



**State Program Management Unit  
DELHI STATE HEALTH MISSION**

(Govt. of NCT of Delhi)

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F. NO.F10/ESTT./MOSHS (D)/178/DSHM/12-13/I | 614 | 2014 DATED: 25/09/2014

**SUBJECT: MINUTES OF THE MEETING**

I am directed to forward the minutes of the meeting of State Health Society (Delhi) (No. 1/18/2014-15) held under the Chairmanship of Chairman, SHS (D) / Secretary (H&FW), GNCTD at SPMU, DSHM on 15.09.2014 at 10.00 a.m.

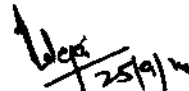
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*25/9/14*  
(State Program Officer)  
Delhi State Health Mission

F. NO.F10/ESTT./MOSHS (D)/178/DSHM/12-13/I | 614 | 2014 DATED: 25/09/2014

Copy to:

1. Secretary (H&FW) / Chairman, SHS (DELHI).
2. Divisional Commissioner (Co-Chairperson), Govt. of NCT of Delhi
3. Pr. Secretary (Finance), Govt. of NCT of Delhi.
4. Pr. Secretary (Planning), Govt. of NCT of Delhi.
5. Pr. Secretary (UD), Govt. of NCT of Delhi.
6. Joint Secretary (NRHM), Ministry of Health & Family Welfare, Govt. of India.
7. Secretary-Cum-Director (Social Welfare), Govt. of NCT of Delhi.
8. Director (ISM&H), Govt. of NCT of Delhi.
9. Director (Education), Govt. of NCT of Delhi.
10. Secretary (NDMC), New Delhi Municipal Council.
11. Additional Commissioner (Health), EDMC, SDMC, NDMC
12. Additional Commissioner (Slums), EDMC, SDMC, NDMC.
13. Additional Commissioner (Deptt. of Environmental Sanitation), EDMC, SDMC, NDMC
14. Director (CHEB), Representative of Directorate General of Health Services, Govt. of India.

15. Director, Health Services, Govt. of NCT of Delhi.
16. Director, Family Welfare, Govt. of NCT of Delhi.
17. Dean, Maulana Azad Medical College, New Delhi.
18. Chief Executive Officer, Delhi Cantonment Board.
19. Municipal Health Officer, EDMC, SDMC, NDMC
20. Director Health Administration, EDMC, SDMC, NDMC
21. MOH Family Welfare, New Delhi Municipal Council
22. Chief Executive Officer, Delhi Jal Board
23. Director / Head of the Department, Community Health Department, National Institute of Health & Family Welfare.
24. Director / Head of The Department, Community Health Department, Jawahar Lal Nehru University, New Delhi
25. Director, National Institute of Communicable Diseases, or his nominee.
26. Director (Medical), Employees State Insurance Corporation.
27. Additional Director (HQ), Central Govt. Health Scheme, Govt. of India.
28. Representative of Department Of Health & Family Welfare, GoI
29. Project Director, Delhi State Aids Control Society.
30. All State Programme Officers (RCH-II Including Immunization, Tb, Leprosy, Cancer Control, Blindness Control, Deafness Control, Iodine Deficiency, Mental Health Programmes, Diarrhea Control, National Vector Borne Disease Control Programmes (Malaria, Filariasis, Dengue, Japanese B Encephalitis Etc.), And Integrated Disease Surveillance Project), Pulse Polio Immunization
31. NGO - SOSVA
32. NGO - UHRC
33. PA to MD, DSHM

  
(State Program Officer)  
Delhi State Health Mission

**Minutes of the State Health Society Meeting**  
**(No. 1/18/2014-15) held on 15/09/2014**

State Health Society (Delhi) meeting was held on 15/09/2014 at 10 A.M. in Conference Hall, SPMU, DSHM, Vikas Bhawan-II.

List of participants is as per **Annexure-I**.

The proceedings and decisions are as follows:

**Agenda No.1**

The minutes of the SHS (D) meeting held on 15-01-2014 were confirmed.

**Agenda No.2**

Action taken report on the minutes of the State Health Society meeting held on 15/01/2014 was shared.

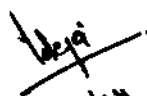
(i) Funds for help desk for senior citizen in Delhi Govt. Hospital: Fund @ Rs. 100 per volunteer per day (3 for hospitals with more than 100 bed and 2 for hospitals with less than 100 bed) were approved under Mission Flexipool in 2012-13. However, despite repeated proposals the activity was not approved by the MoHFW under Mission Flexipool.

SHS (Delhi) approved that SPO (Geriatrics) should ensure that all Medical Superintendents should refund the unspent balances as on 31/03/2013 to the respective IDHS. In case, the activity was continued in 2013-14 and further, funds available in RKS can be utilized for the activity as per the financial guidelines of RKS.

**Agenda Point No. 3**

**New Contractual engagements:** SHS (D) approved the engagement of personnels on contract under DSHM as per the list placed at **Annexure-II**.

All Program Officer were directed to ensure that offer of appointment is given only for engagements done at the State Level. Those posts reflected in the districts in ROP, the offer of appointment may be given by the respective IDHS.

  
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SHS (D) directed that whenever new persons are engaged, the details of the persons along with their job responsibility should be shared with the Directorates.

#### Agenda Point No. 4

##### Inter District / State Transfers:

SHS (D) approved:

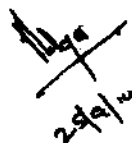
- (i) Applications for mutual transfer should be processed twice in a year - June / July & Nov. / Dec. However, all pending applications as on date may be disposed of by 15.10.2014 by all IDHS as a one-time measure.
- (ii) In case of request for mutual transfer from candidates of same post belonging to different categories, i.e. General/SC/ST/OBC, inter district transfer requests should be agreed to by the Integrated District Health Societies, if it has vacancies in the respective category.

#### Agenda Point No. 5

##### Modification of Leave Rules:

In the meeting held on 25.09.2013, SHS (D) had approved encashment of Earned Leave at the end of each contractual period subject to Labour Laws. This proposal even though projected by DSHM, was not approved by Gol. The funds required for encashment of leave have also not been approved by MoHFW, Gol. SHS (D) approved the modification in the leave rules as per following details:-

- (i) Contractual engagements under DSHM may be allowed 30 days leave in a contract period of 12 months @ 2.5 days per month, to be governed as per rules of casual leave.
- (ii) 15 days of leave may be credited on 1st January & 15 days on 1st July. However, the leave permissible in case the contract period is less than 6/12 months, the leave will be credited proportionately @ 2.5 days per month.
- (iii) Other leave rules under DSHM will remain same as per order no.F1/EM/327/DSHM/12-13/5466-89 dtd: 05/11/13.

  
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- (iv) Relevant office order and contract agreement format may be modified accordingly.

**Agenda point No. 6:**

**Hiring the services of Stretcher Bearers in Delhi Govt. Hospitals**

SHS (Delhi) ratified hiring the services of stretcher bearers by the Rogi Kalyan Samitis of 29 Delhi Govt. Hospitals in the financial year 2013-14 subject to:-

- (i) Approval by the Rogi Kalyan Samiti of the Hospital
- (ii) Availability of funds
- (iii) As per financial rules

**Agenda point No. 7:**

**Concurrent Audit for F.Y.2014-15 in respect of State Health Society (Delhi):-**

As per the guidelines issued by MoHFW, GoI, Concurrent Auditor can be selected for 2 consecutive financial years subject to satisfactory performance by the Auditor. M/s Sushil K Gupta & Co., the Concurrent Auditors had been selected through the open tender for 2013-14. The proposal for extension of services of Concurrent Auditors i.e. M/s Sushil K Gupta & Co. for F.Y 2014-15 on the same terms and conditions was ratified by SHS (D).

SHS (D) also approved the reappointment of concurrent auditors for the 11 IDHSs on the same terms and conditions subject to satisfactory performance.

**Agenda point No. 8**

**Statutory audit for F.Y.2013-14 in respect of State Health Society (Delhi):-**

As per direction of GoI, MoHFW vide D.O. no-27034/19/2012-NRHM- Finance dated 08-01-2014 directed to make appointment of Statutory Auditor for F.Y. 2013-14 on open tender basis.

SHS (D) approved the appointment of M/s KPMR Associates (CA Firm) as Statutory Auditor for Fy-2013-14.

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SHS (D) was informed that the audit report is in the final stages and will be submitted to Gol by 22/09/2014.

### **Agenda point No. 9**

#### **Selection for vacant posts**

(i) Applications were invited by the SPMU for various vacancies in Dec, 2012.

Since more than 18 months are over, SHS (Delhi) approved that a further processing of these applications may be discontinued following a notification published to this effect.

(ii) SHS (D) was informed that the selection of Medical Officers and Specialists was done by Directorate of Health Services in July, 2013. The validity of the panel has lapsed. Currently the active panel for district level posts are available for District Program Manager & District ASHA Coordinator only. There have been instances where the IDHS has not recruited the candidates, selection for whom was coordinated by the SPMU.

**SHS (Delhi) approved that the selection and recruitment in the current financial year will be coordinated as per following details:-**

State Program Management Unit shall coordinate the selection for following posts.

1. Anesthetist
2. Bio Medical Engineer
3. Accounts Assistant

Directorate of Family Welfare shall coordinate the selection for following posts.

1. Pediatrician
2. Medical Officers
3. Staff Nurses
4. ANM

Directorate of Health Services shall coordinate the selection for following posts.

1. Public Health Nurse

For posts approved in ROP 2014-15, the concerned SPOs shall be responsible for successful completion of the task.

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Sr. No.	Programme	Resource Envelope		Amount Approved	
		(Rs. Crores)	In	(Rs. Crores)	In
1	RCH Flexible Pool	43.44		66.60	
2	NHM Flexible Pool	13.57		70.93	
3	Immunization & PPI Operation Cost	9.23		9.16	
4	Iodine Deficiency Disorder	1.00		Approval pending	
5	National Urban Health Mission (NUHM) Flexible Pool	83.21		84.24	
6	Integrated Disease Surveillance Project	0.75		1.44	
7	National Leprosy Eradication Program	0.78		2.11	
8	National Vector Borne Disease Control Program	5.92		0.7	
9	Revised National Tuberculosis Control Program	18.2		29.67	
10	National Program for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS)	1.88		Approval pending	
11	National Program for Control of Blindness (NPCB)	2.89		2.89	
12	National Mental Health Program (NMHP)	Allocation pending		Approval pending	
13	National Programme for Health Care of the Elderly (NPHCE)	1.00		Approval pending	
14	National Programme for Prevention and Control of Deafness (NPCCD)	0.23		Approval pending	
15	National Tobacco Control Programme (NTCP)	1.42		0.93	
16	National Oral Health Programme (NOHP)	0.02		Plan not submitted	
17	Infrastructure Maintenance	9.24		9.24	
18	State Share	64.26			
19	Uncommitted unspent	23.17			
	<b>Total</b>	<b>280.21</b>		<b>277.91</b>	

SHS (D) approved that all recurring cost including human resource to be within the resource envelop allocated for the program by Gol. The state share shall not be used

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SHS (D) approved the outsourcing of vacant posts of CDEO & support staff. For support staff, the available rate contract of Directorate of Health Services may be utilized by the IDHS.

#### Agenda Point No. 10

A contract agreement is to be signed with each contractual engagement by the SHS (D) at the time of initial appointment / renewal.

SHS (D) approved that State Program Officer with whom the contractual engagement is attached may sign the contract on behalf of society.

#### Agenda Point No. 11

SHS (D) was informed about approval of State PIP 2014-15 received from Gol. Total Resource Envelope for 2014-15 approval

	(Rs in Crore)
Uncommitted Unspent Balance Available under NHM as on 01 / 04 / 2014	23.17
GOI Resource Envelope for 2014-15 under NHM	173.50
Assuming 10% incentive based on performance	19.28
25% State Share (2014-15)	64.26
<b>Total</b>	<b>280.21</b>

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for HR remuneration purpose. State Program Officer to ensure that the activities approved in the current financial year are completed timely.

A supplementary proposal for NTCP may be submitted for the resource envelope available.

State Program Officers for National Iodine Deficiency Disorder Control Program for (NIDDCP), National Program for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS), National Mental Health Program (NMHP), National Programme for Health Care of the Elderly (NPHCE) & National Programme for Prevention and Control of Deafness (NPPCD) will follow up with respective program divisions in the Ministry for the approval of the plan submitted by the State. The plans can be executed as per approvals received.

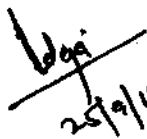
(i) SHS (D) approved enhancement of all existing positions by 5% over the remuneration being paid in 2013-14 as per approval in the PIP 2014-15. All staff under DSHM to be given uniform enhancement subject to approval in the respective program, so that posts of similar nature receive the same remuneration.

(ii) SHS (D) approved all existing posts in the districts. The additional approval available if any in the current PIP will be allocated district wise by the committee constituted at the State level under the Chairmanship of MD, DSHM

(iv). City Program Management Unit (For EDMC, NDMC & SDMC) - Each Program Management Unit has been allowed 1 Program Manager, 1 Accounts Manager, 1 Accounts Assistant and 1 Establishment Clerk. SHS (D) approved setting up of PMU as per approvals received. Proposal for the same may be submitted by the EDMC, NDMC & SDMC. SHS (D) informed the benefits like direct fund flow, separate HR to MCD facilities, better monitoring support, separate PIP etc with the formation of a separate society to each of the MCD city programme units. A meeting may be held with MCD health authorities by MD DSHM before a formal proposal is submitted to the Commissioners of 3 municipalities.

SHS (D) approved the resubmission of the proposal for ongoing activities in supplementary proposal as per following details:-

(I) 10 CDEO's were proposed under Program Management at State Level for Directorate of Health Services. The proposal has not been approved. Since all these

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CDEOs are in position at Directorate of Health Services, a supplementary proposal may be sent to GoI for their continuation.

### (II) Seed PUHC

- (i) Rent @ Rs. 25000/- p.m. and running cost @ Rs. 7,000/- p.m. has been approved in the current year. Being an ongoing activity, expenditure has been incurred as per approvals in 2013-14 i.e. Rs. 15000/- p.m. for running cost. GoI may be requested to allow in principle approval for the rate of Rs. 15,000/- p.m. which shall be managed with existing fund approval for rent and running cost.
- (ii) Support staff for seed PUHC was approved @ of 4 per seed PUHC. Since this is an ongoing activity, approval for 6 months may be allowed at the existing rate. For next 6 months it will be restricted to 2 per Seed PUHC unit i.e. one sweeper & one peon.

### (III) Dispensary contingency

Dispensary contingency @ Rs. 10,000/- per annum for 400 Primary Health Centre (i.e. Dispensaries/MCW centres) is an ongoing activity and the centers have been using this fund till date. GoI may be requested to allow continuation of the activity in the current year. Funds approved under untied grants for UPHC will be re-appropriated for the activity.

(IV) Provisions for CDEOs: In ROP 2014-15, 298 CDEOs under M&E component provisioned for only six months (till September 2014) as under NUHM there is no such post allowed at present though it visualizes clerical support. Since there is no clerical staff in the primary healthcare facilities and the CDEOs are also providing this support, SHS (D) approved that the position may be defined as the Clerical Assistant cum Data Entry Operator. The RRs and the TORs shall be redefined accordingly. The existing eligible and willing CDEOs shall continue to function in the system and the vacancies shall be outsourced.

(V) The component of CDEOs for hospitals has not been approved and the 25 CDEOs in position in LNJP have only been provisioned for till September 2014. Since it may be difficult to find alternate state funding or to make any other alternative arrangements in the middle of the year, GOI may be requested to fund the activity in CFY, giving the hospital time to look and arrange for alternatives.

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(VI) Funds for Computers have not been approved in the PIP 2014-15. The details of requirement are being sent to GOI for reconsideration.

(VII) Formation of 50 Mahila Arogya Samitis (Pilot project with PFI) is an important activity for the year 2014-15. Funds have not been approved by GOI for supporting the identified NGO. The same shall be sent for reconsideration.

(VIII) **Emergency Transport / Ambulance :-** As per the administrative approvals received, GoI has approved Rs. 288.00 lakhs @ 20% of OPEX of Rs. 1.00 lakh/ ambulance / month for 120 ambulances for 3 rd year of ambulance services & Rs. 60.00 lakhs @ 60% of OPEX of Rs. 1.00 lakh/ ambulance for 1 month for 100 ambulances for 1st year of service.

The ambulances are operationalised by the government society – Centralised Accidents and Trauma Services. GoI may be requested to allow support in the current year as per rate approved in 2013-14 i.e. Rs. 1 Lakh per ambulance per month as the funds required for state support has not been projected this year.. In view of the communication received from Joint Secy. (Policy), GoI, CATS may also be requested to make provisions in the State Fund in RE.

(IX) **Outsourced staff:** Support staff was proposed @ Rs. 11,500/- p.m. As per the minimum wages for unskilled labour in Delhi Rs. 8554/- p.m. has to be given to these personnels. For outsourcing additional charges i.e. 4.75 % ESI charge, 10% service charge & 12.36% service tax has to be provisioned for. Proposal may be submitted for approval to pay as per the minimum wages rate for unskilled labourer of Delhi fixed from time to time.

#### **Agenda Point No. 12**

#### **Setting up of a Common Delhi Health Planning Body:**

In order to ensure Universal Coverage, for Quality Assured Primary Healthcare, optimum utilization of existing health infrastructure (of GNCTD and MCDs) and rational location of new health facilities as per needs is required.

The ground work in terms of:

- (i) Mapping of existing health infrastructure of the two key agencies (GNCTD & MCD) has been done.

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- (ii) Unserved and underserved areas identification has been done by a detailed process of catchment area mapping for health facilities.
- (iii) A common minimum services package of Primary Healthcare Services has been formulated which must be available in all Primary Urban Health Centres (PUHCs) catering to a defined catchment area.
- (iv) Criteria and requirements for opening of new health centres have also been laid down.

With this backdrop, it was proposed that a Common "Delhi Health Planning Committee" with key functionaries (the three Commissioners and the Secretary (H&FW) of the two agencies as members be set up so that well coordinated and synergistic plans and systems can be put in place for execution of universally available, quality assured Primary Healthcare to all without affecting the ownership in any way.

It was agreed in principle that a state level planning body involving the two major players will be beneficial to the public. The proposal may be placed before competent authority for approval.

It was also decided that there could be a two tier mechanism - A policy approval body and a technical body to facilitate health planning. Mission Director may submit a proposal in this regard to DoHFW.

### **Agenda Point No. 13**

#### **Referral Linkages operationalization**

Pilot project is being undertaken in two districts for a cluster of PUHCs and linked maternity homes and Secondary care hospitals. The aim is to provide Quality antenatal care in the primary health facilities, in the vicinity of the pregnant ladies and increase the deliveries in Maternity homes.

One of the main reasons for women going directly to the hospitals in early / mid-pregnancy is for conduct of certain basic lab tests and Ultrasound. In the absence of availability of these tests in the Primary Healthcare facilities, the linkages cannot work. It is therefore essential that the basic tests be made available at the PUHCs / Maternity Homes.

It is proposed that:

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- (i) SHS approved the proposal to allow PUHCs of GNCTD/ MCDs to directly refer the pregnant women who require USG to the same agency / institution empanelled by the referral hospital . The expenditure shall be incurred from the JSSK fund through a defined mechanism.
- (ii) SHS approved that the MO I/C of PUHCs of MCD/GNCTD may utilize the contingency / untied funds for procuring reagents / consumables . The centers where the Jan Swasthya Samitis have been formed but are not functional due to the fact that elected representative members are not available , the MO I/C may be allowed to use the untied funds.

#### **Agenda Point No. 14**

##### **Sub-mission under DSHM for Mother Child & Health**

SHS in principle agreed to form a sub-mission under Delhi State Health Mission for more focused approach in mission mode for "mother and child health" segment to improve Infant mortality rate, neonatal mortality rate and MMR.

Members were requested to suggest experts apart from those mentioned below for inclusion in the committee proposed to provide inputs by mail by 20-09-14.

- (i) Dr. Siddharth Ramji, MS-Lok Nayak Hospital
- (ii) Dr. Harish Challani, Sr. Consultant (Paediatrics), Safdarjung Hospital
- (iii) Dr. Sanjeev Kumar, Executive Director-NHSRC
- (iv) Dr. Arun Singh, Technical Lead
- (v) Dr. Ashok Kumar Deorari-AIIMS

#### **Agenda Point No. 15**

##### **Child Health**

- (i) The State proposed to increase the number of SNCUs from 14 to 15, NBSUs from 14 to 20 and NBCC s from 33 to 38 and NRCs from 11 to 14. However, no manpower has been approved. SHS (D) suggested that running of these units may be done at the hospital level by the Medical Superintendents and may be projected to the state for post creation.

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- (ii) As per Gol directives funds upto Rs. 10 Lakhs per district were utilized on the activities during Intensified Diarrhea Control Fortnight in different PMR Codes which were to be included in the approvals received for the PIP 2014-2015. However, no administrative approvals have been received though districts have already incurred some expenditure on these activities. SHS (D) approved that a supplementary proposal for approval as per actual expenditure may be submitted to Gol.

#### **Programme Management Unit**

There is discrepancy in the salary of Steno (DFW), Steno is drawing salary @ Rs. 18510/-. SHS (D) approved a proposal for enhancement as per entitlement may be included in the Supplementary PIP.

#### **Agenda Point No. 16**

#### **RNTCP Issues**

#### **(i) EPF/ ESI Issues**

As per directions of high court DTUS order have to be implemented w.e.f. 11/05/2011 but the EPF/ ESI are fixing liability retrospectively for EPF from 2002 and ESI from 2008. ESI has already attached & recovered from DTUS account for Rs. 3,44,915/- and DSHM account for Rs. 1,63,79,854/-. Another demand notice has been received from ESIC for recovery of damages under Section 85(B) of ESI Act for delayed payment of ESI contribution for different period as follows:-

(a) From 04/2008 to 12/2012	=	Rs. 96,46,486/-
(b) From 01/2013 to 10/2013	=	Rs, 28,58,444/-
(c) From 11/2013 to 03/2014	=	Rs, 12,62,869/-

Matter needs to be sorted out at the earliest.

SHS (D) was appraised of the issues as above and approved that SPO (RNTCP) should take up the issue with Finance Department, GNCTD, Finance Department, MoHFW, Gol, EPF & ESI Corporation.

With reference to parity with DSHM staff and RNTCP staff, SPO RNTCP informed that MoHFW, TB division will provide a letter shortly allowing state to this effect

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and that adequate funds are available within the ROP approved amount for contractual services of RNTCP. SHS informed that in case the above two criteria are met, Chairman SHS may be authorized to approve the fixation of remuneration of RNTCP staff.

#### **Other issues**

1. In the current financial year, the funds from GoI are being received in the State Treasury. SHS (D) receives funds more than 3 months after it is received in the State. To ensure that the funds are received in the SHS accounts in a timely manner, State Finance Manager was directed to evolve a timeline chart for different approving authorities..
2. Finance Management Group at the State Level should ensure availability of funds for all programs in all the districts timely.
3. In view of the approvals received for National Health Mission of Rs. 280 Crores, representative from Planning Department, GNCTD informed that the SHS (D) needs to put up a revised proposal with enhanced amount so as to make adequate provisions in central as well as state share in RE to GNCTD since only Rs. 192 Crores have been approved for DSHM (Rs. 60 Crores as State Share and Rs. 132 Crores as GoI releases)
4. AYUSH Department, GNCTD to put up a proposal for Supplementary PIP.
5. For the staff outsourced by the SHS (D), it should be mandatory to wear an Identity Card with the display of Employee Provident Fund No. Respective IDHS should check for fund transfer of funds as wages to the outsource staff. Also all payment to the outsource staff should be done by ECS.

Meeting ended with the vote of thanks.

  
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**LIST OF PARTICIPANTS**

1. Dr. N.Vasantha Kumar, IAS, Addl. Secy. (Health) & Mission Director, DSHM
2. Dr. S.K. Sharma, Director, DHS
3. Dr. D.K. Dewan, Director, DFW
4. Dr. D.K. Seth, DHA (NDMC)
5. Dr. Charan Singh, Addl. Director, SPO
6. Dr. Ashwani Khanna, SPO, RNTCP
7. Dr. Varsha Gupta, Specialist B&P, LNH
8. Mr. Devanand Srivastava, Project Manager, NGO-UHRC
9. Dr. K.S. Baghotia, Addl. Director, SPO, NLEP
10. Dr. Suresh Seth, HOO, DFW
11. Dr. R.K.Batra, SPO (RCH)
12. Mrs. Manju Sahoo, Dy. Director, Planning Department
13. Dr. Pawan Kumar, CMO (DHS)
14. Dr. Mirnalini, DD, DSACS
15. Mr. Jagdish Prasad, Assistant Director, NDMC
16. Dr. R.K. Sehgal, CDMO (South East District)
17. Dr. S.C. Arun, Addl. MHO, NDMC
18. Dr. Sonia Gupta, CMO SAG, NCDC
19. Mr. G.K. Marwah, CEO, SOSVA (MNGO)
20. Dr. A.K. Sani, SPO, NPCB
21. Dr. Devashish Bhattacharya, Addl. Director (Ph-II), DHS
22. Dr. S.K. Arora, Addl. Director (Ph-I), DHS
23. Dr. G.P. Singh, CMO (Plan), NDMC
24. Dr. R.P. Gupta, Addl. DHA, M&CW, NDMC
25. Dr. Bimlesh Yadav, SPO (Maternal Health), DFW
26. Dr. Gautam Kr. Singh, SPO (Adolescent Health), DFW
27. Dr. Shalley Kamra, SPO, PNDT
28. Dr. Rajeev Kumar, Medical Officer, PNDT
29. Mr. Shyam Sudner, Addl. Director, Directorate of Education
30. Dr. Sita Bhagi, DHO, MCD
31. Dr. Nidhi Agarwal, Medical Officer Incharge
32. Dr. Monika Rana, SPO, DSHM
33. Dr. Nutan Mundeja, SPO, DSHM
34. Dr. S. Ailawadi, SFM, DSHM
35. Mr. Mukesh Gupta, SFM, DSHM



**ANNEXURE-II**

List of employees who have joined at Sate Programme Management Unit after SHS meeting on 15.01.2014:

<b>Sr. No.</b>	<b>Name</b>	<b>Designation</b>	<b>Joining date</b>	<b>Place of posting</b>
1.	Mr. Nitin Nayyar	Quality Assurance Manager	15.07.2014	SPMU
2.	Mr. Roopak	State ASHA Coordinator	16.07.2014	SPMU
3.	Mr. Ramesh Pandey	Quality Assurance Consultant	04.08.2014	SPMU
4.	Mr. Shahadat Hussain	Statistical Officer	06.08.2014	SPMU
5.	Mr. Amit Saini	Equipment Procurement Consultant	11.08.2014	SPMU
6.	Mr. Mukesh Kumar Gupta	State Finance Manager	01.09.2014	SPMU
7.	Ms. Deepika Gulati	Budget & Finance officer	23/7/14	NLEP (HQ)