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# DELHI STATE HEALTH MISSION

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Dated: 00 03 2010 3606/2010 F.No.F1-20/1/2018-Estt. I

# Minutes of Meeting of State Health Society (Delhi)

The undersigned is directed to circulate herewith a copy of Minutes of the Governing Body of the State Health Society (Delhi) meeting chaired by Chairman, SHS (Delhi)/Pr. Secretary (H&FW), GNCTD held on 26/02/2018 at 10:30 AM at Conference Hall, Delhi State Health Mission, 6th Floor, B-wing, Vikas Bhawan-II, Delhi-110054.

This is issued with approval of Chairman SHS (Delhi).

Encl: As above

Dr. Nutan Mundèja State Program Officer Delhi State Health Mission

F.No.F1-20/1/2018-Estt.

Dated:

- 1. Secretary (H&FW)/Chairman ,SHS (Delhi)- for information
- 2. Divisional Commissioner (Co-Chairperson), Govt. of NCT of Delhi.
- 3. Pr. Secretary (Finance), Govt. of NCT of Delhi- with the request to nominate an officer for the meeting.
- 4. Pr. Secretary (Planning), Govt. of NCT of Delhi with the request to nominate an officer for the meeting.
- 5. Pr. Secretary (UD), Govt. of NCT of Delhi- with the request to nominate an officer for the meeting.
- 6. Joint Secretary (NRHM), Ministry of H&FW, 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 (Delhi)
- 12. Additional Commissioner (Slums), EDMC SDMC, NDMC (Delhi)

- 14. Director (CHEB), Directorate of General of Health Services, Govt. of India
- 15. Director, Directorate of Health Services, Govt. of NCT of Delhi
- 16. Director, Directorate of Family Welfare, Govt. of NCT of Delhi
- 17. All Regional Director Health Services (RDHS)
- 18. Dean, Maulana Azad Medical College, New Delhi
- 19. Chief Executive, Delhi Cantonment Board.
- 20. Municipal Health Officer, EDMC SDMC, NDMC (Delhi)
- 21. Director Health Administration, EDMC SDMC, NDMC (Delhi)
- 22. MOH Family Welfare, New Delhi Municipal Council
- 23. Chief Executive Officer, Delhi Jal Board
- 24. Director/Health of the Deptt, Community Health Department, National Institute of Health & Family Welfare
- 25. Director/Health of the Deptt., Community Health Department, Jawahar Lal Nehru University, New Delhi.
- 26. Director, National Institute of Communicable Diseases, or his nominee
- 27. Director (Medical), Employees State Insurance Corporation
- 28. Additional Director (HQ), Central Govt. Health Scheme, Govt. of India
- 29. Project Director, Delhi State AIDS Control Society
- 30. All State Program Officers (RCH-II including Immunization T.B, Leprosy, Cancer Control, Blindness Control, Deafness Control, Iodine Deficiency, Mental Health Programs, Diarrhea Control, National Vector Borne Disease Control Programs (Malaria, Filaria, Dengue, Japanese B encephalitis etc.), and Integrated Disease Surveillance Project), Pulse Polio Immunization
- 31. NGO-SOSVA
- 32. NGO-UHRC

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Dr. Nutan Mundeja State Program Officer Delhi State Health Mission

# Minutes of the Meeting No.3/25/2017-18

Meeting of the State Health Society (Delhi) was held on 26/02/2018 at 10.30 a.m in the Conference Hall of State Programme Management Unit, Delhi State Health Mission, 6 Floor, B-Wing, Vikas Bhawan-ll, Delhi -54 under the Chairmanship of Chairman, State Health Society (Delhi).

List of participants is as per Annexure-1

The proceedings and decisions are as follows:

**Agenda Point No. 1** :- The minutes of the State Health Society (Delhi) meeting held on 19/09/2017 were confirmed.

**Agenda Point No. 2** :- Action taken report on the minutes of the State Health Society (Delhi) meeting held on 19/09/2017 was presented for discussion as per following details :-

Point No.	Action Required	Action Taken	Observations/Directions of State Health Society (Delhi)
2(vii)	Status of merger of National Mental Health Program (NMHP)	Merger is still pending and shall be done in the next financial year.	State Health Society (Delhi) reiterated the decision for merger as per Govt. of India guidelines.
2(xiii)	Finalization of Recruitment Rules by the committee constituted under the Chairmanship of Director General Health Services.	<ul> <li>Recruitment Rules for the following posts have been finalized by the Committee:</li> <li>1. CDEO (To be outsourced)</li> <li>2. Quality Assurance Consultant (1 and 2)</li> <li>3. State Consultant-Quality Monitoring (Earlier-Statistical Assistant</li> <li>4. State M&amp;E Officer</li> <li>5. State MIS Expert</li> <li>6. District Quality Assurance Consultant</li> <li>7. Legal Consultant</li> <li>8. Psychologist</li> <li>9. Social Worker</li> <li>Submitted for approval by SHS (D)</li> </ul>	State Health Society (Delhi) approved the Recruitment Rules for the posts finalized by the Recruitment Committee as per Annexure 2
2(xv)	Employees Provident Fund	Relevant documents for getting coverage under the PF Amnesty Scheme were submitted to the EPFO by the State and all IDHS.	Noted by State Health Society (Delhi).

Point No.	Action Required	Action Taken	Observations/Directions of State Health Society (Delhi)
		However, no confirmation regarding the same has been received from EPFO.	
		Submitted to SHS (D) for information.	
2(xvi)	Proposal for extending the benefit of Patient Care Allowance (PCA) to all categories involved in patient care under National Health Mission.	Initially, a proposal was submitted and has been received back with observations and is being re-submitted to the Department of Health and Family Welfare. Submitted to SHS (D) for information.	Noted by State Health Society (Delhi).
12	Payment of wages to the manpower as per enhanced Minimum Wages.	Orders have been issued. Submitted to SHS (D) for information.	Noted by State Health Society (Delhi).
19	Recruitment of Software Team from open Market	As approved by IT, a request for provision of three personnel, (2 Senior Programmer and 1 Database Administrator) has been sent to NIELET. Submitted to SHS (D) for information.	Noted by State Health Society (Delhi).
10.2(b)	Enhancement of Human Resource in 2017-18	Executive Committee approved an enhancement of 5% for all contractual engagement under DSHM for the year 2017-18. Submitted to SHS (D) for ratification.	State Health Society (Delhi) ratified the enhancement of 5% for all contractual engagement under DSHM for the year 2017-18.

# Agenda Point No. 3:- Renewal of contractual engagements of State Health Society (Delhi).

State Health Society (Delhi) approved renewal of the contract of Ms. Vandana Rawat (Steno) w.e.f. 01/04/2017 to 31/03/2018 consequent upon resuming her duties after completion of Maternity Leave on 24/07/2017.

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# Agenda Point No. 4:- Re-appointment of Statutory Auditor for the financial year 2017-18.

State Health Society (Delhi) ratified the re-appointment of the Statutory Auditor M/s K.K. Goel & Associates, Chartered Accountant, Delhi for the F.Y. 2017-18 @ Rs. 1,02,609/- inclusive of all taxes, as approved by MD, DSHM. M/s K.K. Goel & Associates was appointed through open tender in the year 2016-17.

# Agenda Point No 5 :- Status of Concurrent Audit for the Financial Year 2017-18

The Audit report of the concurrent audit of State Programme Management Unit under DSHM till December-2017 was submitted to State Health Society (Delhi).

## Agenda Point No. 6 :- Appointment of Concurrent Auditor for the Financial Year 2018-19.

State Health Society (Delhi) was informed that tender for appointment of State Concurrent auditor for the F.Y 2018-19 has been floated with approval of MD, DSHM.

It was also informed that Concurrent auditor for the district was appointed in the year 2017-18 and all the districts have given their consent to continue with the same auditor in f.y 2018-19.

# Agenda Point No. 7:- Administrative approval of Supplementary Program Implementation Plan 2017-18

State Health Society (Delhi) was informed that approval for Supplementary PIP 2017-18 has been received vide Letter No. F. No 10(22)/2017-NHM-I dated 22.01.2018. SHS (D) approved the implementation as per approvals received.

Some of the key approvals submitted to SHS (D) are as per following details:

- i. Construction of Ambedkar Nagar Hospital: The estimated cost of 200 bed hospital was Rs. 125.90 Crores. Rs. 55.05 Crores had been added for additional 400 bed. The additional fund required for construction of 600 bed hospital at Ambedkar Nagar was not approved. Director General Health Services has been requested to keep the provision for the revised amount in the State budget.
- ii. Approval of Rs. 54.52 Lakhs for NCD screening in Central District
- iii. Pulse polio operating cost: Rs 690 lakh has been approved
- iv. Human Resource for M&E, ASHA & Clerical staff under NUHM: The approval of ongoing human resource which was missed has been received.
- v. Rs 36.6 Lakh has been approved for Leprosy screening in high endemic districts

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# Agenda Point No. 8:- Financial progress under Delhi State Health Mission:

# Financial progress as per following details was submitted to SHS (D):

			Details of I	Budget and E	xpenditure	under NHM f	or 2017-18			
S. N O	Pool	Budget approved including Committe d	Resourc e Envelop e	Opening Balance including advances	Fund sanction ed by GOI & Received by state during f.y2017- 18*	Total funds available	Total Expend till 31- 12-2018	Balance of Funds as on 31.12.18 including Advances	% of Expend iture against Budget	% of Expen d. against Total availa ble balanc e
				(A	mount in La	cs)				
1	RMNCH Flexible Pool	5841.58	5708.00	9416.83	3230.00	12646.83	1180.05	11466.78	20.20	9.33
a.	RCH Flexi pool	2395.58	4747.00	7623.43	1898.00	9521.43	370.04	9151.39	15.45	3.88
C.	Routine Immunizati on	2418.00	342.00	520.07	308.00	828.07	267.29	560.78	11.05	32.27
C.6	Pulse Polio	1000.00	562.00	850.19	1000.00	1850.19	514.56	1335.63	51.46	27.81
d	NIDDCP Undistribut	28.00	57.00	73.51	24.00	97.51	28.16	69.35	100.57	28.87
	ed GIA			349.63		349.63	0.00	349.63		
2	HSS	21177.74	4162.00	10722.11	3981.00	14703.11	13228.62	1474.49	62.46	89.97
b.	MFP			8108.48	3981.00	12089.48	13228.62	-1139.14		
b.i	NOHP		4162.00	0.00		0.00	0.00	0.00	62.46	108.93
b.ii	NPPCD Undistribut	21177.74		53.63		53.63	0.00	53.63		
	ed GIA			2560.00		2560.00		2560.00		
3	NUHM Flexi- pool	10038.05	4765.00	3222.62	4289.00	7511.62	3509.70	4001.92	34.96	46.72
4	CD Flexi pool	3446.65	3405.00	1056.96	2581.00	3637.96	816.19	2821.77	23.68	22.43
a.	IDSP	158.00	150.00	35.27	124.00	159.27	34.12	125.15	21.59	21.42
b.	NVBDCP	82.00	168.00	622.25		622.25	4.48	617.77	5.46	0.71
с	NLEP	282.60	69.00	-6.76	57.00	50.24	34.84	15.40	12.33	69.34
d.	RNTCP	2924.05	3018.00	406.20	2400.00	2806.20	742.75	2063.45	25.40	26.46
5	NCD Flexi pool	1296.20	1431.00	1404.62	0.00	1404.62	71.06	1333.56	5.48	5.05
a.	NPCB	708.00		183.53		183.53	65.40	118.13		
b.	NMHP	86.00		97.96		97.96	0.00	97.96		
с.	NPHCE	42.00	1431.00	34.58		34.58	0.00	34.58	5.48	9.46
e.	NTCP	330.20		47.75		47.75	4.67	43.08		
g.	NPCDCS	130.00		387.16		387.16	0.99	386.17		
	Undistribut ed GIA			653.64		653.64		653.64		
6	State Specific Scheme	0.00	0.00	1441.19	975.00	2416.19	1568.40	847.79		64.91
a.	ASHA Incent.						1218.72			
b.	State Govt. Salary Part			1441.19	975.00	2416.19	349.68	847.79		



	Total	42724.22	20395.0 0	27264.33	20735.76	48000.09	20900.11	27099.98	48.92	43.54
	Infra &Main.	924.00	924.00		679.76	679.76	526.10	153.66	56.94	77.39
c.	GIA AAMC				5000.00	5000.00		5000.00	#DIV/0 !	0

SHS (D) was concerned regarding the low utilization under some programs.

# Agenda Point No. 9:- State Program Implementation Plan 2018-19

State PIP 2018-19 compiled in the State Program Management Unit Level based on inputs received from Program Officers as per following details was submitted to SHS (D) for approval:-

		including un		Deal Dudget Tetal Anticipate Uncommitted Total Dromocod								
	Pool	Budget approved including Committe d	Total Expenditur e till 31.12.2017	Anticipate d Resource Envelope for 2018- 19	Uncommitted Unspent of 2017-18	Total Resourc e Envelop e availabl e for 2018-19	Proposed budget in PIP 18-19					
	ount in Lacs)						1					
1	RMNCH Flexible Pool	5841.58	1180.05	6564.20	6109.00	12673.20	3974.98					
a.	RCH Flexible	2395.58	370.04	5459.05	6909.00	12368.05	926.98					
C.	Routine Immunizatio n	2418.00	267.29	393.30	-400.00	-6.70	1820.00					
C. 6	Pulse Polio	1000.00	514.56	646.30	-400.00	246.30	1200.00					
d	NIDDCP	28.00	28.16	65.55	0.00	65.55	28.00					
2	Health System and strenghthin g	21177.74	13228.62	4786.30	-100.00	4686.30	15000.0 0					
b.	MFP	21177.74	13228.62	4786.30	-100.00	4686.30	15000.00					
b.i	NOHP		0.00		0.00	0.00						
b.i i	NPPCD		0.00		0.00	0.00						
3	NUHM Flexible pool	10038.05	3509.70	5479.75	3066.00	8545.75	5728.66					
4	CD flexible pool	3446.65	816.19	3915.75	1613.37	5529.12	7986.15					
a.	IDSP	158.00	34.12	172.50	78.37	250.87	113.15					
b.	NVBDCP	82.00	4.48	193.20	595.00	788.20	173.00					
с	NLEP	282.60	34.84	79.35	0.00	79.35	300.00					
d.	RNTCP	2924.05	742.75	3470.70	940.00	4410.70	7400.00					
5	NCD flexible pool	1296.00	71.06	1645.65	649.00	2294.65	1711.10					
a.	NPCB	708.00	65.40	1645.65	649.00	2294.65	304.00					

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	Total	41800.02	18805.62	22391.65	11337.37	33729.02	34400.89
g.	NPCDCS	130.00	0.99			0.0	363.00
e.	NTCP	330.00	4.67				437.90
c.	NPHCE	42.00	0.00				129.20
b.	NMHP	86.00	0.00				477.00

- Ongoing Activities- All ongoing activities were approved by SHS (D) to be proposed.
- b) Rare Diseases- State Health Society (Delhi) approved the proposal for funds of Rs. 20 Crore as corpus amount for Rare Diseases to be projected under RMNCH+A program.
- c) Support to CATS Ambulance- State Health Society (Delhi) approved the following proposals:

No. of Ambulance	Amount/month (Rs.)	Months	Total (Rs. In Lac)
120 Patient Care Ambulance	20,000/-	12	288
55 BLS	60,000/-	3	66
55 BLS	40,000/-	9	99
19 BLS	60,000/-	4	30.4
19 BLS	40,000/-	8	30.4
26 BLS	60,000/-	8	83.2
26 BLS	40,000/-	4	20.8
TOTAL			617.80

i. Funds of Rs 617.80 Lacs for patient care and BLS ambulances as per following details:

ii. A new proposal for integrating location services of the caller to CATS control room was approved by SHS for CATS. Funds of Rs 2.5 Crores for support to CATS control room was approved to be budgeted under NUHM Innovations.

- iii. SHS (D) approved the proposal for procurement of two Advanced Life Support Ambulances for infant transportation. Director, Family Welfare shall be putting up detailed proposal for operationalizing these two ambulances in Delhi through CATS.
- d) Seed Primary Urban Health Centre SHS (D) was informed that under NUHM, 63 Seed PUHCs are approved. Of these 61 Seed PUHCs are functional. These are supported with running expenditure of Rs 15000/p.m and staff (1-2 Medical Officer, 1 Pharmacist, 1 Lab Technician, 2 Support Staff and Area ANM). One AAMC at Peera Garhi (established in 2015) was being supported as SPUHCs with approval from GoI. The support to this is



being withdrawn from F.Y 2018-19 with approval from CDMO and DGHS and shall now be supported by DGHS.

Additional 9 SPUHCs are being proposed – 5 for South East District, 2 for East District, 1 for New Delhi District and 1 for South District as per following details:

S.No	District	Area
1	South East	<ol> <li>Aali Village, Aali Vihar, Lohia Pull, Jagdamba Colony, Priyanka Camp.</li> <li>Khadda Colony</li> <li>Jaitpur Village</li> <li>Tekhand Village</li> <li>Harkesh Nagar, Okhla</li> </ol>
2	East	<ol> <li>Chilla Village</li> <li>New Ashok Nagar</li> </ol>
3	South	1. New Kishan Garh
4	New Delhi	1. Masood Pur (for 15000 population)

State Health Society (Delhi) approved the proposal.

e) Rogi Kalyan Samiti — Since, the utilization of funds by the RKS was Rs. 10 Lakhs – against an approval of Rs 135 Lakhs, State Health Society (Delhi) directed that till the RKS of the Hospital utilize the funds made available, Rs. 5 Lakh per hospital per annum as grant in aid to RKS of the Hospital under NUHM may be proposed for 2018-19.

# f) Human Resource-

- i. SHS (D) approved the proposal for all ongoing Human Resource. For the post of Leprosy Assistant, SHS (D) directed that the post should be proposed under Leprosy program. If approvals are not received, the Leprosy assistants may be placed at the base rate of Senior Treatment Supervisor (STS) under RNTCP.
- ii. State Health Society (Delhi) directed that the decision regarding enhancement of base slab of all posts under DHSM may be taken by a committee to be constituted under the Chairmanship of Mission Director, DSHM with members from Delhi State Health Mission, Department of Finance, GNCTD; Department of Planning, GNCTD, Department of Services, GNCTD, Health Department, GNCTD and Municipal Corporation of Delhi.
- State Health Society (Delhi) directed that the decision regarding Loyalty Bonus for all posts under DHSM may be taken by the same committee as directed in f (ii) above.
- iv. The enhancement may be proposed as per MoHFW, Gol guidelines for 2018-19.



v. **Innovation under HR:** Provision of Tablets with Internet connectivity for 350 doctors working under National Health Mission. In order to provide easy access to various portals, see reports online, review and validate data online , access various guidelines and protocols , it was proposed that Medical officers working under NHM be provided with Tablets and Internet connectivity.

Financial Implications @ Rs.15,000/- per tab and Rs. 1000/- per month for connectivity data pack for 10 mths = 84.5 lakhs.

The proposal was approved for projection in State PIP 2018-19.

- **g) PPP for Dialysis-** State Health Society (Delhi) approved the proposal for Rs. 10.73 Crore for PPP for Dialysis under NUHM being implemented by Director General Health Services. The State Program Management Unit has been authorized to make payments for sanctions issued by Director General Health Services as per the approvals in the current financial year.
- **h)** Support for East Delhi Municipal Corporation- SHS (D) was informed that a fund of Rs 379.9 Lakh through NUHM has been proposed by EDMC for ongoing activities under NUHM.

State Health Society (Delhi) approved the proposal for fund of Rs 379.9 Lakh for support to EDMC through NUHM for ongoing activities.

State Health Society (Delhi) was informed that no proposal has been received from North Delhi Municipal Corporation, New Delhi Municipal Council and South Delhi Municipal Corporation.

Representative from Cantonment Board informed that a support under NHM needs to be provided for the Civil Hospital managed by Delhi Cantonment Board. SHS (D) approved the proposal for inclusion in the State PIP 2018-19 in principle, if received by SPMU by 27.02.2018.

# i) Health Management Information System (HMIS).

It was highlighted that there are 410 Health facilities ( 260 GNCTD plus 150 M&CW Centers) in the primary healthcare tier and 41 hospitals which are engaged in uploading various types of data , patient / beneficiary details , tracking of patients . Different IT Platforms are in use -- HMIS , RCH , IDSP , Nikshay , Inventory management , NCD , State MIS portal . In addition there are various reports to be generated SOS , training databases to be uploaded and kept updated , Payments / SOEs to be made etc.

Although in the GOI mandated structure of UPHC, there is a provision of a M&E Unit personnel and similarly a CDEO cum assistant in the State structure defined for PUHC, at present this work is being supported by a Clerical assistant cum DEO shared between 2-3 health facilities.

It was proposed that we may seek the provision for this clerical cum DEO support , one for each health facility for 462 (410 plus 41 hospitals plus one per district ) . 223 being in place , the remaining and any new vacancies to be outsourced through a GNCTD empanelled agency. We may accordingly seek provisions from GOI. 5.88 crores was approved in 2017-18.

Total Financial implications in 2018-19 covering all facilities : 10.8 crores.

The proposal was approved for projection in PIP 2018-19.

## j) National Quality Assurance Program :

Provision for OA Manager for the hospitals with 500 beds and A. above : State is fully committed to the provision of Quality Assured healthcare services and achievement of compliance with the prescribed standards is now the thrust area. In this regard, it was highlighted that this entailed multiple, multi pronged activities - ensuring adherence with various statutory compliances ie, AERB, Physical infra guidelines for specific areas, periodic calibration of equipments, Quality checks and validation like EQAS for various laboratories, Printing, dissemination of guidelines / SOPs / working instructions , organization of capacity building workshops, coordinating conduct of assessments and Audits. Report preparation and presentation for use by stakeholders. Gap analysis , review meetings for timebound gap filling , activities for gap filling , reassessment for gap closure etc. Conduct of patient / staff satisfaction assessment and compiling and tabling the same for review and improvement.

For 500 and plus hospitals, this work cannot be accomplished by the 3-4 identified doctors and nurses as an added responsibility. A dedicated Quality assurance manager may be approved for the six (five of GNCTD and one of MCD) to implement the various components in the earnest.

Total Financial implications for six hospital QAM @ Rs. 40,000/- per month for ten months is Rs 24 Lakhs.

The proposal was approved for projection in PIP 2018-19.

B. Annual provision of Rs.25000/- per annum to the Primary Health facilities for minor Gap filling under Quality Assurance Program.

As a part of the Quality Assurance Program, Primary healthcare facilities are carrying out their internal assessments using the NQAS checklists. In the process the gaps are being identified and these have to be plugged for achieving compliance with the defined standards . It has been observed that many gaps though critical are not resource intensive and can be closed at the local PUHC level.

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It was proposed that Rs. 25,000/- per year may be provisioned for the PUHCs (GNCTD & MCW centers) with total annual financial implications of  $410 \times 25,000 = 1.03$  crores.

## The proposal was approved for projection in PIP 2018-19.

k)

# Community Processes : Formation and operationalization of Mahila Arogya Samitis.

As a part of community processes, Mahila Arogya Samitis are to be formed , one for around 100 families. State had kept a target of 100 MAS to be formed as a pilot exercise. Over last 2 years 100 MAS have been formed through the ASHA Coordinators. The experience has revealed that upscaling of the activity to form around 10000 MAS cannot be taken up by the available resources and a massive effort including additional HR adept at community processes will be required.

It was proposed that the exercise be undertaken through identification of an NGO like in some other states. In the first phase , formation of 2500 MAS through a suitable NGO identified through prescribed process may be undertaken . The implementation MOU and deliverables shall be specified. Financial Implications : @ Rs. 3000 /- per MAS for 2500 MAS for the year is 75 Lakhs.

The proposal was approved in principle for projection in PIP 2018-19.As directed the proposal with more details received from SPO is as per Annexure-3.

## l) Trainings under NUHM-

State Health Society (Delhi) approved the following trainings to be included under NUHM:

- i. Training at IIM for Senior and Middle level Managers in Delhi Govt. / MCDs with financial implication of Rs 1.35 Crore @ Rs. 1.5 Lakh per participants for 5 days. Training of 3 batches for 30 participants each was approved.
- ii. Emergency Response Training- 1 day Emergency Response training of Hospital staff / CATS staff involved in Emergency care with financial implication of Rs. 4.5 Lakh.
- **m)** National Oral Health Program- State Health Society (Delhi) gave in-principle approval for the proposal for fund of Rs. 1.22 Crore for support to 5 clinics in 5 regions under NUHM as per following details:-

Components	Funds proposed (In Rs.)
A. Recurring GIA	
Contractual Manpower HR	17,39,600
1. Dental Surgeon	6,99,600
2. Dental Hygienist	2,40,000

3. Dental Assistant (to be outsourced)	3,00,000
Consumables	5,00,000
B. Non recurring GIA	7,00,000
Strengthening of Clinic (Renovation, Dental Chair, Equipment)	7,00,000
Total Expenditure for 1 clinic	24,39,600

SHS (D) approved the proposal with the direction that DGHS may identify the sites for setting up of these clinics. State Program Management Unit to ensure that the unit rate projected for Dental hygienist should be as per the unit rate approved for the post under ongoing Mobile Dental Vans.

- n) MAIDS- State Health Society (Delhi) approved the proposal for ongoing activities to MAIDS.
- o) National Program for Palliative Care (NPPC) State Health Society (Delhi) directed SPO, NPPC to submit a comprehensive proposal for establishing 50-bedded Palliative Care Unit/Wing in Rajiv Gandhi Super specialty Hospital, Tahirpur and 30-50 bedded Palliative Care Unit/Wing in Satyawadi Raja Harishchandra Hospital, Narela.
- p) Maternal Health-All ongoing activities were approved to be included.

Proposal for High Dependency Unit / Maternal Intensive Care Unit to be included under RMNCH+A as a comprehensive plan.

State Health Society (Delhi) desired that detailed note on maternal deaths in Delhi for 2017-18 should be put up informing the cause of death along with the residence status of the mother.

One of the interventions identified to reduce Maternal Mortality Ratio is to improve the nutritional status of the pregnant women. Director, Family Welfare will put up a strategy to address the issue in consultation with Department of Woman & Child Development.

**q)** Child Health- In line with the National goal, Delhi is committed to reduce the Infant Mortality Rate to less than 10. State Health Society (Delhi) desired that Director, Family Welfare shall put up a detailed plan to achieve the objective clearly identifying the constraints and modality to address them.

Following proposals under Child Health were approved by SHS (D):-

**Proposal for DEIC** – May be reworked as per availability of space & concurrence of Medical Superintendent to carry out the activity in their hospital. SHS (D) in principle approved the inclusion of the proposal under RMNCH+A.



**Proposal for New Born Screening-** SHS (D) approved the inclusion of the activity under RMNCH+A.

- **r) Family Planning-** All ongoing activities was approved. SHS (D) desired that the targets should be fixed for JJ clusters / urbanized villages & areas with migrant population. Territorial plan for entire Delhi should be submitted within 15 days.
- Adolescent Health- Proposal as per following details was approved by SHS (D):

S.No	RKSK Agenda for SHS-Meeting	Brief of Proposal Agenda	Financial Implication
1	Establishment of DISHA Clinics at nearly 30 facilities at Mty Home/ sub- district / District Hospitals	30 DISHA Clinics shall be established in Mty Home/district/Sub-district hospitals/Medical colleges across Delhi. Out of these 30 clinics 3-4 clinics shall be established in the community centres run by Medical colleges like AIIMS, MAMC, VMMC etc. Human resource at all these centres shall be trained and other per- requisites shall be full-filled in accordance with Gol guidelines. Establishment of Clinics in all Hospitals has been proposed keeping in view the need to cater to the adolescents detected for substance misuse and referred from Field as directed by Juvenile Justice Committee. Human Resource at all AFHCs to undergo specialized training for screening, counseling and initial management of substance misuse. 20 more Clinics to be established in Northeast & Northwest district.	Rs. 18.75 Lac
2	Procurement of Sanitary Napkins	Proposal for supply of Sanitary Napkins to nearly 50,000 Out of school adolescent girls and nearly 20,000 girls in Schools of North Delhi Municipal Corporation & South Delhi Municipal Corporation as per the demand submitted from the respective agencies/Department.	Rs. 151.0 Lac
3	Procurement of Sanitary Napkin Vending Machines	installation in schools.	Rs. 10.0 Lac
4	Approval of AH Counselors	Process is underway for Recruitment of 27 counselors approved in RoP 2017-18. The proposal has been made for 20 more counselors keeping in view the recommendations made by Juvenile Justice Committee constituted by Hon'ble Delhi High Court to have more counselors in place to cater to adolescents to be budgeted underRMNCH+A.	for 6 months. (apart from nearly 65 lac for 27 counselors for 12 month)
5	Three separate Studies under Anemia Prevention & Control program, Mental Health & addictive behavior	Studies to be conducted by AIIMS (two) and MAMC (one)	Rs. 51.5 Lac

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	among adolescents and Menstrual hygiene practices among adolescent girls		
6	NGO Implementation Model of Peer Education Program	NGOs/CSOs to be selected following an open tender process for two RKSK Districts. Team at each district to consist of One Program Manager and one BCC/IEC/Communication expert at District level @ Rs. 30,000 per month and 4 Program Coordinators at Sub district level @ Rs. 20000 per month for 12 months for two such teams. Selected NGOs/CSOs to ensure transfer of Incentive (financial) in the Aaadhar Linked bank account of the PEs (to be ensured by NGO/CSO) at the rate of Rs. 100/- per meeting with one meeting per week for 12 months for 320 Peer Educators.	Rs. 52.0 Lac

t) Immunization – To improve the coverage in immunization, SHS (D) approved that the OSD, Pulse Polio Program should report to Director, Family Welfare. This will ensure optimum utilization of the available resources.

## **NTCP**

- i. **New Appointments** State Health Society (Delhi) approved the appointment of One State Consultant & One State Account Manager at the State Cell, one Psychologist, one District Consultant & one social worker in East District and one District Consultant & one Social worker in New Delhi District under NTCP.
- Proposal to increase remuneration of 5 posts under NTCP- SHS(D) State Health Society (Delhi) directed that the monthly remuneration should be paid as per base slab advertised.

The meeting ended with the vote of thanks.

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# Attendance Sheet of the meeting of State Health Society (Delhi) held on 26.02.2018 under the chairmanship of Chairman, State Health Society/Secretary, Department of Health & Family Welfare, GNCTD

Sr. No.	Name	Designation	Department	Phone Number
1	Sh. Sachin Shinde	Mission Director	Delhi State Health Mission	011-23813540
2	Dr. Nutan Mundeja	State Program Officer	Delhi State Health Mission	9999888149
3	Dr. Monika Rana	State Program Officer	Delhi State Health Mission	9811484474
4	Dr. Suresh Seth	CMO (SAG)/State Program Officer, (RCH)	Directorate of Family Welfare	9968609802
5	Dr. S.K. Arora	Addl. Director & State Program Officer, NTCP, NPHCE	Directorate of Health Services	8745011331
6	Dr. K.S. Baghota	Addl. Director /State Program Officer, NLEP, NPCB NPPCD	Directorate of Health Services	8745011314
7	Ms. Madhu Bhatia	Deputy Director	Women & Child Development Department	9866047047
8	Ms. Anita Kaushal	Assistant Director	Women & Child Development Department	9868211185
9	Dr. Ruby Kurian	CMO (HQ)/M&CW	South Delhi Municipal Corporation	9711114037
10	Dr. Jyoti Sachdeva	State Program Officer (Family Welfare)	Directorate of Family Welfare	9868394885
11	Dr. R.N. Das	I/c Rare Diseases	Directorate of Health Services	8745011340
12	Dr. Surender Singh	Addl. Director, PH-II, NPCDCS	Directorate of Health Services	9560593050
13	Mr. Virender Singh	Sub Divisional Magistrate	Revenue Department GNCTD	9971465989
14	Dr. Ashwini Khanna	State Tuberculosis Officer	Revised National Tuberculosis Control Program	8745011280
15	Dr. Sunil Kumar	Medical Suptt	Guru Teg Bahadur Hospital	9868399799
16	Dr. Siddarth	Dean -MAMC	Maulana Azad Medical Sciences	9968604304
17	Dr. Kirti Bhushan	Director-DGHS	Directorate of Health Services	9868394871
18	Dr. O.P. Aggarwal	Principal-HFWTC	Health & Family Welfare Training Centre	9868394869
19	Dr. J.P. Kapoor	Director- Family Welfare	Directorate of Family Welfare	9868394820
20	Dr. Nitin	ноо	Directorate of Family Welfare	8745011282
21	Mr. Harish Kumar	Deputy Director, Finance	Delhi State Health Mission	9868092916
22	Dr. Shintoo Doomra	Central Coordinator, Pulse Polio Program	Directorat of Family Welfare	9811607067
23	Dr. J.C. Passey	Medical Director/RDHS (Central)	Lok Nayak Hospital	9968604233
24	Mr. Pawan Pravesh	DS	Urban Department	9810810297
25	Dr. S.M. Raheja	ADG	Directorate General Health Services	9318099009

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26	Dr. Mridula Pandey	Deputy Director (Homeopahty)	Directorate of Ayush	9868396475
27	Dr. Sushila Gambhir	GDMO	Delhi Jal Board	9650291541
28	Dr. Ritu Yadav	GDMO	Directorate General Health Services	8745011784
29	Dr. Gaurav Arya	State Entomologist	IDSP Delhi	7827929078
30	Dr. Madhu Bala	СМО (НQ)/	East Delhi Municipal Corporation	8130560567
31	Dr. (Mrs) R. Chandravati	Deputy DHA (M&CW)	North Delhi Municipal Corporation	9910479687
32	Dr. Hema Kolhe	Deputy Director (ISM&H)	Directorate of Ayush	9868396533
33	Dr. Praveen Kumar	Addl. Project Director	Delhi State AIDS Control Society	9868399826
34	Dr. Subhita Bagga	CMO (SAG)	North Delhi Municipal Corporation	011-23743688
35	Dr. Gurdev Singh	CMO I/c	CG Hospital Delhi Cantonment Board	7042491436
36	Dr. Reena Yadav	State Medical Officer (Immunization)	Directorate of Family Welfare	011-23813476

Annexure-II

E-File No- 2504

Date: 06 02 2016



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File No: F1-19011/1/2017-Estt.

# State Program Managment Unit DELHI STATE HEALTH MISSION

6th Floor, "A" & "B" wing, Vikas Bhawan-II, Civil LinesDelhi-54, Phone-23812902-04 Fax no. 011-23813540, E-mail-ID: dshmspmu@gmail.com

# MINUTES OF MEETING

The third meeting of the recruitment committee was held under the Chairmanship of Director General Health Services on 10<sup>th</sup> November-2017 at 10:30 AM at Delhi Secretariat. The meeting was attended by:

S.No	Name	Designation
1.	Ms. Rashmi Krishnan	Secretary, Health and Family Welfare
2.	Dr. Kirti Bhushan	Director General Health Services/Chairperson
3.	Dr. Sachin Shinde	Mission Director, Delhi State Health Mission
4.	Dr. J.P. Kapoor	Director, Family Welfare
5.	Dr. Nutan Mundeja	State Programme Officer, DSHM
6.	Dr. Monika Rana	State Programme Officer, DSHM
7.	Dr. Suresh Seth	State Programme Officer, RCH
8.	Dr. Jyoti Sachdeva	State Programme Officer, Family Planning
9.	Dr. S.K. Arora	State Programme Officer, NTCP and NPHCE
10.	Dr. O.P. Aggarwal	Principle, H&FW Training Centre
11.	Dr. Satyajit Kumar	State Programme Officer, PC & PNDT
12.	Dr. Navneet Sharma	IDSP
13.	Dr. Gautam	RKSK
14.	Dr. Mani Bhatia	State Programme Manager/Convenor

The committee met to discuss and finalize the recruitment Rules for essential posts for which recruitment needs to be undertaken.

The following Recruitment Rules were discussed:

## **CDEO**

The committee agreed to adopt the agreement dated 11/05/2016 between Dept of Information Technology (DIT), GNCTD and NIELET for engagement of technical manpower under IT The committee agreed to adopt the Recruitment Rules of CDEO as per the said agreement.(Annexure-1)

It was decided that the hiring of CDEO's may be done from NIELET subject to availability of approval of funds in administrative approval of State PIP and approval of Governing Body of State Health Society (Delhi).

SPO, DSHM (Dr. Monika Rana) submitted GoI approved RR's for the post of\_Quality Assurance Consultant, Quality Assurance Manager, Statistical Officer, State Monitoring and Evaluation Officer, State MIS Expert and District Quality Assurance Consultant for approval by the committee. The committee suggested the following :

## Quality Assurance Consultant

The committee agreed to adopt the Recruitment Rules prescribed by Govt. Of India

## Quality Assurance Manager

It was decided that the position to be upgraded Quality Assurance consultant (Public Health) as per GOI Guidelines for QA Cell personnel and the GOI RRs to be adopted. It was also decided that State may write to NHM for appropriate change and seek enhanced remuneration as per their RRs to get a more qualified personnel

## Statistical Officer

The position to be called State Consultant (Quality Monitoring) and the RRs may be adopted for the same as per GOI Guidelines for QA Cell personnel and the GOI RRs to be adopted. State may write to NHM for changes being made accordingly.

## State Monitoring and Evaluation Officer

The Recruitment Rules were modified as follows:

MBBS with At least 3 years experience in the field of monitoring & evaluation of public health programme. (Retired govt./Public Sector Officer upto the age of 62 years may also apply with this qualification (Upto 62 tears are eligible to apply & working contract may be upto 65 years) with Working knowledge of computer is a must along with basic knowledge of MS Xcel. Working knowledge of computer is a must along with basic knowledge of Xcel.

## State MIS Expert

The committee agreed to adopt the Eligibility Criteria used by GOI for recruitment similar post at National level.

## District Quality Assurance Consultant

The committee agreed to adopt the Eligibility Criteria used by GOI. It was also decided to use the same terminology i.e. District QA Consultant.

It was also decided that State may write to NHM to seek enhanced remuneration for the post.

SPO, DSHM-Dr. Monika Rana has submitted revised Recruitment Rules finalized by the committee. (Annexure-2)

# Family Planning Consultant

The committee directed the Program Officer-Family Planning to submit Gol approved Recruitment Rules /Recruitment Rules for similar post in NHSRC / Recruitment Rules for similar post in other States to the committee before the next meeting.

## State Consultant- Adolescent Health/ RKSK

The committee agreed to adopt the Recruitment Rules prescribed by Govt. Of India. However, it was decided that Masters in Sociology may be omitted from qualifications, The candidate should have relevant Work Experience of 2 years in Public Health. Desirable - The candidate should have Basic computer knowledge and communication skills.

## Sub-District Adolescent Health/RKSK Coordinator (AFHC Counsellor)

The committee proposed that Recruitment Rules may be re-drafted and Job Description may be expanded so that counselling for other programs may also be done by the same counsellor. The committee directed to re-ubmit the Recruitment Rules with existing RR's, proposed RR's and Job Responsibilities before the next meeting.

It was also proposed that since the salary for the post is less that minimum wage advised by GNCTD, a letter may be sent to GOI to enhance the salary upto the limit of minimum wage requirement of the State.

## PNDT-M&E-Officer

The committee decided to adopt the same Recruitment Rules as that finalized for State Monitoring and Evaluation Officer.

## District PNDT Consultant

The committee directed to re-ubmit the Recruitment Rules with existing RR's, proposed RR's and Job Responsibilities before the next meeting.

## Establishment Clerk

The committee advised to adopt existing Recruitment Rules of DSHM approved Recruitment Rules for the post. However, the Recruitment Rules may be approved by the committee in the next meeting.

#### NTCP

SPO, NTCP submitted Gol approved RR's for the post of Legal Consultant, Psychologist and Social Worker (Annexure-3) for approval by the committee. The committee suggested the following:

Legal Consultant - The committee agreed to adopt GOI approved recruitment Rules for the post.

Additionally, Enrolment with Delhi Bar Counsel should be mandatory.

Psychologist- The committee agreed to adopt GOI approved recruitment Rules for the post.

Social Worker- The committee agreed to adopt GOI approved recruitment Rules for the post.

<u>NPHCE</u>- Program Officer, NPHCE to submit existing Recruitment Rules, suggested changes along with Job Responsibilities before the next meeting for approval by the committee.

# Training Centre

It was decided that Principal, H&FW Training Centre shall submit Recruitment Rules, suggested changes along with Job Responsibilities before the next meeting for approval by the committee. Recruitment Rules shared should be in accordance with GoI guidelines.

It was directed that a communication may be sent to all Program Officers for submission of Recruitment Rules (Gol approved) for approval by the recruitment committee under DSHM.

The meeting ended with a vote of thanks to the Chair.

Dr. Sachin Shinde MD, DSHM

Dr. Kirti Bhushan DGHS

Dr. J. P. Kapoor DFW

SP DSHM

S. No.	Post	Revised Recruitment Rules after Committee Recommer
1	Quality Assurance Consultant	Essential Qualification : MBBS/Dental/AYUSH/Nursing Graduate With Masters in Hospital Administration/He equivalent) With 5 Years experience in Public Health/ Hospital Administration, out of wh quality. Desirable : Training and experience of implementing a recognised quality system like NABH/ISO 9001:: be preferred. Age Limit : upto 45 Year
2	Quality Assurance Consultant (2)	<ul> <li>Essential Qualification : MBBS/ Dental / AYUSH/ Nursing graduate With Masters in Public Health (MPH) / Commu Management With 5 years experience in public Health / Hospital administration, out of which Public Health Quality.</li> <li>Desirable : Training and experience of implementing a recognised quality system like NABH/ISO 9001:20 be preferred.</li> <li>Age Limit : upto 45 Year</li> </ul>

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Dr. Sachin Shinde MD, DSHM

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Dr. Kirti Bhushan DGHS

Dr. J. P. Kapoor DFW

S. No.	Post	Revised Recruitment Rules after Committee Recomm
3	State Consultant (Quality Monitoring)	Essential Qualification : Post graduate degree / advance qualification in Statistics With Specialization in Biostatisti health informatics) / Masters in epidemiology (MPH epidemiology) With Two years expe
	[Statistical Officer]	Age Limit : upto 40 Year
4	State M&E Officer	Essential Qualification : MBBS With At least 3 years experience in the field of monitoring & evaluation of public h Sector Officer upto the age of 62 years may also apply with this qualification (Upto 62 tears may be upto 65 years) With Working knowledge of computer is a must along with basic knowledge Age Limit : upto 45 years
5	State MIS Expert	Essential Qualification : Possess at least post-graduation in health management / public health / Statistics / informati relevant area With The consultant should have at least 2 years of work experience of Health With Working knowledge of MS-Office and Statistical software (SAS, SPSS etc.). Age Limit: upto 45 Years

Dr. Sachin Shinde

MD, DSHM

Dr. Kirti Bhushan DGHS

Dr. J. P. Kapoor DFW

S. No.	Post	Revised Recruitment Rules after Committee Recommen
6	District Quality Assurance Coordinator	<ul> <li>Essential Qualification :</li> <li>MBBS/ Dental /AYUSH / Nursing graduate With Masters in Hospital administration / Healt equivalent) With 2 years experience in Public Health / Hospital administration.</li> <li>Desirable :</li> <li>Training and experience of implementing a recognized quality system like NABH/ISO 9001:: be preferred. Previous work experience in the field of health quality would be an added advant Age Limit : upto 40 Years</li> </ul>
7	Data Entry Operator	Essential Qualification : (To be outsourced) 10+2 Pass with good typing speed of atleast 30 WPM Desirable : Working knowledge of MS-Office

Dr. Sachin Shinde MD, DSHM

Dr. Kirti Bhushan DGHS

Dr. J. P. Kapoor DFW

DFO

# Government of NCT of Delhi Department of Information Technology 9<sup>th</sup> Level, B-Wing, Delhi Secretariat, I.P. Estate, New Delhi - 110002

F.No. A-12/87/2015-Admin-Secy (IT) / 3121

Date: 12/05/2016

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## CIRCULAR

The Council of Ministers, GNCTD, vide Decision No. 2342 dated 27/04/2016 has approved the following relating to engagement of IT technical manpower from NIELIT: -

(I) Ex-post facto approval to continue the existing IT related manpower engaged by various Departments/Local Bodies/Autonomous bodies of GNCTD from NIELIT from 01/01/2016 to 31/03/2016 on the same terms and conditions as per the agreement with NIELIT, singed in June 2013. It is pertinent to mention that the said agreement with NIELIT had expired on 31/12/2015, which has been extended upto 31/03/2016.

(II) The Council of Ministers, GNCTD, has also approved the continuation of existing IT Technical manpower (System Analyst, Programmer, Programmer Assistant 'B', Programmer Assistant 'A' and DEO's) through NIELIT for a period of five (5) years w.e.f. 01/04/2016 based on the requirement of the department and performance of the individuals as per the following terms and conditions. Department of Information Technology has signed an agreement with NIELIT on 11/05/2016. Copy of which is available in the website of DIT i.e. http://it.delhi.gov.in. Departments are requested to go through agreement.

 Revised remuneration for System Analyst, Programmer, Programmer Assistant 'B', Programmer Assistant 'A'

Designation	Proposed Consolidated remuneration	NIELIT charges a 10%	Sum C=A+B	(*) Current Service Tax on (C) @ 14.5%	Total Amount payable to NIELIT (round off)
	(A)	(LJ)	(C)	(D)	(E)
System Analyst	26625	2653	29288	4246.75	33535
Programmer	24962	2496	27458	3981.42	31439
Programmer Assistant B'	21634	2163	23797	3450.58	27248
Programmer Assistant 'A'	16641	1664	18305	2654.22	20959

(b) Revised remuneration for Data Entry Operators (Skilled) (based on Notification No. F.No. 12(142)/13/mw/Lab/2231 dated 16/10/2015 of the labour Department) is as under: -

Consoli dated (DEO) (skilled) Manpow er	ESI (Employe r's share) @ 4.75%	PF (Employe rs_share) (2 13.36%	Total A+B+C	NIELIT charge @ 10% on (A)	Total amount F= (D+E)	Current Service Tax @ 4.5% on (P) (*)	Gross amount payable to NIELIT = (F+G)
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
11154	530	1490	13174	1115	14289	2072	16361

However, Departments/Local Bodies/Autonomous Bodies of GNCTD shall pay DEOs as per revised minimum wages, ESI, EPF as applicable notified by Labour Department for skilled manpower from time to time.

(\*) Service Tax will be applicable as per Govt. notification from time to time (Current rate is 14.5% w.e.f. 15/11/2015).

(c) The Council of Ministers, GNCTD, has also approved engagement of new IT related technical manpower through NIELIT by the Departments / Local Bodies / Autonomous Bodies of GNTCD. The same terms and conditions as per the agreement, signed on 11/5/2016, will be applicable. However, in case of requirement of new IT related technical manpower,

greement between DIT.GNCTD and NIELIT



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AGREEMENT FOR SOFTWARE DEVELOPMENT, MAINTENANCE AND SUPPORT SERVICES

Please write or type below this line

the cardification

This agreement made on this 11th day of May in the year 2016 by and between National Institute of Electronics and Information Technology, Delhi Centre hereinafter referred to as the NIELIT(which expression shall unless excluded by or repugnant to the context deemed to include its successor(s) in office or assigns), an Autonomous Scientific Society of Department of Electronics and Information Technology, Ministry of Communications and Information

by Secretary

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approval of Technical Evaluation Committee of Department of Information Technology, GNCTD, Finance department and the concerned Minister in charge shall be obtained by the Department/Local Bodies/Autonomous Bodies of GNTCD before engagement.

(d) The Council of Ministers has also approved an annual increase of 5% (except for DEOs for whom minimum wages rates of skilled category of Labour Department will be applicable), subject to satisfactory performance of IT related manpower, engaged from NIELIT. The first annual increment shall be on completion of one year beyond 01/04/2017 only.

(Dr. Vasanthakumar N.) Secretary (IT)

Copy to: -

- To All Pr. Secretaries/Secretaries/ HODs/local bodies/autonomous bodies of GNCTD.
- Director NIELIT, Delhi Centre, 2nd Floor, Parsvnath Metro Mall, Near Inderlok Metro Station, Inderlok, New Delhi- 110052.

(Dr. Vasanthakumar N.) Secretary (IT) - Agreement between DIT, GNCTD and NIELIT

Technology, Govt. of India, through its authorized representative, Smt. Sheela V.S., Director, having its office at 2<sup>ND</sup> Floor, Parsvnath Metro Mall, Inderlok Metro Station, Inderlok, Delhi-110052, of the one part

And

President of India through Sh. Vivek Mittal, Deputy Secretary, Dept. of Information Technology, Govt. of NCT of Delhi, Delhi Sachivalaya, IP Estate, New Delhi hereinafter referred to as 'DIT' (which expression shall unless excluded by or repugnant to this context deemed to include its successor(s) in office or assign), having its headquarters located at 9<sup>th</sup> Level, B-Wing, Delhi Sachivalaya, IP Estate, New Delhi-110002, of the other part.

#### PREAMBLE

This Agreement is for providing TECHNICAL AND SKILLED MANPOWER on contract and shall not amount to any employment obligation, for the manpower provided by NIELIT to DIT present or future, on the part of DIT.

NIELIT has agreed to work in close coordination with DIT under the agreed terms and conditions set forth in the following paragraphs:

#### 1. RIGHTS & OBLIGATIONS OF NIELIT

- 1.1. NIELIT will provide the required manpower at the locations in Delhi and NCR as specified by DIT from time to time to meet the requirement of its projects.
- 1.2 NIELIT will provide the manpower through its bonafide employees who have the required knowledge and skill as prescribed by DIT
- 1.3. NIELIT may change any persons/staff with the mutual consent. If any of the deputed person leaves NIELIT during the course of the Project duration, NIELIT will provide replacement of the manpower within two weeks of the report received from DIT in this regard.
- 1.4 NIELIT shall always keep with it, the name, parentages, residential address, educational and technical qualification, specimen signature, two passport size photographs of all its employees whom it deploys for rendering the said services at the location(s) specified by DIT and furnish these details/information whenever demanded by DIT.

### 2. RIGHTS & OBLIGATIONS OF DIT

- 2.1. The period for which the manpower is required will be indicated by DIT at the beginning of commencement of the project.
- 2.2. DIT at its sole discretion can extend the period through a separate agreement, to be signed between NIELIT and DIT.
- 2.3. DIT and NIELIT may work out a mechanism to ensure that DIT is getting the required service from the NIELIT.

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- 2.4. DIT will nominate an officer for coordinating the services provided by NIELIT and the manpower provided by NIELIT for carrying out the assigned job. NIELIT shall report to and seek instructions from the officer of DIT, nominated for all technical support.
- 2.5. Working hours and holidays for the purpose of this Agreement will be as per GNCTD norms, subject to applicable law.
- 2.6. Casual leave will be applicable to manpower as per Govt. of India norms.
- 2.7. Attendance of the NIELIT assigned manpower, certified by the Project Coordinator should reach NIELIT by the 2<sup>nd</sup> day of following month.
- Department will not provide I Card to the Staff engaged from NIELIT, if required, NIELIT would provide Identity Card.

#### 3. PAYMENTS

- 3.1 The Department shall send the attendance of the IT Professionals to NIELIT 3<sup>rd</sup> of every month. NIELIT shall raise monthly bill in triplicate, on the basis of monthly attendance communicated by the concerned Dept, for charges towards deployment of manpower. The payment against the bill will be released within one week by the concerned dept. Salary will be paid to the deployed professionals on receipt of payment from the Dept. each month.
- 3.2 DIT agrees to pay NIELIT on monthly basis as per the rates given in the Annexure I. The wages of the Data Entry Operator will be as per the minimum wages specified by Labour Dept., Govt. Of India. Any revision of such wages by the Labour Dept. during the validity of this agreement will be automatically applicable to all DEOs deployed by DIT through NIELIT. For all other categories (Except DEOs for whom minimum wages rates of skilled category of Labour Department will be applicable) of IT Professionals, engaged from NIELIT, an annual increase of 5% will be given , subject to satisfactory performance and recommendation given by the department. These increases will affect the administration charges and the service tax which will have to be borne by DIT. ESI & EPF would be applicable to the DEOs as per the statutory obligations.
- 3.3 TDS as applicable will be deducted by DIT before making payments and the TDS statement would be sent to NIELIT by DIT.
- 3.4 DIT will pay only the salary plus ESI & EPF charges plus 10% charges along with service tax as per Govt. rules. Service Tax as revised by the Govt. from time to time will be automatically applicable
- 3.5 NIELIT will submit a pre-receipted bill in triplicate in the name of DIT every month of the services by 10th of the following month along with proof of payment to the persons for the period of claim. DIT will remit payment of the bill by Electronic Fund Transfer / Cheque as per norms of PAO, GNCTD, latest by 25<sup>th</sup> of the month. However, DIT will provide the details of payment made to NIELIT through Electronic Funds Transfer separately.
- 3.6 No TA/DA shall be payable to the persons deputed by NIELIT at the time of joining. In case the persons are assigned duties outside his place of posting for visiting other

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locations, such TA/DA shall be claimed by the person and be paid by NIELIT on the basis of information/details forwarded by the Project Coordinator, which shall be reimbursed by DIT to NIELIT along with 10% service charges plus service tax in the Monthly Bills as per GOI rates. However, TA/DA on official tour, if any will be regulated at the rates as admissible to the officers/officials of the same status in the Govt. of NCT of Delhi.

- 3.7 The qualification and experience for each post is attached herewith as Annexure II. The applicable rates for each of the posts are attached as Annexure-I and would be applicable w.e.f 1<sup>st</sup> April 2016.
- 3.8 NIELIT shall submit a Performance Bank Guarantee amounting to Rs. 10,12,496/- in favour of Secretary (IT), Department of IT, GNCTD valid for the period of this agreement. Thereafter, in case of extension of this agreement NIELIT will submit fresh Bank Guarantee of mutually agreed amount as performance guarantee valid for the period of contract extended.
- 3.9 Fixed remuneration paid to IT professionals as per Annexure-1 is subject to minimum wages fixed by GNCTD from time to time.

## 4 SECURITY

NIELIT will ensure that no information about the software, hardware, Databases and the policies of DIT is taken out or passed on to any party, in electronic form or any other media from the DIT site.

## 5 GENERAL

- 5.1 The agreement shall be effective from 1/4/2016 and shall remain valid for five year only.
- 5.2 The main body of this agreement along with all the attachment here to constitute the agreement.
- 5.3 Neither this agreement nor any part or portion hereof shall be assigned, sublicensed or otherwise transferred by the NIELIT to anyone without DIT's prior written permission
- 5.4 On all aspects where the above articles of the Agreement are silent, or for special cases of deviation from these articles, the decision mutually agreed to by both the parties shall be final. However, in case of any dispute relating to or arising out of the articles of this Agreement, such dispute shall be resolved amicably by mutual consultations. If such resolutions are not possible, then the unresolved dispute or differences shall be decided by a sole arbitrator to be appointed by Lt. Governor, NCT of Dethi. The arbitration proceedings shall be governed by the Arbitration Act 1996 and Rules framed there under as amended from time to time.
- 5.5 Since NIELIT has not supplied more than 20 staff in a single department, the registration of the Principle Employer and NIELIT at Labour department is considered

Secretary on of information Technology

exempted under the purview of contract labour (Regulation and Abolition) Act. If in case at any point of time Principle Employer ( department /establishment) engage more than 20 staff from NIELIT, then Principle Employer and NIELIT will abide fully whichever is applicable as per contract labour ( Regulation and Abolition ) act.

## 6 SUB CONTRACTING AND FRANCHISE

The NIELIT shall not assign, novate, Sub-Contract, Franchise or otherwise dispose of this Agreement or any part thereof without the previous consent in writing of the DIT.

## 7 COMMUNICATIONS

Except as otherwise expressly provided no communication from one party to the other shall have any validity under this Agreement unless made in writing by or on behalf of the DIT or as the case may be by or on behalf of the NIELIT.

## 8 TERMINATION

- 8.1 If the situation warrants either party can terminate the agreement by giving a notice period of three months in writing and without any liability to the other party.
- 8.2 An agreement for the discontinuation of this agreement shall be accepted by both parties subsequent to clause 8.1 here in above.

## 9 CONSEQUENCES OF TERMINATION

The termination or expiry of this Agreement shall not prejudice or affect any right of action or remedy, which shall have accrued or shall thereafter accrued to either Party

## 10 RECOVERY OF SUMS DUE

If any sum of money shall be due from the N/ELIT, the same may be deducted from any sum then due or which at any time thereafter may become due to the N/ELIT under this Agreement or any agreement with D/T or with any other department, office or organization of the Government of NCT of Dethi.

## 11 AMENDMENTS TO THIS AGREEMENT

Other than as expressly provided for in Clause I and 2 herein above, this Agreement shall not be varied or amended unless such variation or amendment is - agreed in writing by a duly authorized representative of the DIT on behalf of the DIT and by a duly authorized representative of the NIELIT on behalf of the NIELIT in accordance with the Change Control Procedures.

## 12 LAW AND JURISDICTION

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5

This Agreement shall be considered as a contract made in India and according to Indian Law and subject to the exclusive jurisdiction of the Indian Courts to which both parties hereby submit, subject to clause 5 here above

This Agreement is binding on DIT and its successors and assignees and the NIELIT and its successors and permitted assignees.

# 13 ENTIRE AGREEMENT

This Agreement constitutes the entire understanding between the parties relating to the subject matter of this Agreement and, same as may be expressly referred to or referenced herein, supersedes all prior representations, writings, negotiations or understandings with respect hereto, except in respect of any fraudulent misrepresentation made by either party

# 14 DURATION

The agreement is effective from 01/04/2016 and will be valid upto 31/03/2021.

IN WITNESS WHEREOF THE PARTIES HAVE ENTERED INTO THIS AGREEMENT ON THE DATE HEREOF:

SIGNED BY	abuild
Authorized Representative of NIELIT, DELHI CENTRE	FOR & ON BEHALF OF DEPT. OF DIT, GOVT. OF NCT OF DELHI ULU (VIVEK MITTAL) Dy. Secretary Dept. of Information Technology Govt of NCT of Delhi
In the presence of Name and Designation Departy Draceborn Departy NICCIT.	Name and Designation

## Agreement between DIT, GNCTD and NIELIT

#### Annexure - I

7

Designation	Consolidated Remuneration Paid To The IT Professional	NIELIT Charges @10% on A	Total (A+B)	Service Tax on (C) @14.5%	Gross Amount Payable
	(A)	(B)	(C)	(D)	E=C+D
Systems Analyst	26625		29288	4247	33535
Programmer	24962	2496	27458	3981	31439
Prog Asst 'B'	21634		23797	3451	27248
Prog Asst 'A'	16641	1664	18305	2654	20959

The rate of Data Entry Operators w.e.f. 1-4-2016 is as under: -

Designation	Consolidated Remuneration (A)	ESI (Employer's Share) @4.75% (&)	PF (Employer's Share) @ 13.36% (#)	TOTAL (D=A+B+C)	NIELIT charges @ 10% on A	Total amount F=(D+E)	Service Tax @ 14.5% on F	Gross amount payable
		(B)	(C)		(E )		(G)	H=(F+G)
DEO (Non- Graduate)	11622	552	1553	13727	1162	14889	2159	17048

\*\* Subject to revision as per notification of the Govt

(&) ESI Charges are subject to change as per Notification issued by Govt. from time to time.

(#) PF Charges are subject to change as per Notification issued by Govt. from time to time.

The wages of DEO (Non Graduate) given above are as per minimum wages fixed by Labour Department of Govt. of NCT of Delhi and accordingly will be revised automatically from time to time. The Service Tax and ESI, EPF charges are subject to change as per Notifications issued by Govt. from time to time.

5% annual increase will be given to IT Professional (System Analyst, Programmer, Prog. Asstt. B & A) subject to satisfactory performance of IT related manpower, engaged from NIELIT. This will affect the Administrative Charges, ESI, EPF and the Service Tax which will have to be borne by DIT.

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## Annexure II

## NIELIT, New Delhi

Details of qualification, experience required for each post

S No	Post	Essential Qualification and Experience	Total experience in IT (after availing any Govt. recognized degree/diploma in I.T.)
1	Systems Analyst	BE./B.Tech (Computer Science/ Electronics & communication) / MCA / 'B' level of DOEACC Or B.E./B.Tech (other disciplines) /Master's degree in Science, Mathematics, Statistics, Economics Commerce, Operations Research with one year 'A' level of DOEACC/ PGDCA (50% Marks in aggregate or Equivalent grade in qualifying Degree/Diploma)	At least three Years experience in large software Designing & Development using VB, ASP, JAVA, JSP, Net, D2K, SQL server/Oracle 8i/9i DBA, WIN NT/Linux with knowledge of Hardware and Networking
2	Programmer	SAME AS OF SYSTEMS ANALYST	At least two Years experience in large software Designing & Development using VB, Net, ASP, JAVA, JSP, D2K, SQL server/Oracle Bi/9i DBA, WIN NT/Linux with knowledge of Hardware and Networking
3	Programmer Assistant B	Bachelor's Degree in Computer Science/Computer Applications/ Electronics & communication Or Bachelor's degree in Science, Mathematics, Statistics, Economics, Commerce, Operations Research with one year 'A' level of DOEACC/ PGDCA (50% Marks in aggregate or Equivalent grade in qualifying Degree/Diploma)	At least one year experience in large software Designing & Development using VB, .Net, JAVA, JSP, D2K, SQL server/Oracle 8i/9i DBA, WIN NT/Linux with knowledge of Hardware and Networking
4	Programmer Assistant A	Bachelor's Degree in Computer Science/Computer Applications/ Electronics & communication Or Bachelor's degree in Science, Mathematics, Statistics, Economics, Commerce, Operations Research with one year 'A' level of DOEACC/ PGDCA (50% Marks in aggregate or Equivalent grade in qualifying Degree/Diploma)	Designing & Development using VB, .Net .JAVA, JSP, D2K, SQL server/Oracle 8i/9i DBA, WIN
		10+2 Pass with good typing speed of	Working knowledge of MS-Office

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## Community Processes : Formation of Mahila Arogya Samitis

Community mobilization is a process through which community, individuals or groups plan, carry out, and evaluate activities on a participatory and sustained basis to improve their health care and other needs. Major purposes of community mobilization include demand generation ensuring optimal utilization of services, establishing referral linkages, increasing community ownership and sustainability and establishing a community based monitoring system. MAS in one of the key interventions under National Health Mission aimed at promoting community participation in health at all levels, including planning, implementing and monitoring of health programs.

## Objective of MAS :

### The major objectives of MAS are to :

a) Provide a platform for convergent action on social determinates and all public service directly or indirectly related to health.

b) Provide a mechanism for the community to voice health needs, experiences and issues with access to health service.

c) Generate community level awareness on locally relevant health issues and to promote the acceptance of best practices in health by the community.

d) Focus on preventive and promotive health care activities and management of untied fund.

e) Support and facilitate the work of community service providers like ASHA and other frontline workers who form a crucial interface between the community and health institutions.

f) Provide and institutional mechanism for the community to be informed of various health programmes and other government initiatives and to participate in the planning and implementation of these programmes, leading to better health outcomes.

g) Organize or facilitate community level services and referral linkages for health services.

One of the most important factors influencing the positive health outcomes are other determinants of health which don't come under the direct purview of Health Department. Chief amongst these being safe water, sanitation, hygiene and nutrition, behaviourial issues and substance abuse etc.

Role of community and their positive health seeking behaviour play an important role in tackling with these determinants. Formation and operationlization of group of 10 to 12 women in a cohesive manner for every 50- 100 families through defined community processes is an important initiative identified and formulated by GOI for urban vulnerable areas ( slums, JJ clusters, unauthorized colonies and resettlement colonies etc.) These groups are known as MAS. After training each group is endorsed , bank accounts opened and Rs. 5000/- given per MAS per annum for local health related initiatives.

## Work done in this direction

State had undertaken formation of 100 MAS across spread over the districts in a pilot mode .The District ASHA Coordinators were made responsible for formation and operationalization of 8 to 10 MAS in their districts . Over last two years , these MAS have been formed , bank accounts opened and funds transferred. Simple formats / modules have been developed. Certain MAS communities have shown marked improvement – cleaning of the drains , garbage management , reclamation of a garden from a garbage dump , putting up a gate at the required point , listing out the visually impaired for screening camp etc.

Experience has shown that formation of MAS requires intensive effort for identication of the correct members, to hold them into the group and trained them. Once formed, continued presence in the community and hand holding and guidance, facilitation in approaching linked platforms – MCD, WCD, DJB, Social welfare, UD are required. Opening of bank accounts, basic minimum documentation for fund utilization of the untied funds, basic recording of activities and improvement thereof etc.

Each MAS requires continuous mentoring and monitoring atleast till such time as these groups are trained enough to carry on their functions and become familiar with other Govt. Mechanism that are need to be contacted for their requirements / entitlements. This huge task can not be undertaken by the existing mechanisms / structure available at their disposal health department / DSHM ,in the form of one district coordinator per district and one Communitization officer who are looking after the multiple ASHA related activities -- mentoring and monitoring, trainings, activity reporting, field visits to centers , distribution and ensuring uninterruped logistics supply to the ASHAs , incentive payments etc.

Instead of augmenting infrastructure including HR, a more viable option, which has been adopted by other States is the formation, training and operationalizing of MAS through well reputed & competent NGO / NGOs.

## Proposal:

It is proposed that State may take up the activity of formation of 2500 MAS spread over 2 to 3 identified districts using an NGO Model.

Recruitment and placement of programme staff, desk research meetings, selection of local NGOs and CBOs if so required, formation of MAS groups, training of MAS members, support and monitoring identification of existing community groups, local self help groups and training them to enable them to fulfill the objectives of the MAS.

NGO shall be identified using transparent tendering process. And implementation shall be governed through an MOU. Payments shall be phased and linkd to deliverables.

## Some of the deliverables shall be -

- i. Number of MAS formed.
- ii. Number of MAS Trained .
- iii. Number of MAS operationalized as evinced from the regular meeting records and documented improvement.
- iv. Conduct vulnerability assessement
- v. Compilation of local resources,
- vi. Development of referral linkages.
- vii. Meeting reports , physical and financial reports on monthly basis,

Financial implications: The cost is budgeted at around Rs. 3,000 per MAS for one year. For 2500 MAS, Rs. 75 lacs will be required .

**Monitoring**: State shall do the monitoring and mentoring through the State and district Nodal officers, state and district ASHA Coordinators, Communitization officer.