

Sr. No	Conditionality	Incentive/Penalty	Source of verification	%Incentive Penalty	Status/Remarks
1.	Incentive or penalty based on NITI Aayog ranking of states on 'Performance on Health Outcomes'	<p>Based on the ranking which will measure incremental changes</p> <ol style="list-style-type: none"> 1. The states showing overall improvement to be incentivized 2. States showing no overall increment get no penalty and no incentive 3. States showing decline in overall performance to be penalized <p>% of incentives/penalty to be in proportion to overall improvement shown by the best performance state and the worst performing state : +40 to -40 points</p>	NITI Aayog report	+40 to -40	<p>The 1st round of State Health Index (SECOND ROUND) reported as per guidelines of NITI Aayog in 2017-18.</p> <p>UT-Chandigarh was ranked 2nd amongst UT's which is as under:-</p> <p>The State Health Index 2nd Round has been compiled and submitted on online http://social.niti.gov.in. The external agency has also conducts the assessment and verify for validating the information of 3rd Round of State Health Index. UT Chandigarh has provided the full access and support to the teams of NITI Aayog for assessment of 3rdround of State Health Index for which the report is awaited.</p>
2.	Rating of District Hospitals in terms of input and service delivery	<p>At least 75% (in Non EAG) and 60% (in EAG and NE states) of all District Hospitals to have at least 8 fully functional specialties as per IPHS: 10 points incentive.</p> <p>Less than 40% in Non EAG and 30% in EAG to be penalized upto 10 points</p>	HMIS and NITI Aayog DH ranking report	+10 to -10	<p>In U.T, Chandigarh, there is only one District Hospital i.e GMSH-16 Chandigarh. All data reports of District Hospital, GMSH-16, Chandigarh and are uploaded on HMIS portal. This hospital is participating on DH-ranking as per guidelines instructions of MOHFW, GOI, New Delhi. All data reports of the District Hospital pertaining to the indicators of monthly MIS report in HMIS (in both old and new Versions of Applications) are submitted regularly.</p>

3.	Operationalization of Health and Wellness Centers (HWC)	State to operationalize 30% of SCs, PHC and UPHC as HWCs	State report NHSRC report	+20 to -20	<p>As per the guidelines of Govt. of India, the following five Sub Centers (Alternative Medical Units) and five Civil Dispensaries i.e. ten such centers has been upgraded and designated as Health and Wellness Centers:-</p> <ol style="list-style-type: none"> 1. HWC- Village Behlana 2. HWC -Village Mauli 3. HWC - Village Dariya 4. HWC - Sarangpur 5. HWC - Village Dhanas 6. HWC, Sector-20 7. HWC, Sector-38 8. HWC-Maulijagran 9. HWC-Dadumajra 10. HWC- Dhanas <p><u>The following activities have already been undertaken</u></p> <ul style="list-style-type: none"> • Assessment of the facility as per HWC norms for upgradation of centre. • The change of facade of the HWCs is being undertaken as per the guidelines. • Training of the Medical Officers for providing Comprehensive Primary Health Care. • Provision of Yoga Services (Govt. Yoga College has agreed to provide Yoga Instructor in the mornings at all the five HWCs). • Provision of Dental Services at all HWCs shall be ensured (by posting Dental Surgeon from RBSK/RKSK).
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4	% district covered under Mental Health Programme and providing services as per framework	<p>If 75% of the district covered : 5 points</p> <p>If 50% districts in Non-EAG and 40% districts in EAG states: incentives 3 points</p> <p>Less than 40 % EAG less than 50% Non EAG to be penalized 3 points</p> <p>Less than 30% in EAG and 40% in Non EAG to be penalized 5 points</p>	Report from Mental Health Division MOHFW	+5 to -5	<ul style="list-style-type: none"> Chandigarh is one state and one district. Mental Health is implemented since F.Y. 2014-15. There are 6 existing posts approved under the NHM, UT Chandigarh.
5.	% of 30 plus population screened for NCDs	<p>15% of 30 plus population screened for NCDs:5 points incentives</p> <p>7% of 30 plus population screened for NCDs: 3 points incentives</p> <p>Less than 3 % of 30 plus population screened for NCDs: 3 points penalty</p> <p>Less than 2 % of 30 plus population screened for NCDs :5 points penalty</p> <p>50% of the screening data must be captured in NCD app</p> <p>(denominator total 30 plus population of the State)</p>	<p>Report from NCD division MOHFW and State reports</p> <p>Any survey data available</p>	+5 to -5	<ul style="list-style-type: none"> NPCDCS has been started in U.T, Chandigarh in the month of November,2014. Cumulative data of NCD screening done for population above 30 years at NCD Clinics, peripheral health facilities, ongoing population based NCD screening, NCD screening of female sex workers and screening camp(Model jail) held is as follows:- Approximately 87082 people above 30 years have been screened for NCDs. Target population above 30 years- 4 Lacs % of 30 plus population screened for NCDs-21.77% till Oct,2018

6.	HRIS Implementation	Ensure implementation of HRIS for all HRH (both regular and contractual) in the state. Salary invoice and transfer orders to be generated by HRIS. Line listing of all staff for all facilities to be available. HRIS data should match with HMIS reporting. Case where it doesn't, state should provide reason and numbers	HRIS (State) and HMIS report	+10 to -10	<p>In U.T, Chandigarh, e-seventh software is already functional for maintaining the records of regular employees including e-payment through treasury. However, "Manavsampada" application implemented as complete HRIS System for regular and contractual employees in Chandigarh wherein 706 number of regular employees and 678 employees of NHM are registered on eHRMS portal. All appraisals of regular employees are initiated through manavsampada portal which is further be extended to all employees. The performance appraisal of regular employee has been made online on this platform including their service book record and leave etc.</p> <ul style="list-style-type: none"> •The posting and appointment orders of employees are also made online through this system. (ehrms.nic.in) •All information about the salary component of regular employee is also available under this system. However It is in process for to the contractual employees in NHM as their salary routed through PFMS •The line list of all the employees contractual+ regular is also available separately under this system. •The facility wise line listing of all staff and linking of salary invoice with PFMs is being done. <p>All data are reported in HMIS which is followed as single source of information•</p>
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7.	Star rating of PHCs (both urban and rural) based on inputs and provision of the service package agreed	<p>75% (in Non EAG) and (60% in EAG and NE) of the PHCs having 3 or more star rating: 5 points incentive</p> <p>50% (in Non EAG) and 40% (in EAG and NE)PHCs having 3 or more star rating : 2 points incentive</p> <p>Less than 40% (in Non EAG) and 30% (in EAG and NE) of PHCs having 3 or more star rating to be penalized : 5 points</p>	HMIS	+5 to -5	<p>As per guidelines of star rating of PHCs (both rural and urban), there are grades for indoor facility being provided at PHC level. However during meeting on 28th July, 2017 at MOHFW criteria of grading of Urban PHCs with no indoor services is yet to notified.</p> <p>As in U.T. Chandigarh, Civil Dispensaries are grouped in the category of PHCs with no indoor facilities. Hence the grading of CDs/PHCs for U.T. Chandigarh will be only possible after the notification of PHC of urban area with no IPD services.</p>
8.	Early Childhood Development(ECD)	Implementation of ECD in State	State Response Report from CH Division	+5 to -5	Implemented in U.T Chandigarh with support of Medical teams of RBSK & RKSK and Child Health