# <u>Uttar Pradesh</u>

### **Coverage:**

The CBMP component would be implemented in a phased manner- initially covering 36 blocks in 18 High Priority Districts (HPD)1 and later scale up to cover other districts. In each district, the programme would cover 2 blocks and Gram Panchayats/ VHSNC within them. The program would cover 2667 Village Health Sanitation & Nutrition Committee (VHSNC) in 36 blocks across the selected districts.

# **Implementation Structure:**

The CBMP programme at the state level will be managed by a team of professionals based at the State Programme Management Unit (SPMU). At the district and block level, the programme would be implemented in partnership with local NGOs/ community based organizations/ academic institutions. Initially, the programme would focus on building the structure and process for implementation of CBMP at state, district and block level. In addition, specific capacity building processes would be undertaken for strengthening of Planning and Monitoring Committees at the district and block level and VHSNC at the community level. The AGCA would provide continuous guidance and support to the team in operationalising the programme.

State level,

- Programme Manager- 1,
- training officers-2,
- Monitoring & documentation officer- 1,
- Account officer- 1

District level

• District Programme Coordinator-1

Block level

- Block Project Coordinator.
- Community Facilitator-1 per 20 Village Health Sanitation Nutrition Committee (VHSNC)

#### Key programme implementation processes:

The following activities are proposed to be undertaken

#### Activities at State Level:

- Orient and organize quarterly meetings of the State Advisory Group on Community Action (SAGCA) to guide the implementation of CBMP processes
- Organize working group meetings for development/ adaptation of training materials, manuals and tools, IEC materials etc
- Hire and orient staff based at the State Programme Management Unit (SPMU)
- Develop criteria and processes for selection of implementing organizations
- Undertake mapping exercise to identify potential NGOs/Community Based Organizations
- Field appraisal and finalization of contracts with implementing organizations
- Organize programme orientation of implementing organizations a) Chief Functionaries b) NGO staff
- Train a pool of master trainers to facilitate training of VHSNC
- Organize program planning and review meetings with implementing organizations

<sup>&</sup>lt;sup>1</sup> Badaun, Bahraich, Balrampur, Barabanki, Barielly, Etah, Faizabad, Gonda, Hardoi, Kaushambi, Kheri, Pilibhit, S K Nagar, Shahjahanpur, Shrawasti, Siddharthnagar, Sitapur, Sonbhadra

#### Activities at district and block level;

- Constitute and orient Planning and Monitoring Committees at the district and block levels
- Organize regular quarterly meetings of the Planning and Monitoring Committees at the district and block levels
- Orient District Programme Managers (DPM), District Community Mobilizers (DCM) and Block Community Mobilizers (BCM) on the CBMP processes
- A pool of 6 master trainers would be developed in each district. The master trainers would facilitate large scale training of VHSNCs (basic and refresher training).

#### Activities at village and community level

- Re-organization/ expansion of the VHSNC, with adequate representation of PRI members, SHG leaders, especially members from excluded and minority groups (as per the revised National VHSNC Guidelines)
- Awareness generation on NHM entitlements through community meetings, wall writings, display of citizens charter etc
- Organize first round of orientation training for VHSNC members
- Handhold regular monthly meetings of the VHSNC, including introducing the community enquiry tools

#### **Updates on CAH Implementation**

- State Advisory Group for Community Action for Health (State AGCA) and working group have been constituted and the first meeting of the state AGCA organized on June 25, 2014.
- An orientation of State Nodal Officers on CAH was organized on August 1, 2014. Participants included the staff from State Programme Management Unit (Community Process), SIFPSA and representatives of Technical Support Unit (TSU). Participants were oriented on essential components and processes of Community Based Monitoring & Planning:- Awareness generation on health entitlements, Strengthening of Village Health Sanitation and Nutrition Committees (VHSNC),Formation/ strengthening of Planning and Monitoring Committees at block and district level, and Community level data collection and facility survey, Public dialogues (Jan Samwad)
- Rapid Appraisal of RKS and VHSNC was conducted in three districts- Pilibhit, Sant Kabir Nagar and Hardoi.
- AGCA Secretariat oriented the newly recruited staff (8 participants) on Community Action for Health on Feb 24,2015. The participants included Training officers, Monitoring & Documentation officer, Account Officer under Community Based Planning & Monitoring (CBPM), Asha Regional coordinators, Programme Coordinators and Assistant under community process. AGCA team oriented the District Community Programme Managers (DCPM) from 26 districts on Community on May 13, 2015.
- The second State AGCA meeting was organised on April 22, 2015. The meeting was chaired by Principal Secretary-Health. Senior NHM officials- Mission Director- NHM, Additional Mission Director- NHM, Executive Director- Technical Support Unit-BMGF, General Manager- Community Processes, Director-SIHW, SIFPSA, state NHM community processes team, along civil society representatives from Save the Children, CARE, PANI, Voluntary Health Association of India (VHAI), UNICEF participated in the meeting. Principal Secretary requested a) State AGCA should be re-constituted to include SIRD and other departments b) A revised notification needs to be sent to the District Collectors for re-constituting the

VHSNC and RKS as per MoHFW guidelines c) Finalisation of RFP for selection of NGOs and approval by Consultant Monitoring Committee (CMC) d) implementation process should be expanded to cover one block in each of the high priority districts

- The second STAG meeting was organised on April 21,2015. The meeting was chaired by Mr. Abhishek Prakash, (Additional Mission Director, NHM. Participants included representatives from the TSU, Sahbhagi Shikshan Kendra, Population Service International (PSI), Price Waterhouse Coopers (PwC) and the State NHM Community Processes team. Key decision taken were a) AGCA will facilitate for exposure visit state NHM team to Maharastra b) AGCA team will share the IEC materials and hindi version of the programme managers and user's manual c) Field appraisal should be an essential component of the NGO assessment process. Exposure visit of State NHM team to Maharastra was postponed due to non-availability of dates for visit in the month of May.
- State is in process of finalization of Request for Proposal (RFP) for NGO selection.