

Government of West Bengal
Health & Family Welfare Department
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Memo No: H/SFWB/4'0'-02-2012/2178(2)

Date: 02/01/2014

**From : Commissioner, Family Welfare &
Secretary, Health & Family Welfare**

**To : 1. Principal (All Medical College & Hospitals)
2. CMOH (All Districts)**

ORDER

Operational Guidelines for functionality of SNCUs has been under review of the Department for quite some time. After careful consideration, the following guidelines are being issued in supersession of all previous guidelines issued.

A. General administrative guidelines:

- a. DMCHO of the district will be the nodal officer for all FBNC activities. DPC will assist DMCHO in all aspects.
- b. CMOH will review the performance of all FBNC activities at the district at least once a month.
- c. One Assistant Superintendent at the hospital should be designated as the nodal person to look after SNCU non-clinical activities by the MSVP/ Superintendent.

B. Job Description of SNCU MOs:

1. The services of SNCU Medical Officers (Regular Health Service Medical Officer/Contractual Medical Officer) should be utilised in SNCU, Neonatal wards, Postnatal wards, Labour Rooms and Operation Theatre in the following manner:
 - a. **SNCU:** The duty should be spread over 6 days a week @ 8 hrs a day. There will be only one day off.
 - b. **Neonatal ward:** MO, SNCU visit every morning and evening at least once and in case of emergency.
 - c. **Postnatal ward:** MO, SNCU visit every morning and evening at least once and in case of emergency.
 - d. **Labour Rooms:** MO, SNCU will attend all newborns needing resuscitation at Labour Room on call by the LR duty sister.
 - e. **O.T:** MO, SNCU will attend all newborns needing resuscitation during Caesarean Section on call by the OT duty sister
2. Medical Officer of SNCU will be primarily responsible for first reporting of any event in SNCU. This includes any death of neonates, any untoward incident and any instruments/equipment going out of service to Medical Officer, In-charge, SNCU and MSVP/ Superintendent as the case may be.

C. Clinical Management:

Standard protocol as described in the FBNC Training manual should be followed for admissions, discharge and treatment.

1. Admission procedure:

- a. All admissions to SNCU will be under the Bed-in-Charge (BIC) for the day.
- b. All admissions to SNCU/Neonatal ward should be through the SNCU triage. Emergency Medical Officers should refer all neonates requiring admissions to the SNCU triage. MO SNCU will take the decision for admission and the ward where the baby is to be admitted. BIC will be informed about such admissions through the regular system in the hospital. This criterion may be relaxed when BIC is present during admission where he will take the decision directly.
- c. Admission criteria:
 - Birth weight <1800g or gestation <34 weeks
 - Large baby >4.0Kg
 - Perinatal asphyxia
 - Apnea or gasping
 - Refusal to feed
 - Respiratory distress (Rate > 60/min or grunt/retractions)
 - Severe jaundice (appears < 24hrs/ stains palms or soles/ lasts > 2 weeks)
 - Hypothermia (<35.4^o C) or hyperthermia (>37.5^o C)
 - Central cyanosis
 - Shock (Cold periphery with CFT > 3 sec and weak & fast pulse)
 - Coma, convulsion or encephalopathy
 - Abdominal distension
 - Diarrhea/Dysentery
 - Bleeding
 - Major malformations

2. Criteria for Transfer to Step Down:

- a. Babies whose respiratory distress is improving and no longer require oxygen supplementation to maintain saturation
- b. Babies on antibiotics for completion of duration of therapy
- c. Low birth weight babies (<1800gms) who are otherwise stable (for adequate weight gain)
- d. Babies with jaundice requiring phototherapy but otherwise stable
- e. Babies admitted for any condition but are now thermodynamically and haemodynamically stable.

3. Discharge Procedure:

- a. Decision for discharge will be taken by the SNCU MO with consent of BIC.
- b. Discharge criteria:
 - Baby is able to maintain temperature without radiant warmer
 - Baby is haemodynamically stable (normal CFT, normal volume pulse)
 - Baby accepts breast feed well

- Baby has documented weight gain for 3 consecutive days and weight >1.5kg
- Primary illness has resolved

The criteria for admission, transfer of babies to the Step Down Ward and discharge procedure mentioned above is in accordance with the '**Facility Based Newborn Care Operational Guide**' of the Ministry of Health & Family Welfare, Govt. of India.

4. Treatment protocol: As detailed in the FBNC manual of GOI
5. Criteria for transfer to Neonatal ward:
 - a. Babies who satisfy the criteria for transfer to step down ward but cannot be accommodated due to want of space in the Step down ward and whose mother is available for stay with the baby
 - b. Babies who are comparatively less sick but need observation. Such babies shall be transferred to SNCU if their condition does not improve at the Neonatal ward.
6. Day to day management:
 - a. SNCU MO will be responsible for day to day management of the neonates admitted in SNCU and neonatal ward
 - b. BIC should examine all babies admitted at least twice on admission day and at least once daily on subsequent days until discharge. He should also attend any calls when asked for by the SNCU MO.
7. Reporting system:
 - a. SNCU reporting should be made in the '**Neonet**' software daily based on midnight census of the previous day.
 - b. The fields required to be filled up daily and monthly should be strictly followed.
 - c. SNCU MO and facility in charge will see that the report is made available to the DEO/person reporting in time. MOs should also help DEO to simplify medical jargon while reporting.
 - d. The report will be sum total of reports of SNCU, Step Down and Neonatal Ward.
 - e. The number of beds should be also reported as the sum total of beds of SNCU, Step Down and Neonatal Ward.

D. Utilisation of Annual Maintenance Grant (AMG):

Indicative guidelines for expenditure of AMG are noted hereunder:

1. Comprehensive Maintenance Contract (CMC) including procurement of spares of equipments supplied by WBMSCL after warranty period.
2. Comprehensive Maintenance Contract (CMC) including procurement of spares of equipments not supplied by WBMSCL after warranty period.
3. In case of equipments supplied by WBMSCL, the rates of spares as contracted should be obtained from WBMSCL. In other cases, the rates of spares for the entire period of CMC should be obtained in advance during making the contract and such rates adhered to during the period CMC is in force.
4. Renewal of contract will be the responsibility of the MSVP/ Superintendent. He/She will initiate the process at least 60 (Sixty)days before the existing contract period expires.
5. Minor repair of equipments/ instruments not covered under CMC: Such cost should not exceed Rs 10000 per annum. Equipments/ instruments like Autoclave, Semi Auto


- Analysers, Washing machine etc. required for uninterrupted functionality of SNCU may be covered under this Head.
6. Comprehensive Maintenance Contract of Electrical fittings and fixtures including AC machines, Servo Voltage Stabilizer and online UPS (if any) will be through PWD (Electrical). The estimated amount should be placed with the respective Division of PWD (Electrical).
 7. Consumables for all equipments/ instruments are to be procured at pre-fixed prices out of this grant.
 8. Minor civil, electrical and plumbing works at SNCU not exceeding Rs 20000 per annum may be done out of this fund.
 9. Reimbursement of cost of fuel for the dedicated Generator of SNCU. If the generator is a shared generator of the facility, reimbursement of fuel cost will be proportional to the bed strength of SNCU compared to the total bed strength of the facility. Log book is to be maintained to record the number of hours for which the generator has been put on.
 10. Operation of the dedicated generator set of SNCU: The existing generator operator of the facility may be paid a monthly remuneration not exceeding Rs 1000 for such purpose.
 11. Payment of daily allowance of Nabajata Sahayikas during training @ Rs 80 per head per day during their period of training.
 12. Payment of daily wages to a maximum of 4 (Four) female sweepers engaged through existing agency for security and scavenging of the facility. Payment is to be made to the existing agency as per rates fixed by the Department.
 13. Payment of daily wages of a Data Entry Operator as per the minimum daily wages for skilled workers. Such engagement should not be for more than 26 days per month. The services of such DEO will be utilised primarily for data management and transmission of SNCUs. **This is an interim arrangement and shall stand automatically discontinued once the contractual DEO from NRHM is engaged for which separate instructions are being issued.**
 14. Purchase of gowns masks, rubber slippers and other consumables for sepsis control only if not available in store
 15. Cost of procurement and maintenance of fire extinguishers.
 16. Cost of internet connectivity for SNCU if not connected from any other source. A dedicated net connection should be provided, the cost of which should not exceed Rs 750 per month.
 17. Cost of procurement of computer & printer consumables and stationeries not exceeding Rs 12000 per annum.
 18. Reimbursement of travel cost to staff for attending FBNC review meetings at the State level. Such reimbursement will be on actuals and according to the existing TA rules of the State Government.
 19. Cost towards mentoring support to the facility. Such expenditure should be on actuals not exceeding Rs 2000 per visit of mentor.
 20. Furniture for SNCU should be procured out of RKS fund or Corpus fund of the District and not out of this fund. Repair of such furniture and procurement and maintenance of soft furnishing like curtains etc. may be made out of AMG, such expenses not exceeding Rs 10000 per annum.
 21. Any other expenditure authorised to be paid out of AMG by the State from time to time.

E. Utilisation of JSSK Grant:

All infants (up to 1 year) should get free treatment as per Janani Sishu Suraksha Karyakram guidelines. Mothers who are admitted for delivery or have delivered a child will also be entitled for free treatment until discharge as per Janani Sishu Suraksha Karyakram guidelines. Mothers after discharge from hospitals following delivery will not be entitled for free treatment under JSSK even if they are accompanying the admitted infant. All mothers accompanying the infants will be entitled for free diet.

The JSSK guidelines should be strictly adhered to.


This order will take immediate effect.


**Commissioner (FW) &
Secretary, H&FW Dept**

Memo No: H/SFWB/4'0' - 02-2012/2178(2)/1145) Date: 02/01/2014

Copy forwarded for kind information to:

1. Director of Health Services
2. Director of Medical Education
3. SFWO & Addl. DHS (FW)
- 4-16. MSVP, (All Medical Colleges)
17. Programme Officer, NHM
18. DADHS (CH)
19. Coordinating Officer, FBNC Cell
- 20-41. Superintendent, (All hospitals having SNCU)
42. Sr. PS to Principal Secretary
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Secretary, H&FW Dept**