

ABSTRACT

Welfare of Differently Abled Persons Department – Budget Announcement – Constitution of State / District Convergence Committee – Framing of Standard Operating Procedure (SOP) – Orders – Issued.

WELFARE OF DIFFERENTLY ABLED PERSONS (DAP-3.1) DEPARTMENT

G.O. (Ms) No.30

Dated: 04.11.2022 சபகிருது, ஐப்பசி 18, திருவள்ளுவர் ஆண்டு 2053.

Read:

- 1. Budget Announcement 2022-2023, Dated 18.03.2022.
- 2. From the Commissioner for Welfare of the Differently Abled, Roc. No.3111/GRH/2022, dated 27.08.2022 and 12.09.2022.

ORDER:

The Hon'ble Minister for Finance and Human Resource Management has made the following announcement during the Budget speech for the year 2022-2023 on 18,03.2022:-

"It is essential to diagnose and treat disabilities at an early stage to ensure that every child with special needs has the opportunity to grow well. At present, the Health and Family Welfare Department, Social Welfare and Women Empowerment Department, School Education Department the Welfare of Differently Abled Persons Department are performing these tasks in silos. The Government will take steps to coordinate the activities of these departments, facilitate the exchange of information and provide all services to children born with special needs through treatment centres at various levels".

2. In the letter second read above, the Commissioner for Welfare of the Differently Abled has requested the Government to constitute State / District level Convergence Committee under the Chairmanship of Chief Secretary at State Level and concerned District Collector at district level respectively and to frame the Standard Operating Procedure (SOP) to enable and facilitate identification, Screening and Rehabilitation of Children with Disabilities under the age of 18 years.

3. After careful examination of the proposal of Commissioner for Welfare of the Differently Abled, the Government have decided to accept and constitute the State Level Convergence Committee under the Chairmanship of Chief Secretary at State level and District Level Convergence Committee concerned District Collectorate at District Level so as to ensure the convergence activities among the Departments of Health and Family Welfare, Social Welfare and Women Empowerment and Rural Development and Panchayat Raj and in order to bring working frame work to enable and facilitate identification. Screening and rehabilitation of Persons with Disabilities in the age group of Birth to 18 years and further welfare activities envisaged by the Government and mandated by the Rights of Persons with Disabilities Act, 2016, from time to time.

i. The Member of the Committee are as follows:-

STATE CONVERGENCE COMMITTEE

SI.		
No.	Designation	
1.	Chief Secretary	Chairmara
2.	Additional Chief Secretary / Principal	Chairperson
	Secretary / Secretary to Government	Member
	Social Welfare and Women Empowerment	T TOTAL T
3.	Department	
٦,	Additional Chief Secretary / Principal	2000 V
	Secretary / Secretary to Government, Finance Department	Member
4.	Additional Chief Secretary / Principal	
	Secretary / Secretary to Government	Member
	Rural Development and Panchavat Rai	Meniper
5.	Department	1981 10
٥,	Additional Chief Secretary / Principal	
	Secretary / Secretary to Government, Health and Family Welfare Department	Member
6.	Additional Chief Secretary / Principal	·
	Decicially / Decidiary to Covernment	
	School Education Department	Member
`7.	Additional Chief Socretary	
		Member Secretary
N.	Welfare of Differently Abled Persons Department	. rember secretary
_8.	Director / Commissioner of Social Defence	
9.	Director Cum Mission Director,	Member
	Integrated Child Development Scheme	NA contract to
10.	Mission Director,	Member
	National Rural Health Mission	Member
11.	Project Director,	
	Tamil Nadu Health System Project	Member

12	Managing Director, Tamil Nadu Corporation for Development of Women	Member
13.	Executive Director, Tamil Nadu Corporation for Development of Women	Member
14	Managing Director, Tamil Nadu Arasu Cable TV Corporation Ltd	Member
15.	Regional Director, Regional Centre, National Institute of Open Schooling	Member
16.	Chief Executive Officer, Tamil Nadu e-Governance Agency	Member
17.	Commissioner / Director for Welfare of Differently Abled	Convener

DISTRICT CONVERGENCE COMMITTEE

SI.	F	
No.	Designation	
1	District Collector	Chairperson
2	District Project Officer,	
	Integrated Child Development Scheme	Member
3	Dean / Joint Director and Nodal Officer-	
<u> </u>	District Early Intervention Centre	<u>Member</u>
4	Deputy Director of Health Service,	Member
1	Medical Officer, District Training Team,	
	Rastriya Bal Swasthaya Karyakram	. s&:
	(RBSK)	
5	District Project Officer,	
	United India Insurance Company (UIIC)	Member
6	Chief Education Officer,	·
	Sarva Siksha Abhiyan	Member
7	District Child Protection Officer	Member
8	Project Director,	Member
	Tamil Nadu Corporation for Development	
	of Women	
9	Deputy Manager,	
	Tamil Nadu Arasu Cable TV Corporation	Member
	Limited	
10	District Differently Abled Welfare Officer	Member Secretary
		cum Convener

The role and functions of the Committees are as follows:-

- a. The Committees may meet once in 6 months or on suitable Periodical interval as the requirement arises.
- b. Monitoring of the Online issue of Disability Certificate / Online generation of UDID through Nodal agency to be nominated by Health and Family Welfare Department and guiding the process.
- c. Monitoring and guiding on the Issuance of Chief Minister Comprehensive Health Insurance Scheme (CMCHIS) cards and implementation of CMCHIS packages to persons with Differently Abled persons with Special Needs.
- d. Monitoring collection of Aadhaar card number and maintenance of Differently Abled Persons deduplicated data base.
- e. Monitoring the study of the existing IT application of HoDs and integration.
- f. Monitoring the Development of Social Registry (RIGHTS) / State Family Data Base (Tamil Nadu e-Governance Agency) and online tracking of Children with Special Needs.
- g. Monitoring the preparation of Standardisation of screening protocols and tools and providing convergence support to the successful implementation of World Bank supported RIGHTS Project.
- h. To evolve a mechanism for periodical survey of Differently Abled Persons with special focus on Children with Special Needs.
- i. Development Assessments Cards for differently abled persons
- j. To ensure Children with Special Need for getting all benefit and Schemes.
- k. Centralised Distribution Mechanism for supply of Assistive Devices
- Resource mapping of existing service providers and rating and ranking of item.
- m. Fund resources and Management.
- ii. The Standard Operating Procedure (SOP) for providing effective services on their appropriate jurisdiction / responsibilities are annexed to this order.

(BY ORDER OF THE GOVERNOR)

R. ANANDAKUMAR, SECRETARY TO GOVERNMENT.

To
The Commissioner for Welfare of the Differently Abled /
Director for Welfare of the Differently Abled, Chennai – 5.
The Additional Chief Secretary to Government,
Social Welfare and Women Empowerment Department, Chennai – 9.

The Additional Chief Secretary to Government,

Finance Department, Chennai - 9.

The Principal Secretary to Government,

Health and Family Welfare Department, Chennai - 9.

The Principal Secretary to Government,

Information Technology and Digital Services Department, Chennai - 9.

The Principal Secretary to Government,

Rural Development and Panchayat Raj Department, Chennai-9.

The Principal Secretary to Government,

School Education Department, Chennai-9.

The Director / Commissioner of Social Defence, Chennai-10.

(through Commissioner for Welfare of the Differently Abled)

The Director Cum Mission / Director Integrated Child Development Service, Chennai. (through Commissioner for Welfare of the Differently Abled)

The Mission Director / National Rural Health Mission,

Chennal. (through Commissioner for Welfare of the Differently Abled)

The Project Director, Tamil Nadu Health Service Project,

Chennai (through Commissioner for Welfare of the Differently Abled)

The Managing Director / Executive Director, Tamil Nadu

Corporation of Development of Women, Chennai

(through Commissioner for Welfare of the Differently Abled)

The Managing Director, Tamil Nadu Arasu Cable Tamil Nadu Corporation Limited, Chennai. (through Commissioner for Welfare of the Differently Abled)

The Regional Director / Regional Centre,

National Institute Of Open schooling,

Chennai. (through Commissioner for Welfare of the Differently Abled)

The Chief Executive Officer, Tamil Nadu e-Governance,

Chennal. (through Commissioner for Welfare of the Differently Abled)

All District Collectors. (Through Commissioner for Welfare of the Differently Abled)

All District Differently Abled Welfare Officers.

(through Commissioner for Welfare of the Differently Abled Communicate)

The District Project Officer,

Integrated Child Development Scheme

(through Commissioner for Welfare of the Differently Abled)

The Dean / Joint Director and Nodal Officer-District Early Intervention Centre.

(through Commissioner for Welfare of the Differently Abled) The Deputy Director of Health Service, Medical Officer,

District Training Team, Rastriya Bal Swasthaya Karyakram (RBSK)

(through Commissioner for Welfare of the Differently Abled)

The District Project Officer, United India Insurance Company (UIIC) (through Commissioner for Welfare of the Differently Abled)

The Chief Education Officer, Sarva Siksha Abhiyan

(through Commissioner for Welfare of the Differently Abled)

The District Child Protection Officer

(through Commissioner for Welfare of the Differently Abled)

The Project Director, Tamil Nadu Corporation for Development of Women. (through Commissioner for Welfare of the Differently Abled)

The Deputy Manager, Tamil Nadu Arasu Cable TV Corporation Limited. (through Commissioner for Welfare of the Differently Abled)

Copy to:-

The Chief Minister's Office, Chennai-9.

The Special Personal Assistant to Hon'ble Minister,

Finance and Human Resource Management, Chennai-9.

The Senior Principal Private Secretary to Chief Secretary to Government, Chennai-9.

The Private Secretary to Secretary to Government,

Welfare of Differently Abled Persons Department, Chennai-9.

Welfare of Differently Abled Persons (DAP-I /II) Department, Chennai— 9. Stock File / Spare Copy.

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National Health Mission

1. School Health Programme

- In 2006, Tamil Nadu implemented a School Health Programme (SHP) which included services like general health check-up, clinical screening for nutritional deficiencies, systemic illness, refractive errors, and minor ailments
- On all Thursdays, School Health Programme (SHP) was implemented among children studying in 1st to 12th standard in all government and government aided schools.
- All Saturdays as "referral days" for ensuring follow-up of the referred children.
- The above best practices were adopted by GOI in the year 2014 and conceptualised the programme as Rashtriya Bal Swasthya Karyakram.

2. Rashtriya Bal Swasthya Karyakram- RBSK

- The Government of India has launched the Rashtriya Bal Swasthya Karyakram (RBSK) Program. Under this program, screening is being done for children of ages 0 to 18 years.
- The programme aims at early detection and management of a set of 30 health conditions prevalent in children less than 18 years of age.

3. Components of RBSK

- Screening and intervention for Children in the age group of 0 to 18 years:
 - 1. Facility Based New born screening (up to 48 hours of life)
 - Community Based New born screening (age 0-6 weeks) for Birth Defects
 - Screening of Children in the age groups of 6 weeks to 18 years of age Attending Anganwadi Centers and Schools

- 4. District Early Intervention Centre (DEIC): All DEICs are enrolled under Chief Minister's Comprehensive Health Insurance Scheme (CMCHIS).
- Children in the age group of 0-18 yrs. are screened for the "4 D's,"
 which include:
 - (1) Birth defects,
 - (2) Developmental delays & including disabilities,
 - (3) Deficiencies, and
 - (4) Diseases
 - The RBSK team screens the children in Anganwadi centres biannually and Government & Government aided Schools annually across the State.
 - 805 Teams There are 770 Mobile health teams in 385 rural blocks with 35 Mobile Health teams in urban corporations.
 - 60- 120 children per day per team are being screened by each team
 - This scheme is implemented by placing two Mobile Health Teams / Block.

 - RBSK team The annual plan for each team visit is made in Anganwadi centre, and Schools, which will be visited as per Advanced Tour Program. This team visits the schools once in a year and Anganwadi centres twice in a year.
- 5. Education Management Information System (EMIS) of School Education Department.
 - This portal includes data related to Anganwadi children and School Children.

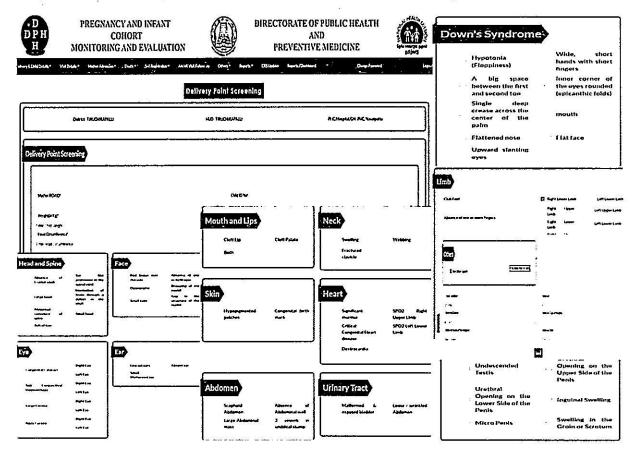
- RBSK reaches all 69 lakh students every year in 45702
 Government and Government aided schools and reaches to all 38
 Lakh Anganwadi children Bi- annually at 54439 AWC.
- The trained school teachers will screen the children for preliminary screening based on the 40 simple questionnaire, and refer the children to RBSK team for secondary screening.
- These children will be further referred to the second level of screening by RBSK Medical Officer and PMOAs.
- Based on the severity of the diagnosis the child with 4 Ds (Disability, Diseases, Deficiency, Defect at Birth) would be referred to Block PHC and DEIC for expert opinion.

6. Delivery point screening

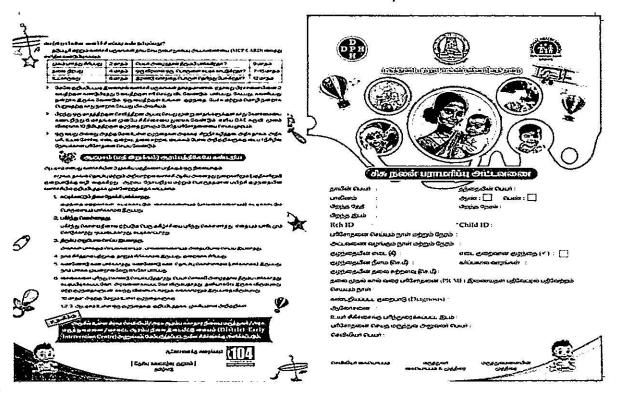
- Primary Birth Defect screening is being done at all delivery point by the Medical Officers before 48 hours of birth time. Once the child is screened and referred from delivery point, it is ensured that the necessary treatment /intervention is delivered at zero cost to the family.
- During April 2024 January 2025, 3,79,297 Newborn delivered in Government institutions have been screened out of which, 4,44,998 Newborn delivered in Government institutions have been screened out of which, 5,160 Newborn with Congenital Anomalies have been referred for further management
- The data capturing is through PICME software where in exclusive web page has been developed as detailed below (Fig -1) where in various visible congenital anomaly viz Neural Tube Defect, Cleft Lip and Cleft palate Down Syndrome, Development Dysplasia of Hip, Microcepahly Downs Syndrome, Limb Abnormality Club Foot, Polydactaly / Contracture, Ambiguous Genitalia, Imperforate Anus, Intestinal Obstruction etc could be followed up. The Portal was included in the Revamped PICME 3.0 was launched from Oct 2024 onwards.

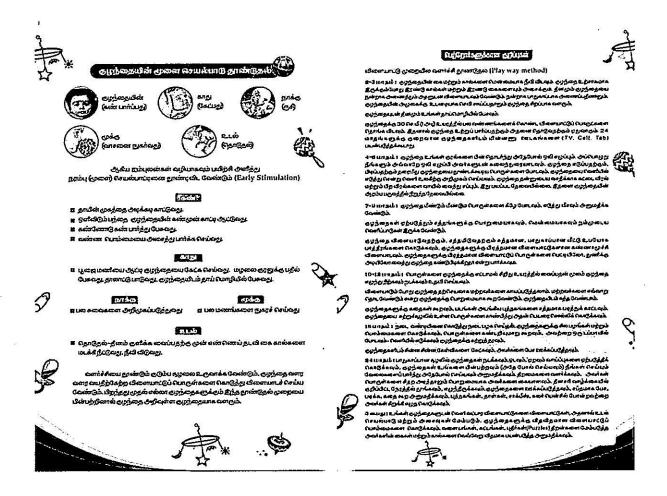
Fig -1

Provision to enter Visible Birth Defect in Birth Defect



Also 10 lakh Child Health Card for detection of have been printed and issued to all delivery point through NHM during the year 2024-2025 where the Birth defect have to be entered for follow up activities





7. Biannual screening of under 5 children at Anganwadi centre

- The biannual screening of children from 6 weeks to 6 years are being conducted at Anganwadi Centres by the RBSK teams.
- There are 54439 Anganwadi Centrer in the State.
- The ICDS Software with its database of 37 lakh children is interfaced with the Education Management and Information System (EMIS) software of School Education in-order to track the Under - 5 children enrolled in ICDS.
- Primary screening for identification of 4Ds (Defects at Birth, Disease, Deficiency and Disability) is done by RBSK team based on 40 Questions built-in the EMIS portal and the Children with 4Ds who need referral are sent to District Early Intervention Centre for Expert opinion, Medical and Surgical Management.

During April 2024 to March 2025, 72,62,131 children (Phase-I - 37,79,108 and Phase-II- 34,83,023) have been screened and 8,243 (Phase-I - 5,500 and Phase-II 2,743) children with 4Ds were referred to District Early Intervention Centre.

7. Annual screening of 6yrs to 18 years at Schools

- There are 45702 Government Aided School and Government Schools in the State.
- The children are screened once in a year through 805 RBSK Team.
- Children in the age group of 6 years to 18 years in all Government and Government aided schools are being screened once a year by RBSK Mobile Health Team functioning @ 1 per block.
- The EMIS portal maintained by the School Education Department has
 the line list of all 69 lakh children enrolled in Government and
 Government aided schools from Grade 1 to 12 and Primary screening
 is carried out by School teachers using 32 questions covering 40
 Disease conditions such as General health conditions, issues in vision
 etc. followed by BMI screening.
- The data is captured in the EMIS app. In the Secondary screening done by the RBSK team, children identified with 4D's are managed by the medical team and those who need expert opinion, medical or surgical management are further referred to DEICs.
- During April 2024 March 2025, Mobile Health team have screened 67,07,487 children and referred 77,040 children to DEIC.

8. District Early Intervention Centres (DEIC):-

- DEIC are located in Government Medical College hospitals of the districts and Government Head Quarters hospitals of the districts where there is no Medical College hospital.
- There are 35 functioning District Early Intervention Centres to effectively implement this programme. 4 new DEIC are yet to be

- made functional in Newly Bifurcated districts such as Kancheepuram, Kallakurichi, Ranipet and Tenkasi.
- In the year 2025-2026, new DEIC will be established at Mayiladuthurai District
- The EMIS portal maintained by the School Education Department
 has the line list of all 69 lakh children enrolled in Government
 and Government aided schools from Grade 1 to 12 and Primary
 screening is carried out by School teachers using 32 questions
 covering 40 Disease conditions such as General health conditions,
 issues in vision etc. followed by BMI screening.
- The data is captured in the EMIS app.
- Further Secondary screening done by the RBSK team, children identified with 4D's are managed by the medical team and those who need expert opinion, medical or surgical management are further referred to DEICs.
- Human Resources deployed at DEICs are Paediatrician, Medical Officer, Pedodontist, Physiotherapist, Audiologist, Speech Therapist, Psychologist, Optometrist, Early Interventionist cum Social Worker, Lab Technician, Dental Technician, System Analyst, and Data Entry Operator.
- During April 2024- March 2025, 4.96 Lakh children have been managed in all 39 DEICs in the State.
- Children identified with 7 major conditions (Congenital Heart Disease, Cleft lip and palate, Rheumatic Heart Disease, Congenital Deafness, Congenital Cataract, Club foot and Neural Tube Defect) are intensively monitored at the State Level and also at the District level by the District Health Officer & DEIC Nodal Officer.

April 2024 - March 2025 (Source - HMIS)

SI.No	HILCORCO	No of Children Confirmed		Needed	No of Surgery Done	No of Death	No of Children Due for Surgery
1	CHD	7837	6188	1649	1584	5	60
2	RHD	644	604	40	40	0	0
3	Club Foot	902	712	190	183	1	6
4	Cleft Lip & Palate	718	153	565	459	1.	105
5	Cong. Cataract	170	23	147	140	0	7
6	Cong. Deafness	603	406	197	171	0	26
7	NTD	162	78	84	75	2	7
	Total	11036	8164	2872	2652*	9	211

Note -7 Major surgeries

- All the surgeries are performed free of cost under Chief Minister Comprehensive Health Insurance Scheme (CMCHIS) at Government and Private Hospitals.
- Since April 2021- March 2025, (Last 4 years) among 82,977 children confirmed at DEIC with 4 Ds, 49,969 children have been medically managed and 33,008 children surgically managed.

9.Funds approved every year by NHM

	Rashtriya Bal Swasthya Karyakram (RBSK)	Activities	Rs in Lakhs
A	Operationalisation of RBSK scheme		
1.	RBSK tool kit	805 Teams x Rs 5000 / Kit	40.25
2.	Fuel Charges Mobility support for 805 RBSK Mobile health team	Rs.40,000 x 805 Teams x 12 months	3878.40
3.	Support for RBSK: Tablet - CUG connection charges	Rs 2470 x 820 Teams	20.25
4.	Medicine Pass book to RBSK Team	Rs.40,000 x 805 Teams	322
5.	RBSK Registers	₹ 2000 000 000 000 000 000 000 000 000 0	5.24
B.	District Early Intervention Centers (DEIC)		0

	Rashtriya Bal Swasthya Karyakram (RBSK)	Activities	Rs in Lakhs
1.	DEIC (including Data card internet connection for laptops and rental)	Rs.5000 x 12 months x 39 DEIC	23.40
2.	Referral Support for Secondary/ Tertiary care (pl give unit cost and unit of measure as per RBSK guidelines) - RBSK		50
C.	Human Resource for RBSK team		0
1.	820 RBSK Medical Officer *	820 Medical Officer x 12 months x Rs.40,000	3936
2.	805 Staff nurse / Sector Health Nurse on contract basis	805 x 12 months x Rs 18,000	1738.8
3	805 Pharmacist on contract basis	806 x 12 months x Rs 15,000	1449
	Total		11463.34

Note:

- 1. Doctors are Regular and hence Rs40,000 / Doctor is remitted into government account.
- 2.The funds provided under NHM by Ministry of Health & Family Welfare are 60:40 Ratio (GOI: State)

Awards

- 1. Tamil Nadu has been awarded the Best Converging Mechanisms Award awarded for implementing RBSK programme and School Health and Wellness Ambassador Programme in convergence with School Education department by Ministry of Health and Family Welfare Government of India during the year 2022- 2023
- Tamil Nadu has been awarded for best Menstrual Hygiene Campaign Award at Workshop at National School Health and Wellness Ambassador Programme under Rastriya Kishore Swasthya Karyakram on 17.1.2023.

POCSO Medico-Legal Examination Report For the Month of APRIL 2024 - MARCH 2025

	Name of the District	No.of POCSO cases		No. of POCSO Cases with Disability		No. of POCSO Cases for whom MTP was done			No.of Medico-	Whether acknowledgment	No.of Cases
S. No			POCSO	POCSO	No.of POCSO cases Examined	No. of Physically challenged	No. of Mentally challenged	Less than 12 weeks	12 to 24 weeks	More than 24 weeks	Legal Examination Report handed over to Survivor/ Parent/ Guardian
1	Ariyalur	73	73	0	0	1	1	0	7	0	0
2	Chengalpattu	106	105	0	1	1	0	0	103	66	4
3	Coimbatore	144	128	0_	1	6	4	0	105	77	22
4	Cuddalore	259	258	0	1	11	1	0	252	215	2
5	Dharmapuri	67	67	0	0	0	0	0	67	67	5
6	Dindugal	80	80	0	0	1	2	0	64	50	2
7	Erode	419	418	0	1	20	7	0	299	194	37
8	Kallakurichi	96	96	0	0	0	0	0	96	59	0
9	Kancheepuram	50	50	0	0	5	1	0	39	35	1
10	Kanyakumari	6	6	0	0	0	0	0	6	6	0
11	Karur_	23	23	0	0	1	0	0	20	20	2
12	Krishnagiri	64	64	0	0	5	1	0	64	56	3
	Madurai	36	37	0	0	0	0	0	22	14	3
	Mayiladuthurai	50	50	0	0	4	3	0	40	25	0
	Nagapattinam	6	6	0	0	2	0	0	6	6	6
16	Namakkal	57	56	3	0	0	0	0	29	43	0
17	Perambalur	140	140	0	0	2	0	0	131	96	0
18	Pudukottai	15	15	0	0	4	1	0	4	4	2
19	Ramanathapuram	8	8	0	0	1	0	0	1	0	3
20	Ranipet	61	54	0	0	2	0	0	50	50	. 11
21	Salem	47	47	0	0	2	0	0	47	38	0
22	Sivaganga	25	25	1	0	1	1	0	25	21	21
23	Tenkasi	151	150	0	0	3	0	0	31	80 .	3
24	Thanjavur	118	118	0	0	7	6	0	111	108	1
	The Nilgiris	36	35	0	0	3	0	0	17	17	10
26	Theni	1	1	0	0	0	0	0	1	0	1
27	Thirupattur	91	91	0	0	6	0	0	89	88	2
28	Thoothukudi	59	59	0	1	4	0	0	58	55	0
29	Tiruchirapalli	74	72	0	1	1	0	0	26	31	40

POCSO Medico-Legal Examination Report For the Month of APRIL 2024 - MARCH 2025

S. No	Name of the District	No.of POCSO cases	W00000 2000	No. of POCSO Cases with Disability		No. of POCSO Cases for whom MTP was done			No.of Medico-	Whether acknowledgment	No.of Cases
			POCSO	No.of POCSO cases Examined	No. of Physically challenged	No. of Mentally challenged	Less than 12 weeks	12 to 24 weeks	More than 24 weeks	Legal Examination Report handed over to Survivor/ Parent/ Guardian	obtained for receipt of Medico-Legal Examination Report with Date and Time from the Survivor/Parent/ Guardian
30	Tirunelveli	2	2	0	0	1	0	0	1	1	2
31	Tirupur	78	78	0	0	4	1	0	53	41	1 1
32	Tiruvallur	38	35	0	0	0	0	0	9	6	2
33	Tiruvannamalai	50	50	0	1	1	0	0	45	44	25
34	Tiruvarur	33	33	0	0	2.	2	0	22	8	3
35	Vellore	12	12	0 .	0	0	0	0	11	12	12
36	Villupuram	64	60	0	0	0	1	0	19	7	30
37	Virudhunagar	269	268	0	1	15	0	0	246	239	3
	Grand Total	2908	2870	4	8	116	32	0	2216	1879	259