


QUARTERLY NEWSLETTER BY UP-TSU

# HAPPY NEW YEAR 2021





**राज्य सरकार की वर्गगत पहल**  
**कोरोना जीव केन्द्र तक पहुँचाने के लिए आसान**  
**नवतकसित मेरा कोविड केन्द्र एप**





की  
**लॉन्चिंग**

**योजना आदित्यनाथ**  
 मुख्यमंत्री, उत्तर प्रदेश शासन

**गतिमयता नवसिद्धि**

**श्री जयप्रकाश सिंह**  
 मंत्री, शिक्षा एवं स्वास्थ्य, परिवहन, कृषि, मानव संसाधन, समाज कल्याण विभाग, उत्तर प्रदेश सरकार

**दिनांक: 5 दिसम्बर 2020 | समय: अपराह्न 4.30 बजे**  
 स्थान: 5, बालगंगा नगर, गोरखपुर



**भूपाल एले स्टोर पर MERA COVID KENDRA एप डाउनलोड करें**

- 5 किमी के अन्दर स्थित कोविड जीव केन्द्र का पता अज्ञातों से साझा।
- जीव केन्द्र पहुँचने का रास्ता एवं स्थित जानकारी भी मिलेगी एप पर।
- 1. जीव केन्द्र का भौतिक लोकेशन
- 2. कक्षा/जीव केन्द्र का नाम
- 3. योधापत्र नम्बर
- 4. रोकप्रतिपात्र नम्बर
- 5. पिता कोड
- अन्य मिलने से स्थित कोविड जीव केन्द्र का पता पत्र भी मिलेगा।

**सूचित कोविड जीव प्रवेश प्राप्त करें** : <https://fabreports.up.govt191racks.in/>

समस्त जानकारीयों हेतु सम्पर्क करें

**104**







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FP Posters made by TSU team unveiled in NHM event on felicitation of best performing service providers and FLWs on 4th April '20



L1 facility staff training in district Bahraich



Counsellor discussing audio case study with ASHA Sanginis in CHC Gola



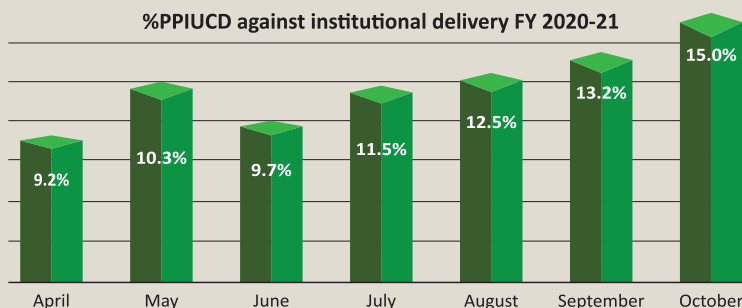
MD-NHM discussing 'Shagun kit' on Kushhaal Parivar Diwas in CHC Aliganj in Lucknow

## Family Planning–2020 at a Glance

With the onset of the COVID-19 pandemic family planning interventions were affected; however GoUP with support of UP-TSU responded with resilience and innovations to resume FP interventions across the state. Some of the key highlights are as follows :

- The state helped 28, 66,766 couples access their preferred contraceptive method by March'20: 38% more than the previous year (2018-19). Additionally, 13, 32,514 couples were reached out from April '20 to October '20 despite multiple restrictions.
- RMNCH+A counsellors continued their role in the provision of FP services despite being enlisted in COVID-19 duty and counselled 4,17,507 clients between April'20 - November'20. Audio-case-studies were shared with all RMNCH+A counsellors via digital platforms for dissemination among nearly 5000 FLWs across all 75 districts.
- Since April '20, demand for FP along with COVID 19 preventive messaging is being created through intensive communication initiatives under the Zaroori Hain Baat Karna campaign.
- District Family Planning Specialists (DFPS) played a critical role in the COVID response by supporting the state to establish and activate dedicated COVID hospitals (L1, L2 and L3) and the operationalisation of COVID-19 surveillance portal.
- Support extended to the rollout of new contraceptives (Antara injectable and Chhaya) to sub-block facilities, with a focus on Health and Wellness Centres (HWCs). By November'20, 6175 facilities - including 93 district facilities, 961 block facilities, 14 medical colleges, 513 PHCs/UPHCs, 877 PHC-HWCs, 2109 sub-centres (SCs), and 1608 HWC-SCs provided the new contraceptives.
- Facilitated capacity building of FP logistic-managers to strengthen efforts towards ensuring contraceptive security at all levels of facilities. 95% of facilities were operationalized to use 'Family Planning Logistic Management Information System (FPLMIS)' by November'20.
- 2 lakh service-providers across various cadres were part of the training of trainers (TOT) and the onsite training of facility teams.

%PPIUCD against institutional delivery FY 2020-21



**PPIUCD champions' innovation - aimed at motivating available trained non-performing providers to increase uptake of PPIUCD.**

Source : HMIS standard reports

- E-modules developed using blended training approach for service providers with a focus on ANMs. A total of 285 master trainers and 2,134 ANMs have been trained using the e-module through ANM trainings till December '20. LaQshya resource package, an online compendium was developed for online trainings of facility staff of 23 district hospitals and 3 CHCs.
- The baseline findings of the Naya Pahal Kit (NPK) pilot in two districts of UP has helped design effective communication material, training modules, and composition of the kit. This new package has been adopted by the state to be rolled out in 12 districts as 'Shagun kit', slated to be scaled up in 75 districts next year.
- Supply chain pilots were rolled out in Gonda division. Integrating FP in Pradhan Mantri Surakshit Matritva Abhiyan through counselling and availability of FP services and commodities, with a focus on women accompanying cases of high risk pregnancy.





## Frugal Innovation- An Ingenious Way to Save Lives

While wrapping a newborn post-delivery is essential to protect it from hypothermia, this is not often the case in the vast rural hinterlands as there is lack of awareness among the community. Often, those from poor socioeconomic background end up using old clothes and rags - usually pieces of an old sari or dhoti - to cover the newborn. While at the facility, the erratic supply of sterile clothes to wrap the newborn further compromises the survival of the new born.



Baby covered with cap and socks kept under radiant warmer

The staff nurses of NBSU Haidergarh came up with an ingenious solution of using markins and gauze to make caps and socks for newborns. They used gauze to wrap the head and feet of the baby while using a radiant warmer, and sustained KMC to prevent hypothermia. This innovative idea has now been adapted in all 4 NBSUs at Barabanki, giving immense joy and encouragement to all.



Mother practicing KMC with baby covered with cap and socks

## Improved Monitoring for Quality Neonatal Care

As part of the Newborn Health Strategy, an orientation session on NBSU and MDSR format for all Block Community Programme Managers (BCPMs) was organised at Kheri. The session aimed at building competency and ensuring involvement of the community team in strengthening newborn-care. As a result, BCPMs are now equipped to train and educate ASHAs and ASHA Sanginis to increase referral of cases to NBSU for quality neonatal care. Similar sessions have been initiated in Sitapur, Ayodhya, Hardoi, Kannauj, and Farukhabad districts.



## Vertical Integration (VI) Meetings – an Opportunity for Referral Strengthening

Vertical Integration (VI) meetings were introduced at the district level to address the challenges in referral management. VI meetings provide an interactive platform for the facility administration and referral workforce of block and district level health facilities to get together and discuss cases for cross-learning to improve referral linkages between the facilities.

3 aspirational districts: Chandauli, Chitrakoot and Fatehpur, conducted their first VI meetings in November. The creation of referral WhatsApp groups facilitated the sharing of real time data of complications referred across facilities, with scope for distance mentoring.

Some of the key decisions that have been made using the VI meeting platform are the purchase and use of non-pneumatic anti-shock garments, and placement of phones in labour rooms to strengthen referral system with improved documentation among others.



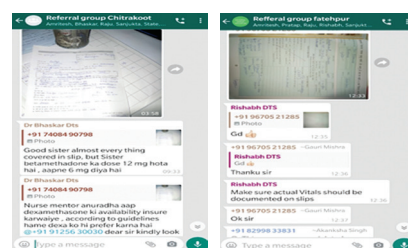
VI meeting in Chitrakoot



VI meeting in Fatehpur



VI meeting in Chandauli



Referral WhatsApp Group- Chitrakoot

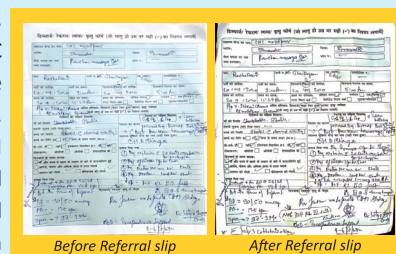
Referral WhatsApp Group- Fatehpur



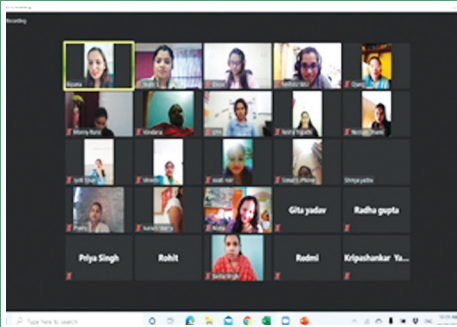
Referral WhatsApp Group-Chandauli

## Averting Danger by Embracing Technology

Radha, a 26 year old native of Malhipur block, Shrawasti gave birth to a healthy baby girl at the CHC on 20th Sep 2020. While the baby was stable, she complained of dizziness and shivering post-delivery. The staff nurse on duty realised it was a case of PPH and informed the doctor immediately. Dr. Satyamol started management of PPH and posted the referral slip on 7.01 PM in referral group of Shrawasti. Within 5 minutes Dr. Vandana, DD, FRU, NM Intervention, UPTSU saw the message and initiated live mentoring. Radha was subsequently shifted to the DCH where Archana and Rinki attended to her immediately as they were a part of the referral WhatsApp group. While Radha required one-unit of blood before her vitals were stable again, it was through coordination and quick response that her life was saved.







Simulation Supervisor practicing Simulations



Simulation Supervisor practicing team building exercises

## Simulation Facilitation Training- Putting Knowledge to Practice

IHAT, in collaboration with PRONTO International, conducted a three-day in-person simulation facilitation training of Simulation Supervisors. The aim of the training was to equip the participants with facilitation and debriefing skills for improved obstetric and neonatal emergency care. The simulations use low-technology hybrid-birth-simulator PartoPants, which are worn by a patient to simulate obstetric emergency, and the Laredal Neonatal for neonatal resuscitation scenarios.

Following the training of Simulation Supervisors, under phase 1, virtual training of 68 Nurse Mentors from 28 HPDs and ADs were conducted in 2 batches. A total of 64 NMs were trained on simulation and clinical skills.



## District Review Meetings- Tracking Progress

To push for a more structured review of all NMs in a district, a letter was issued by the CMO ensuring active participation by all NMs and the District Maternal Health Consultant. With a strengthened review mechanism, NMs of both dedicated and nominated blocks, DTS, DM&E, DMHC, ACOMO, ZTS, state team participate in the review meetings. The generation of concrete actionable points helps in tracking progress and accountability. These meetings are a norm across all 28 HPDs and aspirational districts since August 2020.



DRM Prayagraj district in presence of ACOMO-RCH



DRM Fatehpur district in presence of ACOMO-RCH







## Views of an FLW on impact of COVID-19 on routine activities at VHND

"Refreshingly, the VHND venues are cleaner nowadays. Earlier, no one helped us clean the sites, but now the community and the Pradhan make it a point to ensure VHND sites are clean for beneficiaries to visit without any fear of infection. They help us clean and sanitize the sites both before and after the session. They also encourage beneficiaries to maintain social distance and wash hands before entering into the VHND sites." *AWW, SC Sachwara, Block Kanaili, District Kaushambi.*

## Testimony of a District Level Officer on the resumption of VHND services

"During the lockdown, outreach sessions were stopped which hampered ANC and immunization services. Fearing infection, fewer people visited the CHC to avail these services. But as the VHNDs resumed, pregnant women and children turned up to get MNCH services. UPTSU's block outreach coordinators played a major role in ensuring adequate preparations for VHNDs by updating duelist with time slots a day prior to VHND along with ASHAs and ASHA Sanginis. Efforts were made to ensure a hand washing corner at every VHND site. And the service-providers see to it that all the beneficiaries use face-masks and maintain physical distance during the sessions". *Dr. Suhaib, MOIC, Gainsdas Bujurg, District Balrampur.*

## COVID-19 impact on MNCH services and the resumption of VHND: Voices from the field

With control measures introduced to check the COVID-19 transmission, UP faced unforeseen challenges such as a massive economic bust, relentless inward migration, and derailed population stabilization efforts. Management of the pandemic in the state was so exhaustive that it relegated delivery of essential health services to alarmingly lower levels. Furthermore, mass-repurposing of frontline health-workers to COVID-19 halted maternal & child care and nutrition services at the grassroots. During this time, UP-TSU objectively supported the GoUP in drafting strategies, modification of policies & guidelines, and development of action plans to build capacities of health workforce on COVID-19 infection prevention and control measures. Consequently, a government order was released on 29th April to resume key MNCH and nutrition services in consonance with the COVID-19 guidelines in the community.

## A beneficiary's testimonial on the resumption of VHND services

"I was pregnant with my first child and received 2 ANC services at VHND. In April, I was informed that VHNDs have been put on hold. When they resumed after a month, we were asked to wait our turn sitting on circles drawn on the floor. Even though we had to follow many protocols, I was happy that I received all the ANC services". *Sushma, Robertsganj block in Sonbhadra district.*

### District Wise VHND Sessions



District Balrampur - VHND Site Preparation



District Badaun - Beneficiary mobilization based on Time clustering



District Chandauli - VHND Session



District Farrukhabad - VHND Session



GO issued by Districts Administration to commence VHND sessions amid COVID-19



## Way Forward



**Shri. Kapil Singh**  
Director, SNM, U.P.

Interdepartmental convergence, increased use of data for decision making at all levels, and coordination with other stakeholders like SHGs, PRI, and key community influencers for promoting optimal nutrition practices in the community are critical for improving the quality and coverage of Poshan Abhiyaan in UP. I am sure UP-TSU can support us in all these aspects.

They can extend their techno-managerial support to the Government in the remaining 45 districts of UP for system strengthening and capacity building of the ICDS functionaries to ensure quality implementation of Poshan Abhiyaan across the state.

**"We are working hand-in-hand with UP-TSU to comply with the mandates of the GoI & GoUP".**



Supported AWWs in conducting virtual counselling sessions, including 1,32,922 video conference calls and 84,062 audio conference calls

## An Interview with the Director, State Nutrition Mission, Uttar Pradesh

**What have been the accomplishments and challenges in the implementation of Poshan Abhiyaan in UP?**

To strengthen the Poshan Abhiyaan - launched in UP in August 2018, we have completed training of the Anganwadi workers on 21 Incremental Learning Approach (ILA) modules in 75 districts, and rolled out ICDS-CAS, a mobile-based software that enables Anganwadi workers to capture real-time data, in 25 districts of UP. We also prepared and operationalized the state and district convergence action plans (CAP). Community-Based Events (CBEs) like Godbharai and Annaprashan have been organized at the Anganwadi centers across the state to promote optimal nutrition practices at critical stages of life.

A very important accomplishment is the procurement of Growth Monitoring Devices (GMDs) this year, courtesy of the guidance of our Additional Chief Secretary, Madam S. Radha Chauhan, and the Executive Director of UP-TSU, Dr. Vasanth Kumar.

Some of the challenges we face are the absence of the State Project Management Unit (SPMU), delay in payment of performance incentives to Anganwadi workers, and large number of vacancies of Mukhya Sevikas leading to lack of quality rollout of Poshan Abhiyaan activities in the state.

**How has UP-TSU been supporting the State Nutrition Mission in the roll out of the Poshan Abhiyaan?**

UP-TSU has extended crucial technical support at all levels for the quality roll-out of Poshan Abhiyaan activities across 30 districts of UP. They have been providing handholding and mentoring support to the Anganwadi Workers for better service delivery, Mukhya Sevikas for improved Supportive Supervision and strengthening of review platforms, especially the district nutrition committee meetings (DNCs) and sector meetings. Besides, they have also supported in creating awareness among the FLWs and community for preventing the spread of COVID19 Pandemic and in the resumption of essential nutrition service delivery by the Anganwadi Workers post-lock-down.

Their assistance to the ICDS Department and State Nutrition Mission in procurement of GMDs, and the establishment of THR Supply Chain, SPMU, district and block help desks, has been quite significant.



Provided handholding and mentoring support to 68,907 AWWs, 2773 Mukhya Sevikas, and 704 CDPOs



Supported AWWs in providing quality counselling to 1,71,013 Pregnant Women, and caregivers of 2,92,073 (0-6) and 3,33,912 (6-23) months children through accompanied homevisits



Supported AWWs in conducting quality Home Based - CBEs, including 60,882 Godbharai and 32,230 Annaprashan

Source: Monthly Program Monitoring Data, Jan - Oct 2020





## Interview Byte On Overcoming Challenges



**Dr. Vikasendu Agarwal**  
State Surveillance Officer, UP

With COVID-19 outbreak, 2020 was a challenging time for the health department in UP. Luckily for us, our honourable CM was very active in COVID-19 management and at a nascent stage itself, he established a team of senior bureaucrats, called 'Team 11,' to handle COVID situation in the state.

While we expected the numbers to be very high initially, for handling the information flow, we needed a robust data platform. Being a huge state, comprising of 75 districts – many of these districts being equivalent to or even bigger than small European countries – UP needed a system wherein data would be gathered for evidence-based decision-making. Initially, we relied on paper-based reporting, but in March, we realised its limitations. We contacted TSU and jointly developed a template as to what type of datasets would be required. We fleshed out the necessary data fields and established the algorithm for data collection.

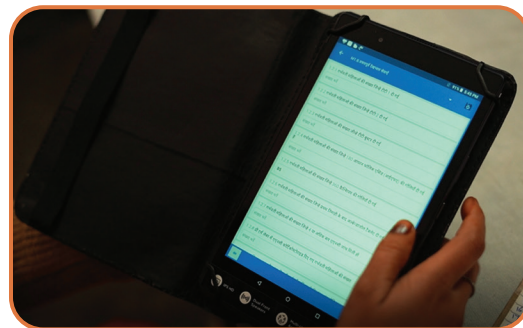
Subsequently, TSU developed the platform, 'COVID19tracks.in,' in record time. Since April, data has been collected on this platform. It doubles up as an analysis tool and most major decisions in the state on COVID-19 were taken based on the generated evidence. For instance, if we observe a continuous growth in cases in a particular district, particularly if the growth rate is higher than the state average, we send special teams therein and intensify contact tracing, so, that positive cases are identified earlier.

Similarly, other key indicators, including positivity and Case Fatality Rate (CFR) are tracked longitudinally for every district. TSU has been supporting us very actively in analysing them and preparing related graphs and charts. Apart from this, there are many day-to-day needs which are handled by TSU.

## Using Data for improved services

Acknowledging the growing need for data driven decision making to predict and mitigate major health issues in the midst of a pandemic, UP-TSU intensified its monitoring and evaluation efforts throughout 2020. Some of the major interventions are highlighted below:

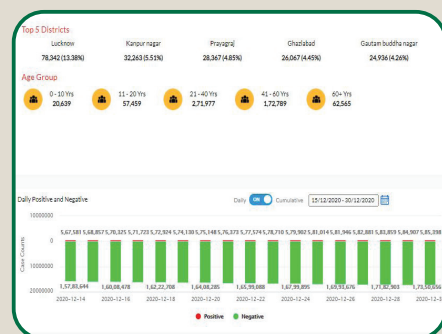
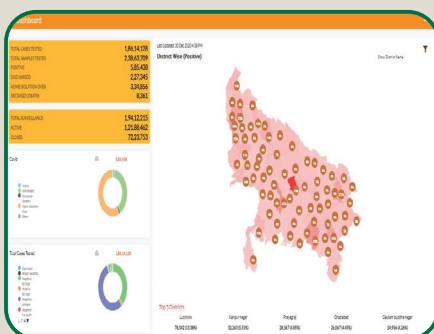
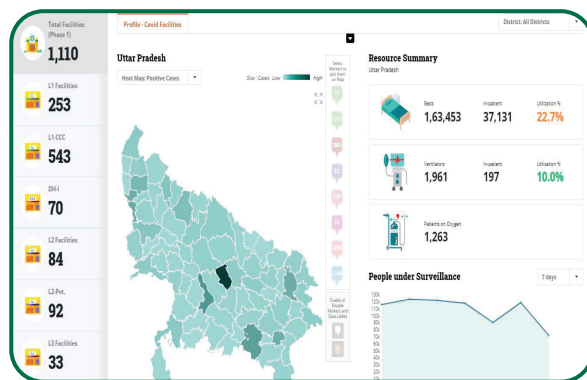
- **ANM SC Application** – Piloted in January, 2020 at Ayodhya and implemented in 43 Districts of UP. The android-based application is now used for data entry at sub-centres.
- **Facility Mapping** – Physical verification of over 13,000 public healthcare facilities conducted in 36 districts of UP to upgrade and correct the facility master dataset.
- **RFS+ Survey** – A pioneering large-scale Rolling Facility Survey-Plus (RFS+) survey conducted in 54 healthcare facilities across 25 HPDs in UP. It provides a bird's eye view into the management of maternal and neonatal complications in public health facilities across the state.
- **Family Planning Survey** – Comprising of households, currently married women (15-49 years), frontline workers (FLWs) and facility-based assessment, this comprehensive exercise presently bolsters UP's family welfare services' operations.



## Data on COVID-19

In addition to key analyses done by UPTSU being used in decision making by the authorities, some of the work done by the Monitoring and Evaluation team regularly was as follows :

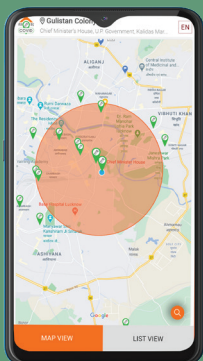
- **COVID-19 Bulletin** – Shared daily with GoUP and NHM, it recounts total number of afflicted cases, recoveries, and deaths.
- **COVID-19 Integrated Surveillance Platform and COVID-19 Dashboard** – Used to map the changing epidemiological reach of the disease in each district, and the available resources for testing and treatment. The information is shared with district and state-level health programme managers.
- The first **Sero Prevalence Survey** for COVID-19 was conducted by GoUP in 11 districts of the state in September 2020, with methodological and logistical support of UP-TSU.



## 'Mera COVID Kendra App': Test-centres at your fingertips

In a major technical break through, the Government of Uttar Pradesh has launched the 'MERA COVID KENDRA' application.

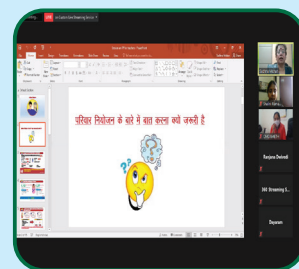
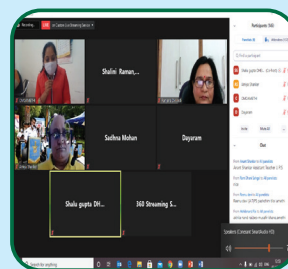
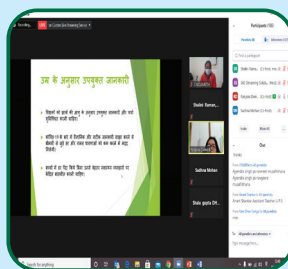
The android - based app developed by UP-TSU helps the residents access all information related to COVID-19 test-centres within a 5 km radius, including their names, timings, the type of testing available, and the direction to reach the centre of choice...all at one go!



## Lessons on COVID 19 – Webinars for Teachers

District Amethi, Kanpur & Gautam Buddha Nagar organised orientation workshops for teachers on COVID-19 in partnership with CFAR and UNICEF. A series of webinars for primary and upper-primary school teachers were conducted between November and December 2020. Over 10,000 teachers participated in these webinars aimed at spreading COVID-19 preventive messages during festivals.

Facilitated online, the webinars covered the most important aspects of COVID-19 including prevention, home-isolation, and stigma and discrimination against COVID patients. Sessions were also enriched by knowledge and experience sharing by COVID-survivor teachers who articulated their personal encounters with discrimination after being tested positive for COVID 19.



Use of BCC Materials at Community Level

## Recruitment of Specialists' Cadre: A landmark decision towards strengthening Public Health in UP

With nearly 70% shortage of specialist doctors against the 8413 sanctioned posts, recruitment of specialists in UP was critically overdue and paramount to ensure quality emergency RMNCH services in the state. In this light, the amendment of the 'Doctors' Service Rules' on 11th of December marks a historic watershed. Resulting from concerted efforts spanning 26 months, the amendment required nearly 100 revisions besides multiple consultations with the concerned officials and the public.

UP-TSU provided extensive support to GoUP in conceptualizing and drafting the revised rules while actively steering interdepartmental consultations for implementation.

The revised rules have led to some groundbreaking changes, making the specialist cadre a very attractive position - including choice-based posting to FRUs, exemption from transfers, legal indemnity, and performance-based incentives among others.



Dissemination of BCC Materials at Community Level

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