of all National Health Programmes, these MPH(M) will be placed at Sub Centres to look after all programmes including Leprosy and Malaria.

The meeting ended with vote of thanks to the chair and participants.


(P.K. Mohapatra)
Principal Secretary to Govt.
Health & Family Welfare Department
Government of Odisha


(U.N. Behera) 25/11/2014.
Additional Chief Secretary,
Finance Department
Government of Odisha

True copy attested

Under Secretary to Govt.
Health & F.W. Deptt.



GOVERNMENT OF ODISHA
HEALTH & FAMILY WELFARE DEPARTMENT

No. 25776

H.

Date. 14.9.2021

File No HFW-MSIII-PG-0006-2020

From

Mamata Barik, OAS
Joint Secretary to Government

To

The Commissioner-cum- Secretary to Govt.

Social Security & Empowerment of Persons with Disabilities Deptt.

Sub: Filling up of posts of Para Medical Workers, Non Medical Supervisors and support staff (Dressers and Attendants etc.) trained in Leprosy.

Ref- Your letter No.6982, dtd.06.08.2019

Sir,

In inviting a reference to the subject cited above, I am to inform you that the posts of PMW and Leprosy Asst. and NMS have been abolished vide Govt. Order no 44260/H dated 22.11.01. At present, this programme is being implemented as ACDRS in the field by ASHA and supported by MPW (M&F) MPHS and confirmed by M.O. It no more runs as a vertical programme as per GOI guideline under NLEP and has been integrated to primary health care system. Hence, as per present scenario, the process of filling of the posts, which are already abolished does not arise.

This is for information and necessary action.

Yours faithfully,

[Signature]
Joint secretary to Government

*25472/94 (G)/
14/9/2021*

*B 42
18/9/21*

True copy attested

[Signature]
Under Secretary to Govt.
Health & F.W. Deptt.

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Minutes of the meeting to assess the shortfall of funds to meet the salary requirement ^{of remuneration} for the newly created 10301 posts of paramedics under H&FW Department. M
O

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True copy attested
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Under Secretary to Govt.
Health & F.W. Deptt.

PP LG

Radiographer: It was decided that, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS for payment of remuneration to 48 Radiographers who have already been engaged out of 99 sanctioned posts during the year 2013-14 and remaining 51 post may be filled up during the year 2014-15. Accordingly, grant-in-aid will be provided to OSH&FWS.

- 6. MPHW(M) : With regard to MPH(M) the entire cost of 991 newly created contractual post will be met out of State budget. For the year 2013-14, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS for payment of remuneration to 255 MPH(M), who have already engaged out of 991 sanctioned post. Further, it was decided that, no new recruitment will be made in current year i.e. 2014-15, as all 603 MPW(M) working under NVBDCP, out of World Bank supported project will be adjusted as contractual MPH(M) under State budget against 326 vacant post of MPH(M) under Leprosy. Accordingly, the post of MPW(M) under Leprosy will not be filled up henceforth and will be converted to MPH(M). However, the remuneration of rest 277 MPH(M) of NVBDCP (603-326=277) will be met out of State budget. Accordingly, Finance Department, Govt. of Odisha will provide grant-in-aid to OSH&FWS towards payments of remuneration to all MPH(M). For better convergence of all National Health Programmes, these MPH(M) will be placed at Sub Centres to look after all programmes including Leprosy and Malaria.

The meeting ended with vote of thanks to the chair and participants.

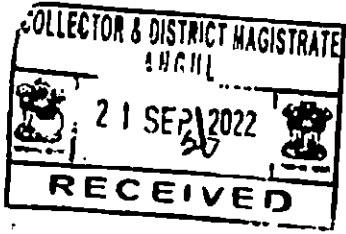
(P.K. Mohapatra)
Principal Secretary to Govt.
Health & Family Welfare Department
Government of Odisha

(U.N. Behera)
Additional Chief Secretary,
Finance Department
Government of Odisha

True copy attested

Under Secretary to Govt.
Health & F.W. Deptt.

Annexure-E
ADPHO (Sep)



Government of Odisha
Health & Family Welfare Department

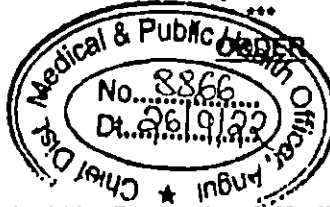
From 23/9/22
@ DM & PHO

DLC/PMI

23/9

Dated 16/09/2022

26.9.22



No. 90501/H&FW
DPH-MF-MISC-0026-2022

Subject: Integration of Disability Prevention & Medical Rehabilitation (DPMR) under National Leprosy Eradication Programme (NLEP) and Morbidity Management & Disability Prevention (MMDP) under Elimination of Lymphatic Filariasis (ELF) under the nomenclature of "Integrated DPMR Clinic"

CDM & PHO

M

Government have been pleased to approve the integration of Disability Prevention and Medical Rehabilitation (DPMR) activities under National Leprosy Eradication Programme (NLEP) and Morbidity Management and Disability Prevention (MMDP) under Elimination of Lymphatic Filariasis (ELF) of NVBDCP under the nomenclature of "Integrated DPMR Clinic". The integration of both the programmes have been approved as there are similarities in management of disabilities of both the diseases. The integration will also help in minimising the overlapping of activities of both the diseases and will help the beneficiaries in accessing better services and optimum utilization of health care services by trained manpower through a single window. Henceforth the DPMR clinics will be known as "Integrated DPMR Clinic" and will provide disability prevention and morbidity management services to patients suffering from Leprosy & Lymphoedema respectively.

83/7
22/09/22

All the districts need to take appropriate action for integrating both services within one month of issue of this order. The guidelines of integration are enclosed herewith for reference and immediate action. The action taken report in this regard needs to be submitted to the Director of Public Health, Odisha.

DLC of guidelines
Give copy to ADPHO (VBD)
26.9.22

16/9/2022

Principal Secretary to Govt.

Dated 16/09/2022

Memo No 90502/H&FW
Copy forwarded to MD, NHM, Odisha for information.

Special Secretary (PH) to Govt

Dated 16/09/2022

Memo No 90503/H&FW
Copy forwarded to DHS (O)/DPH(O)/ D SIH & FW(O) / Director, Capital Hospital, BBSR/ Director, RGH, Rourkela for information and necessary action.

Special Secretary (PH) to Govt.

Dated 16/09/2022

Memo No 90504/H&FW
Copy forwarded to all Collectors & DM/all CDM & PHOs for information and necessary action.

Special Secretary (PH) to Govt

Dated 16/09/2022

Memo No 90505/H&FW
Copy forwarded to P.S. to Hon'ble Minister, H & FW, Odisha for kind information of Hon'ble Minister.

Special Secretary (PH) to Govt

True copy attested

Under Secretary to Govt.
Health & F.W. Deptt.



-22-

Annexure-F

Mission Directorate
National Health Mission, Odisha
Department of Health & Family Welfare,
Government of Odisha

AB
Court Matter
Urgent

Letter No:- OSH & FWa/857
File No:- 508/2022

Date:- 09.01.23

From

Sri Arun Kumar Biswal, OAS (SAG),
Additional Director, Administration, NHM, Odisha.

To

The Director of Public Health, Odisha.

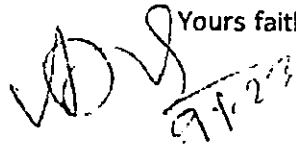
Sub: W.P.(C) PIL No. 13403/2015- Bipin Bihari Pradhan- Vrs- State of Odisha and Others.
Ref: Your L.No. 6963/ Lep cell 1/19 dtd. 14.12.2022.

Sir,

With reference to the letter on the subject cited above, I am directed to enclose herewith the compliance report as per Para- 2 & 3 of the Order dtd. 07.12.2022 of the Hon'ble High Court passed in W.P.(C) PIL No. 13403/2015 filed by Bipin Bihari Pradhan - Vrs- State of Odisha and Others for information and necessary action.

Encl: As above


Yours faithfully,


Additional Director, Administration
NHM, Odisha.

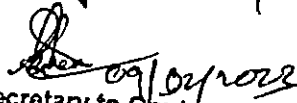
Memo No:- 358

Date:- 09.01.23

Copy along with the compliance report as per Para- 2 & 3 of the Order dtd. 07.12.2022 of the Hon'ble High Court passed in W.P.(C) PIL No. 13403/2015 filed by Bipin Bihari Pradhan are forwarded to Joint Secretary to Government, Health and Family Welfare Department, Govt. of Odisha for information and necessary action.


Additional Director, Administration
NHM, Odisha.

True copy attested


Under Secretary to Govt.
Health & F.W. Deptt.

AP

Compliance Report as per Para-2 & 3 of the Order dtd. 07.12.2022 of the Hon'ble High Court passed in W.P.(C) PIL No. 13403/2015 filed by Bipin Bihari Pradhan.

Para 2:

With regard to the diversion of funds sanctioned for Para Medical Workers (PMW) under NHM PIP 2013-14, it is to state that the sanctioned funds for 184 PMWs were not diverted for any other purpose. Under NRHM, funds have been released to State by Govt. of India as a pool fund to take up all activities as per the approved NHM Programme Implementation Plan. Based on available funds and as per the priority of the State, the activities are taken up. It is to mention that only Rs. 391.97 lakhs were available including opening balance towards NLEP as against total approved budget of Rs. 707.03 lakhs during the year 2013-14, as a result of which, there were shortage of funds of Rs. 315.06 lakhs which was needed to take up all activities approved under NLEP. Due to such shortage of funds, the allocated fund towards PMW for an amount of Rs. 264.00 lakhs was not available with the State and therefore there was no scope of any diversion of such fund for any other purpose. However, as per NHM norms, the unspent balance of previous year is carried forward to the next year and treated as available fund for the current year and being utilized for the approved activities only.

Para 3:

Provision for treatment to the Persons affected by Leprosy is being provided by General Health Care System including trained Medical Officers (MBBS & AYUSH), MPHWS (Male & Female), Community Health Officers, Physiotherapist and ASHA.

True copy attested

[Handwritten Signature]

Under Secretary to Govt.
Health & F.W. Deptt.

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The following health staffs/ personnel have been trained by NLEP to take care of the leprosy patients and to follow up and conduct counselling:-

SI No	Type of health Personnel	Trained on NLEP
1	Multi Purpose Health Worker (Male)	3,218
2	Multi Purpose Health Worker (Female)	7,224
3	Community Health Officer (CHO)	4,009 Training going on and will be completed by March 2023
4	ASHA	48,011
5	Medical Officers (MBBS)	4,991
6	Medical Officer (AYUSH)	2,852
7	Physiotherapist	76

The details regarding utilization of funds approved under NHM for free treatment of leprosy patients & training of staffs on NLEP from 2013-14 onwards are as follows:-

Year	Expenditure for Treatment of Leprosy patients in Rs.	Expenditure for Training of staffs in Rs.
2013-14	56,87,524.00	10,50,586.00
2014-15	51,71,647.00	17,04,166.00
2015-16	82,96,694.00	26,34,163.00
2016-17	60,89,645.00	29,44,424.00
2017-18	47,87,085.00	30,71,061.00
2018-19	49,86,848.00	15,43,512.00
2019-20	25,10,841.00	13,19,175.00
2020-21	56,11,808.00	1,36,606.00
2021-22	41,07,000.00	6,17,000.00
2022-23 (Nov 22)	14,15,246.00	6,45,870.00
Total	4,86,64,338.00	1,56,66,563.00

True copy attached

10/02/2023

Under Secretary to Govt,
Health & F.W. Deptt.