



All newborns born at public health facilities and home would be screened for birth defects by health personnel and ASHA respectively, six weeks to six years at Anganwadi centres and six years to 18 years enrolled in government and government aided schools. These children would then be referred to appropriate facility for further management.



In order to implement the same, a dedicated Mobile Block Health Teams would be recruited and stationed at the block level (three per block) consisting of two AYUSH Doctor (one male, one female), one ANM/Staff Nurse and one Pharmacist.



In addition, a District Early intervention centre (DEIC) would be operationalised, consisting of a Multi disciplinary team viz. Medical Professional (Pediatrician, Medical Officer and Dental doctor), Psychologist, Optometrist, Early Interventionist cum Special Educator cum social worker, lab technician, dental technician, manager and a data entry operator and provide referral services to children referred for confirmation of diagnosis and appropriate treatment.



DEIC staff would visit all newborns delivered at District Hospital including those admitted in special Newborn Care Units irrespective of their sickness for hearing, vision, congenital heart diseases before discharge, and will ensure all children born sick or preterm or low birth weight or birth defects or referrals related to development delays are followed up. Furthermore, lab technicians of the DEIC would screen children for inborn errors of metabolism and other disorders at the district level and will ensure linkage with tertiary level care facilities through agreed MOUs.



The Mobile Block Health Teams will undertake at least twice yearly visits to anganwadi centres to screen children aged 6 weeks to 6 years and, at least once a year; they will visit all government and government-aided schools to screen children in the age group of 6 to 18 years. The children identified as requiring further management will be referred to District Early intervention Centres (DEIC) for confirmation of their diagnosis and further care.



Various institutes especially in the public sector have been identified to provide necessary support by collaborating with the national and state governments to achieve better results.



Synergy would be ensured through strong convergence with ongoing schemes of other ministries/ departments viz women and Child development, Social Justice and Empowerment, Education, Disability Affairs, AYUSH, Human Resource Development and also with organisations like National Trust, Norway India Partnership initiative.



The Programme will have an impact of other programmes run by various Departments viz. Right to Education.



RASHTRIYA BAL SWASTHYA KARYAKRAM



Swasth Bharat- A National Initiative



National Health Mission
Department of Health & Family Welfare
Government of Nagaland



RASHTRIYA BAL SWASTHYA KARYAKRAM (RBSK)

Government of India has launched Rashtriya Bal Swasthya Karyakram (RBSK) on 6th February 2013 to screen and manage children in the age group of 0 to 18 years for various health condition viz. Defects at birth, Deficiencies, Diseases and development delays including disabilities and envisages to cover more than 270 million children in a phased manner.

It stipulates that all expenses related to appropriate management and treatment (medical or surgical) would be borne directly by the Government of India.

Government of India is committed to improve survival outcome and better quality of care besides accelerating towards reduction of under-five mortality rate.

DEFECTS AT BIRTH

1. Neural tube defect
2. Down's Syndrome
3. Cleft lip & palate
4. Talipes (club foot)
5. Development dysplasia of the hip
6. Congenital cataract
7. Congenital deafness
8. Congenital heart diseases
9. Retinopathy of prematurity.

CHILDHOOD DISEASES

1. Skin condition (Scabies, fungal infection and Eczema)
2. Otitis Media
3. Rheumatic heart disease
4. Reactive airway caries
5. Convulsive disorders.

Identified Health Conditions for RBSK

DEFICIENCIES

1. Anaemia especially Severe anaemia
2. Vitamin A deficiency (Bitot spot)
3. Vitamin D Deficiency (Rickets)
4. Severe Acute Malnutrition
5. Goiter

DEVELOPMENT DELAYS AND DISABILITIES

1. Vision Impairment
2. Hearing Impairment
3. Neuro-motor Impairment
4. Motor delay
5. Language delay
6. Behaviour disorder
7. Learning disorder
8. Attention deficit hyperactivity disorder
9. Congenital Hypothyroidism, sickle cell anaemia, Beta thalassemia (optional)