



ABSTRACT

Implementation of Non-recurring part of the "Integrated working model to identify, Prevent and set base for treatment for neglected Paediatric disorders - Case of Duchenne Muscular dystrophy" – Recurring cost totaling to Rs.11.67 crore for the initial two years – Sanctioned – Orders - Issued.

HEALTH AND FAMILY WELFARE (EAP II-1) DEPARTMENT

G.O (Ms) No.124

Dated: 04.03.2016
Thiruvalluvar Aandu 2047
Manmatha Massi 21.

Read:

1. Letter of Dr. B.R. Lakshmi, MDCCRC, Coimbatore, dated 06.04.2015.
2. From Member Secretary, State Planning Commission, Chennai-5, letter No. 860/SPC/PC/2015-2, dated: 21.09.2015 addressed to Principal Secretary, Planning Development and Special Initiative and copy marked to the Department.
3. From the State Commissioner for the Differently Aabled, addressed to Principal Secretary, Planning Development and Special Initiative and copy marked to the Government , letter No.RoC.No.4055/OPP/2015, dated 10.09.2015.
4. G.O.(Ms) No.27, Health and Family Welfare (EAPII/1) Department, dated.27.01.2016.

ORDER:

In the reference first read above, Dr. B.R.Lakshmi, Molecular Diagnostics, counseling, care and Research centre, Coimbatore (MDCRC), titled "An integrated working model to identify, prevent and set base for neglected paediatric disorders-care of Duschenne Muscular Dystrophy (DMD)" with 8 components with a total budget of Rs. 20,77,83,041/- for a period of three years. The proposals has been discussed with state commissioner for Differently abled and was sent to the consideration of State Planning Commission.

2. In Government Order.(Ms).No.309, Health and Family Welfare (E2) Department, dated 5.11.2012 ,the Government approved the Molecular Diagnostics, counseling, care and Research centre, Coimbatore as referral centre for Genetic Diagnosis for DMD & SMA disorders. Earlier, in National Health Mission, a pilot project towards Identification and prevention of paediatric disorders-care of Duchenne Muscular Dystropy (DMD) was covered in four Districts of Tamil Nadu in 2011-2012, and in 2013 it was extended to 3 more districts and Government recognized Hospitals in Chennai.

3. The proposal was examined for funding under the Tamil Nadu Innovation Initiation (TAN-II) and the suggestions of Health and Family Welfare and Welfare of Differently Abled Persons Department was sought. The state Commissioner for Differently abled Department has reworked proposal to State Planning Commission as detailed below. He has also suggested that the AYUSH component be separated and may be sent to Government of India as a separate proposal. Accordingly for the 7 components the suggestion have been made as follows:-

Year	Recurring	Non – recurring	Total
(Rupees in crore)			
2015-16	4.68	1.38	6.06
2016-17	6.99	0.71	7.70
2017-18	4.57	0.36	4.93
Total	16.24	2.45	18.69

4. In the Government Order 4th read above a sum of Rs.2.45 crore is sanctioned to carry out the activities of non recurring components under Tamil Nadu Innovation Initiatives (TAN II) for the year 2015 –2018.

5. The Mission Director, National Health Mission informed that the recurring cost has not been approved by Government of India under Program Implementation of Plan for the year 2015-2016 and hence the state funds was sought for implementation of the same.

6. The Government examined the proposal carefully and decided to accept it, accordingly, the Government issue the following orders:

- i. Based on the Pilots carried out in 7 districts the government approve the implementation of the project “An integrated working model to identify, prevent and set base for neglected paediatric disorders – care of Duchenne Muscular Dystrophy (DMD)”Project . The recurring component of the project be implemented at a total recurring cost of Rs.11.67 crore (Rupees eleven crore sixty seven lakh only) for the initial two years 2015-2016 and 2016-2017 (the recurring cost of Rs.4.68 crore and Rs.6.99 crore for the first and second year respectively from the state funds for implementing the above project).
- ii. The Mission Director, National Rural Health Mission is permitted to enter into Memorandum of Understanding (MoU) with Molecular Diagnostics, Counseling, Care and Research Centre, Coimbatore to monitor and periodically review the implementation of the above project and send periodical reports to Government.
- iii. The Mission Director, National Rural Health Mission is directed to take up the proposal with National Health Mission for funding the recurring cost of Rs.4.57 crore for the third year project.

7. The amount sanctioned in para 6(i) above shall be debited to the following new Head of Account opened under Demand No.19 HOD; 09:-

“2211-00 Family Welfare – 103 – Maternity and Child Health – Schemes in the Twelfth Five Year Plan – II – State Plan – JQ – Care of Duchenne Muscular Dystrophy (DMD) Project” – 09 – Grants-in-aid – 03 – Grants for specific schemes (DPC;2211-00-103-JQ-0931)”

8. The Project Director, Reproductive Child Health Project is the Estimating Reconciling and Controlling Authority for the above new head of account.

9. The Pay and Accounts Officer concerned is requested to open the new head of account in their books.

10. The expenditure sanctioned in para 6(i) above is an item of "New Service" the approval of the Legislature will be obtained in due course. Pending approval of the Legislature, the expenditure may be initially met by drawl of an advance from the contingency fund. The Mission Director, State Health Society is directed to apply for sanction of advance from the contingency fund to Finance (BG-I) Department directly in Form 'A' appended to the Tamil Nadu Contingency Fund Rules 1963 along with a copy of this order. The Mission Director, State Health Society is also requested to send a draft explanatory notes for including the above expenditure in the Revised Budget Estimate 2016-2017/ Supplementary Estimate 2016-2017 to Finance (BG-I/Health-I) Department without fail.

11. This orders issued with the concurrence of Finance Department vide is U.O.No.80/ADS(Dr.PU)/HI/2016, dated:04.03.2016 and ASL No.2580(Two Thousand Five Hundred and Eighty.)

(BY ORDER OF THE GOVERNOR)

**J.RADHAKRISHNAN
PRINCIPAL SECRETARY TO GOVERNMENT**

To

The Member Secretary, State Planning Commissioner, Chepauk,Chennai-6
The Principal Secretary, Planning Development and Special initiative Department, Secretariat, Chennai-
The Mission Director, National Health Mission, Chennai-6/The Project Director,
Reproductive and Child Health Project,Chennai-6.
The Commissioner for Differently Abled, Chennai-78 .
The Commissioner of Indian Medicine &Homeopathy Department, Chennai.106.
The Managing Director, Tamil Nadu Medical Services Corporation, Chennai-8
The Project Director, Tamil Nadu Health SystemProject,Chennai-6.
The Chairman, Medical Services Recruitment Board,Chennai.6.
The Project Director, Tamil Nadu State Aids Control Society, Chennai-8.
The Project Director, Tamil Nadu State Blindness Control Society, Chennai-8.
The Director of Medical Education, Chennai.10.
The Director of Medical and Rural Health Services, Chennai-6.
The Director of Medical and Rural Health Services(ESI), Chennai-6.
The Director of Public Health and Preventive Medicine, Chennai-6.
The Director of Family Welfare Department, Chennai-6
The Director of Drugs Control, Chennai-6.
The Director, State Health Transport,Chennai-32.
The Pay and Accounts Officer(South),Chennai.35.
The Pay and Accounts Officer Concerned.
The Accountant General,Chennai-18.
Dr.B.R.Lakshmi, Kurinji Hospital, 522/3, Udayampalayam Road, Sowripalayam Post, Coimbatore-28.

Copy to:-

The Finance (Health-II) Department,Chennai-9,
The Planning Development and Special initiative Department, Chennai-9
Welfare of the Differently Abled Department, Chennai-9.
The Health and Family Welfare (Data Cell) Department,Chennai-9
SF/SCs.

//Forwarded by Order//

Section Officer.

ANNEXURE-I

(G.O.(Ms) No.124, H& FW (EAP II-1) Department, Dated: 04.03.2016)

Sl. No.	Project Title	Recurring (2015-2016)
		(Rs)
1.	Reach 1- Training and quick confirmation of DMD from existing MD cases.	53,01,940
2.	Molecular Diagnostics – Identification (confirmation of clinical diagnosis)	2,16,78,111
3.	Prevention through carrier analysis and Genetic Counseling	1,59,86,265
4.	Reach 2 – IEC Activities	0
5.	Improve quality of life of children with DMD through Multidisciplinary Clinical Care and its integration into the Health Systems	4,54,986
6.	Model rehabilitation initiative for children with Duchenne muscular dystrophy.	26,80,914
7.	State wide registry for Duchenne Muscular Dystrophy.	6,65,025
	Total	4,67,67,241

J. RADHAKRISHNAN
PRINCIPAL SECRETARY TO GOVERNMENT

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SECTION OFFICER

ANNEXURE- II

G.O.(Ms) No.124, H&FW Department, (EAP-I) Dated: 04.03.2016

Sl. No.	Project Title	Recurring (2016-2017) (Rs)
1.	Reach 1- Training and quick confirmation of DMD from existing MD cases.	64,27,305
2.	Molecular Diagnostics – Identification (confirmation of clinical diagnosis)	2,33,65,487
3.	Prevention through carrier analysis and Genetic Counseling	1,68,39,900
4.	Reach 2 – IEC Activities	1,67,17,050
5.	Improve quality of life of children with DMD through Multidisciplinary Clinical Care and its integration into the Health Systems	49,88,423
6.	Model rehabilitation initiative for children with Duchenne muscular dystrophy.	0
7.	State wide registry for Duchenne Muscular Dystrophy.	16,01,518
	Total	6,99,39,683

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PRINCIPAL SECRETARY TO GOVERNMENT

//True Copy//

SECTION OFFICER