Government of West Bengal

Department of Health & Family welfare

<u>State Family Welfare Bureau</u>

Swasthya Bhavan, GN 29, Sector V,

Salt Lake, Kolkata 700091

No.: H/SFWB/21S-05-2013/2035 (26)

Dated: 03 12 2013

To

1-25) The Chief Medical Officer of Health, All Health Districts, 26) The DFWO, Kolkata

Subject: Provision of quality services for Safe Abortion

You are aware that increasing access to and provision of quality service for Safe Abortion is part of Government of West Bengal's maternal health strategy to reduce maternal mortality and morbidity in the state as unsafe abortion is still one of the leading causes of maternal mortality and morbidity.

To ensure provision of quality Safe Abortion Services throughout the state, a roadmap outlining the key steps to be taken for the same has been formulated as stated below. You are instructed to go through the contents of the roadmap and to implement the steps immediately,

#### Roadmap for provision of quality Comprehensive Abortion Care Services

- 1. State/ District Nodal Officer for safe abortion services: ADHS (Maternal Health) in the state & DMCHO in the districts are responsible as nodal officer for the services.
- 2. District Level Committee for certification, regulation & monitoring of the services in public sector: The CMOH of the districts are asked to constitute the District Level Committee for the same in the respective district as per provision laid in the MTP Act, 1971, MTP Rules, 2003 & MTP Regulation, 2003, as follows:
  - i) The CMOH of the district shall be the Chairperson of the committee,
  - ii) The Committee shall consist of not less than three and not more than five members including the chairperson
- iii) One member of the committee shall be the Gynecologist/ Surgeon/ Anesthetist and other members from local medical profession, Non-Government Organization and Panchayeti Raj Institution of the district
  - iv) Provided that at least one of the members of the committee shall be a woman
- v) Tenure of the Committee shall be for two calendar years and the tenure of the Non-government member shall not be more than two terms.

The CMOHs are asked to constitute the DLC within next 15 days and to intimate the state accordingly.

Constitution of DLC in districts should be followed by :-

- i) Wide publicity on constitution of DLC and availability of Form A for application for approval of a place under clause (b) of Section 4 of MTP Act, 1971
  - ii) Ensure availability of Form A in sufficient quantities
  - iii) Verification of sites applied for and submission of report to DLC by verification team
  - iv) Approval of sites (if verification team is satisfied) in Form B
- v) Conduct meeting with all licensed CE of the district providing Maternity services for dissemination of MTP ACT, Rule & Regulation and constitution of DLC

- **3.** Inclusion of Medical abortion drugs in Essential Drug list: MMA drugs [Tab Mifepristone, 200 mg (CAT No 35.13(A)/T & Tab Misoprostol, 200 mcg (CAT No 35.09 (A)/T & Tab Misoprostol, 100 mcg (CAT No 35.09 (B)/T)] have already included in CMS approved Drug catalogue of the state. The CMOH of the districts will ensure supply of the drugs to all health facilities of the district where services are being provided.
- **4.** Training of Medical Officers in safe MTP technique:- Already 46 Specialist MO (G & Obs.) and 6 GDMO in the year 2011-12, 70 Specialist MO (G & Obs.) and 50 GDMO in the year 2012-13 and 7 Specialist MO (G & Obs.) and 13 GDMO in the year 2013-14 ( total of 192 MOs) have been trained in safe MTP technique throughout the state with technical support and assistance from Ipas.

The CMOH of the districts will ensure that there is at least one CAC trained MO at each BPHC/ CHC/ RH of the district.

The CMOH of the districts are asked to supervise and monitor the performance of the trained MO regularly through District Nodal Officer for the same.

- **5. Post training mentoring of the service provider:** As per MOU signed between Dept of H & FW, Govt. of WB and Ipas to collaborate in increasing access to safe abortion care in the state including implementation of safe abortion component in RCH II project, which is valid from 1<sup>st</sup> January, 2012 to 31<sup>st</sup> December, 2014, Ipas will continue periodic tracking of the trainees and assess the extent of service provision, programme progress and evaluate the impact of the intervention. This organization is doing the same. The CMOH/ Nodal Officer of the district will keep close liaison with the organization and cooperate with the organization for carrying out the activities effectively. (Contact persons: Paramita Aich, State Programme Officer, Ipas, Mb no. 9334196224, Aveek Dey, Associate-Programm, West Bengal, Ipas, Mb no. 9378143552)
- **6. Monthly reporting of progress of CAC services in standard format:** The CMOH will use District Monitoring Format (Monthly) for CAC services to monitor the programme in the district and submit the report to ADHS (Maternal Health) regularly (on monthly basis) by post & email (adhsmh@gmail.com).

The CMOH of the districts will instruct every head of the public facilities and owner of the approved private facilities to maintain a register in Form III as per regulation 5 of MTP Regulations, 2003 for recording therein the details of the admissions of women for termination of their pregnancies and to keep such register for a period of five years from the end of the calendar year it relates to.

The CMOH of the districts will share the "Comprehensive Abortion Care (CAC)- Training & Service Delivery Guideline", which has been already sent to them through email, and this Roadmap with every head of the public and private facilities in the district.

An action taken report in this regard will be sent by the CMOH of the districts within one month from issuing of this letter to the undersigned.

Commissioner, Family Welfare & Secretary to Govt. of West Bengal

## **Comprehensive Abortion Care**

### **District Monitoring Format (Monthly)**

(Please do not modify/ change the format)

Name of the District: No of Units in District:

Month & Year of Reporting:

Name of District Nodal Officer for MTP activities: Designation and Contact Number:

E-mail id:

#### A. District Level Indicator:

SI No.		Indicator	Response
1	Whether Compr district (Yes/No)	ehensive Abortion Care (CAC)- Training & Service Delivery Guideline is available in	
	District Level	Whether District Level Committee is formed & functioning (Yes/No)	· · · · · · · · · · · · · · · · · · ·
2	Committee (DLC)	Whether DLC meeting held regularly (at least once in every month) during reporting month (Yes/No)	
	Approved NGO, Private Clinic & Hospital	a. Number approved by DLC to provide Safe Abortion Care	
		b. Number of Renewal Certificate issued by DLC during reporting month	
		c. Number of New Certificate issued by DLC during reporting month	
3		d. Number of application pending with DLC for one year at the end of reporting month	
		e. Number of New application received during reporting month	er e
		f. Number of applications out of the new application (e) pending with DLC at the end of reporting month	

- is MVA Equipments being procured & supplied to Facilities (Yes/No):
- Are Drugs for MMA being procured & supplied to Facilities (Yes/No):

### **B. Capacity Building:**

Name of the Nodal Agency for Training:

SI No.		Indicator	Response
	Training	Number of Tertiary Care Facilities (MCH) conducting training	<u> </u>
1	Site	Number of Secondary Care Facilities (DH/SDH/SGH) conducting training	
		Number of any other facility including NGO/ Pvt. Hospital conducting training	
	Training of MO	MO Training Load cumulative since April 2005	
'		Number of MO trained cumulative since April 2005	
2		Number of MO trained during reporting month	
		Number of MO trained since April of reporting year	<del>                                     </del>
<del></del>		Target for MO training for the current year	
3		District Trainer trained cumulative since April 2005	
4	No. of ANN cumulative	4 & Staff Nurse trained to provide confidential counseling for MTP & Post Abortion Care since April 2005	
5	No. of ANN during repo	A & Staff Nurse trained to provide confidential counseling for MTP & Post Abortion Care printing period	
6	No. of ASH Abortion C	A & other field functionaries trained to provide confidential counseling for MTP & Post are cumulative since April 2005	
7	No. of ASH. Abortion C	A & other field functionaries trained to provide confidential counseling for MTP & Post are during reporting period	

## ےc/BCC :

ooes the district have an IEC/BCC plan for the following:

SI. N	Subject	Please specify the frequency of IEC/BCC activities						
1	On the legality of MTP	i) Print: iii) Video: ii) Audio: iv) Any other:						
2	On sex determination preceding MTP as an offence	i) Print: iii) Video: ii) Audio: iv) Any other:						
3	On mandatory requirements for approval of Pvt./ NGO service delivery sites	i) Print: iii) Video: ii) Audio: iv) Any other:						
4	On MTP service availability at nearest facility in public & private sector	i) Print: iii) Video: ii) Audio: iv) Any other:						

## D. Supportive Supervision:

Sl.No.	Indicator	
1	What is the supportive supervision/ monitoring mechanism for post training	Remarks
	follow up & quality of MTP service delivery	
2	If there is no such mechanism, what is the district's plan for it & the proposed timeline	

## E. Biomedical Waste Management :

- \* What is the Mechanism of disposal of products of conception:
- st Is this mechanism is in accordance with CAC Guideline (Yes/No) :
- \* Whether implemented in all facilities (Yes/No):

# F. Service Availability & Service Utilization:

						7	Facilit	у		•
SI No		Availability		Medical College Hospital	District Hospital	HDS /HQS	CHCs (FRU)	24X7 PHCs, Non FRU CHCs	Other PHCs	Approved NGO/ Pvt. Hospital
1		Health facilities in the district				N()	<del> </del>			
2	Number with M	P Drugs	<del></del>				<del> </del>	1 2 2 2		
3	Number with M1	P Equipments					<del>                                       </del>			
4		P Trained Providers		· ·		74				
5		three (Drug, Equipment & Trained Prov	ider)				<del> </del> -			
6	Number of Instit	utions providing MTP services	idely				<u> </u>			
7	Number of Instit (MVA/MMA)	utions providing MTP up to 8 weeks onl	у	en je					·	Table 1 1 1
8	Number of Instit (MVA/MMA)	utions providing MTP up to 12 weeks on	lly					·		i
9	Number of Institution 12 weeks (EVA/N	utions providing MTP both up to 12 wee IVA/MMA)	ks & above						<del></del>	**
10		Utilization				- <del>12. 1</del>	<del>  </del>			
	U	p to 12 weeks during reporting month				· · · · · · · · · · · · · · · · · · ·				<del></del>
	mber of MTP	p to 12 weeks since April of reporting ye	ear			<del></del>				
þ	erformed A	oove 12 weeks during reporting month				-	-	<del></del>		
	A	oove 12 weeks since April of reporting y	ear	-	<u> </u>	<u> </u>				

# G. Performance of Facilities:

Category	SI No	Alama and	facility facili	Whether	Whether	No of MTP performed				
of Facility				facility has MTP	facility has MTP trained	For the	Month	Cumulative since April of the year		
			(Y/N)	equipment (Y/N)	provider (Y/N)	Up to 12	Above	Up to 12	Above 12	
MCH	$\overline{}$				(1714)	weeks	12 weeks	weeks		
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. Remarks if any (may add separate pages):

nature of District Nodal Officer with seal

e: to be sent by the district monthly by 10<sup>th</sup> of next month to the ADHS (Maternal Health) by post & email (<u>adhsmh@gmail.com</u>)