मुख्यमंत्री निःशुल्क जाँच योजना चिकित्सा एवं स्वास्थ्य विभाग, स्वास्थ्य भवन, तिलक मार्ग, सी–स्कीम, जयपुर

क्रमांक : 278

दिनांक : 24 - 1 - 2013

आदेश

राज्य सरकार द्वारा ''मुख्यमंत्री निःशुल्क जाँच योजना'' के अन्तर्गत राजकीय चिकित्सा संस्थानों में आने वाले सभी रोगियों को आवश्यक सामान्य जाँचें निःशुल्क उपलब्ध करवाने का निर्णय लिया गया है। यह योजना तीन चरणो में लागू की जायेगी । प्रथम चरण में, आगामी विश्व स्वास्थ्य दिवस के अवसर पर दिनांक 7 अप्रैल, 2013 से योजना राज्य के सभी मेडिकल कॉलेज, जिला चिकित्सालयों, उप–जिला चिकित्सालयों एवं सेटेलाइट चिकित्सालयों में शुरू की जायेगी, वहां पर संलग्न सूची अनुसार क्रमशः 57 व 44 जाँचे उपलब्ध कराई जाएगी। द्वितीय चरण में 1 जुलाई 2013 से सामुदायिक स्वास्थ्य केन्द्रों पर 28 जाँचे उपलब्ध कराई जाएगी । तृतीय चरण में 15 अगस्त 2013 से प्राथमिक स्वास्थ्य केन्द्रों एवं डिस्पेसंरीज पर 15 प्रकार की जांचें आमजन को निःशुल्क उपलब्ध करवाई जाएगी ।

प्रथम चरण का क्रियान्वयन अस्पताल स्तर पर गठित आरएमआरएस के माध्यम से किया जाना है। इस हेतु मेडिकल कॉलेज अस्पताल एंव उनसे संबंधित चिकित्सालयों हेतु संभागीय आयुक्त, जिला चिकित्सालय, उप—जिला चिकित्सालय एवं सेटेलाइट चिकित्सालयों पर जिला कलेक्टर की अध्यक्षता में आरएमआरएस की बैठक आयोजित कर योजना के प्रभावी क्रियान्वयन से सम्बन्धित सभी आवश्यक तैयारियाँ की जानी है। योजना को लागू करने हेतु सिविल निर्माण कार्य, मानव संसाधन, उपकरणों की मरम्मत, लैब रिएजेन्ट्स आदि की आवश्यकताओं का आंकलन कर इसकी आपूर्ति सुनिश्चित करने की व्यवस्था की जानी है, जिससे आगामी 7 अप्रैल से यह योजना लागू की जा सके। मेडिकल कॉलेज अस्पतालों में अधिक कार्यभार को देखते हुए जाँच सेवायें आउटसोर्स (Outsource) भी की जा सकती है । मेडिकल कॉलेज चिकित्सालयों एंव जिला चिकित्सालय, उप—जिला चिकित्सालय एवं सेटेलाइट चिकित्सालयों में सोनोग्राफी (Ultra Sonography) सेवायें भी आउटसोर्स (Outsource) की जा सकती है । आरएमआरएस द्वारा जाँच योजना पर व्यय की गई राशि का पुनर्भरण राज्य सरकार द्वारा किया जाएगा। प्रथम चरण हेतु वित विभाग द्वारा जएगी ।

द्वितीय एवं तृतीय चरण के कियान्वयन के समय आर.एम.एस.सी. द्वारा चिकित्सालयों द्वारा मांगे गये जाँच उपकरण व लैब रिऐजेन्ट्स उपलब्ध कराये जाएगें। उपकरणो का रख –रखाव (maintenance) व मरम्मत (repair) भी आर.एम.एस.सी. के Equipment Maintenance and Repair Cell (EMRC) के माध्यम से किया जायेगा। लैब्स हेतु टैक्नीशियन, लैब सहायक, रेडियोग्राफर एंव सूचना सहायक आदि कार्मिको की स्थायी भर्ती भी चिकित्सा एवं स्वास्थ्य विभाग द्वारा की जा रही है।

योजना की कियान्वती हेतु विभागाध्यक्ष– पेथोलॉजी, माइक्रोबायोलॉजी, बायोकेमिस्ट्री, रेडियोलॉजी एवं मेडिसन (मेडिकल कॉलेज), एक्स.ई.एन एनआरएचएम/पी.डब्लू.डी एवं पैथोलोजिस्ट/लेब इन्चार्ज (जिला चिकित्सालय) तकनीकी परामर्श व सहयोग प्रदान करेगें।

योजना के प्रभावी क़ियान्वयन हेतु राज्य स्तर पर एक निगरानी समिति गठित की गई है, जिसमें प्रमुख सचिव चिकित्सा शिक्षा, प्रमुख सचिव चिकित्सा स्वास्थ्य, प्रबंध निदेशक आर.एम.एस.सी., निदेशक जन स्वास्थ्य, अतिरिक्त निदेशक (प्रशासन) एवं प्रधानाचार्य व नियन्त्रक एसएमएस मेडिकल कॉलेज सम्मिलित है।

मेडिकल कॉलेज अस्पतालों की मॉनीटरिंग संभागीय आयुक्त द्वारा एवं जिला अस्पतालों व जिले में स्थित अन्य अस्पतालों की मॉनीटरिंग जिला कलेक्टर द्वारा की जायेगी। अतः सभी सम्भागीय आयुक्तों एवं जिला कलेक्टरों से अपेक्षा की जाती है कि वे अपने स्तर पर बैठकें आयोजित कर योजना की सफल क्रियान्विति सुनिश्चित करे।

मुख्य संचिव राजस्थान सरकार

प्रतिलिपि निम्नलिखित को सूचनार्थ एवं आवश्यक कार्यवाही हेतू प्रेषित है-

- 1. निजी सचिव, माननीय मुख्यमंत्री महोदय राजस्थान सरकार ।
- 2. निजी सचिव, माननीय मंत्री महोदय चिकित्सा एवं स्वास्थ्य विभाग राजस्थान सरकार।

ולא האינטיבן ידן עד נכילו ל ו גרייוי בדילה נהה עלה מתויק גע צוב וו על אלו הי איני איני איני

- 3. निजी सचिव, प्रमुख शासन सचिव, चिकित्सा शिक्षा विभाग
- 4. निजी सचिव, प्रमुख शासन सचिव, चिकित्सा एवं स्वास्थ्य विभाग
- 5. मिशन निदेशक, एनआरएचएम
- 6. प्रबंध निदेशक, आरएमएससी
- 7. समस्त निदेशक चिकित्सा एवं स्वास्थ्य सेवायें, जयपुर
- 8. समस्त संयुक्त निदेशक, चिकित्सा एवं स्वास्थ्य सेवायें, राजस्थान
- 9. समस्त मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी
- 10. समस्त प्रमुख चिकित्सा अधिकारी
- 11. आदेश पत्रावली।

प्रमुख शासैने सचिव चिकित्सा एवं स्वास्थ्य विभाग

Rajasthan Medical Services Corporation (Deptt. Of Medical & Health)

Swasthaya Bhawan, C-Scheme, Jaipur

Phone No: 0141-2228065, Fax No: 0141-2228065

E_mail : mnjyraj@gmail.com

No: F-6()/RMSC/ Logistic / MNJY/2012/ 279

Date 24-1-2013

All Divisional Commissioners / District Collectors

All Principal & Controllers, Medical Colleges/Superintendents, Medical College Hospitals All Joint Directors-Zone/CM&HOs/ PMOs /Officer In- Charge - DDW

Sub: Implementation of Mukhyamantri Nishulk Janch Yojana (Free Diagnostic Services)

As per announcement made by Hon'ble Chief Minister common essential diagnostic tests are to be provided free of cost at Medical College Hospitals and District Hospitals in the state with effect from 7th April, 2013. After implementation of Mukhyamantri Nishulk DavaYojana, provision of this facility will be another milestone in the state's health sector. Rajasthan Medical Services Corporation has been identified as the nodal agency for facilitation of the scheme. In phase I the scheme envisages provision of 57 free basic diagnostic tests at Medical College Hospitals and 44 at District Hospitals, Sub-divisional Hospitals and Satellite Hospitals. In the next phases the scheme is to be extended to Community Health Centres.

The phased implementation will be as follows:

Phase	Implementation Date	Level of Implementation	No. of Tests
Phase I	7 th April,2013	Medical College Hospitals(MCH)	57
	(World Health Day)	District Hospitals(DH),Sub-divisional Hospitals(SDH) and Satellite Hospitals(SH)	44
Phase II	1 st July, 2013 (Doctor's Day)	Community Health Centres (CHCs)	28
Phase III	15 th August, 2013 (Independence Day)	Primary Health Centres (PHCs) & Dispensaries	15 -

All Medical College Hospitals, District Hospitals/Sub-divisional hospitals and Satellite hospitals are hereby directed to start preparedness for implementation of the first phase of scheme. For ensuring success of the intervention, the following are to be carried out as indicated below: -

SHORT TERM ACTIVITIES FOR STRENGTHENING OF LABORATORIES at MCH, I	JH, SDH & SH
SHOKT TERM ACTIVITIES FOR STILL ST	COUDCEOE

S. No	Components	Immediate Action (Jan 13 - Feb 13)	Timelines (Date of completion)	Agency	FUNDS	
(I) Ga	ap Analysis and H	Filling of Gaps			DIDG U'. 1	
1	Infrastructure	Repair, renovation, establishment of collection counter & report distribution centres	28 Feb,2013	Medical Superintendent (MS) /Principal Medical Officer (PMO) /CM&HO/PWD/ CE(M&H)	RMRS, Untied funds, AMG, Corpus funds etc.	
2	Manpower	Deployment of Lab Technician/Lab Assistant/Radiographer from existing staff * Deputation of LT/LA/Radiographer through RMRS if required	28 Feb,2013	MS/PMO DMHS/CM&HO	RMRS	
3	Equipments	Repair of existing equipments Arrange new diagnostic equipments	28 Feb,2013	MS/ PMO/CM&HO	RMRS, Untied funds, AMG, Corpus funds etc.	
4	Reagents and Consumables	Local purchase at hospital level **	28 Feb,2013	MS/ PMO/CM&HO	04.635	

(II) T	raining				
1	Training of Doctors	Orientation & Hands on Training of Doctors (10 days)	28 Feb,2013	Medical Colleges (Path Dept.)	DM&HS
2	Training of LT /LA/RG	Orientation & Hands on Training of LT /LA/RG (10 days)	28 Feb,2013	10.00 (in 10.00) 	
(III) I	IEC				
	Display Boards	Display board of list of available tests (blue base with white letters) outside the laboratories (instructions will be issued separately and bills of RMRS reimbursed)	30 March, 2013	MS/ PMO/CM&HO	RMRS, Untied funds, AMG, Corpus funds etc.

*(order being issued)

**(Bills of RMRS will be reimbursed)

- As the 1st phase has to start from 7th April, 2013 at MCH and DH/SDH/SH immediate steps are to be initiated locally by the concerned Medical Superintendent and Principal Medical Officer to fill these gaps of infrastructure, manpower, equipments and reagents and consumables using Rajasthan Medicare Relief Society (RMRS) funds. Moreover as indicated above the unused untied fund, Annual Maintenance Grant, Corpus fund etc. available with RMRS may also be used for this purpose.
- This expenditure and every recurrent expenditure on outsourced services (Public Private Partnership) operating as per outsourcing policy of GoR will be reimbursed by the state government, these accounts be maintained separately.
- To compensate for other expenditures which were earlier met by income from lab tests, demand for more budget under Office Expenditure head has to be sent to Directorate of Medical &Health Services and Principal Secretary (ME) as directed during video conferencing so that its provision can be made under the Office Expenditure budget head by the respective departments. You are required to send budget estimate under this head @ 50% of last year's RMRS income for Budget Finance Committee. (initially for next 3 months followed by that for next financial year 2013-14).
- Hands on training of manpower will be undertaken at medical colleges by the Pathology department for the districts in their respective division .(module will be shortly shared with all medical colleges)

As activities like constitution of new labs, recruitment of new staff, tendering and supply of new equipments and lab reagents may take few months the following actions are to be carried out over next 4 to 6 months.

S. No	Component	Immediate Action (Next 4-6 months)	Agency	Source of Funds
1	Infrastructure	Creation of additional space in existing laboratories	Chief Engineer , NRHM PWD	State Govt.
2	Manpower	Deployment of Pathologist (MO-PG/JS/SS)	DM&HS Principal Secretary	State Govt.
		Deployment of Radiologist (MO-PG/JS/SS)	(Medical Education)	
		Recruitment of regular LT, LA,IA,RG etc.	Add. Dir (Non Gaz.)	
3	Equipments	Supply of new lab equipments by RMSC as per demand	RMSC	State Govt
4	Reagents	Supply of essential lab reagents and consumables by RMSC as per demand	RMSC	State Govt

LONG TERM ACTIVITIES FOR STRENGTHENING OF ALL LABORATOR	IES
at MCH, DH, SDH, SH, CHCs, PHCs and Dispensaries	

For ensuring the availability of functional equipments and lab reagents following units will be established and related activities will be carried out under RMSC:

- 1. **Establishment of EPMC:** which will prepare essential equipment list (EEL) and essential laboratory reagents and consumables list (ELRCL) as advised by TAC and will procure and supply them through DDWs to all hospitals which demand them.
- 2. Establishment of SEMRC, ZEMRC and DEMRC: State equipment maintenance and repair centres (SEMRC) along with the zonal equipment maintenance and repair centres (ZEMRC) at divisional level and district equipment maintenance and repair cell (DEMRC) will be established to ensure preventive maintenance and repair of equipments.
- 3. **Procure and supply essential laboratory reagents, chemicals and consumables:** at DDWs and store these until they are issued to hospitals (along with drugs) for proper functioning of diagnostic facilities.
- 4. **Quality control** quality policy has been developed and its compliance will be ensured by establishment of Quality Assurance Program Implementation Unit at state level at RMSC, at zonal level at medical colleges and at district hospitals in the districts.
- 5. **Bio-safety** Standard Operating Procedures (SOPs) for healthcare workers will be developed and issued and personal protective gear for bio-safety will be provided to all laboratory staff.
- 6. BMW Rules implementation all healthcare institutions are legally bound to implement Bio Medical Waste (Management & Handling) Rules (1998 amendment 2000 & 2003) and it will be the responsibility of medical office in-charge to ensure disposal of laboratory generated bio-waste as per rules and obtain Common Treatment Facility(CTF) connectivity for same.
- 7. **Provision for back-up equipments** all medical officer in-charges to ensure stand by invertors and generators for emergency times as also additional standby equipments.
- 8. **Patient friendly services** ensure proper waiting space, shed, counter for registration, sample and report collection such that the patients do not have to wait for more than 10 minutes at these counters. Medical college hospitals to ensure availability of online report of diagnostic tests.
- 9. **Display of Boards** of list of available tests outside the laboratories (on blue background with white letters) and also board indicating time of sample and report collection.
- 10. Ensure 24x7 lab services -for Intensive Care Units (ICU), in patients department (IPD) emergency/casualty and other serious patients at MCH, DH, SDH and SH.

The Divisional Commissioners and District Collectors are expected to -

- Inspect the institutions and take a meeting
- Identify difficulties/issues and resolve the same
- Major issues of extra infrastructure, manpower etc. may be communicated to Medical & Health and Medical Education departments.
- Apprise the progress of implementation of the scheme to respective departments fortnightly

The role envisaged for various agencies for implementing the scheme, the list of tests at different levels of institutions and reference material for design and setting of laboratory are enclosed as technical support. You are expected to abide by the above directions and timelines. Query pertaining to any of the above issues may be addressed to the MD, RMSC so that matters are resolved early and scheme is implemented as per the decided timelines.

(C. K. Mathew) Chief Secretary Govt. of Rajasthan

Copy to:

- 1. PS to Hon'ble Health Minister
- 2. PS to Principal Secretary(ME)
- 3. PS to Principal Secretary (M,H&FW)
- 4. Director(Public Health), DM&HS for necessary action
- 5. OSD & All ED, RMSC QC/Logistic/Proc/Finance/EPM
- 6. Office File

(Deepak Upreti) Chairman, RMSC & Principal Secretary (M, H&FW)