

Revised Norms and Basis of Costing for RNTCP

S.No.	Norms	Basis of Costing (Unit cost)
1.	Civil works	
	<ul style="list-style-type: none"> • Designated Microscopy Centre (DMC)– 1 DMC per 1 Lakh population. In tribal/hilly areas 1/50,000 population. States can relax norms by 10% in case of additional requirement of DMC based on geographical or technical considerations. • Tuberculosis Unit (TU) – 1 per 500,000 population and 1/250,000 population in hilly/tribal areas. • DTC 1 per revenue district. • State Drug Store (SDS): 1 per 50 million population <p>For minor civil, plumbing and electrical repairs in the DMCs, DTC, STDC, TU etc</p>	<p>Initial Establishment/Refurbishment costs One Time Costs</p> <ul style="list-style-type: none"> • DMC- Up to Rs 30,000 per DMC • TU – Up to Rs 35,000 per TU • DTC – Up to Rs 1.5 lakhs per DTC. New DTC (where no DTC exists) up to Rs 4 lakhs per DTC which includes the above provision of Rs 1.5 lakhs per DTC • STO Office up to Rs 50,000 • State Drug Store – up to Rs 4 Lakhs • IRL – up to Rs 10 lakhs for Laboratory and Monitoring unit • DOTS Plus Site-up to Rs. 10 Lakhs <p>Maintenance of Civil works:</p> <ul style="list-style-type: none"> • DMC: Rs. 1000 per year • TU: Rs 1300 per year • DTC: Rs 4500 per DTC per year • State TB Office, IRL/STDC, SDS, DOTS Plus Site: Rs 75000 per year. <p>The maintenance amount for DMCs and TUs may be pooled at district level and repairs are undertaken where necessary.</p> <p>In addition, one time provision of Rs 1.5 lakhs per SDS and Rs 30,000 per District Drug Store to improve storage capacity for 2nd line drugs for DOTS Plus.</p>
2.	Procurement of Equipment	
	<ul style="list-style-type: none"> • Lab Equipment: Binocular Microscopes are being provided by CTD for training institution and for service delivery in RNTCP areas. • Culture and Sensitivity Equipment: Will be purchased by CTD, wherever approved. • Office Equipment: Office equipment will be procured by States/districts for 	<p>Office Equipment: Computer, Modem, Scanner, Printer, UPS, software</p>

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	<p>new units planned under the project (State TB cell, DTC, SDS, IRL and DOTS Plus site) and for replacing computer systems which are more than 8 years old and are not functional.</p> <p>Condemnation rules of State Government will be followed.</p>	and set-up-Rs. 60,000 per system
3.	Procurement of Vehicles	
	<ul style="list-style-type: none"> • New Four Wheelers: All districts are expected to hire four wheeler except where procurement of four wheeler has been specifically approved in writing for hilly and tribal districts. These are to be procured at DGS & D rate contract. • Replacement: Replacement of four wheeler vehicles will be permitted for notified tribal and hilly districts. Purchase of new four wheeler vehicles will be done in consultation with CTD. Vehicles due for replacement should have completed 6.5 years or 150,000 Kms whichever is later. • Replacement for 2 wheelers may be allowed if they have completed 6 years or 100,000 kms whichever is later. <p>Condemnation rules of State Government will be followed, where applicable.</p>	<ul style="list-style-type: none"> • Jeep (petrol/diesel) - Rs. 4.3 lakh • Two-wheeler - Rs. 0.5 lakh
4.	Procurement of Drugs	
	Anti-TB drugs are being procured centrally and are not be procured at the State and Districts levels.	
5.	Printing	
	Printing of stationery items such as treatment cards, patient identity card, TB register, laboratory form, transport form, training modules, quarterly report format and other formats required for Programme implementation at State/District level.	Rs.1.50 lakh/million population, including printing undertaken at State and District levels.
6.	Laboratory materials	
	Lab consumables for DMCs and for IRLs at State level. The detailed list of laboratory	State Level: Rs. 0.15 lakh/million population at State level for

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	<p>material is given in the RNTCP laboratory QA protocol.</p>	<p>procurement of lab, material for states performing culture and DST activities.</p> <p>District Level: Rs. 1.5 Lakh/million Populations at district level.</p> <p><i>The above costing is based on a case detection of 135/lakh population. If the case detection is more, the consumption of laboratory consumables will be higher and the DTCS/District Health Society may have the flexibility of proportionately increasing the expenditure on laboratory consumables.</i></p>
7.	Training	
	<ul style="list-style-type: none"> The training of STO/DTOs will be organised at central institutes. The other categories of staff will be trained at State/District level. The training will be held in batches and cost for each batch of training for different category of staff is provided. The STOs/Dy STO/DTOs/MO-STC/STDC faculty/Microbiologist/TB-HIV Coordinator will be allowed to travel by air for meetings, trainings and programme evaluations outside the State where the distance to be covered is more than 500 kms. The costs include hiring of venue, organization charges, honorarium for trainers, TA/DA, course material and refreshment. 	<p>Training to be planned as Initial Training, Retraining and Update training.</p> <p>District level: The year-wise costs for training and review meetings at district level are Rs. 55,000 per million population.</p> <p>State Level: The year-wise costs for training at state level are Rs. 15,000 per million population.</p> <p>Central Level: The year-wise costs for training at Central level are Rs. 10,000 per million population.</p> <p><i>During training programmes the norms for lunch, refreshment and TA/DA costs would be as per approved norms under NRHM/State Health Society.</i></p> <p><i>The norms for the size of the batch, cost of the training material, and cost of the course are provided in Annexure I.</i></p> <p>Review meetings (State level): The cost for review meetings at state that include quarterly meetings of DTOs and half-yearly meetings of key policy makers are as under:</p> <ul style="list-style-type: none"> Rs. 2 lakh/year for states with >30 million population Rs. 1 lakh/year for state with 10-30 million population

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		<ul style="list-style-type: none"> Rs. 0.5 lakh/year for states <10 million population.
8.	I.E.C./Publicity	
	<p>The IEC campaign would be for the different target groups i.e., medical professionals, para-medicals, patients, relatives of patients and the community.</p>	<p>State Level norms:</p> <ul style="list-style-type: none"> Population up to 10 million: Rs. 5 Lakhs Population of 10 to 30 million: Rs. 7 Lakhs. Population of over 30 million: Rs. 10 Lakhs. <p>District Level norms:</p> <ul style="list-style-type: none"> Rs 75,000/million population per year. <p>For more focused targeting already identified 16 urban cities with more than 1 million population the norms is higher at Rs 1.5 lakh/million population per year. For all other urban areas with more than 1 million population Rs 1.0 lakhs per year per million has been provided.</p> <p>An additional Rs 20,000 per district/year have been provided for hiring an agency/NGO to work as a communication facilitator. This selection will be done at State level at one agency/NGO per 5-6 districts.</p>
9	Medical Colleges	
	<ul style="list-style-type: none"> Medical colleges will be provided funds through concerned State/District Health-TB Control Societies for activities relating to referral of cases and treatment, operational research, sensitization and advocacy among the staff, faculty and medical students. National/ Zonal/State Task forces have been formed for medical college involvement under RNTCP. The cost for travel and per diem for the Chairmen and members of these task forces for attending task forces meetings and follow-up visits to the medical colleges in their jurisdiction would be borne by the respective health societies. The organizational cost for such meetings would also be borne by respective Societies. Meetings /Visits to be conducted by the 	<p>The Medical colleges can be provided with the contractual staff (MO, LT and TB HV) as per requirement. . Rates of contract are same as for similar staff at district level.</p> <p>Provision has been made for need based training of resident doctors of all departments in RNTCP. It is expected that 50 residents/year/medical college would require this training.</p> <p>A thesis grant of Rs 20,000 for research on RNTCP priority areas will be approved by STF at one thesis per medical college per year.</p> <p>Provision is also available for support to Conferences, symposiums, panel discussions and workshops organized at National and state levels and at level of Medical college.</p> <ul style="list-style-type: none"> At the National level- Rs. 2 lakhs per conference for 4 conferences annually;

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	<p>Task forces will be as under:</p> <ul style="list-style-type: none"> ○ NTF - Whenever called for ZTF meetings ○ ZTF- Quarterly meetings of ZTF and all STF within the zone will be visited once in six months ○ STF- Quarterly meeting of STF and all medical colleges in the state will be visited once a year <p>Some contractual staff i.e MO, LT, and TB HV may be hired at medical colleges for RNTCP work and follow up of cases put under RNTCP regimen.</p>	<ul style="list-style-type: none"> • At the state level - Rs. 50,000/- per conference for 4 conferences annually. • Sponsorship of plenary session on RNTCP in seminars / CME /Workshops up to Rs.5,000/ - once annually for a medical college. <p>Travel costs and per diems for participation in STF/ZTF/NTF will be borne by their respective health societies.</p>
10.	Contractual Services	
	<p>State Level: Provision is available for</p> <ul style="list-style-type: none"> • <i>Asst. Programme Officer/Epidemiologist</i> • Medical officer • TB-HIV Coordinators (Where approved) • Urban TB Coordinators (Where approved) • <i>DOTS Plus Site Sr. Medical Officer</i> • <i>DOTS Plus Site Statistical Assistant</i> • Microbiologist for IRL • <i>Sr. LT at IRL</i> • IEC Officer • Accounts Officer/ State Accountant • Secretarial Assistant • Pharmacist/Storekeeper • <i>Store Assistant (SDS)</i> • DEO (State TB cell) • <i>DEO (IRL)</i> • States that have vehicles procured out of RNTCP funds (for STC/STDC) are eligible to appoint one driver per vehicle on contractual basis. <p>District level: The norms for determination of number of contractual staff at district level are as follows:</p> <ul style="list-style-type: none"> • Medical Officer: 15% of second medical officer at the DTCs in the State/UT • <i>Sr. DOTS Plus and TB HIV Supervisor-</i> 	<p>Contractual Staff (State Level): The costs of each category of contractual staff is as under:</p> <ul style="list-style-type: none"> • <i>Asst. Program Officer/ Epidemiologist –Rs 40,000 p.m.</i> • <i>Medical officer - Rs 30,000 p.m.</i> • <i>TB-HIV Coordinators – Rs 35,000 p.m.</i> • <i>Urban TB Coordinators – Rs. 20,000 p.m.</i> • <i>DOTS Plus Site Sr. Medical Officer – Rs. 30,000 p.m</i> • <i>DOTS Plus Site Statistical Assistant – Rs. 15,000 p.m</i> • <i>Microbiologist (IRL)– Rs 40,000 p.m*</i> • <i>Sr. LT (IRL)- Rs.15,000 p.m</i> • <i>IEC Officer – Rs. 18,000 p.m</i> • <i>Accounts Officer/ State Accountant – Rs.18,000 p.m</i> • <i>Secretarial Assistant – Rs.8500 p.m</i> • <i>Pharmacist/Storekeeper– Rs 12,000 p.m.</i> • <i>Store Assistant (SDS)– Rs. 8000 p.m</i> • <i>DEO (State TB Cell)– Rs.10,000 p.m</i> • <i>DEO (IRL) – Rs.10,000 p.m</i> • <i>Driver Rs.7000 p.m</i> <p>Contractual Staff (District Level) The cost for each category for each contractual staff is as under:</p> <ul style="list-style-type: none"> • <i>Medical Officer (District) - Rs. 28,000 p.m</i> • <i>Sr. DOT Plus & TB-HIV Supervisor–Rs.15000 p.m</i>

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	<p>1 per district (as per phased expansion of DOTS Plus and intensified TB-HIV activities)</p> <ul style="list-style-type: none"> • STS and STLS: 1 each per 5 lakhs population (1 per 2.5 lakhs population in tribal/hilly areas) • LT: Eligibility is 20% of the total requirement as per number of DMCs. CTD may approve higher percentages up to 50% where justified. • TB-HV: 1 per lakh urban population • DEO: 1 per DTCS • Accountant (part time): 1 per DTCS Districts may hire Accountant -cum-DEO to perform the duties of DEO and part time accountant. The remuneration provided will be equal to the remuneration of DEO and part time accountant. • Driver: Districts that have vehicles procured out of RNTCP funds are eligible to appoint one driver per vehicle on contractual basis. 	<ul style="list-style-type: none"> • STS /STLS (each)- Rs. 12,000 p.m • LT - Rs. 8500 p.m • TBHV - Rs. 8000 p.m In addition a fixed TA of Rs 750 p.m is also payable, against appropriate travel documentation • DEO - Rs. 8500 p.m • Accountant (Part Time) -Rs. 3000 p.m • Driver - Rs. 7000 p.m <p>A fixed allowance of Rs 1000 per month will be given to contractual STS/STLS/LT at TU/DMCs in notified tribal areas as per the tribal action plan.</p> <p>DA (daily allowance for travel) is only to be released against appropriate travel documentation. Where eligible such DA may be paid under State Government rules from the miscellaneous head.</p> <p>All new recruits will commence at above basic rate of remuneration. All contracts will be for one year. Contracts will be renewed by the society based on satisfactory performance. In the renewed contract the remuneration would be enhanced by up to 5% each year. Enhancement will be calculated over the basic rate and not the remuneration in the previous year.</p>
11.	Honorarium/Counseling charges	
	<ul style="list-style-type: none"> • It is presumed that of all the TB patients put on treatment 	Rs. 0.28 lakh/million based on actual expenditure at district level.

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	<p>approximately 25% in the district may not come to the public health facility for DOTS. This group of patients will need community volunteers to facilitate DOTS.</p> <ul style="list-style-type: none"> The honorarium/counseling charges for provision of DOT will be paid only to such workers who are not salaried employees of the Central/State Government. This would include among others Anganwadi workers, trained dais, village health guides, community volunteers, ASHA, etc. The honorarium/ counseling charges to be paid to volunteer supervising MDR-TB treatment. Actual fares by public transport to MDR- TB patient (on DOTS-Plus treatment) and 1 attendant for travel to DTC/DOTS Plus site/IRL for follow up examination. Special provisions for Tribal areas under 'Tribal action plan' 	<p>Rs. 250 per patient upon completion or cure to each volunteer. This is expected to be within 25% of all the patients put on DOTS in the district. With more community volunteers, including ASHA being involved as DOT providers this can be more than 25%</p> <p>Rs.2500/-(Rs.1000/- for IP and Rs.1500-for CP) to the individual volunteer for each MDR patient treatment completed to be disbursed in two instalments.</p> <p>As per the tribal action plan an aggregate amount of Rs 250 will be provided to patients on completion of treatment to cover travel costs of tribal patients and attendant(s) in tribal areas.</p> <p>As per the tribal action plan, volunteer for sputum collection in tribal areas may be paid an honorarium of Rs 100 per month for costs towards sputum collection and transport to DMC from tribal areas. If visit to health centre is more than one per week then Rs 200 per month may be given.</p>
12.	NGO/PP support	
	<ul style="list-style-type: none"> NGO should be registered under State Societies Act/ Societies Act/ Companies Act or Trusts Act with their Memorandum /Articles of Association expressly stating that the Company/ Society has been formed for purpose of non-profit and has its independent sources of funding and is not solely dependent on any programme funds. NGOs/PP working for or planning to work for TB Control Programme are 	<p>Up to Rs. 3 lakh / million populations per year has been earmarked under various schemes for NGO/PP. Districts and state health societies may approve additional expenditure over and above the proposed norms.</p> <p>Norms for various schemes are as provided in the revised NGO/PP Guidelines issued by RNTCP.</p>

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	required to follow the NGO/PP guidelines of RNTCP.	
13.	Research & Studies	
	<ul style="list-style-type: none"> There are certain studies like ARI studies, mortality surveys and drug resistance surveillance studies which will be undertaken by CTD and Central Institutes. Additionally operational research proposals on identified priority areas will be invited from State level and from the Medical Colleges. The STCS may approve up to 2 proposals from the state in each year. The STF/ZTF may approve up to one proposal per medical college per year. 	<p>The priority areas for operations research and formats for proposals are given in the website www.tbcindia.org. The research may be initiated at district, states or medical colleges.</p> <p>Proposed studies and their estimated costs may be included in the Annual Action Plans. Research proposals up to Rs 5 Lakhs may be approved by the ZTF (for medical colleges) or OR committee of the STCS. Proposal above Rs 5 lakhs will be forwarded to CTD. CTD may approve proposals upto Rs 15 lakhs and proposals above Rs 15 lakhs will be forwarded to the Central OR Committee.</p>
14.	Vehicle operation (POL & maintenance)	
	<p>Vehicles used for supervisory visits by DTO, MO-TC and STS/STLS are costed on the basis of:</p> <ul style="list-style-type: none"> Kilometers traveled/day, number of days in a month and current cost of POL. Total amount includes repairs, spare parts, service charges, etc. which may be required for the maintenance of vehicles. <p>Appropriate travel documentation including ATP, tour dairy, tour report, log book etc as applicable is to be ensured.</p> <p>In case of increase in POL costs, corresponding increase in norms for vehicle operations & maintenance will be made at Central level from time to time.</p>	<p>Cost of POL and maintenance has been taken as:</p> <ul style="list-style-type: none"> 2 wheelers – Rs. 25,000 per year 4 wheelers – Rs. 1.25 lakh per year 4 wheeler of State TB cell/STO- Rs 2.00 lakh per year <p>In case of 4 wheelers, funds for vehicle operation are only provided to districts which have jeeps rather than hired vehicles.</p> <p>Vehicle maintenance for two wheelers may be increased up to Rs 30,000 per annum for STS/STLS in tribal areas.</p>
15.	Vehicle hiring	
	<p>Vehicles are hired where RNTCP or State Government Vehicle are not available, for supervisory visits to be under taken by DTO or MO-TC. Appropriate documentation for supervisory visits to be ensured.</p>	<p>MO-TC for 7 days a month up to Rs 750/day (up to Rs 850 / day for in tribal and hilly areas)</p> <p>DTO (where not provided with Jeeps) Up to 25 days a month, Rs 750/ day, (up to Rs 850/day in Tribal and</p>

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		<p>Hilly areas.</p> <p><i>The above rates are for a distance of 80 km and duration of 8 hrs. Additional cost towards extra mileage or duration would be on pro-rata basis of Rs.7.50 per every additional kilometre and Rs.25 for every extra hour.</i></p>
16.	Office Operation (Miscellaneous)	
	<p>Office operation expenditure includes cost of TA/DA(except for training) for STOs, DTOs, MO-TC and all contractual staff, janitorial expenses, electricity, telephone bills, fax bills, postage, office stationery, office furniture for STCs/DTCs and TB Units, repair of furniture, hiring of daily wage labour for loading and unloading of drugs, transportation of drugs from State drug store to district store, office rental, <i>reimbursements for travel of MDR-TB patients to DTC/IRL/DOTS Plus sites, etc.</i></p>	<p>State level:</p> <ul style="list-style-type: none"> Population upto 20 million – Rs 3 lakhs Population of 20-30 million – Rs 5 lakhs Population of >30 million – Rs 7 lakhs <p>District level:</p> <ul style="list-style-type: none"> Rs. 1.5 lakh/million population /year in RNTCP districts. <p><i>TA/DA would be as per approved norms under NRHM.</i></p> <p>Only costs not covered by State/Districts budgets will be provided under project funds.</p>
17.	Equipment Maintenance	
	<p>Maintenance/upgradation costs for Laboratory equipment and office equipment like computers, photocopier, fax, etc. are included under this head.</p>	<p>Maintenance costs for the equipment have been estimated on the basis of the current market cost as:</p> <ul style="list-style-type: none"> Computers/Photocopier /Fax – Rs 30,000/- per year per district and per State Binocular Microscope - Rs. 1500 per microscope per Year Culture and DST equipment - 15% of cost of C&S equipment per Year <p>The maintenance funds will be pooled at state or district level and arrangements made for responsive maintenance of equipment for least down time.</p>

* IRL Microbiologist with MSc degree would get Rs 35,000 p.m.

- For North-Eastern states (Arunachal Pradesh, Assam, Nagaland, Mizoram, Meghalaya, Manipur, Tripura and Sikkim), these norms would be applicable at the rate of 1.3 times as compared to the rest of the country except for the expenditure under the head "Contractual Service".
- Some enhanced norms have been proposed in the tribal areas, as has been indicated above.

Norms for organization of RNCP trainings

Annexure I

Category	Trainees per batch	Faculty	Course Organization per batch	Course Material per participant	Level of Training
Initial Training					
STO/DTO	20	4	5000	350	Centre
MO-TC	20	4	3000	350	State
MO	20	4	2000	300	State/District
STS/TO/SA/IEC Officer	12	3	3000	300	State/District
STLS	6	3	3000	300	State/District
LTs	8	3	2000	150	State/District
MPH Supervisors	25	3	2000	100	State/District
MPW/TBHV	25	3	2000	100	District
Pharmacist in RNTCP	25	3	2000	100	District
Training of Staff on Drug Management (Pharmacist State / District / TU)	25	3	2000	100	District
Accountants	25	3	3000	100	District
Community Volunteers	25	2	2000	100	District
Pvt Practitioners	20	4	2000	350	District
Private LTs	8	3	2000	150	District
Update Training					
EQA					
EQA Trg. (Master Trainers, Microbiologists)	10	2	5000	350	Centre/State
EQA Trg. (IRL LTs)	6	2	5000	350	Centre/State
EQA Trg (STDC Director/STO)	15	3	5000	350	Centre/State
EQA Trg (DTO/MOTC)	25	5	3000	350	State
EQA Trg (STLS)	6	2	2000	350	State
EQA Trg (LT)	25	2	2000	150	District
TB-HIV					
TB-HIV (Master Trainers)	10	1	5000	350	Centre
TB-HIV (DTO/MOTC)	10	1	3000	350	State
TB-HIV (MO)	30	3	2000	350	District
TB-HIV (STS/STLS)	10	1	2000	100	State
DOTS Plus					
DOTS-Plus (STO/STDC/DTO/DOTS Plus site faculty)	25	5	5000	350	Centre
DOTS Plus (MO-DTC/ MOTC/MO)	20	3	3000	350	State
DOTS Plus (STS/STLS/ Paramedical staff)	10	2	3000	350	District
Refresher Training					
Retraining of STO	20	5	5000	350	Centre
Retraining of DTO/MOTC	20	4	2000	350	Centre/State
Retraining of MO	20	4	1000	350	State/District
Retraining of STS/TO/SA/IEC Officer	20	4	2000	300	State/District

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Retraining of STLS	6	3	2000	300	State/District
Retraining of LTs	8	3	1000	150	State/District
Retraining of MPH Supervisors	25	3	1000	100	State/District
Retraining of MPW/TBHV	25	3	1000	100	State/District
Retraining of Pharmacist in RNTCP	15	3	1000	100	State
Retraining of Staff on Drug Management (Pharmacist State / District / TU)	15	3	1000	100	State
Retraining of Accountants	25	3	1000	100	State
Retraining for EQA (Master Trainers, Microbiologists)	10	2	5000	350	Centre
Retraining for EQA (IRL LTs)	6	2	5000	350	Centre/State
Retraining for EQA (STDC Director/STO)	15	3	5000	350	Centre/State
Retraining for EQA (DTO/MOTC)	20	4	2000	350	Centre/State
Retraining for EQA (STLS)	6	2	2000	350	State
Retraining for TB-HIV (DTO/MOTC)	10	1	2000	350	State
Retraining for TB-HIV (MO)	30	3	1000	350	State/District
Retraining for TB-HIV (STS/STLS)	10	1	1000	100	District
Retraining for DOTS Plus (STO/DTO/DOTS Plus site faculty)	25	5	5000	350	Centre
Retraining for DOTS Plus (MO-TC/ MO)	20	3	5000	350	State
Retraining for DOTS Plus (STS/STLS/Paramedical staff)	10	2	3000	350	District