Issue 30 | June 2026

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QUARTERLY NEWSLETTER BY UP-TSU

A NOTE BY THE LEAD, UP-TSU

Dear Readers,

I am pleased to present the 30th edition of the PAHAL Newsletter, which highlights key innovations and progress achieved during the second quarter of 2026. This edition reflects our ongoing support to the Health Department and ICDS in strengthening health systems, enhancing facility capacity, and expanding community outreach across Uttar Pradesh.

Inside, you will find accounts of major interventions that contribute to a more resilient and responsive health system: the digitisation of equipment lifecycle management through the eUpkaran rollout; NHM's performance appraisal enhancements via eHRMS; and contribute in improvements on maternal health outcomes through the phased introduction of Ferric Carboxymaltose to manage anaemia. The issue also illustrates how simple digital solutions- including a WhatsApp-based, case based family planning learning initiative and newborn referral groups-are improving service delivery. Field stories further demonstrate the tangible benefits of focused, community level action at the last mile.

As we build on these accomplishments, our commitment to advancing equitable, high quality healthcare remains unwavering. I trust this edition will offer valuable insights into the collective efforts driving improved health outcomes across the state.

Warm Regards,

John Anthony
(Senior Project Director & Lead, UP-TSU)

ABOUT UP-TSU

Uttar Pradesh Technical Support Unit (UP-TSU) was established in 2013 under a Memorandum of Cooperation signed between the Government of Uttar Pradesh (GoUP) and Gates Foundation to strengthen the Reproductive, Maternal, Newborn, Child, Adolescent Health and Nutrition (RMNCAH+N). University of Manitoba's India-based partner, the India Health Action Trust (IHAT) is the lead implementing organization.

UP-TSU provides technical and managerial support to GoUP at various levels of the health systems and that includes maternal, new born, child health, nutrition and family planning. UP-TSU also supports the GoUP at the state level in policy formulation, planning, budgeting, human resource management, monitoring, contracting, procurement, and logistics to improve healthcare throughout the state.

IN THIS ISSUE

Share your valuable suggestions, innovative ideas and feedback at iec.uptsu@ihat.in

ENHANCING NHM'S EFFICIENCY FOR ONLINE LEAVE MANAGEMENT

NHM with technical support from UP-TSU has successfully digitized the leave management process for SPMU staff through the eHRMS portal, marking another step towards strengthening administrative efficiency. The transition from paper - based leave applications to a digital platform has reduced paperwork, improved transparency, and streamlined approval workflows.

Through the online module, employees can apply leave, track status in real time, and receive timely decisions from approving authorities. The system also enables administrators to monitor applications and approvals through a centralised dashboard, facilitating faster processing and improved oversight. As of June 2026, more than 700 leave applications have been submitted through the portal, with 548 applications processed, resulting in a leave closure rate of approximately 78%.

Leave Portal Outcomes		
700+ Applications Submitted	**548** Applications Processed	**78%** Leave Closure Rate Achieved

FCM Training launched in Raebareli

FCM Training at Hardoi

"Maternal anaemia remains a significant challenge in UP, affecting the health and well-being of mothers and newborns. The introduction of Injection FCM in the health system is an important step towards ensuring timely and effective treatment of moderate to severe anaemia, thereby contributing to improved maternal health outcomes across the state. I appreciate the technical support provided by UP-TSU in operationalizing this intervention."

– Dr. Shalu Gupta

Joint Director, Maternal and Child Health
Directorate of Family Welfare, Uttar Pradesh

eHRMS STRENGTHENS ADMINISTRATIVE GOVERNANCE FOR NHM STAFF

To strengthen administrative governance and improve operational efficiency, NHM, with technical support from UP-TSU, has successfully transitioned the Performance Appraisal System for State Programme Management Unit (SPMU) staff to the Electronic Human Resource Management System (eHRMS). This shift from an exhaustive paper-based process to a fully online workflow has enhanced transparency, streamlined approvals, and reduced administrative delays.

Implemented in the first phase for over 250 SPMU staff members, the initiative has shown encouraging results, with 96% of employees successfully submitting their appraisals online and 91% reaching the acceptance level, while the remaining cases are under process. The department established standardised appraisal formats, configured templates, and defined division-wise workflows for Assessing, Reviewing, and Accepting Officers, enabling seamless end-to-end processing of performance appraisals through the portal, ensuring greater transparency and accountability.

Annual Performance Management System at a Glance		
250+ SPMU Staff Benefited	**96%** ACRs Submitted Online	**91%** Reached Acceptance Level

What's Next

Discussions are underway to expand the Digital Performance Appraisal System to District Programme Management Units in the next phase, paving the way for strengthened digital HR governance across NHM's district network.

FERRIC CARBOXYMALTOSE (FCM) ROLL-OUT IN UTTAR PRADESH

The introduction of Ferric Carboxymaltose (FCM), a single-dose intravenous iron therapy, marked a new chapter in anaemia management in Uttar Pradesh's public health system. Recognising its potential, the Government of Uttar Pradesh, with UP-TSU's support, initiated its introduction within the public health system.

Training of service providers on FCM administration	Inaugural events for FCM Launch
To support the implementation of Ferric Carboxymaltose (FCM), UP-TSU launched a structured capacity - building programme for Medical Officers and Staff Nurses at CHC-FRUs and District Women Hospitals. Training materials, developed jointly with faculty from KGMU, Lucknow, and GSVM Medical College, Kanpur as per GoI's guidelines. The sessions covered anaemia management, FCM administration, documentation, and adverse event reporting. The training was formally launched by the Director General- Training in Raebareli. Between Feb and May' 2026, 19 on-site training batches were conducted across five intervention districts (Fatehpur, Hardoi, Jalaun, Raebareli, and Sitapur). A decision was taken during the STF meeting under the chairmanship of Additional Chief Secretary to rapidly scale up the training across remaining 70 districts, followed by eight NHM-led virtual training sessions that reached nearly 8,000 providers across the state.	To operationalise FCM services and build awareness among beneficiaries and healthcare providers, launch events were organized across the five intervention districts between March and May 2026 with support from UP-TSU. Attended by senior health officials from state and districts, the events highlighted the importance of timely anaemia management, role of FCM, and adherence to follow-ups, with beneficiaries receiving counselling and Poshan Potlis containing iron & protein. The first FCM administration was conducted on National Anaemia Day (21 March 2026) at CHC Unchahar, Raebareli. During the launch phase, 59 eligible beneficiaries received FCM following standard protocols, vitals monitoring and documentation, with no adverse events reported, reinforcing confidence in the intervention's safety and effectiveness.

Guidelines on Re-initiation of oral IFA post IV Iron Therapy
A review of existing guidelines revealed conflicting recommendations on restarting oral IFA after IV iron therapy. To address this gap, UP-TSU advocated for the constitution of a Technical Support Group (TSG) comprising DGFW, NHM, KGMU, and UP-TSU. In May 2026, the TSG recommended initiating oral IFA based on reassessment of Hb levels after 1 month of IV iron therapy. 2 IFA tablets for anaemic (Hb <11 g/dl) and 1 tablet for pregnant women with normal haemoglobin of 11 g/dl. The recommendation was subsequently adopted through a DGFW directive, standardising post-IV iron anaemia management across State.

District - Raebareli

COMMUNITIES COMING TOGETHER TO DONATE BLOOD FOR EMERGENCY CARE

Timely access to safe blood transfusion is critical for managing maternal health emergencies, particularly severe anaemia and haemorrhage during pregnancy & post partum. To strengthen blood availability for emergency obstetric care and support the functioning of Blood Storage Units at First Referral Units (FRUs), Raebareli district organized a series of voluntary blood donation camps at CHC FRUs in Bachrawan, Lalganj, and Unchahar. The initiative was led by **Dr. Naveen Chandra, Chief Medical Officer (CMO), Raebareli, with guidance from Dr. Pushpendra, CMS (Male District Hospital), and Dr. Sharad Kushwaha, ACMO-RCH,** and support from the District TSU team.

The camps witnessed enthusiastic participation from healthcare workers, community members, and voluntary donors. The initiative serves as an excellent example of proactive planning, interdepartmental coordination, and community participation, strengthening health systems and improving preparedness for maternal emergencies.

Blood Donation Camps Organised in Raebareli District

S. No.	CHC/Facility	Date of Blood Donation Camp	Blood Units Collected
1	CHC Lalganj	29 April 2026	8
2	CHC Unchahar	28 April 2026	12
3	CHC Bachhrawan	20 May 2026	9
	Total		**29**

A total of 29 units of blood were collected through blood donation camps organized at CHC Lalganj, CHC Unchahar, and CHC Bachhrawan.

TIMELY CARE SAVES A HIGH-RISK PREGNANCY

Mrs. Atika Bano was identified as a High-Risk Pregnancy (HRP) during a PMSMA session at CHC Unchahar due to a previous history of LSCS. Following counselling by the doctor on the risks associated with attempting a normal delivery after a previous LSCS, she consented to a repeat LSCS. Under the guidance of Dr. Manoj Shukla, MOIC, CHC Unchahar, a multidisciplinary team led by Dr. Vanya (EMOC Specialist), with anaesthesia support from Dr. Lakshmi Narayan and assistance from Staff Nurses Divya and Meera, successfully conducted the procedure, resulting in the safe delivery of a healthy male baby.

During the post-operative period, the mother received a blood transfusion, improving her haemoglobin level from 7.8 g/dl to 9.8 g/dl. The case highlights the importance of timely HRP identification, quality counselling, skilled obstetric care, oral IFA therapy and coordinated teamwork in ensuring safe maternal and newborn outcomes.

"The successful outcome of Mrs. Atika Bano's case is a result of early identification through PMSMA, effective counselling, and the dedicated efforts of the healthcare team at CHC Unchahar. This case reinforces our commitment to strengthening maternal health services and ensuring that no mother is left behind in receiving quality healthcare."

Dr. Naveen Chandra
CMO, Raebareli

District - Bulandshahr

STRENGTHENING MATERNAL CARE THROUGH DAY-WISE ANC

Recognizing the need to improve high-risk pregnancy (HRP) identification and institutional deliveries, CHC Danpur in Bulandshahr introduced a structured, day-wise ANC service delivery model in August 2025 following a gap analysis conducted by the district UP-TSU team. Under the initiative, duty rosters were developed for ASHAs and facility staff to ensure systematic beneficiary mobilization and uninterrupted ANC services. Supported by a Health ATM, pregnant women receive comprehensive ANC care including screening, lab investigations, counselling, treatment, and referral services, while ANMs are regularly mentored by TSU team on HRP identification and management.

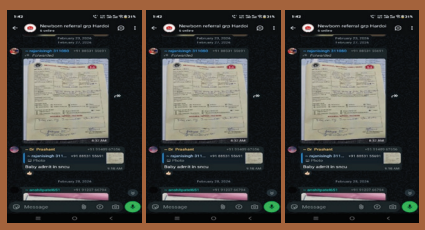
The initiative has strengthened early registration, ANC service utilization, timely identification and referral of high-risk pregnancies, and institutional deliveries in the block. Regular monitoring of beneficiary attendance and performance reviews at block-level meetings have further improved accountability and service delivery. The intervention demonstrates how effective planning, supportive supervision, and coordinated teamwork can strengthen maternal and newborn health services, contributing to safer pregnancies and improved health outcomes.

ANC clinic at CHC Danpur, Bulandshahr

HMIS data		
Indicator	**2024-25**	**2025-26**
New ANC	149	215
ANC in 1st trimester	132	193
4 or more ANC	918	1280
Total ANC footfall	6497	13035
Severe anaemia detected	100	146
Intra partum PPH	16	10
Eclampsia	2	1
Total HRP	98	144
Total deliveries	2119	2320

"एएनसी क्लिनिक शुरू होने के बाद गर्भवती महिलाएँ सीएचसी पर अधिक आने लगी हैं। इससे उनकी सभी जाँचें समय पर हो जाती हैं और डिलीवरी के समय उनके रिकॉर्ड एवं रिपोर्ट आसानी से उपलब्ध रहते हैं। इससे हमें डिलीवरी के समय बेहतर और सुरक्षित सेवाएँ प्रदान करने में सहायता मिलती है।

— Mrs. Manju,
Staff Nurse, CHC Danpur



Senior district officials monitor the group regularly, while senior paediatricians provide continuous feedback.

CASE STUDY:

A new-born with meconium aspiration, seizures, and low oxygen saturation was referred from NBSU Harpalpur to ASMC Hardoi. The referral WhatsApp group enabled real-time tracking, so SNCU staff and the paediatrician were prepared for immediate intervention. Treatment was initiated without delay, and the baby recovered fully, being discharged in stable condition.

"In neonatal emergencies, especially cases involving meconium aspiration and hypoxic seizures, we are fighting against a ticking clock. Previously, patients would arrive unexpectedly at our triage, and we would lose vital minutes setting up specialized equipment or tracking down clinical histories. Now, through this referral network, we monitor the pre-referral management, track the transit, and are ready before the ambulance even pulls in. This network has helped to erased the structural delays that used to cost infant lives."

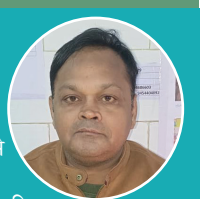
Dr. Ashish Kumar Verma,
Senior Paediatrician at SNCU, ASMC Hardoi

मैने SNCU खलीलाबाद मे आयोजित प्रशिक्षण मे भाग लिया, जिसमे जन्म के समय सांस न आना, नवजात पीलिया, एप्निया एवं अन्य नवजात जटिलताओ के प्रबंधन की जानकारी दी गई। FBNC पोर्टल पर रिपोर्टिंग एव केस आधारित प्रशिक्षण मे मेरी कार्यक्षमता एव आत्मविश्वास मे वृद्धि हुई।

-- **Janki Gupta;** Staff Nurse,
NBSU CHC Semariyawa.

SNCU खलीलाबाद में आयोजित प्रशिक्षण के दौरान हमें नवजात संक्रमण, हाइपोथर्मिया दूध पीने में कठिनाई एवं अन्य जटिलताओं के प्रबंधन का व्यवहारिक प्रशिक्षण प्राप्त हुआ। FBNC पोर्टल एवं हैंड्स-ऑन केस मैनेजमेंट से हमारे ज्ञान एवं कौशल में सुधार हुआ यह प्रशिक्षण हमारे दैनिक कार्य में अत्यंत उपयोगी सिद्ध होगा।

-- Hema Sharma
STAFF NURSE, NBSU CHC Nath Nagar.



NBSU स्टाफ के लिए आयोजित प्रशिक्षण में नवजात जटिलताओं के प्रबंधन, FBNC पोर्टल तथा केस आधारित शिक्षण पर प्रशिक्षण प्रदान किया गया। प्रतिभागियों ने सक्रिय रूप से भाग लिया तथा हैंड्स-ऑन सत्रों के दौरान अच्छी सीखने की क्षमता प्रदर्शित की।

डा० सुनील कुमार (नोडल अधिकारी)
PICU/SNCU/KMC

District - Hardoi

WHATSAPP REFERRAL GROUP BRIDGING THE GAP IN CRITICAL NEONATAL CARE

Timely referral and tracking of sick and high-risk newborns are critical for ensuring access to specialised care, reducing treatment delays, and improving survival outcomes. Under the leadership of Dr. Bhawnath Pandey, CMO Hardoi, and coordinated efforts of Dr. Subodh Kumar, CMS, Autonomous State Medical College (ASMC), Hardoi, with support from the district TSU team, a dedicated WhatsApp-based Newborn Referral Group was established to strengthen referral coordination and continuity of care.

Under this initiative, referral slips for every newborn referred to ASMC, Hardoi are shared in the group, capturing key details such as the cause of referral, newborn condition, pre-referral management, and vaccination status. SNCU staff update arrival status, clinical condition, and follow-up outcomes, enabling real-time tracking of each case until recovery. The initiative has strengthened referral communication, improved preparedness at the receiving facility, and enhanced follow-up of high-risk newborns across the district.

District - Lucknow

A DECADE OF PMSMA IN "SAVING MOTHERS"

On 9 June 2026, Uttar Pradesh joined the nation in celebrating ten years of the Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) under the theme "10 Years of PMSMA: Safer Pregnancies, Healthier Mothers, Stronger India." The milestone highlighted the programme's contribution to strengthening antenatal care and improving early identification and management of high-risk pregnancies. At CHC FRU Bindki, Fatehpur, 444 pregnant women received ANC services between October 2025 and April 2026, of whom 79 (17.7%) were identified as high-risk pregnancies. Sixty women received Iron Sucrose therapy and 16 received blood transfusions, all managed through close coordination between doctors, staff nurses, and community health workers. The impact of PMSMA was also evident across other districts. CHC FRU Kakori, Lucknow, examined 7,467 ANC cases during FY 2025-26, the highest among CHC FRUs in the district, while on the June PMSMA day, 58 women were screened and 17 high-risk pregnancies were identified and managed. Similarly, CHC FRU Salon, Raebareli, ensured comprehensive ANC services for 107 pregnant women through systematic planning and ASHA-led mobilisation, identifying and managing six high-risk pregnancies. These experiences underscore the sustained efforts of facility teams, specialists, frontline workers, and programme managers in advancing the goal of safe motherhood through PMSMA.

"Ten years of PMSMA symbolize ten years of dedicated service and efforts put by our facility team and frontline workers to improve maternal health outcomes and strengthen healthcare delivery. Together, we will continue our efforts to ensure that every pregnancy is safe and every mother receives quality care"
***Dr K.D Mishra,* Dy CMO/MOiC CHC Kakori, Lucknow**

District - Sant Kabir Nagar

HANDS-ON-TRAINING FOR ENHANCING NBSU READINESS

During Virtual NBSU reviews, Child Death Review findings, field observations, and FBNC report analysis, the UP-TSU district team identified gaps in the technical knowledge and confidence of NBSU staff in managing sick newborns. As Observer-ship trainings had not been conducted due to the unavailability of FBNC-trained doctors in the district, the CMO initiated a structured clinical posting and mentoring programme for NBSU Staff Nurses at SNCU, DCH Khalilabad. A total of 11 staff from all five NBSUs were trained in two batches through one-week postings aligned with the Observer-ship training agenda.

Under the mentorship of Dr. Sunil (SNCU Nodal Officer), Dr. Devendra Pratap (Pediatrician), Dr. Adit, and Dr. Naveen, supported by the SNCU nursing team and District UP-TSU team, participants received hands-on clinical exposure in newborn care management and orientation on FBNC portal reporting. The initiative strengthened the clinical skills and confidence of NBSU staff, enhanced their ability to manage neonatal emergencies at sub-district facilities, and improved coordination and referral linkages from block to district.

District - Azamgarh

DRIVE AGAINST ILLEGAL CLINICS ENSURES SAFE HEALTHCARE PRACTICES

To promote safe, ethical, and accountable healthcare services, Azamgarh district has undertaken a sustained enforcement drive against illegally operated hospitals, clinics, nursing homes, diagnostic centres, and unauthorized ultrasound facilities. Under the guidance of DM Azamgarh Shri Ravindra Kumar and CMO Dr. N.R. Verma, the initiative is focused on strengthening regulatory compliance and protect citizens from unsafe medical practices. Joint inspection teams comprising officials from the Health Department, district administration, and police conducted surprise inspections and compliance checks across urban and rural areas, identifying several establishments operating without mandatory registration, qualified personnel, or prescribed clinical standards.

Following the inspections, several unauthorized facilities were sealed and legal action initiated under the provisions of the Clinical Establishment Act and other applicable regulations. Simultaneously, enforcement measures were intensified against illegally operated ultrasound and phototherapy centres led by Dr. Alendra Kumar, Deputy CMO for Private Nursing Homes, and Dr. Umasharan Pandey, ACMO for Ultrasound Centres. These activities have received significant coverage in print and electronic media, helping to raise public awareness about the importance of seeking care only from registered healthcare providers.

The initiative has strengthened interdepartmental coordination between health, administrative, police, and regulatory authorities, resulting in improved oversight of private healthcare institutions and encouraging compliance with mandatory registration norms. The campaign has contributed to building public trust in the healthcare system and demonstrates Azamgarh's commitment to strengthening healthcare governance through sustained regulatory action.

"WHATSAPP-BASED CASE-BASED LEARNING INITIATIVE" RECOGNISED AS A BEST PRACTICE

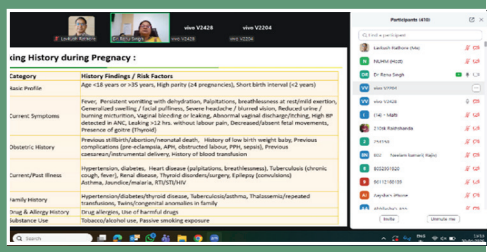
To bridge the gap between theoretical training and real-world counselling, the GoUP, with support of UP-TSU, launched a WhatsApp-based Weekly Case-Based Learning Initiative in October 2025. The initiative covers all 217 RMNCAH counsellors working across District Hospitals and Community Health Centres in the state and uses structured case studies on various aspects of family planning (FP). Responses are submitted through the WhatsApp group, which are reviewed and feedback provided; promoting continuous learning and peer knowledge sharing.

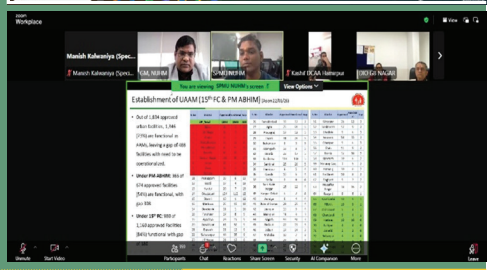
~100 case studies across 20 thematic areas have been developed under the initiative. The programme is aimed at enhancing counsellors' ability to provide client-centred, need-based family planning services.

Recognising its innovative approach and impact on improving counselling quality, the initiative was selected as a Best Practice under the Family Planning Programme by the Government of India. MD-NHM presented the initiative at the 10th National Summit on Good, Replicable Practices and Innovations in Public Healthcare Systems in India, held in Chandigarh on April 30th, 2026.

KEY HIGHLIGHTS OF FAMILY PLANNING INITIATIVES

- MPA-SC administration was initiated across selected geographies from April 1, 2026, marking the official interdiction of the method within the state's family planning programme.
- ~ 1500 clients have chosen MPA-SC since the introduction, as reported through FPLMIS.
- The first state-level review meeting on MPA-SC was convened on May 12, 2026 under the Chairpersonship of the Director, Family Welfare, with over 400 participants joining virtually.
- As of June 10, 2026, more than 1,100 SNs, ANMs, and CHOs across 28/38 intervention blocks have been re-oriented on MPA-SC administration covering both technical and program aspects of MPA-SC.





District - Badaun

NURTURING HEALTHY TWINS AGAINST THE ODDS

Rachna, a resident of Pahadpur village in Badaun district, was identified as a high-risk pregnant woman due to her twin pregnancy. Through regular home visits, the ASHA and ASHA Sangini closely monitored her pregnancy and with support of BoC counselled the family on potential complications and the importance of institutional delivery. A birth preparedness plan was also developed to ensure timely referral and specialised care when labour began.

On March 30, 2026, the plan was put into action when Rachna went into labour. She was promptly referred from CHC Bilsi to the District Hospital, where she safely delivered twins (a baby boy weighing 2.06 kg and a baby girl weighing 1.795 kg). As both newborns were low birth weight and referral to SNCU was not feasible for the family, the ASHA, ASHA Sangini, Anganwadi Worker, and BoC initiated intensive Home-Based Newborn Care visits and counselled the family on Kangaroo Mother Care (KMC), exclusive breastfeeding, warmth, and hygiene.

Over the following weeks, frontline workers continued regular follow-up visits to monitor the twins' growth and support the family. With initial issues but consistent KMC and feeding practices, the baby girl's weight increased from 1.795 kg at birth to 2.6 kg, while the baby boy's weight increased from 2.06 kg to 3.1 kg. Today, both children are healthy and thriving, demonstrating the impact of timely referral, family counselling, and continued community-based newborn care.

VIRTUAL TRAINING TO STRENGTHENING URBAN HEALTH WORKFORCE

To strengthen the capacity of healthcare providers in urban areas, the National Urban Health Mission (NUHM), Uttar Pradesh, launched a series of short & focused virtual training capsules for clinical and managerial cadres across Urban Primary Health Centres (UPHCs) and Urban Ayushman Arogya Mandirs (UAAMs). The initiative addresses gaps in regular training, programme orientation, and continuous capacity building through 45-minute virtual interactive sessions designed for rapid scale-up across the state. Following a letter issued by NUHM-SPMU on 21st Feb, 2026 to all CMOs across state, a total of 22 sessions were planned, of which 15 had been completed as of June 5, 2026.

The initiative is guided by cadre-specific micro-plans that define learning objectives, priority topics, schedules, and assessment mechanisms. Context-specific Learning Resource Materials (LRMs), developed using national and state training modules, support learning on service delivery protocols, programme implementation, digital tools, and community engagement. Key training themes include NUHM orientation, UAAMs and Polyclinics, JAS, MAS, UHIR, CiUHSND, eKavach, neonatal care, childhood and adolescent health, and Essential Public Health Service (EPS) packages.

Facilitated by subject matter experts with support from NUHM and UP-TSU, the sessions promote interactive learning, operational problem-solving, and continuous feedback. Session recordings are being archived in a digital repository for future reference. The initiative has recorded over 11,000 cumulative participations across completed sessions, demonstrating the potential of virtual learning as a scalable approach to strengthening urban health workforce competencies and service readiness across Uttar Pradesh.

District - Unnao

TB SURVIVOR CURED AT THE AAM : NOW LEADS THE COMMUNITY

Kavita, a 28-year-old resident of Taargaon village in Unnao district, had been living with a persistent cough for several weeks and was relying on over-the-counter medicines for relief. During a routine Community-Based Assessment Checklist (CBAC) survey, an ASHA Manisha identified her prolonged cough as a potential symptom of Tuberculosis (TB) and counselled her to visit the nearby Ayushman Arogya Mandir (AAM) for further evaluation.

Following assessment and diagnostic testing by CHO at the AAM, she was diagnosed with TB which initially left her worried about her health and her family's future. However, regular counselling and reassurance from the AAM team helped her understand that TB is curable and that timely treatment could lead to a full recovery. Motivated by this support, she adhered to her treatment, followed medical advice, and completed the six-month treatment course. In April 2026, she was declared TB-free.

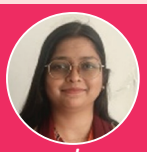
Recognising her determination and recovery, the healthcare team encouraged Kavita to become a TB Champion. Today, she actively promotes awareness on TB, encourages timely testing and treatment adherence, and helps reduce stigma in her community. Her journey highlights the role of Ayushman Arogya Mandirs in ensuring early detection, treatment, and continuum of care for TB patients at the community level and transform a vulnerable patient into a powerful advocate for a TB-free India.

A BAG FULL OF CARE: UNNAO'S INNOVATION STRENGTHENS CiVHNSD SERVICES

To strengthen service delivery during Chhaya Integrated Village Health Nutrition and Sanitation Day (CiVHNSD) sessions, the district administration of Unnao introduced specially designed utility bags for ANMs. The initiative emerged from field observations and review meetings, where challenges related to carrying medicines, logistics, and essential supplies to session sites were identified. Following the direction from DM to address this gap, 468 customized bags were developed and distributed to ANMs across the district under the guidance of MOIC and DIO, with dedicated compartments for medicines, diagnostic supplies, and logistics items.

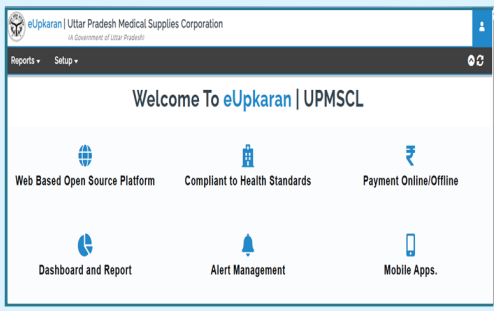
The utility bags have improved organisation, preparedness, and operational efficiency during CiVHNSD sessions by enabling frontline workers to systematically carry and access essential materials. The initiative demonstrates how simple, context-specific solutions can strengthen last-mile service delivery and support better health services at the community level.

Poshan Pathshala session addressed by Smt. Leena Johri, ACS, WCD, GoUP



I have been working as a Mukhya Sevika in Sector Morhun, Prayagraj, for the past 9 months. The 30-day training programme organised by the ICDS Department was highly enriching and provided practical learning on key areas such as nutrition, ECCE, growth monitoring, Poshan Tracker, record management, and supportive supervision. The training strengthened my confidence and enhanced my understanding of my roles and responsibilities, enabling me to better guide and support Anganwadi Workers in improving service delivery"

–Kirti Pandey, Mukhya Sevika, Sector Morhun, Soraon, Prayagraj



"The Inter Warehouse Transfer Tool has transformed the way we plan stock redistribution. What previously took several days of manual analysis can now be completed within minutes, enabling faster, data-driven decisions and more efficient utilization of available medicines across warehouses."

–Dr Srikant Mishra
Manager - Supply Chain, UPMSCL

"This training was conducted after a long time and was much needed for warehouse staff. The sessions on DVDMS and Excel have helped us save time in report preparation, analyze data more effectively, and perform our daily work with greater ease and confidence."

Mr. Prashant Shukla
Pharmacist, District drug warehouse, Raebareli

STRENGTHENING NUTRITION SERVICES THROUGH CAPACITY BUILDING OF ICDS CADRES

The Department of ICDS, with end-to-end technical support from UP-TSU and other development partners, conducted a series of capacity-building initiatives during April–June 2026 for ICDS cadres, including District Programme Officers (DPOs), Child Development Project Officers (CDPOs), Mukhya Sevikas (MSs), and Anganwadi Workers (AWWs). Through classroom trainings and virtual orientations, the initiative aimed to enhance the knowledge, skills, and competencies, thereby strengthening ICDS service delivery across the state.

Certificate distribution to Mukhya Sevikas by Smt. Asha Singh, DD ICDS, upon completion of the training

Highlights of Capacity Building Initiatives (April-June 2026)

- **DPO-CDPO Leadership Training** (172 participants trained across 5 batches)
- **Mukhya Sevika Training** (287 participants trained across 4 batches)
- **Webcast on Proper Nutrition & Early Care for Overall Child Development** (108,556 views on youtube)
- **Virtual orientation of DPOs and CDPOs on New THR recipes** (650 participants oriented)

Source: Training attendance reports, Zoom and YouTube records

eUPKARAN STREAMLINES MEDICAL EQUIPMENT TRACKING

Following a Government Order dated 3rd December, 2025, the Equipment Maintenance and Management System (eUpkaran), a centralized digital platform was rolled-out for monitoring & management of medical equipment across state. Developed under the guidance of the Director General of Medical Health, the platform enables procurement tracking, inventory management, complaint resolution, calibration, real-time monitoring and app-based complaint registration. Facility IDs have been created across health facilities to support state-wide implementation and strengthen visibility across the equipment lifecycle.

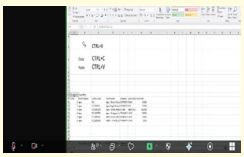
To operationalise the platform, nodal officers were trained through a Training of Trainers (ToT) approach, followed by district-wide capacity-building of CMOs, CMSs, MOICs, facility nodals, and support staff. The system has strengthened transparency and accountability in equipment management, improved maintenance tracking, and supported timely availability of functional medical equipment across public health facilities.

OPTIMISING DRUG REDISTRIBUTION THROUGH INTER-WAREHOUSE TRANSFER TOOL

To strengthen inventory management across UPMSCL warehouses, an Inter-Warehouse Transfer (IWT) Tool has been developed to facilitate data-driven redistribution of drug stocks. The tool analyses real-time stock availability and consumption patterns to identify surplus and deficit stocks across warehouses and generate evidence-based transfer plans.

The tool also incorporates route optimisation to enable efficient stock movement across several deficit warehouses in a single trip, reducing transportation costs and improved operational efficiency. By automating transfer planning, the IWT Tool has improved inventory utilisation and supported the timely availability of drugs across the state.

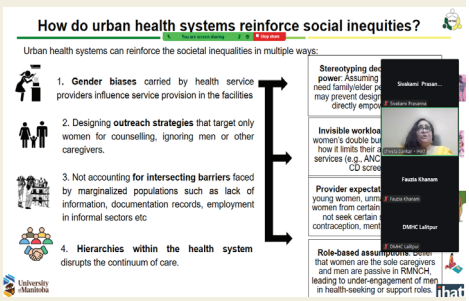
CAPACITY BUILDING OF UPMSCL PHARMACISTS ON DIGITAL MANAGEMENT SKILLS



Under the chairmanship of the MD-UPMSCL, UP-TSU conducted five capacity-building sessions from 20 to 25 May, 2026, for staff from all 75 UPMSCL District Drug Warehouses. The training focused on the enhanced Drug and Vaccine Distribution Management System (DVDMS), including new modules, upgraded functionalities, and reporting features to strengthen inventory management and warehouse operations. During the session, warehouse pharmacists shared the operational challenges faced by them which were documented for consideration in future system enhancements.

Participants were trained on key warehouse processes, DVDMS-based reporting, and the use of Microsoft Excel for data analysis and decision-making. The initiative is expected to strengthen inventory monitoring, transparency, reporting efficiency, and support data-driven management of the drug supply chain across the state's warehouse network.

AI enabled portable hand-held X-ray devices being organized at Ayushman Shivir screening camps in Meerut district



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AI-ENABLED CHEST X-RAY SCREENING STRENGTHENS TB DETECTION

Under Phase 2 of the 100-Day TB Mukt Bharat Abhiyaan, launched on March 24, 2026, UP is scaling up TB screening among vulnerable populations across nearly 26,000 high-risk villages. As part of the campaign, all TB vulnerable adults in identified villages are being screened using AI-enabled Handheld Chest X-ray (HHX) devices, enabling early identification of potential TB cases among both symptomatic and asymptomatic individuals.

To support implementation, IHAT, along with partner organisations, is assisting the state in integrating the Central TB Division-endorsed Institute of Plasma Research (IPR) Deep CXR AI into handheld and standalone digital X-ray machines across public health facilities. The team has also developed Standard Operating Procedures and instructional videos to facilitate seamless integration. As of May 31, 2026, AI integration had been completed in 390 out of 692 eligible HHX and standalone digital X-ray machines, with integration of the remaining machines underway.

VIRTUAL SESSION SENSITIZES URBAN HEALTH CADRES ON GENDER AND HEALTH EQUITY

In coordination with the Urban PMU, UP-TSU conducted a virtual session on “Social Factors Affecting Women’s Health” for urban primary healthcare cadres on April 16, 2026. More than 340 participants, including Medical Officers, Staff Nurses, and ANMs, attended the session. The training strengthened the participants’ capacity on how social and gender inequalities influence access to healthcare, experiences within the health system, and health outcomes, particularly for women and marginalised communities in urban settings. It also explored the role of intersecting factors such as caste, religion, and class in shaping health inequities. The session equipped health cadres with practical strategies to promote gender-responsive and equitable healthcare planning and service delivery.

FILMS FOR BRINGING NEW "RECIPE- BASED THR" TO LIFE

GoUP with support from the ICDS Department, and UP-TSU has developed four audio - visual films for the launch and implementation of the newly introduced recipe-based Take Home Ration (THR), aligned with the 2023 amendment to the National Food Security Act, 2013. The films focus on (i) introducing the new THR initiative, (ii) orientation of Anganwadi Workers (AWWs) on the new THR, (ii) support AWWs in sensitising parents and caregivers of children and (iv) sensitising pregnant and lactating women about the updated THR.

SYMPOSIUM FOR ACTION ON IMPROVING NEWBORN SURVIVAL

Improvements in Newborn Survival to Achieve the Sustainable Development Goals in Uttar Pradesh" was held on 11th June 2026 at SIHFW, Lucknow, jointly organised by NHM-UP, CFAR, UNICEF, & UP-TSU under the chairmanship of Shri Amit Kumar Ghosh, ACS, MoHFW, GoUP. The event brought together senior government officials, medical experts, and district health functionaries to deliberate on strategies to improve newborn survival outcomes in the state. Key discussions covered timely identification and management of neonatal complications and promoting health-seeking behaviour for small and vulnerable newborns. Expert recommendations centred on 24×7 CEmONC readiness, mandatory CPAP in all delivery rooms, scale-up of Kangaroo Mother Care, and strengthened intrapartum monitoring.

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Uttar Pradesh Technical Support Unit
India Health Action Trust
404, 4th Floor, Ratan Square, 20-A, Vidhan Sabha Marg, Lucknow-226001 Uttar Pradesh
+91 522 4922350, 4931777 / www.ihat.in