



Mission Directorate
National Health Mission, Odisha
Department of Health & Family Welfare,
Government of Odisha

Letter No. OSH&FWS/ 10479

Date: 06.09.2025

From

Dr. Brundha D, IAS
Mission Director, NHM, Odisha.

To,

The Director (Capital Hospital & RGH, Rourkela)
All CDM&PHO –cum– DMDs
All ADUPHOs

Sub: Guidance Note on Campaign “Swasth Naari, Sashakta Parivar Abhiyan” – Reg.

Ref: DO No Z.28015/61/2025-NHM-I dated 5th September 2025 from MoHFW

Madam/ Sir,

Health and empowerment of women is central to the progress of our families, communities and the Nation at large. In this context, the MoHFW is launching the health campaign - “Swasth Naari, Sashakta Parivar Abhiyan” from 17th September to 2nd October 2025 across all States including Odisha.

In order to rollout the campaign, a detailed Guidance Note has been prepared & attached herewith on Campaign “Swasth Naari, Sashakta Parivar Abhiyan”, following instructions from Gol.

Preparatory Actions for the Campaign:

- Stakeholders Meeting (W&CD, Mission Shakti, ST&SC, PR, Pvt. Hospitals, Medical Forums, NGOs etc.) under the Chairpersonship of Collector & DM by 10th September 2025.
- Prepare & share Calendar of Activities (in the desired Format) by 12th September 2025.
- Ensure availability of Devices & Logistics
- Orientation of Staff at all levels through VCs
- Discussion with People’s representatives & finalize the guest list for attending camps at different levels.

This is for information and necessary action.

Yours faithfully,


Mission Director,
NHM, Odisha

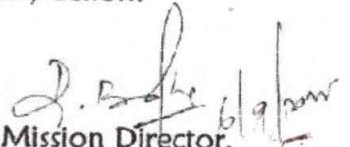


Mission Directorate
National Health Mission, Odisha
Department of Health & Family Welfare,
Government of Odisha

Memo No 10480

Date 06.09.2025

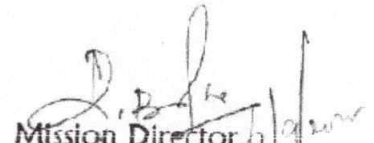
Copy forwarded to the AMD, Odisha for information and necessary action.


Mission Director,
NHM, Odisha

Memo No 10481

Date 06.09.2025

Copy forwarded to all Director of Health & FW Department, Odisha for information and necessary action.


Mission Director,
NHM, Odisha

Memo No 10482

Date 06.09.2025

Copy forwarded to all DPMs / all CPMs for information and necessary action.


Mission Director,
NHM, Odisha

OFFICE OF THE CHIEF DISTRICT MEDICAL AND PUBLIC HEALTH OFFICER, RAYAGADA

Memo No. 8441 / 2025

date 11 / 09 / 2025

Copy to the Superintendent, SDH Gunupur and the Medical Officer I/c s of all CHC and UPHCs of Rayagada district for information and necessary action.

Copy to the DPHO / DMO (MS), DHH / ADPHO (FW) / ADPHO (VBD) / ADPHO (TB) / ADPHO (DC) / ADPHO (Lep), and all DPMU, staff of NHM Rayagada for information and necessary action.



CDM&PHO cum District Mission Director,
Rayagada

Guidance Note On "Swasth Naari, Sashakta Parivar Abhiyan"

1. Background :

"Swasth Naari, Sashakta Parivar Abhiyan" is a National level campaign planned all across the States including Odisha for providing comprehensive health screening & services to **women and girls of all ages** on priority through camp approach for building a healthy future generation. The Abhiyan will be inaugurated by Hon'ble PM at Indore on **17th September 2025**.

2. Period of the Abhiyan & Major Initiatives Planned :

The campaign will be rolled out from **17th September to 2nd October 2025** across the State, involving Public Health Administration, Forums / Agencies/ Hospitals working in Health Sector including NGOs. The comprehensive health Screening & Services will be offered to **women and girls of all ages** through camp approach during the Abhiyan.

Observation of National Voluntary Blood Donation Day (NVBDD) on 1st Oct 2025 and **e-PMSMA**s planned by individual facilities shall be observed with utmost quality under the Supervision of assigned Monitors as part of this Abhiyan.

The **Poshan Maah** observed by Department of Women & Child Development planned from **12th September to 11th October 2025** will be strengthened through convergent action for intensify efforts to combat malnutrition & promote holistic wellbeing during this Abhiyan.

3. Targeted Beneficiaries of the Abhiyan:

- The Abhiyan mandates the inclusion of **all females –spanning from early childhood to Children, adolescence, adulthood and senior age groups**. However, if cases of other Sex attend the camp, then they should not be debarred from availing the services.
- As part of the screening, **all female Service providers/Activists/ Mobilisers associated with H& FW and other line Deptts** (details as given below) shall be screened, especially **on the day of Launching of the Campaign** at nearby Public Health facilities.
 - Health & FW Deptt – ASHAs, HW-M & Fs, CHOs, Health Supervisors, Nursing Officers, LTs, Pharmacists, Doctors etc.

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- W&CD Deptt – AWW, Helper, Supervisors
- S&ME- Teachers
- ST&SC – Teachers, ANMs
- Mission Shakti- WSHGs

However, Female Donors can not alone be targeted for blood collection under Voluntary Blood Donation Camps.

4. Major Components of the Abhiyan

4.1 Comprehensive Health Screening: The comprehensive health screening shall cover the following conditions;

- **NCD screening** for Hypertension, Diabetes, Oral Cancer, Breast Cancer and cervical Cancer (Eligible - All women of 30 years of age & above)
- **Tuberculosis Screening** (Eligible - only Women & girls from Vulnerable group i.e. Contact cases of last 3 years, all 60 years & above age, Diabetes, malnourished, Smokers, Drinkers)
- **Screening for Anemia** (Eligible -all adolescent girls & women in reproductive age group)
- **Screening for Sickle Cell & Thalassemia** (Eligible - all women & girls of 0 to 40 years of age)
- **ANC Screening/checkups** (Eligible - Pregnant Women)
- **Age appropriate vaccination** (Eligible – all women & girls upto 18 years of age)

Apart from health screening, awareness shall be created on **menstrual hygiene, reduction in consumption of oil and sugar** apart from areas mentioned above in 6 broad heads in the proposed camps.

4.1.1 Levels of Camp: Under this campaign, it is planned to organize both **facility & Field level Camps**. The Facility level camps will be organized at following sites.

Facility level Camp

- Public Health Facility i.e. CHC, UCHCs, PHC AAMs, UPHC AAMs, UAAMs, SC AAMs
- Private Health Facilities i.e. all empanelled Private Health Facilities under PMJAY & JSY

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Field Level Camp

- The field level camps will be organized at all selected revenue villages (with more than 1,000 population and located beyond 3 Kms from SC falls under its operational area) across the State.

4.1.2 Types of Camp planned: The proposed camps shall be of two types, decided based on the nature of screening i.e. **General Screening –cum-Awareness Camp & Specialist Camp.**

General Screening-cum- Awareness Camp:

- **Purpose of the Camp:** Here in the camp, **primary screening** shall be done by the team of Primary Care Health Service providers.
- **Team Composition:** A minimum 2 members team (among SN/ CHO/ HW-M/ HW-F/ Pharmacist/ LT) will be formed to facilitate online registration and screening process
- **Place of organization of camp:** These camps shall be organized at both **Facility & Field level.**
- **Frequency of Camp at Public Health Facilities:** The General Screening camp shall regularly be organized at all public health facilities (UAAM/ PHC/ UPHC/ CHC/ UCHC/ SDH/ DHH/ MCHs) throughout the campaign period (except public holidays) & the timing shall be **coterminous with OPD timings.** But a separate Kiosk will be placed at OPD for the same at CHC, UCHC, SDH & DHH level.
- **Site of the Camp at Field level:**
 - SC-HQ
 - **Revenue villages** with more than 1,000 population and located beyond 3 Kms from SC falls under its operational area.
 - **VHSND / FID session Site** (Camp activities shall be taken up preferably in the afternoon or after completion of usual assignment of VHSND/ FID).
- **The primary screening will be on 6 broad areas as mentioned in point no- 4.1**
- **All female Service providers/Activists/ Mobilisers associated with H& FW and other line Deptts** (details as given below) shall be screened, especially **on the day of Launching of the Campaign** at nearby Public Health facilities.
- **Leaflets** shall be distributed in the camp to the beneficiaries (Issue appropriate) for improving general awareness.
- **School Level Camps** – MHTs shall organize such camps at Schools for screening of students and report as part of their regular visit to schools. Similarly, ANMs of ST/SC Deptt. Shall organize such camps at their assigned schools & report.

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- **Recording of Suspected case (Line Listing):** The line listing of suspected cases shall be done following guidelines shared time to time with districts.

Specialist Camps

- **Purpose of the Camp:** These Special camps are meant for **confirmation of suspected cases identified from general camps & initiate treatment if any at SDH, CHC, UCHC, UPHC Level.**
 - **Team Composition:** These Camps shall be attended by **Specialists from any stream** as per availability & expected referral cases to attend the proposed camp. **A team of Nursing & Paramedical Staff** (i.e. SN/CHO/ HW-M/ HW-F/ Pharmacist/ LT) as per the expected camp size (based on Case Load) shall be deployed for supporting in organizing the camp.
 - **Frequency of Camps:** At least one such camp shall be planned during the campaign period.
 - **Mobilization of Specialists:** Specialists/ Super Specialists shall be mobilized from DHH, Govt MCHs and private empaneled hospitals under PMJAY-GJAY & JSY.
 - **Presence of People's representatives:** District shall discuss with People's representatives & finalize the guest list for attending such camps at different levels.

4.1.3.1 Planning for organizing General Screening-cum- Awareness Camp & Specialist camp:

- The district has to prepare a Calendar for organizing Specialist camps & General Screening-cum- Awareness Camp at field (Village Level) and facility level in the desired Format attached herewith at **Annexure- A.**
- **General Screening-cum- Awareness Camp shall be organized for a minimum of 10 days (except Sunday & Puja Holidays out of scheduled 15 days of campaign period) at all levels (Facility & Field i.e. Village).**
- **Specialist camps shall be organized at least twice at CHC/UCHC/UPHC in the Abhiyan period.**
- **The copy of the same shall be kept with all administrative units (District/ City/ Block/ Sector) for information & monitoring.**

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4.1.4 Procurement of Devices & Logistics

The availability of screening devices & Logistics like Hemoglobin meter & strips, Gluco meter & strips, Acetic acid for VIA, DBS-HPLC Kits, TrueNAAT Devices, Chips & sputum containers and BP Instruments are essential for organizing **General Screening-cum-Awareness Camps under this Abhiyan**. Further, it is to note that the letter No 11776 dated 16th August 2025 from DC –cum- Additional Chief Secretary, Odisha says that adoption of Non-invasive Screening Technology for rapid, painless mass screening for anemia.

In case, districts are short of these devices and logistics, must procure the same observing due financial procedures at the earliest out of XV-FC funds.

4.1.5 Confirmation of Suspected cases & Initiation of treatment: The suspected cases identified at general screening camps shall be referred to PHC/UPHCs in the 1st step for confirmation of disease status if any. The Follow up of these cases shall be taken up as per the standard procedures as intimated time to time through guidelines. All identified cases must be referred **within 2 days of identification** to nearest PHC/UPHCs (with Doctor)/ or any other nearest Public Health facilities (as deemed fit).

4.1.6 Budget for Proposed Camps

Sl. No	Activities	Unit Cost	Heads of Expenses	Remarks
1	General Screening-cum-Awareness Camp			
1.1	Refreshment Cost for Service Providers at Facility Level(CHC/UCHC/SDH/DHH)	Rs.500/- per day	RKS Fund	Expected 4 members team with 1 support Staff
1.2	Refreshment Cost for Service Providers at Facility Level (UAAM/ PHC/ UPHC)	Rs.200/- per day	JAS Fund in case of PHC/ UPHC & UAAM Budget	Expected 2 members team
1.3	Refreshment Cost for Service Providers for organizing camp (at SC & Villages with more than 1,000 population and located beyond 3 Kms from SC) by SC Team	Rs.300/- per day	Special fund earmarked under Ayushman Arogy Shivar	Expected 2 members team & ASHAs to support
2	Specialist Camp			
2.1	Transportation support for Specialists mobilized for the	Rs.5,000/-	Special fund earmarked	1 Camp during campaign period is

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Sl. No	Activities	Unit Cost	Heads of Expenses	Remarks
	camp (From DHH/Govt. MCH)		under Ayushman Arogy Shivar	proposed per CHC/UCHC/SDH/UPHC level. Transportation cost for mobilization of Specialist/ Super Specialists from Private empaneled hospitals shall be borne by respective Private empaneled Hospitals
2.2	Refreshments & other camp arrangements cost	Rs 10,000/-	RKS Fund	
3	IEC/BCC			
3.1	Banner & Standee			
3.1.1	UAAM/ SC-AAM/PHC /UPHC Level	Rs. 1,500/-	JAS/ UAAM fund	2 Banners 2 Standees
3.1.2	CHC/UCHC/SDH/DHH	Rs.5,000/-	RKS	4 Banners & 8 Standees
3.2	Leaflets			
3.2.1	Leaflet for Districts / City	Rs.10,000/- per Block / Per UPHC @ Rs.5,000/-	SAMPuRNA fund	SAMPuRNA – Area Specific IEC/BCC fund

N.B: Due post facto approval must be taken for utilization of fund for the above given purpose out of RKS/ JAS fund.

4.2 Voluntary Blood Donation camp:

- Under this Abhiyan, each Odisha Blood Centers shall organize at least 10 Camps & a Mega Camp on National Voluntary Blood Donation Day (1st Oct) within the Abhiyan period of 15 days.
- On National Voluntary Blood Donation Day to promote Blood donor's registration & awareness, Blood Group testing facilities shall be arranged at PHCs/ UPHCs/ CHCs/ UCHCs/ SDHs / DHHs / MCHs level. The report shall be made available to the beneficiary.

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- Blood donation pledge shall be taken at each camp to promote voluntary blood donation in the State. People's representatives shall be invited to such camps.
 - All blood collection data shall be uploaded in the e-raktkosh portal for proper documentation and reporting. Further, the same shall also be reported in the National Portal (developed for the Abhiyan).
 - In order to streamline the organization of camp, a calendar of camps shall be prepared in advance in the desired format attached herewith at Annexure- B & made available with all concerned (CDMO/ BPHO).
- 4.3 **e- PMSMA:** The District shall review the ANC case load based the guidance note attached herewith at **Annexure-B** for notification of new dates at existing facilities /identify new facilities for e-PMSMA & strengthening implementation at existing sites as part of the Abhiyan.
- 4.4 **Nikshya Mitra Enrollment Drive:** A focused effort shall be taken to expand the pool of Nikshya Mitras during the fortnight, to encourage participation of Individuals, Institutions (Preferably Private Hospitals empaneled under PMJAY-GJAY & JSY) and organizations in adopting TB patients & supporting the Jan Andolan against TB. They can support by adopting any number of patients under health facilities (for individual donor), or any blocks/ urban wards/ districts/ States for at least six months.
- 4.5 **Poshan Maah :** The detailed guidelines will be shared after due consultation with W& CD Deptt.

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Calendar of SC Level General Screening -cum- Awareness Camps

District:

Block:

Name of the SC-AAM:

Name of the Revenue Village with more than 1000 population & located beyond 3 Kms from SC-AAM
(eligible for Camps):

Date	Place of Camp (mention the Name)	Category (SC HQ /eligible Revenue Village / VHSND/ FID Session Site)	Team Responsible (at least 2 person in each day) - Put Yes at appropriate place			Name of ASHA Responsible	Remarks
			CHO	MPHW (Female)	MPHW (Male)		
17-Sep-25							
18-Sep-25							
19-Sep-25							
20-Sep-25							
21-Sep-25							
22-Sep-25							
23-Sep-25							
24-Sep-25							
25-Sep-25							
26-Sep-25							
27-Sep-25							
28-Sep-25							
29-Sep-25							
30-Sep-25							
01-Oct-25							
02-Oct-25							

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Calendar of Specialist Camps

District:

Block:

Name of the Facility:

Category of the Facility:

** Specialist Camps during the campaign shall be taken up only at UPHC/ CHC/ UCHC/ SDH Level*

Sl. No	Name of the UPHC/ CHC/ UCHC/ SDH Level	Date of proposed Camp	Name of the Specialist	Mention Specialization	Mobilized from (Name of the Institution)	Public/ Private	Remarks
1							
2							
3							
4							
5							

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District Level Abstract
Abstract of Camps Proposed during Swasth Naari, Sashakta Parivar Abhiyan (Odisha)
Name of the District:

Date	SC Level General Screening -cum- Awareness Camps (put Numbers)				Other Facility Level General Screening -cum- Awareness Camps (put Numbers)								Specialist Camps (put Numbers)				
	SC - HQ Level Camps	Revenue Village Level Camps	VHSND/ FID Level Camps	Total number of SC Level General Screening-cum-Awareness Camps	UAAM Level	PHC Level	UPHC Level	CHC Level	UCHC Level	SDH Level	DHH Level	Total number of Other facility level General Awareness -cum- Screening Camps	UPHC Level	CHC Level	UCHC Level	SDH Level	Total number of Facility Level Specialist Camps
17-Sep-25																	
18-Sep-25																	
19-Sep-25																	
20-Sep-25																	
21-Sep-25																	
22-Sep-25																	
23-Sep-25																	
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26-Sep-25																	
27-Sep-25																	
28-Sep-25																	
29-Sep-25																	
30-Sep-25																	
01-Oct-25																	
02-Oct-25																	
Total																	

Signature

Radharani

Date

Strengthening Quality of Extended PMSMA (e-PMSMA)

Introduction:

Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) has been a significant initiative to ensure quality antenatal care (ANC) for pregnant women on a fixed day every month. While PMSMA has expanded access to ANC services, there remains a need to extend its reach to facilities with higher patient load and ensure that pregnant women consistently receive quality and comprehensive care.

To address this, the concept of **extended PMSMA (e-PMSMA)** has been introduced. The e-PMSMA focuses on organizing additional PMSMA days at high-footfall facilities, ensuring visibility of the campaign, availability of specialized services, and improved monitoring of ANC coverage.

The e-PMSMA aims to:

- Enhance visibility of quality ANC services beyond the monthly PMSMA day.
- Ensure services are available where demand is high.
- Strengthen planning, implementation, and reporting mechanisms for better maternal health outcomes.

Steps to Make e-PMSMA Visible and Effective

1. Identification of Facilities and Dates and Notification

- Facilities with **more than 50 ANC footfall per Obstetrician & Gynaecologist (O&G Specialist) or BEmOC-trained doctor** will be identified as potential sites for conducting e-PMSMA.
- The **CDM & PHO** will review ANC load across facilities and issue an official order notifying the new e-PMSMA dates/new facilities if any.
- The identified **e-PMSMA dates** will be entered and notified in the **PMSMA portal**, ensuring visibility and transparency. One facility can organise maximum 4 sessions in a month as extended PMSMA in month
- Facility-level signages/IEC boards will display the notified dates of e PMSMA with clear mention of division of area of coverage.
- All **HW (Female)** and **ASHAs** under the facility's jurisdiction shall be informed in advance about the schedule, so that they can mobilize eligible pregnant women to attend the services.

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2. Service Delivery as per PMSMA Guidelines

- Services on e-PMSMA days will strictly follow PMSMA guidelines, ensuring standardized and comprehensive care. This will include:
 - Clinical examination by O&G specialists or BEmOC-trained doctors.
 - Laboratory investigations as per protocol.
 - Nutritional counselling and dietary guidance for pregnant women.
 - **Ultrasound services** for women requiring further evaluation, ensuring timely referral and management.
 - Counselling on birth preparedness, danger signs, and family planning.
 - Facility arrangements will be made in advance to ensure crowd management, adequate privacy, and respectful maternity care.
 - Adequate logistics including drugs, supplements, diagnostic kits, and referral linkages will be ensured prior to the e-PMSMA date.
 - Foods shall be provided as per PMSMA guidelines.

3. Reporting and Monitoring

- All services provided during e-PMSMA must be entered into the PMSMA portal within 7 days of the session
- New PMSMA/e PMSMA OPD register is to be strictly used. HRP register for tracking is to be maintained and all service data related to HRP is to be entered in PMSMA portal.
- CDM & PHO will review the reporting status and provide feedback to facilities for ensuring completeness and accuracy of data.

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