



Government of Mizoram

**R F D**

(Results-Framework Document)  
for

Department of Health & Family Welfare  
(2015-2016)

## Section 1: Vision, Mission, Objectives and Functions

### Vision

Provide equitable, accessible and affordable quality health care services for all

### Mission

Providing quality Health Care through preventive and curative health services, improving maternal and child health, encouraging population stabilisation, developing human resources for health services and revamping local health traditions

### Objectives

- 1 Control of Communicable and Non-Communicable Diseases including HIV/AIDS
- 2 Promotion of Community Action for Health (CAH)
- 3 Reduction in Infant Mortality Rate (IMR)
- 4 Reduction in Maternal Mortality Ratio (MMR)
- 5 Improving Maternal and Child Health
- 6 Ensuring Population Stabilization
- 7 Enforcement of Health related regulatory matters in the state
- 8 Promotion of Adolescent Health
- 9 Development of AYUSH Hospitals & Dispensaries including IEC under AYUSH Programme

### Functions

- 1 Management of Health Institutions and Provisions of Laboratory Services for all diagnostics
- 2 Providing Primary Health Care Prevention, Promotion, Curative and Rehabilitation.
- 3 Enforcement of Health related regulatory matters in the state
- 4 Improvement of School Health Services
- 5 Promotion of Nutritional Education, Services and Environmental sanitations
- 6 Promotion of Community Action for Health (CAH)
- 7 Strengthening of IEC/BCC services
- 8 Promotion of intersectoral coordination for better health services

## Section 1: Vision, Mission, Objectives and Functions

- 9 Training and capacity building of health care providers and the community as per needs
- 10 Promotion of intersectoral coordination for better health services
- 11 Obtaining monetary and other support from Govt. Of India,Private sector,WHO etc. for improvement of Health infrastructures.
- 12 Ensuring community participation in all activities

## Section 2: Inter se Priorities among Key Objectives, Success indicators and Targets

Objective	Weight	Action	Success Indicator	Unit	Weight	Target / Criteria Value				
						Excellent	Very Good	Good	Fair	Poor
						100%	90%	80%	70%	60%
[1] Control of Communicable and Non-Communicable Diseases including HIV/AIDS	35.00	[1.1] To reduce mortality and morbidity due to Malaria	[1.1.1] [1.1.1] Annual Parasitic Incidence (API)	Nos per 1000	4.00	18	20	22	24	26
		[1.2] To improve Malaria Surveillance	[1.2.1] [1.2.1.] Annual Blood Examination Rate (ABER)	%	3.50	30	27	24	21	18
		[1.3] Control of Tuberculosis	[1.3.1] [1.3.1] Total cases detected	Nos.	3.00	1980	1800	1584	1386	1188
			[1.3.2] Success Rate	%.	3.50	97.4	88.6	70.8	62.02	53.16
		[1.4] Control of Blindness	[1.4.1] [1.4.1.] New cataract cases detected	Nos	1.00	1925	1750	1540	1347	1155
			[1.4.2] No. of Screening School Children for Refractive Error	Nos	2.00	3300	3000	2646	2310	1980
			[1.4.3] Cataract Surgery performed successfully	Nos	1.50	1760	1600	1408	1232	1056
		[1.5] Control and reduction of burden due to HIV/AIDS	[1.5.1] [1.5.1] Percentage of HIV positive pregnant women cover with multi drug regimen	%	2.50	88	80	64	56	48
			[1.5.2] Generate awareness on HIV/AIDS through mass media	Nos	2.00	3322	3020	2416	2114	1812
			[1.5.3] Percentage of eligible patient started on ART	%	2.00	93	85	68	59	51
			[1.5.4] No. of ANC tested for HIV	Nos	2.00	28600	26000	20800	18200	15600

## Section 2: Inter se Priorities among Key Objectives, Success indicators and Targets

Objective	Weight	Action	Success Indicator	Unit	Weight	Target / Criteria Value				
						Excellent	Very Good	Good	Fair	Poor
						100%	90%	80%	70%	60%
			[1.5.5] Percentage of voluntary blood donation	%	2.00	93	85	68	59	51
		[1.6] Mental Health	[1.6.1] [1.6.1] Early detection and treatment of mentally ill patients	Nos	1.00	5500	5000	4400	3850	3300
			[1.6.2] School visit (Secondary & Higher) for increasing awareness and reducing stigma related to mental health problems	Nos.	1.00	37	34	27	23	20
		[1.7] To reduce and control of tobacco use prevalence and resultant diseases	[1.7.1] [1.7.1] Public awareness programmes	Nos	1.25	279	254	223	195	167
			[1.7.2] Training of health care workers, enforcement official, ect	Nos	1.25	59	53	43	41	35
			[1.7.3] Tobacco quit rate	%	1.50	13.2	12.09	10.56	9.24	7.92
[2] Promotion of Community Action for Health (CAH)	5.00	[2.1] Health Insurance Scheme for BPL and APL Families	[2.1.1] No. of claims settled under Mizoram Health Care Scheme	Nos	5.00	6490	5900	5192	4593	3894
[3] Reduction in Infant Mortality Rate (IMR)	15.00	[3.1] Promotion of Institutional deliveries	[3.1.1] Institutional deliveries	Nos	5.00	19800	18000	15840	13860	11880
		[3.2] Full immunization of children	[3.2.1] No. of children fully immunized	Nos	5.00	18370	16700	14696	12859	11022

## Section 2: Inter se Priorities among Key Objectives, Success indicators and Targets

Objective	Weight	Action	Success Indicator	Unit	Weight	Target / Criteria Value				
						Excellent	Very Good	Good	Fair	Poor
						100%	90%	80%	70%	60%
		[3.3] Number of beneficiaries receiving JSSK	[3.3.1] Number of sick infant availing JSSK	Nos	5.00	7095	6450	5676	4966	4257
[4] Reduction in Maternal Mortality Ratio (MMR)	5.00	[4.1] Increase in ANC checkup	[4.1.1] Women completing 3 ANC's	Nos	5.00	17875	16250	14300	12512	10725
[5] Improving Maternal and Child Health	10.00	[5.1] Support through Janani Suraksha Yojana (JSY)	[5.1.1] JSY beneficiaries (Mother components)	Nos	5.00	5951	5410	4760	4165	3570
			[5.1.2] JSY beneficiaries (ASHA components)	Nos	5.00	5610	5100	4488	3927	3611
[6] Ensuring Population Stabilization	6.00	[6.1] Number of sterilized	[6.1.1] No. of sterilized	Nos	3.00	1485	1350	1188	1038	981
		[6.2] Intra Uterine Device (IUD) insertion	[6.2.1] No. of IUD inserted	Nos	3.00	2530	2300	2024	1771	1518
[7] Enforcement of Health related regulatory matters in the state	6.00	[7.1] Enforcement of COPTA	[7.1.1] Checking done by Anti-Tobacco Squads	Nos	1.00	163	149	130	114	97
		[7.2] Enforcement of Food Safety & Standard Act 2006	[7.2.1] License issued to manufacturer of food item	Nos	1.50	56	51	45	39	34
			[7.2.2] Registration of food business operator	Nos	1.50	154	149	123	108	92
		[7.3] Enforcement of Drugs & Cosmetic Act 1940	[7.3.1] Drugs store inspection	Nos	1.00	1263	1250	1010	884	758
[7.4] Implementation of Clinical Establishment Act 2015	[7.4.1] No. of clinical establishment registered	Nos	1.00	275	250	220	192	165		
[8] Promotion of Adolescent Health	4.00	[8.1] Prevention of Anaemia	[8.1.1] Number of Beneficiaries receiving Weekly Iron Folic	Nos	4.00	126500	115000	101200	88550	75900

## Section 2: Inter se Priorities among Key Objectives, Success indicators and Targets

Objective	Weight	Action	Success Indicator	Unit	Weight	Target / Criteria Value				
						Excellent	Very Good	Good	Fair	Poor
						100%	90%	80%	70%	60%
			Supplement							
[9] Development of AYUSH Hospitals & Dispensaries including IEC under AYUSH Programme	4.00	[9.1] Provisions of medicines at District Hospital	[9.1.1] Attendance of patients at OPD	Nos	4.00	14245	12950	11396	9971	8547
* Efficient functioning of the RFD System	3.00	Timely submission of Mid Term Achievement	On-time submission	Date	1.0	10/10/2015	17/10/2015	24/10/2015	30/10/2015	10/11/2015
		Timely submission of final corrected RFD of 2015-2016 through RFMS	On-time submission	Date	1.0	15/07/2015	21/07/2015	28/07/2015	04/08/2015	10/08/2015
		Timely submission of Results for 2015-2016	On-time submission	Date	1.0	02/05/2016	03/05/2016	04/05/2016	05/05/2016	07/05/2016
* Effective redressal of citizens' grievances	1.00	Timely disposal of citizens' grievances lodged through www.mipuiaw.nic.in	Citizens' grievances disposed off through www.mipuiaw.nic.in within 30 days	%	1.0	100	90	80	70	60
* Preparation of Citizen's Charter	2.00	Submission of Citizens' Charter as per the framework provided by RFMS	On-time submission	Date	2.0	11/01/2016	14/01/2016	17/01/2016	20/01/2016	25/01/2016
* Simplifying internal procedures for effective public service delivery	4.00	Timely formation of Core Committee for Simplification of Internal Procedures	On-time formation of the Committee	Date	1.0	10/05/2015	20/05/2015	30/05/2015	10/06/2015	15/06/2015
		Cumbersome internal procedures are simplified by the Department as per the recommendations of the Core Committee	Number of internal procedures simplified	No.	3.0	5	4	3	2	1

\* Mandatory Objective(s)

### Section 3: Trend Values of the Success Indicators

Objective	Action	Success Indicator	Unit	Actual Value for FY 13/14	Actual Value for FY 14/15	Target Value for FY 15/16	Projected Value for FY 16/17	Projected Value for FY 17/18
[1] Control of Communicable and Non-Communicable Diseases including HIV/AIDS	[1.1] To reduce mortality and morbidity due to Malaria	[1.1.1] [1.1.1] Annual Parasitic Incidence (API)	Nos per 1000	7.6	23.4	20.00	18.4	16.4
	[1.2] To improve Malaria Surveillance	[1.2.1] [1.2.1] Annual Blood Examination Rate (ABER)	%	2.65	22.90	27.00	28.00	29.00
	[1.3] Control of Tuberculosis	[1.3.1] [1.3.1] Total cases detected	Nos.	2015	1954	1800	1850	1900
		[1.3.2] Success Rate	%.	87.33	88.88	88.6	90.60	99.60
	[1.4] Control of Blindness	[1.4.1] [1.4.1] New cataract cases detected	Nos	1688	1671	1750	1850	1900
		[1.4.2] No. of Screening School Children for Refractive Error	Nos	1649	2812	3000	2100	2250
		[1.4.3] Cataract Surgery performed successfully	Nos	1853	1562	1600	1672	1762
	[1.5] Control and reduction of burden due to HIV/AIDS	[1.5.1] [1.5.1] Percentage of HIV positive pregnant women cover with multi drug regimen	%	152	100	80	90	100
		[1.5.2] Generate awareness on HIV/AIDS through mass media	Nos	2001	1965	3020	3120	3220
		[1.5.3] Percentage of eligible patient started on ART	%	678	876	85	93	101
		[1.5.4] No. of ANC tested for HIV	Nos	--	--	26000	27000	28000



### Section 3: Trend Values of the Success Indicators

Objective	Action	Success Indicator	Unit	Actual Value for FY 13/14	Actual Value for FY 14/15	Target Value for FY 15/16	Projected Value for FY 16/17	Projected Value for FY 17/18
		[1.5.5] Percentage of voluntary blood donation	%	--	--	18000	20000	21000
	[1.6] Mental Health	[1.6.1] [1.6.1] Early detection and treatment of mentally ill patients	Nos	5465	4853	5000	5100	5300
		[1.6.2] School visit (Secondary & Higher) for increasing awareness and reducing stigma related to mental health problems	Nos.	15	33	35	38	41
	[1.7] To reduce and control of tobacco use prevalence and resultant diseases	[1.7.1] [1.7.1] Public awareness programmes	Nos	192	254	259	265	275
		[1.7.2] Training of health care workers, enforcement official, ect	Nos	17	49	53	57	67
		[1.7.3] Tobacco quit rate	%	15.57	15	12.09	13.09	14.00
[2] Promotion of Community Action for Health (CAH)	[2.1] Health Insurance Scheme for BPL and APL Families	[2.1.1] No. of claims settled under Mizoram Health Care Scheme	Nos	--	5851	5900	6150	6350
[3] Reduction in Infant Mortality Rate (IMR)	[3.1] Promotion of Institutional deliveries	[3.1.1] Institutional deliveries	Nos	--	13602	18000	19000	19500
	[3.2] Full immunization of children	[3.2.1] No. of children fully immunized	Nos	--	16483	16700	17550	18550

### Section 3: Trend Values of the Success Indicators

Objective	Action	Success Indicator	Unit	Actual Value for FY 13/14	Actual Value for FY 14/15	Target Value for FY 15/16	Projected Value for FY 16/17	Projected Value for FY 17/18
	[3.3] Number of beneficiaries receiving JSSK	[3.3.1] Number of sick infant availing JSSK	Nos	2469	6070	6450	7090	8070
[4] Reduction in Maternal Mortality Ratio (MMR)	[4.1] Increase in ANC checkup	[4.1.1] Women completing 3 ANCs	Nos	249.33	11525	16250	11790	11990
[5] Improving Maternal and Child Health	[5.1] Support through Janani Suraksha Yojana (JSY)	[5.1.1] JSY beneficiaries (Mother components)	Nos	11854	5367	5410	7200	9200
		[5.1.2] JSY beneficiaries (ASHA components)	Nos	9147	4658	5100	6150	6950
[6] Ensuring Population Stabilization	[6.1] Number of sterilized	[6.1.1] No. of sterilized	Nos	--	1462	1350	1650	1750
	[6.2] Intra Uterine Device (IUD) insertion	[6.2.1] No. of IUD inserted	Nos	4956	2135	2300	2500	2700
[7] Enforcement of Health related regulatory matters in the state	[7.1] Enforcement of COPTA	[7.1.1] Checking done by Anti-Tobacco Squads	Nos	71	146	149	156	166
	[7.2] Enforcement of Food Safety & Standard Act 2006	[7.2.1] License issued to manufacturer of food item	Nos	83	168	51	65	75
		[7.2.2] Registration of food business operator	Nos	858	2364	149	160	180
	[7.3] Enforcement of Drugs & Cosmetic Act 1940	[7.3.1] Drugs store inspection	Nos	1425	1249	1250	1290	1350
[7.4] Implementation of Clinical Establishment Act 2015	[7.4.1] No. of clinical establishment registered	Nos	--	--	250	275	285	
[8] Promotion of Adolescent Health	[8.1] Prevention of Anaemia	[8.1.1] Number of Beneficiaries receiving Weekly Iron	Nos	--	--	115000	120500	125000

### Section 3: Trend Values of the Success Indicators

Objective	Action	Success Indicator	Unit	Actual Value for FY 13/14	Actual Value for FY 14/15	Target Value for FY 15/16	Projected Value for FY 16/17	Projected Value for FY 17/18
		Folic Supplement						
[9] Development of AYUSH Hospitals & Dispensaries including IEC under AYUSH Programme	[9.1] Provisions of medicines at District Hospital	[9.1.1] Attendance of patients at OPD	Nos	25000	12785	12950	15000	17000
* Efficient functioning of the RFD System	Timely submission of Mid Term Achievement	On-time submission	Date	--	27/05/2015	17/10/2015	--	--
	Timely submission of final corrected RFD of 2015-2016 through RFMS	On-time submission	Date	--	--	03/05/2015	--	--
	Timely submission of Results for 2015-2016	On-time submission	Date	--	--	03/05/2016	--	--
* Effective redressal of citizens' grievances	Timely disposal of citizens' grievances lodged through www.mipuiaw.nic.in	Citizens' grievances disposed off through www.mipuiaw.nic.in within 30 days	%	--	100	90	--	--
* Preparation of Citizen's Charter	Submission of Citizens' Charter as per the framework provided by RFMS	On-time submission	Date	--	--	10/07/2015	--	--
* Simplifying internal procedures for effective public service delivery	Timely formation of Core Committee for Simplification of Internal Procedures	On-time formation of the Committee	Date	--	--	20/05/2015	--	--
	Cumbersome internal procedures are simplified by the Department as per the recommendations of the Core Committee	Number of internal procedures simplified	No.	--	--	4	--	--

\* Mandatory Objective(s)

## Section 4: Acronym

Sl.No	Acronym	Description
1	ABER	Annual Blood Examination Rate
2	AIDS	Acquire Immune Deficiency Syndrome
3	ANC	Anti-Neonatal Centre
4	API	Annual Parasitic Incidence
5	APL	Above Poverty Line
6	ART	Antivetroviral Therapy

## Section 4: Acronym

Sl.No	Acronym	Description
7	ARV	Antiretroviral
8	ASHA	Accredited Social Health Activist
9	AYUSH	Ayurveda Yoga Nauropathy Unani Sidtha & Homoeopathy
10	BPL	Below Poverty Line
11	CAH	Community Action for Health
12	CHC	Community Health Centre

## Section 4: Acronym

Sl.No	Acronym	Description
13	COPTA	Cigarettes & Other Tobacco Product Act
14	HIV	Human Immune Virus
15	IEC	Information Education Communication
16	IMR	Infant Mortality Rate
17	IUD	Intra Uterine Device
18	IUD	Intra Uterine Devices

## Section 4: Acronym

Sl.No	Acronym	Description
19	JSSK	Janani Sishu Suraksha Karyakram
20	JSY	Janani Suraksha Yojana
21	MMR	Maternal Morality Ratio
22	OPD	Out Patient Department
23	TB	Tuberculosis
24	WIFS	Weekly Iron Folic Supplement

## Section 4: Acronym

Sl.No	Acronym	Description
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## Section 4: Description and Definition of Success Indicators and Proposed Measurement Methodology

Sl.No	Success indicator	Description	Definition	Measurement	General Comments
1	[1.1.1] [1.1.1] Annual Parasitic Incidence (API)	It is the most commonly used index of measuring the incidence of malaria, and is highly sensitive. It defined as the number of confirmed cases of malaria per thousand persons during the year in the community under surveillance.	API= Total No. of positive slides for malaria parasites in a year x 1000/total population under surveillance.	Periodic report of State Vector Borne Diseases Control Programme	During the eradication era, the microscopic diagnosis of malaria cases became the main method of diagnosis. The parameters used for the measurement of malaria is mostly parasitological in nature. API is a sophisticated measure of malaria incidence in a community
2	[1.2.1] [1.2.1] Annual Blood Examination Rate (ABER)	As per guideline of WHO, Blood examination for Malaria has to be carried out for all fever cases in high prevalent area like Mizoram so as not to miss any malaria cases	ABER = Total number of Blood Slide Collection/Examination in a year/Total population x 100	Periodical report of SVBDPCP	ABER is the most useful and effective tool for detection of Malaria cases. All fever cases are expected to be tested for Malaria.
3	[1.3.1] [1.3.1] Total cases detected	Under RNTCP, active case finding is not pursued. Case finding will be passive. Patient representing themselves with symptoms suspicious of tuberculosis are screened through 3 sputum smear examination and sputum microscopic examination done at designed RNTCP microscopy centres.	The revised definition of a new sputum smear +ve pulmonary TB case is based on the presence of at least one acid fast bacilli (AFB+) in at least one sputum sample in countries with a well functioning external quality assurance (EQA) system.	Periodic report of the RNTCP, Mizoram	In 2011, India again topped the list for incidence (the no. of new cases detected in a year). It has 2 million - 2.5 million, compared with China 's 0.9-1.1 million. If global incidence during 2011 was 8.3 to 9 million, "India and China accounted for 26% and 12% "respectively. The WHO report notes about 3 lacs people will die this year

## Section 4: Description and Definition of Success Indicators and Proposed Measurement Methodology

Sl.No	Success indicator	Description	Definition	Measurement	General Comments
4	[1.3.2] Success Rate		Annual new case detection rate null (ANCDR) is defined as No. of new cases detected during the year multiplied by 100000 and then divided by population as on 31st March	Periodic reports of Revised National Tuberculosis Control Programme (RNCTP), Mizoram.	The RNCTP target is to achieve Case Detection Rate 85% and Cure Rate 70%
5	[3.1.1] Institutional deliveries	Total number of institutional deliveries include the following health facilities - Hospitals, Dispensary/Clinics/Urban Health Centre/Primary Health Centre/Rural Hospital/Sub-Centre/AYUSH Hospital etc.		Total number of delivery in a defined areas.	In order to reduce infant mortality and maternal mortality the best actions that can be included increasing the institutional delivery for the state.

## Section 5 : Specific Performance Requirements from other Departments

Location Type	State	Organisation Type	Organisation Name	Relevant Success Indicator	What is your requirement from this organisation	Justification for this requirement	Please quantify your requirement from this Organisation	What happens if your requirement is not met.
Central Government		Ministry	Ministry of Finance	[1.2.1] [1.2.1.] Annual Blood Examination Rate (ABER) [1.3.1] [1.3.1] Total cases detected [1.3.2] Success Rate [1.4.1] [1.4.1.] New cataract cases detected [1.4.3] Cataract Surgery performed successfully [1.5.1] [1.5.1] Percentage of HIV positive pregnant women cover with multi drug regimen [1.5.3] Percentage of eligible patient started on ART [1.5.4] No. of ANC tested for HIV [1.5.5] Percentage of voluntary blood donation [1.6.1] [1.6.1] Early detection and treatment of mentally ill patients	For funding	All are centralised schemes		The programmes may not be implemented

## Section 5 : Specific Performance Requirements from other Departments

Location Type	State	Organisation Type	Organisation Name	Relevant Success Indicator	What is your requirement from this organisation	Justification for this requirement	Please quantify your requirement from this Organisation	What happens if your requirement is not met.
				[1.7.1] [1.7.1] Public awareness programmes  [1.7.3] Tobacco quit rate  [3.1.1] Institutional deliveries [3.3.1] Number of sick infant availing JSSK  [4.1.1] Women completing 3 ANC's [5.1.1] JSY beneficiaries (Mother components)  [5.1.2] JSY beneficiaries (ASHA components)  [6.1.1] No. of sterilized  [6.2.1] No. of IUD inserted [7.1.1] Checking done by Anti-Tobacco Squads  [7.4.1] No. of clinical establishment registered				

## Section 5 : Specific Performance Requirements from other Departments

Location Type	State	Organisation Type	Organisation Name	Relevant Success Indicator	What is your requirement from this organisation	Justification for this requirement	Please quantify your requirement from this Organisation	What happens if your requirement is not met.
				[8.1.1] Number of Beneficiaries receiving Weekly Iron Folic Supplement				
State Government	Mizoram	Departments	Department of Local Administration	[2.1.1] No. of claims settled under Mizoram Health Care Scheme	Local council amp;Village Council to help for better registration on health care scheme	Making information and registration	One Local Council for each village	Without their cooperation,the programme may not be achieved
			Department of Excise & Narcotics	[7.3.1] Drugs store inspection	For effective implementation of Narcotic Drugs and Psychotropic Substances Act.			
			Department of Social Welfare	[3.2.1] No. of children fully immunized	Supplement nutrition and immunization			
			Department of School Education	[1.4.2] No. of Screening School Children for Refractive Error	For facilitating medical examination of children,provision of spectacles and use of space for out reach activities like pulse polio.Health campes and also for treatment of emergency patients in out breaks.	To screen school children for refractive errors and other ailments.	A number of children having physical problems may be un detected which may result in weakness in their growth.etc.	
				[1.6.2] School visit (Secondary & Higher) for increasing awareness and reducing stigma	For facilitating medical examination of children,provision of spectacles and use of space for out			A number of children having physical problems may result in weakness in their growth,etc.

## Section 5 : Specific Performance Requirements from other Departments

Location Type	State	Organisation Type	Organisation Name	Relevant Success Indicator	What is your requirement from this organisation	Justification for this requirement	Please quantify your requirement from this Organisation	What happens if your requirement is not met.
				related to mental health problems	reach activities like pulse polio.Health camps and also for treatment of emergency poatients in out breaks.			A number of children having physical problems may result in weakness in their growth,etc.
			Department of Public Health Engineering	[1.1.1] [1.1.1] Annual Parasitic Incidence (API)	For providing safe derinking water for sanitation.			
			Department of Information & Communication Technology	[1.5.2] Generate awareness on HIV/AIDS through mass media	Internet Connectivity	For better and effective mass awareness on health programme		
			Department of Power & Electricity	[1.7.2] Training of health care workers, enforcement official, ect	Electricity will be required while training conducted	Training instrument devices mostly required electricity		

## Section 6: Outcome/Impact of Department/Ministry

Outcome/Impact of Department/Ministry	Jointly responsible for influencing this outcome / impact with the following department (s) / ministry(ies)	Success Indicator	Unit	FY 13/14	FY 14/15	FY 15/16	FY 16/17	FY 17/18
1 Reduction in infant mortality	Social Welfare, Local Administrative, Public Health Engineering Department	IMR	Per 1000 live birth	35	34	32	30	31
2 Reduction in Maternal Death	Education Department, Social Welfare, Public Health Engineer, Transport etc.	MMR	No. per 100000 live birth	76	70	65	60	55
		Institution delivery	Nos.	16700	13608	18000	21500	22500
		Full Immunization	Nos.	17860	16483	16700	25000	26000
3 Reduction in Growth Rate of population	Total Fertility Rate (TFR)	Annual Blood Examination Rate (ABER)	%	2.65	22.90	25.80	26.90	27.80
		Total Tuberculosis Detected	Nos.	2015	1954	1750	2100	2200
		Annual Parasitic Incidence (API)	Per 1000 populatio	7.6	23.32	20.00	19.4	18.3
		Early detection and treated mental diseases	Nos.	5465	4853	5000	4800	4600
		Reduction in Tobacco useage	Tobacco quit rate (%)	15.57	12.04	13	14	15
4 Reduction in diseases burden	Environment & Forest, Social Welfare, Public Health Engineer, Education and Local Administration Department, etc.	Total Fertility Rate (FTR)	Nos.	2.7	2.5	2.4	2.2	2.0