

### **ABSTRACT**

National Health Mission - Tamil Nadu - Implementation of "Makkalai Thedi Maruthuvam" Scheme in Tamil Nadu - Orders - Issued.

### Health and Family Welfare (EAPII-1) Department

G.O (Ms) No. 340

Dated: 03.08.2021 Pilava, Aadi – 18

Thiruvalluvar Aandu 2052

Read:

From the Mission Director, National Health Mission letter R.C. No. 7522/NCD/P14/2021 Dated 02.08.2021.

#### ORDER:

During the Departmental review held on 02.07.2021, the Hon'ble Chief Minister of Tamil Nadu had issued directives to tackle the Non-Communicable Disease (NCD) burden in the State and to ensure that health care services are delivered directly at the door step of beneficiaries. In order to achieve the directives of the Hon'ble Chief Minister, the Department of Health and Family Welfare of the Government of Tamil Nadu has planned to launch a scheme namely "Makkalai Thedi Maruthuvam" which will focus on community based interventions to improve compliance and disease control in the State.

- 2. Now, the Mission Director, National Health Mission in his letter read above has stated that, the CoVID-19 pandemic has exposed the frailties of institutional based care delivery as access to drugs, dialysis facilities, palliative care, geriatric services etc., were compromised during the lockdown resulting in increased morbidity and mortality due to non-CoVID-19 reasons across Tamil Nadu. There is a felt need to strengthen the responsiveness of the State's health system by providing holistic home-based health care services addressing the health needs of all members in a household. Consequently, "Makkalai Thedi Maruthuvam" would offer a comprehensive set of health care services to ensure continuum of care, sustainability of services and will take health service delivery to the door steps of the family. An important feature of the scheme is that every line-listed beneficiary under the scheme will be brought under the Population Health Registry (PHR) which will form the common denominator to ensure continuous monitoring and follow up of patients. Further, he has stated that, the need for such a scheme is particularly significant as Tamil Nadu is yet to reach its Sustainable Development Goal (SDG) of reducing premature mortality from Non-Communicable Diseases (NCDs) through prevention and treatment by one-third by 2030, despite remarkable progress in other areas such as Maternal and Child Health and Trauma.
- 3. The Mission Director, National Health Mission has also stated that, the STEPS Survey conducted by the Tamil Nadu Health System Reform Program (TNHSRP) in 2020 indicated very low community control rates for Hypertension (7.3%) and Diabetes (10.8%) among the patients put on treatment.

The home-based drug delivery component of the Makkalai Thedi Maruthuvam scheme is specifically developed to address this issue by focusing on optimal detection, treatment and follow up to achieve better compliance and control rates for Non-Communicable Diseases across the entire State. A field team including Women Health Volunteers (WHVs) under the Tamil Nadu Corporation for Development of Women (TNCDW). existing . ASHAs tribal Mid-Level Health Providers, Village Health Nurses, Health Inspectors, Palliative Care Staff Nurses and Physiotherapists with the monitoring support of other public health field staff will be deployed to provide home-based health care services. The basket of services will be further expanded based on the needs of the community. He has also stated that the comprehensive range of health care services to be delivered right at the doorstep of households in the community would include the following:-

- Along with the Population Based Screening (PBS) Program for those aged 18 years and above covering 10 common conditions (Hypertension, Diabetes, Oral Cancer, Cervical Cancer, Breast Cancer, TB, Leprosy, Chronic Kidney Diseases, COPD and Mental Health), the Women Health Volunteers will also deliver Hypertension / Diabetes drugs to registered patients aged 45 years and above and also to those with restricted or poor mobility. The Women Health Volunteers will also provide other essential services like motivating women for cancer screening, referrals for AN care and immunization, identification of any congenital problems and information on tele-consultation.
  - ➤ Home-based Palliative care services by Community-based Palliative cum Geriatric Care Staff Nurse for patients with chronic debilitating illness who have difficulty in visiting health facilities.
  - > Home-based Physiotherapy services by Physiotherapists for elderly, home-bound patients and those with restricted mobility.
- ➤ Home-based outreach service by delivering peritoneal Dialysis bags to patients under CAPD (Continuous Ambulatory Peritoneal Dialysis) by the Palliative Care Staff Nurse who will also guide and monitor the home-based Dialysis therapy. The beneficiaries of CAPD under the scheme will be covered under the Chief Minister's Comprehensive Health Insurance Scheme (CMCHIS). The Tamil Nadu Health Systems Reform Program (TNHSRP) would monitor the coverage at the State level and the District Project Officer of the Chief Minister's Comprehensive Health Insurance Scheme would coordinate it at the District level.

He has also stated that the proposed scheme would have the following salient features:-

- A mobile outreach vehicle to be hired with branding as per prescribed norms from National Health Mission - Tamil Nadu for the use of the Block level team consisting of Palliative Care Staff Nurse and Physiotherapist.
- ii. Mobility support for hiring a vehicle to transport drugs from PHC to HSC level from where the WHVs can take them in a branded bag for distribution to enrolled households.

- iii. One time provision of a branded drug box for each patient enlisted, for the home delivery of Hypertension and Diabetes drugs.
- 4. The Mission Director, National Health Mission has added that the first phase of this flagship "Makkalai Thedi Maruthuvam" scheme will cover 1172 Health Sub Centres, 189 Primary Health Centres and 50 Community Health Centres in 50 Universal Health Coverage Blocks across the State. In addition, this scheme will also be implemented in one Zone in three Corporations (Tirunelveli, Coimbatore and Greater Chennai Corporation) covering 106 Sectors and 21 Urban Primary Health Centres. The scheme will further be up-scaled to cover the entire State by the end of 2021.
- 5. The Mission Director, National Health Mission has also stated that, beside the current expenditure for the Non-Communicable Diseases (NCD) Program in the State, this scheme is expected to be implemented at a tentative annual cost of Rs.257,15,78,350/- (Two Hundred and Fifty-Seven Crores, Fifteen Lakhs Seventy-Eight Thousand, Three Hundred and Fifty Rupees only) covering both Rural and Urban areas including the cost for Human Resources. The financial and logistical needs of the scheme are proposed to be currently met out by utilizing the funds approved for the respective programs under National Health Mission - Tamil Nadu with additional support from the Tamil Nadu Health System Reforms Program (TNHSRP). This scheme envisages the coordinated delivery of services including an effective referral mechanism between the Directorate of Public Health and Preventive Medicine, the Directorate of Medical and Rural Health Services and the Directorate of Medical Education to ensure continuum of care and continual follow up of services across the different levels of health care institutions in the Districts. He has also requested to authorize the Directorate of Public Health and Preventive Medicine to implement the program through the State's Primary Health Care System and to monitor the scheme through the State Non-Communicable Diseases (NCD) Cell at National Health Mission - Tamil Nadu.
- 6. The Mission Director, National Health Mission has stated that, the Executive Sub-committee has approved the implementation of the "Makkalai Thedi Maruthuvam" scheme in the Circulation Note.13 / 2021 of National Health Mission, Tamil Nadu and has requested the Government to issue necessary orders in this regard.
- 7. The Government after careful examination has decided to accept the above proposal from the Mission Director, National Health Mission and to issue orders accordingly on the following:-
  - I. The Mission Director, National Health Mission is permitted to implement the "Makkalai Thedi Maruthuvam" scheme through the Directorate of Public Health and Preventive Medicine in coordination with the Directorate of Medical and Rural Health Services and the Directorate of Medical Education as per the roles assigned in the annexure I to this order.
  - II. The Mission Director, National Health Mission is permitted to implement the CAPD component of the scheme such that the provision of peritoneal dialysis bags is supported by the Chief Minister's Comprehensive Health Insurance Scheme with respective Nodal Officers as mentioned in the annexure II to this order.

- III. The Mission Director, National Health Mission is permitted to re-appropriate and utilize the National Health Mission scheme funds approved by Government of India in RoP 2021-22 and funds released by Tamil Nadu Health System Reform Program to National Health Mission Tamil Nadu as detailed in the annexure III to this order.
- 8. This order issues with the concurrence of the Finance Department vide its No.2524/FS/P/2021, dated: 03.08.2021.

### (BY ORDER OF THE GOVERNOR)

### J. RADHAKRISHNAN PRINCIPAL SECRETARY TO GOVERNMENT

To

The Mission Director, National Health Mission, Chennai-6

The Project Director, Tamil Nadu Health System Reform Program, Chennai-6

The Director of Medical and Rural Health Services, Chennai-6

The Director of Medical Education, Chennai-10

The Director of Public Health and Preventive Medicine, Chennai-6

The Accountant General, Chennai-18.

The Pay and Accounts Officer, concerned.

The District Treasury Officer concerned.

Copy to:

The Special Personal Assistant to Hon'ble Chief Minister, Chennai-9.

The Special Personal Assistant to Hon'ble Minister (Medical and Family Welfare

Department), Chennai-9

The Finance (Health-I) Department. Chennai-9

The Health and Family Welfare (Data cell) Department, Chennai-9.

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//Forwarded by Order//

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03/08/2021

### Annexure I

# G.O(Ms)No.340, Health and Family Welfare (EAP II-1) Department, dated: 03.08.2021

# A. Roles and Responsibilities of the Directorate of Public Health and Preventive Medicine

The Directorate of Public Health and Preventive Medicine is authorized to implement the program through the State's Primary Health Care System and to monitor the scheme through the State Non-Communicable Diseases (NCD) Cell at the office of National Health Mission- Tamil Nadu. At the District level, the scheme shall be monitored by the Deputy Director of Health Services by using the services of the following existing staff in coordination with Joint Director of Health Services and Dean of the respective Districts.

SI. No	Directorate of Public Health and Preventive Medicine Staff involved the implementation of the "Makkalai Thedi Maruthuvam" Scheme				
1	District Level				
2	Corporation/Municipality Level				
3	Block Level  Block Medical Officer  NCD Staff Nurse Pharmacist Physiotherapist Palliative care Staff Nurse Community Health Nurse (CHN) Health Inspectors Public Health Managers at Zone Level				
4	PHC Level /UPHC Level				
5	<ul> <li>HSC Level / Sector Level</li> <li>Village Health Nurse (VHN)/ Urban Health Nurse (UHN)</li> <li>Mid-Level Health Provider (MLHP)</li> <li>Women Health Volunteer (WHV)</li> </ul>				

# B. Roles and Responsibilities of the Directorate of Medical and Rural Health Services and Directorate of Medical Education Institutions

The concerned institutions would adhere to the following roles and responsibilities:

- The Directorate of Medical and Rural Health Services and the Directorate of Medical Education should designate a Nodal Officer for implementing the "Makalai Thedi Maruthuvam" scheme who will monitor the scheme and its linkages with existing NPCDCS, NPPC, NPHCE and Dialysis Programs. Further, the Nodal Officer will co-ordinate with the institution level teams representing NPCDCS, NPPC, NPHCE and Dialysis Programs and also liaison with other directorates for referral, treatment and follow up of patients. The Nodal Officer should focus on decentralizing the line-listed patients by facilitating the services under the scheme at their own residence as per the criteria set under MTM.
- The registered line-listed HT/DM patients eligible for home-based delivery of drugs will be linked to the irrespective PHCs/UPHC/ UCHC and brought under the Population Health Registry (PHR) maintained at PHC / UPHC / UCHC level so that the field team catering to the Corporation Zone / Municipality will take them up as beneficiaries requiring home-based services. Similarly, eligible Hypertension/ Diabetes patients getting discharged from different departments (Gen. Med, Diabetology, Endocrinology, Gen. Surgery, O&G etc.) in institutions can be linked to home-based services for drug delivery and follow up by notifying the respective PHCs/UPHC/UCHC.
- While referring eligible in-patients for community-based home delivery for Palliative / Physiotherapy services, the line-list of cases is to be notified to the respective PHCs/UPHC/UCHC.

J.RADHAKRISHNAN
PRINCIPAL SECRETARY TO GOVERNMENT

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### Annexure II

## G.O(Ms)No.340, Health and Family Welfare (EAP II-1) Department, dated: 03.08.2021

# Strategy for the provision of Continuous Ambulatory Peritoneal Dialysis services by integrating Primary, Secondary and Tertiary care institutions:

Diabetes and Hypertension contribute to long term complications of which chronic kidney diseases (CKDs)/ End Stage Renal Disease (ESRD) are highly serious. Once a patient reaches ESRD, the individual is left with only two options of which one is to proceed with a renal transplant either from a living donor / cadaver and the other option is Renal Replacement Therapy (RRT) in the form of Hemodialysis (HD) or Continuous Ambulatory Peritoneal Dialysis (CAPD). Currently, in Tamil Nadu, Hemodialysis (HD) services are provided at District and sub-district level hospitals. Cost analysis of dialysis process includes infrastructure, hardware like dialysis machine, water requirement with reverse osmosis facility, medical and non-medical personnel, hospitalization, complication management, access issues for patients, maintenance, consumables, drugs, diagnostic tests, transportation, social costs like loss of wages for the patient and their caregiver and waste disposal as per Biomedical Waste Management Norms. A viable and important alternative for HD is Continuous Ambulatory Peritoneal Dialysis (CAPD).

Under the "Makkalai Thedi Maruthuvam" scheme, CAPD support services shall be provided at the doorstep following a Hub and Spoke Model, where the Medical College Hospital / District Headquarter Hospital shall be the Hub and the Block Primary Health Centres will serve as the Spoke. The beneficiaries of CAPD under the scheme will be covered under the Chief Minister's Comprehensive Health Insurance Scheme (CMCHIS). The Tamil Nadu Health Systems Reform Program (TNHSRP) would monitor the coverage at the State level and the District Project Officer of CMCHIS under Tamil Nadu Health Systems Project would coordinate it at the District level.

The following are the components of the CAPD services that shall be provided under the MTM scheme:

- Supply of the CAPD Bags by the Palliative Care Staff Nurse who is part of the Mobile Outreach Team.
- The Palliative Nurse shall educate the beneficiary, monitor their self-care, and also examine the patient for any signs of infections like peritonitis and may refer them to Secondary / Tertiary institutions for further evaluation and management as and when needed.
- Under this scheme it will be ensured that the Home-Based outreach services may be provided by the field team irrespective of the beneficiary's coverage under the CMCHIS.
- The Mission Director in coordination with the State Nodal Officer Renal Health, and State Nodal Officer – Peritoneal Dialysis (CAPD) shall develop the guidelines for rolling out the program under this scheme.

At State level, the Nodal officer for the CAPD component of the scheme will be the State Nodal Officer - CAPD. The Nodal officer at District Level would be an identified Nephrologist or a Physician and the District Project Officer, Chief Minister's Comprehensive Health Insurance Scheme is in charge of the logistics part of the program.

### J. RADHAKRISHNAN PRINCIPAL SECRETARY TO GOVERNMENT

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# Annexure III G.O(Ms)No.340, Health and Family Welfare (EAP II-1) Department, dated: 03.08.2021

I. The tentative fund requirement for the implementation of proposed 'Makkalai Thedi Maruthuvam' scheme in Rural areas for the period of One Year are as follows: -

SL No	Subject	Unit Cost	Quantity	Amount (Rs)	Fund Source
1	NCD Drugs- Additional Amount for UHC block	Rs.45000/- Per HSC	8713	39,20,85,000	NHM/TNHSRP
2	Incentive		× 100 × 100		
`	WHVs (performance based)	Rs.5500/- Per month	8713	57,50,58,000	NHM/TNHSRP
	NPPC SNs	Rs.6500/- Per month	385	3,00,30,000	NHM
	Physiotherapist	Rs.4500/- Per month	385	2,07,90,000	NHM
3	Transparent Drug Box with Sticker, Printing Cards, Paper Cover, Bag for WHV & Stickers for MTM branded vehicle	Rs.23850/- Per HSC*	8713	20,78,05,050	NHM/TNHSRP
4	Transportation Cost: Hiring MTM branded Vehicle	Rs.30,000/- Per Month / Block	385	13,86,00,000	NHM/TNHSRP
	Stickers for MTM branded vehicle	Rs.8000/- Per vehicle	385	30,80,000	NHM/TNHSRP
5	Drug Transportation Cost:				
	a) Plains & Hilly area / Tribal area / Difficult to reach areas	Rs.250/- or 350/- Per Month / HSC	8713	2,61,39,000	NHM/TNHSRP

SI. No	Subject	Unit Cost	Quantity	Amount (Rs)	Fund Source
6	Contingency and other		1803	1,09,40,000	NHM/TNHSRP
	a) Block PHC	Rs.10000/- Per Block	385	38,50,000	NHM/TNHSRP
	b) Additional PHC	Rs.5000/- Per PHC	1418	70,90,000	NHM/TNHSRP
7	Salary Cost				
	NCD Staff Nurses	Rs.14,000/- Per Month	2432	40,85,76,000	NHM
	NPPC SNs	Rs.14,000/- Per Month	385	6,46,80,000	NHM
	Physiotherapist	Rs.10,000/- Per Month	385	4,62,00,000	NHM
8	CAPD				
	CAPD bags, consumables & equipment			2,20,28,000	NHM/TNHSP/ CMCHIS
	Total			195,69,51,050	

II. The tentative fund requirement for the implementation of proposed 'Makkalai Thedi Maruthuvam' scheme in Urban areas for the period of One Year are as follows: -

	Fund requirement for Urban Areas				
SI. No	Subject	Unit Cost	Quantity	Amount Sanctioned for year	Fund Source
1	NCD Drugs- Additional Amount For UPHC sector	Rs.50000/- Per Sector	2373	11,86,50,000	State NHM Drug Budget/ TNHSRP
2	Incentives				P
	For WHVs excluding already sanctioned in ROP	Rs.3500/- Per Month	1038	4,35,96,000	NHM/TNHSRP
	For additional Incentive for WHVs	Rs. 2000/- Per Month	2373	5,69,52,000	NHM/TNHSRP
	For Palliative Staff Nurse (Incentive)	Rs.250/-per day/ 26 days Per Month	143	1,11,54,000	NHM/TNHSRP

	For Physiotherapist on Hiring basis	Rs.500/-per day/26 days Per Month	143	2,23,08,000	NHM/TNHSRP
3	Transparent Drug	Rs.100100/- Per WHV	2373	23,75,37,300	NHM/TNHSRP
4	Transportation Cost: Hiring charges for One MTM branded yehicle	Rs.30,000/- Per Month	143	5,14,80,000	NHM/TNHSRP
5	Contingency and Other to UPHC	Rs.5000/- Per UPHC	400	20,00,000	NHM/TNHSRP
6	Contingency and Other to UCHC	Rs.10000/- Per UCHC	39	3,90,000	NHM/TNHSRP
7	NCD Staff Nurses	Rs.14,000/- Per Month	420	7,05,60,000	NHM
		Total		61,46,27,300	

Total cost: Rural (195,69,51,050)+Urban (61,46,27,300) = Rs.257,15,78,350/- (Two Hundred and Fifty-Seven Crores, Fifteen Lakhs Seventy-Eight Thousand, Three Hundred and Fifty Rupees only).

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