

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091****West Bengal**Ref No. **SUDA-Health/63 ULBs/06/263**Date **22.02.2007**

From : Dr. Shibani Goswami
Project Officer
Health, SUDA

To : The Chairman
Kalimpong / Kurseong / Mirik Municipality

Sub. : Hindi version of pre and post evaluation questionnaire for the ensuing HHWs' training programme under Community Based Primary Health Care Services.

Sir,

You may be aware that Pre and Post -evaluation questionnaire in Bengali for the ensuing HHWs' training programme had already been provided to you. In the meantime, it has been learnt that the said questionnaire in Hindi will be useful for the HHWs. Hence, both the pre and post- evaluation questionnaire, one copy each in two separate sealed envelopes are forwarded herewith. On the day of examination, the envelope concerned is to be opened and Xeroxed for the required nos. for conduction of evaluation test.

Thanking you.

Yours faithfully,


Project Officer

समष्टिमित्तिक प्राथमिक स्वास्थ्य परिसेवा
वृहत्तर कलकत्ते से बाहर स्थित ६३ नगरपालिकाओं में
स्वेच्छासेवी स्वास्थ्यकर्मी के लिए
प्राक प्रशिक्षण परीक्षा

कुल अंक - ३०

क्रम संख्या	प्रश्न	सही उत्तर पर (✓) दें	अंक
१.	स्वास्थ्य का मतलब है सिर्फ रोग मुक्त रहना	हाँ ना	१
२.	हमारे देश में कई रोग के प्रतिरोध संभव है	हाँ ना	१
३.	बाल्य विवाह अच्छा है	हाँ ना	१
४.	जन्म नियंत्रण के कृत्तिम पद्धति अपनाना स्वास्थ्य के लिए हानिकारक है	हाँ ना	१
५.	शरीर के खून संचालन में अहम भूमिका	फुस-फुस / आँत / यकृत / हृदय	१
६.	श्वास लेने में अहम भूमिका	फुस-फुस / पाक स्थली / यकृत / हृदय	१
७.	स्वास्थ्य सम्मत परिवेश मतलब केवल सॉनिटरी लैट्रिन	हाँ ना	१
८.	पेय जल साफ़ होना चाहिए	हाँ ना	१
९.	डायरिया रोग का एकमात्र चिकित्सा है सॉलाइन	हाँ ना	१
१०.	मलेरिया रोग फैलता है	पानी के माध्यम से / हवा के माध्यम से / मच्छर के काटने से / कोई भी नहीं	१
११.	पोलिओ रोग के प्रतिरोध के लिए उपयोगी है ओ आर एस	हाँ ना	१
१२.	डायरिया होने पर खाद्य व पेय बंद कर देना चाहिए	हाँ ना	१
१३.	जनगणना कितने साल में होता है	१ / ५ / १०	१
१४.	पृथ्वी से जिस रोग को निर्मूल किया गया	मलेरिया / पोलिओ / स्मॉल पॉक्स	१
१५.	माँ के दूध का पीला भाग फेंक कर बच्चे को पिलाना चाहिए	हाँ ना	१
१६.	गर्भवती माँ को टिटनेस का सुई लगाने पर नवजात को धनुष टंकार नहीं होता	हाँ ना	१
१७.	गर्भवती व प्रसूति माँ को ज्यादा खाद्य आवश्यक है	हाँ ना	१
१८.	प्रत्येक शिशु को उल्लेख किए गए भाँकसिन देना चाहिए	बिसिजि / डिपिटी / पोलिओ / खसरा / कोई नहीं / सारे	१

क्र.सं.	प्रश्न	सही उत्तर पर (✓) दें	अंक
१९	हर प्रकार के कुष्ठ रोग संक्रामक है	हाँ ना	१
२०	शिशु के लिए नर्म व शक्त खाद्य अभ्यास करवाने का उपयुक्त समय	१ / ६ / ४ माह	१
२१	मलेरिया संक्रामक रोग है	हाँ ना	१
२२	वंध्या करण ऑपरेशन एक अस्थायी जन्म नियंत्रण पद्धति है	हाँ ना	१
२३	जन संयोग (स्वास्थ्य संबंधित) के अन्यतम लक्ष्य है स्वास्थ्य के प्रति जागरूकता	हाँ ना	१
२४	विटामिन 'ए' की कमी से रोग	टिबि / लेप्रसि / रात में अंधापन / डिफ्थेरिया	१
२५	कुत्ते के काटने पर एड्स रोग फैलता है	हाँ ना	१
२६	दंपति को कितने बच्चे होने चाहिए	० / १ / २ / ३	१
२७	अमर्त्य सेन को किस विषय पर नोबेल पुरस्कार मिला	साहित्य / विज्ञान / जनहितकारी अर्थशास्त्र	१
२८	राष्ट्र गीत के रचयिता	काजी नज़रुल / रवीन्द्रनाथ / प्रेम चंद	१
२९	पाल्स पोलिओ के अंतर्गत हर पाँच साल के नीचे शिशु को पोलिओ भॉकसिन पिलाना चाहिए	हाँ ना	१
३०	नवजात शिशु के श्रेष्ठ खाद्य	गाय का दूध / माँ का दूध / बकरी का दूध / डिब्बे का दूध	१

नगरपालिका

स्वास्थ्यकर्मी के नाम _____

तारीख _____

समष्टिभित्तिक प्राथमिक स्वास्थ्य परसेवा
वृहत्तर कलकत्ते से बाहर स्थित ६३ नगरपालिकाओं में
स्वेच्छासेवी स्वास्थ्यकर्मी के लिए
प्रशिक्षण पश्चात परीक्षा

समय - ४० मिनट

कुल अंक - ४०

क्रम संख्या	प्रश्न	सही उत्तर पर (✓) दें	अंक
१.	स्वास्थ्यकर्मी का प्रमुख कार्य	रोग निर्णय / रोग का चिकित्सा / स्वास्थ्य के प्रति जागरुकता बढ़ाना	१
२.	विटामिन 'ए' के कमी के कारण रोग	गलगंड / रिकेट / रात में अंधापन	१
३.	विटामिन, जो सूर्य के किरणों के सहारे हमारे चमड़े के नीचे तैयार होता है	विटामिन 'डि' / विटामिन 'सि' / विटामिन 'बि २'	१
४.	खाद्य के तीन मूल उपादान क्या है		६
५.	माँ के दूध का पीला गाढ़ा भाग फेंक कर ही बच्चे को पिलाना चाहिए	हाँ ना	१
६.	शिशु के लिए नर्म व शक्त खाद्य अभ्यास करवाने का उपयुक्त समय	१ / ६ / ४ माह	१
७.	जन्म के समय, शिशु का वजन कितना कम होने पर उसे कम वजन वाला शिशु कहा जाएगा	----- के जी	१
८.	स्वस्थ शिशु के जन्म वजन का अगले ६ माह में वृद्धि	एक / दो / तीन गुण	१
९.	शिशु सहारे के साथ खड़ा रहता है व चलने लगता है	७ / ८ / १० / १२ माह	१
१०.	प्रजननशील दंपति किसे कहते हैं	पत्नी की उम्र ४५ से कम / पति व पत्नी के उम्र ४५ से कम / पत्नी की उम्र १५ से ४५ तक	१
११.	अंतिम मासिक का तारीख विगत २ जनवरी २००४ उसका प्रसव का तारीख क्या होगा	१०.११.२००४ / ९.१०.२००४ / ११.१२.२००४	१
१२.	गर्भवती माँ को बेटा होगा या बेटा यह किस पर निर्भरशील है	माँ / पिता / कोई नहीं	१
१३.	गर्भवती माँ का चेक अप अततः	३ / ४ / ७ बार	१
१४.	प्रसव के बाद के कितने सप्ताह को प्रसवोत्तर कहा जाता है	४ / ६ / ८ / १० सप्ताह	१
१५.	जिस स्त्री को पिछले गर्भ के समय २ टिटनेस के टीके दिए गए उसे इस गर्भावस्था में १ बूस्टर डोज दिए जाएँगे अगर वह	३ / ४ / ५ साल में फिर गर्भवती हो तो	१

गोपी

स्वास्थ्यकर्मी के नाम

नगरपालिका

क्रम	प्रश्न	सही उत्तर पर (✓) है	अंक
१६.	लक्षिकों में विवाह का सही उम्र	१४ / १८ / २१ वर्ष	१
१७.	जीवाणु मुक्त करने के लिए सामान को उबलना चाहिए	५ / १० / २० / ३० मिनट तक	
१८.	प्रतिरोधक टीके किन रोगों से मुक्ति दिलाता है		६
१९.	किस उम्र में शिशु को खसरे के टीके दिए जाते हैं		१
२०.	बिसिन्जि के टीके से ——— रोग के प्रतिरोध होता है	खसरा / पोलिओ / टिबी / टुपिंग	१
२१.	यक्ष्मा रोग के संक्रमण का माध्यम	मच्छर काटने से / यौन संबंध से / खाद्य व प्य से	१
२२.	पोलिओ रोग के संक्रमण का माध्यम	हवा / धूँक / मल व पानी से	१
२३.	एड्स रोग के संक्रमण का माध्यम	मच्छर काटने से / यौन संबंध से / खाद्य व प्य से	१
२४.	एक पैकेट 'ओ आर एस' को घोलने के लिए कितना पानी चाहिए	आधा / एक / डेढ़ लीटर	१
२५.	'ओ आर एस' को घोलने के बाद कितने घंटे तक रखा जा सकता है	१२ / २४ / ४८ घंटे	१
२६.	ऑलबनडानोल की गोली किस रोग में दिया जाता है	जायरिया / 'ए आर आई' / कौम	१
२७.	गर्भाशयक गोली को मासिक के किस दिन से शुरू करना चाहिए	चौथी / पाँचवीं / छठा दिन	१
२८.	भ्रूंसंकटमी के बाद पुनः गर्भकर्म व यौन क्षमता में बदलाव	है / नहीं / जरा सा है	१
२९.	पाल्म पोलिओ के लिए बच्चे का उम्र	३ / ५ / ७ साल तक	१
३०.	किसी स्थान में, एक निदिष्ट साल में मृत्यु के कारण- २ महिला हृदय जड़ित रोग से, १ महिला यक्षा से, १ गर्भवती महिला प्रसव काल में, १ महिला आग से जलने के कारण, १ प्रसूति मौ रक्त खार के कारण प्रसव के ४२ दिनों में। इस निदिष्ट साल में कुल जीवित शिशु की संख्या ५०० हो तो मातृ मृत्यु हार क्या होगा ?		४

समष्टिमितिक प्राथमिक स्वास्थ्य परिसेवा
वृहत्तर कलकत्ते से बाहर स्थित ६३ नगरपालिकाओं में
स्वेच्छासेवी स्वास्थ्यकर्मी के लिए
प्राक प्रशिक्षण परीक्षा

कुल अंक - ३०

क्रम संख्या	प्रश्न	सही उत्तर पर (✓) दें	अंक
१.	स्वास्थ्य का मतलब है सिर्फ रोग मुक्त रहना	हाँ ना	१
२.	हमारे देश में कई रोग के प्रतिरोध संभव है	हाँ ना	१
३.	बाल्य विवाह अच्छा है	हाँ ना	१
४.	जन्म नियंत्रण के कृत्रिम पद्धति अपनाना स्वास्थ्य के लिए हानिकारक है	हाँ ना	१
५.	शरीर के खून संचालन में अहम भूमिका	फुस-फुस / आँत / यकृत / हृदय	१
६.	श्वास लेने में अहम भूमिका	फुस-फुस / पाक स्थली / यकृत / हृदय	१
७.	स्वास्थ्य सम्मत परिवेश मतलब केवल सॉनिटरी लैट्रिन	हाँ ना	१
८.	पेय जल साफ़ होना चाहिए	हाँ ना	१
९.	डायरिया रोग का एकमात्र चिकित्सा है सॉलाइन	हाँ ना	१
१०.	मलेरिया रोग फैलता है	पानी के माध्यम से / हवा के माध्यम से / मच्छर के काटने से / कोई भी नहीं	१
११.	पोलिओ रोग के प्रतिरोध के लिए उपयोगी है ओ आर एस	हाँ ना	१
१२.	डायरिया होने पर खाद्य व पेय बंद कर देना चाहिए	हाँ ना	१
१३.	जनगणना कितने साल में होता है	१ / ५ / १०	१
१४.	पृथ्वी से जिस रोग को निर्मूल किया गया	मलेरिया / पोलिओ / स्मॉल पॉक्स	१
१५.	माँ के दूध का पीला भाग फेंक कर बच्चे को पिलाना चाहिए	हाँ ना	१
१६.	गर्भवती माँ को टिटनेस का सुई लगाने पर नवजात को घनुष टंकार नहीं होता	हाँ ना	१
१७.	गर्भवती व प्रसूति माँ को ज्यादा खाद्य आवश्यक है	हाँ ना	१
१८.	प्रत्येक शिशु को उल्लेख किए गए भाँकसिन देना चाहिए	बिसिजि / डिपिटी / पोलिओ / खसरा / कोई नहीं / सारे	१

क्र.सं.	प्रश्न	सही उत्तर पर (✓) दें	अंक
१९	हर प्रकार के कुष्ठ रोग संक्रामक है	हाँ ना	१
२०	शिशु के लिए नर्म व शक्त खाद्य अभ्यास करवाने का उपयुक्त समय	१ / ६ / ४ माह	१
२१	मलेरिया संक्रामक रोग है	हाँ ना	१
२२	वध्या करण ऑपरेशन एक अस्थायी जन्म नियंत्रण पद्धति है	हाँ ना	१
२३	जन संयोग (स्वास्थ्य संबंधित) के अन्यतम लक्ष्य है स्वास्थ्य के प्रति जागरुकता	हाँ ना	१
२४	भिटाविन 'ए' की कमी से रोग	टिबि / लेप्रसि / रात में अंधापन / डिफ्थेरिया	१
२५	कुत्ते के काटने पर एड्स रोग फैलता है	हाँ ना	१
२६	दंपति को कितने बच्चे होने चाहिए	० / १ / २ / ३	१
२७	अमर्त्य सेन को किस विषय पर नोबेल पुरस्कार मिला	साहित्य / विज्ञान / जनहितकारी अर्थशास्त्र	१
२८	राष्ट्र गीत के रचयिता	काज़ी नज़रूल / रवीन्द्रनाथ / " प्रेम चंद	१
२९	पाल्स पोलिओ के अंतर्गत हर पाँच साल के नीचे शिशु को पोलिओ भॉकसिन पिलाना चाहिए	हाँ ना	१
३०	नवजात शिशु के श्रेष्ठ खाद्य	गाय का दूध / माँ का दूध / बकरी का दूध / डिब्बे का दूध	१

नगरपालिका

स्वास्थ्यकर्मी के नाम _____

तारीख

P-79

Sub. : Payment of honorarium to the trainee trainers during training of trainers under DFID assisted Honorary Health Worker Scheme.

Training of trainers is scheduled on 18.08.2004 at the Conference Hall of SUDA, ILGUS Bhavan, Salt Lake where trainers (Doctors - 2, Nurse - 2) from each ULB will participate throughout the whole day. Total 36 participants from 9 ULBs will attend the day long sessions.

In previous projects i.e. IPP-VIII, IPP-VIII-(Extn.) during trainers trainee, a token amount of Rs. 200/- only per trainee was paid as honorarium which was based on the same practice followed by UNICEF in trainer's training where payment amount per capita is Rs. 400/- only per dia.

Hence, Rs. 200/- may be paid to each of the trainee trainers (total 36 participants) which will come to the tune of Rs. 7,200/- only.

Rs. 7,200/- may be withdrawn as advance to the undersigned from the DFID A/C to disburse the same to the said participants. Necessary adjustment will be submitted in due course.

Submitted for approval.

P.O. (Health Wing)

17/8/04

Sat Kumar Lahiri 17/08/04

May be advanced. Necessary adjustment is required to submit in due course.

An Advance of Rs. 7200/- paid to Mr. S.K. Lahiri
Received Rs. 7200/-
Sat Kumar Lahiri 17/08/04

17.8.04

out of 36 (thirty six) participants attended 33 (thirty three) and amount of RS 6600/- (Rupees six thousand six hundred) is disbursed to the participants vide ~~enclosure~~ attached. Hence the balance amount of RS 600/- (7200 - 6,600) is refunded to F.O. (Health Wing) on 18.08.04.

Received Rs. 600/- from Sri Sat

Sat Kumar Lahiri 18/08/04

F.O.

State Urban Development Agency, Health Wing, West Bengal

Sl.No.	Item of Expenditure	Unit Rate(Rs.)	Qty. Required	Amount (inRs.)Involved
6.	Working Tea, Tiffin & Lunch	@ 85.00	38 (avg.) heads x 12 programmes = 456 heads	38760.00
7.	Contingency	@200.00	For 12 programmes	2400.00
TOTAL				1,58,350.00

Hence, the unit rate for Trainers' training per ULB works out to be Rs.2109.00. Responsibility for the items described at Sl. No. 3-5 & 7 may be allotted to Health Wing, SUDA. Estimated budget from Sl. No. 3-5 & 7, amounts to Rs.81,640.00. Advance will be drawn by FO, Health, SUDA time to time based on the requirement and adjustment will be submitted by FO, Health, SUDA in due course.

For the items described in the remaining Sl.nos. i.e 1-2 & 6, necessary action may be taken by the office of SUDA and handed over the training & reading materials to Health Wing, SUDA by 17.01.2007.

Requirement of fund by Health Wing, SUDA for the ensuing training programme on 19.01.2007 is as under :

Purchase of charts	64 sets	10240.00
Extramural Trainers fee	For 1 trainer	500.00
Trainee Participants fee	For 55 trainees	11000.00
Contingency	For 1 Prog.	200.00
TOTAL		21940.00

The said amount of Rs. 21940.00 may be released to FO, Health, SUDA as advance in cash for the present.

The expenditure is to be booked under the A/C head - "Training - Trainers training".

Submitted for kind approval and further necessary action.

[Signature]
15.1.07

SA-Health/G3
15/06/22
1.07

Health, SUDA

State Urban Development Agency, Health Wing, West Bengal

Sub: Trainers' training in respect of training of HHWs under Community Based Primary Health Care Services in 63 Non-KMA ULBs

With completion of selection of HHWs in the ULBs, one day Trainers' training is to be conducted centrally at SUDA by Health Wing in batches. After the said Trainers' training, the trainers will impart training for 45 days to the HHWs (both regular and panel candidates) at Municipal level, which will be started apropos instruction of the Chairman of the ULB concerned. 4-5 trainers of each ULB will be trained by SUDA.

The 1st batch of Trainers' training is scheduled on 19.01.2007 at SUDA Conference Hall at 11 am. where 11 (eleven) nos. of ULBs i.e Dainhat, Kurseong, Ramjibanpur, Khirpai, Kaliaganj, Gangarampur, Haldia, Taherpur, Habra, Haldibari, and Sonamukhi will participate. Dates of subsequent trainers' training will be finalized as and when the list of trainers will be received at least for 5 ULBs.

The estimated budget :

SL.No.	Item of Expenditure	Unit Rate(Rs.)	Qty. Required	Amount (inRs.)Involved
1	Training Material i.e Folder, Pen and Spiral Note Book	70.00	5 participants x 63 ULBs + 15 = 330	23100.00
2.	Reading Materials -- Training Manual, Family Schedule, HMIS Forms A, Base Line Survey Format, Training Schedule & Curriculum,	90 Pages Xeroxing @ 0.50= 45.00 per set	5 participants x 63 ULBs + 15 = 330	14850.00
3.	Purchase of charts showing elementary human anatomy, physiology for HHWs training, 4nos per ULB	@40.00 per chart i.e 160.00 per set	64 sets (63 ULBs + 1 SUDA)	10240.00
4.	Extramural Trainers' fee	@500.00	12 such one day training prog.	6000.00
5.	Trainee participant's fee	@200.00	For 315 Trainees	63000.00

সমষ্টিভিত্তিক প্রাথমিক স্বাস্থ্য পরিষেবা
বৃহত্তর কলকাতার বাইরে ৬৩টি পৌরসভা

..... পৌরসভা

স্বৈচ্ছাসেবী স্বাস্থ্যকর্মীদের 'প্রশিক্ষণোত্তর পরীক্ষা'

সময় : ৪০ মিনিট

মোট নম্বর : ৪০

ক্রমিক সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (✓) দিন ও যথাযথ জায়গায় উত্তর দিন	প্রশ্নের মান
১।	স্বাস্থ্যকর্মীর প্রধান কাজ	রোগ নির্ণয় করা / রোগের চিকিৎসা করা / স্বাস্থ্য সচেতনতা বাড়াও।	১
২।	ভিটামিন 'এ' - র অভাব জনিত রোগ	গলগণ্ড / রিকেট / রাতকানা	১
৩।	কোন ভিটামিন সূর্যের আলোতে চামড়ার নিচে তৈরী হয়	ভিটামিন 'ডি' / ভিটামিন 'সি' / ভিটামিন 'বি-২'	১
৪।	খাদ্যের তিনটি মূল উপাদানগুলি কি কি	• • •	৩
৫।	শিশুর জন্মের পর মায়ের বুকের হলুদ গাঢ় দুধ ফেলে দেওয়া উচিত	হ্যাঁ / না	১
৬।	শিশুকে নরম ও শক্ত আহার অভ্যাস করানোর উপযুক্ত সময়	৪ মাস / ৬ মাস / ৭ মাস বয়সে	১
৭।	শিশুর জন্ম ওজন কত কেজির নিচে হলে কম ওজনের শিশু বলা হয় ? কেজি	১
৮।	একটি সুস্থ শিশুর জন্ম ওজন ৬ মাসে বৃদ্ধি পাবে	এক গুন / দুই গুন / তিন গুন	১
৯।	শিশু কিছু ধরে দাঁড়াতে পারে, কথা বলতে পারে	৭ / ৮ / ১০ / ১২ মাসে	১
১০।	প্রজননশীল দম্পতি বলতে বোঝায়	স্ত্রীর বয়স ৪৫ বছরের কম / স্বামীর ও স্ত্রী উভয়ের বয়স ৪৫ বছরের কম / স্ত্রীর বয়স ১৫ - ৪৪ র মধ্যে	১
১১।	একজন গর্ভবতী মহিলার শেষ মাসিকের তারিখ বিগত ২রা জানুয়ারী, ২০০৪ সাল হলে সম্ভাব্য প্রসবের তারিখ	১০ই নভেম্বর, ২০০৪ / ৯ই অক্টোবর, ২০০৪ / ১১ই ডিসেম্বর, ২০০৪	১
১২।	গর্ভবতী মায়ের বাচ্চা ছেলে না মেয়ে হবে তা নির্ভরশীল	মায়ের উপর / বাবার উপর / কারোর উপর নয়	১
১৩।	গর্ভবতী মায়ের চেক আপ করাতে হবে অন্তত পক্ষে	৩ / ৫ / ৭ বার	১
১৪।	প্রসবের পর থেকে কত সপ্তাহ পর্যন্ত সময়কে প্রসবোত্তর সময় বলে	৪ / ৬ / ৮ / ১০ সপ্তাহ	১

পরবর্তী পৃষ্ঠায় দেখুন

ক্র.সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (√) দিন ও যথাযথ জায়গায় উত্তর দিন	প্রশ্নের মান
১৫।	যে মহিলা আগের গর্ভকালীন সময় টি.টি. - ২টি ডোজ নিয়েছেন, তাঁর পরেরবার গর্ভবতী অবস্থায় টি.টি. - ১ টি বুস্টার ডোজ দেওয়া হবে যদি	৩ / ৪ / ৫ বছরের মধ্যে তিনি আবার গর্ভবতী হন	১
১৬।	মেয়ের বিয়ের বয়স	১৪ / ১৫ / ১৮ / ২১ বছরের আগে নয়	১
১৭।	যন্ত্রপাতি জীবানুমুক্ত করতে হলে ফোটাতে হবে	৫ / ১০ / ২০ / ৩০ মিনিট	১
১৮।	প্রতিষেধক টীকা দিয়ে এক বছরের কম শিশুকে কোন কোন সংক্রামক রোগের হাত থেকে বাঁচানো যায় ?		৬
১৯।	শিশুর কোন বয়সে হামের টীকা দেওয়া হয়		১
২০।	বি.সি.জি. টীকার দ্বারা কোন রোগ প্রতিরোধ করা সম্ভব	হাম / পোলিও / টি.বি. / ছপিং কাশি	১
২১।	বক্ষা রোগের সংক্রমণের মাধ্যম	কীটপতঙ্গ / জন / শ্বাসপ্রশ্বাস ও বাতাস	১
২২।	পোলিও রোগের জীবানু সংক্রামিত হয়	বাতাস / খুঁত / মল ও জলের মাধ্যমে	১
২৩।	এইডস্ রোগ সংক্রমণ হয়	মশার কামড়ে / যৌন সংসর্গে / খাদ্য ও পানীয় জলের মাধ্যমে	১
২৪।	১ প্যাকেট ও.আর.এস. গোলায় জন্য কতটা জল দরকার	হাক / এক / দেড় লিটার	১
২৫।	ও.আর.এস. একবার গোলা হলে ঐ পানীয় কতক্ষণ ব্যবহার করা যায়	১২ / ২৪ / ৪৮ ঘন্টা	১
২৬।	অ্যালবেনডাজোল বড়ি যে অসুখে দেয়	ডায়ারিয়া / এ.আর.আই. / কৃমি	১
২৭।	গর্ভনিরোধক বড়ি মাসিকের কোন দিন থেকে খাওয়া আবশ্যিক	৪র্থ / ৫ম / ৬ষ্ঠ দিন	১
২৮।	ভাসেকটমির পরে পুরুষের কর্মক্ষমতা ও যৌনক্ষমতা	হ্রাস পায় / হ্রাস পায় না / খানিকটা হ্রাস পায়	১
২৯।	পালস্ পোলিও দেবার জন্য বাচ্চার বয়স হতে হবে	৩ / ৫ / ৭ বছর পর্যন্ত	১
৩০।	কোনো এক জায়গায় নির্দিষ্ট বছরে ২ জন মহিলা মারা গেছেন হার্টের রোগে, ১ জন মহিলা বক্ষা রোগে, ১ জন গর্ভবতী মহিলা প্রসবকালে, ১ জন মহিলা আঙুনে পুড়ে ও ১ জন প্রসূতি মা মারা গেছেন প্রসবের ৪২ দিনের মধ্যে রক্ত স্রাবের কারণে। ঐ নির্দিষ্ট বছরে মোট জীবিত শিশুর জনসংখ্যা ৫০০ হলে মাতৃ মৃত্যুর হার কত ?		৪
	মোট		৪০

স্বাস্থ্য কর্মীর নাম ও স্বাক্ষর :

তারিখ :

স্বেচ্ছাসেবী স্বাস্থ্যকর্মী স্কীম
সহায়তায় - ডি. এফ. আই. ডি
..... পৌরসভা

প্রথম সারির পরিদর্শিকার 'প্রশিক্ষণোত্তর মূল্যায়ণ'

সময় : ৪৫ মিনিট

মোট নম্বর : ৩০

ক্রমিক সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (✓) দিন ও যথাযথ জায়গায় উত্তর লিখুন	প্রশ্নের মান
১।	এক গর্ভবতী মহিলার শেষ মাসিকের প্রথম দিনের তারিখ বিগত ৩০শে জানুয়ারী, ২০০৫ সাল হলে, তার প্রসবের সম্ভাব্য তারিখ লিখুন।		১
২।	প্রধান চারটি কি কি পরিষেবা সাব হেল্থ পোস্ট থেকে দেওয়া হয় ?		৪
৩।	তিন বার এ.এন.সি. চেক আপে বাঞ্ছনীয় সময় সূচী কি ?		৩
৪।	একটি সুস্থ শিশুর জন্ম ওজন ১ বছরে স্বাভাবিক ভাবে কতটা বৃদ্ধি পাবে ?	২ গুন / ৩ গুন / ৪ গুন	১
৫।	কোন ভিটামিনের অভাবে বাচ্চাদের রিকেট রোগ হয়?		১
৬।	উইনিং ফুড কাকে বলে ? চারটি উইনিং ফুডের নাম লিখুন।		৪
৭।	বাচ্চাদের কোন বয়স থেকে কত বয়স পর্যন্ত ভিটামিন এ তেল খাওয়ানো হয় ? যেট কতগুলি ডোজ ?		২
৮।	মিডিলস ও বিসিজি টীকা গোলার পর কতক্ষণ পর্যন্ত ব্যবহার করা যায় ?		১

ক্রমিক সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (✓) দিন ও যথাযথ জায়গায় উত্তর লিখুন	প্রশ্নের মান
৯।	শিশুর সদি কাশি হলে কোন তিনটি বিপদের লক্ষণগুলির প্রতি লক্ষ্য রাখতে হবে ?		২
১০।	গর্ভনিরোধের বড়ি খাওয়ানোর পদ্ধতিটি কি ?		২
১১।	কপার টি কাকে দেবেন না ?		১
১২।	যক্ষা রোগ কি ভাবে ছড়ায় ?		২
১৩।	মাতৃ মৃত্যুহার নির্ণয় সূত্রটি কি ?		২
১৪।	কোনো এক এলাকায় জনসংখ্যা ৩,৫৫০, একবছরে জীবিত শিশুর জন্ম সংখ্যা ৫০, মোট মৃতের সংখ্যা ১৩, ১ বছরের নীচে শিশু মৃত্যুর সংখ্যা ২ এবং ৫ বছরের নীচে বাচ্চার মৃত্যুর সংখ্যা ৫ হলে সেই এলাকায় ঐ বছরে শিশু মৃত্যুর হার কত ?		২
১৫।	কোনো এলাকায় ৩০০ জন প্রজননশীল দম্পতির মধ্যে নির্দিষ্ট বছরে ১০ জন মহিলা লাইগেশন করিয়েছে, ২ জন পুরুষ ভ্যাসেক্টোমি করিয়েছে, ২০ জন ওরাল পিল খান, ৪ জন আই.ইউ.ডি. এবং ১৫ জন কন্ডোম ব্যবহার করেন - এক্ষেত্রে প্রজননশীল দম্পতির সুরক্ষা হার কত ?	১৪ / ১৬ / ১৭	২
	মোট		৩০

প্রথম সারির পরিদর্শিকার নাম :

এস. এইচ. পি. নং :

তারিখ :

সমষ্টিভিত্তিক প্রাথমিক স্বাস্থ্য পরিষেবা
বৃহত্তর কলকাতার বাইরে ৬৩টি পৌরসভা
স্বৈচ্ছাসেবী স্বাস্থ্যকর্মীদের 'প্রাক প্রশিক্ষণ পরীক্ষা'
সঠিক উত্তরে টিক (✓) দিন

মোট নং - ৩০

- | | | | | | | | |
|--|--|-------|----------|--------------|----------------|-------------|------------------|
| ১। স্বাস্থ্য মানে কেবলমাত্র রোগহীনতা | | হ্যাঁ | না | | | | |
| ২। আমাদের দেশে অনেক রোগই প্রতিরোধ করা সম্ভব | | হ্যাঁ | না | | | | |
| ৩। বাল্য বিবাহ ভাল | | হ্যাঁ | না | | | | |
| ৪। জন্ম নিয়ন্ত্রনে কৃত্রিম পদ্ধতি ব্যবহার করা স্বাস্থ্যের পক্ষে ক্ষতিকারক | | হ্যাঁ | না | | | | |
| ৫। শরীরের রক্ত চলাচলে প্রধান ভূমিকা | ফুসফুস | | অন্ত্র | | | | |
| | যকৃত | | হৃৎপিণ্ড | | | | |
| ৬। শ্বাস-প্রশ্বাসের মূল যন্ত্র | হৃৎপিণ্ড | | ফুসফুস | | | | |
| | যকৃত | | পাকস্থলী | | | | |
| ৭। স্বাস্থ্য সম্মত পরিবেশ মানে কেবলমাত্র স্যানিটারি পায়খানা | | হ্যাঁ | না | | | | |
| ৮। পানীয় জলই কেবলমাত্র পরিশ্রুত হওয়া প্রয়োজন | | হ্যাঁ | না | | | | |
| ৯। ডায়ারিয়া রোগের একমাত্র চিকিৎসা স্যালাইন ইনজেকশন | | হ্যাঁ | না | | | | |
| ১০। ম্যালেরিয়া রোগ ছড়ায় | <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 50%; padding: 5px;">জলের মাধ্যমে</td> <td style="width: 50%; padding: 5px;">বায়ুর মাধ্যমে</td> </tr> <tr> <td style="width: 50%; padding: 5px;">মশার কামড়ে</td> <td style="width: 50%; padding: 5px;">কোনটি দিয়েই নয়</td> </tr> </table> | | | জলের মাধ্যমে | বায়ুর মাধ্যমে | মশার কামড়ে | কোনটি দিয়েই নয় |
| জলের মাধ্যমে | বায়ুর মাধ্যমে | | | | | | |
| মশার কামড়ে | কোনটি দিয়েই নয় | | | | | | |

পরবর্তী পৃষ্ঠায়

- ১১। পোলিও রোগ প্রতিরোধে ও.আর.এস. অন্যতম হ্যাঁ না
- ১২। ডায়ারিয়া হলে খাদ্য এবং পানীয় একাবারে বন্ধ করা উচিত হ্যাঁ না
- ১৩। জনগণনা কত বছর অন্তর হয়
- | | | |
|---|---|----|
| ১ | ৫ | ১০ |
|---|---|----|
- ১৪। পৃথিবী থেকে যে রোগ নির্মূল করা সম্ভব হয়েছে
- | | | |
|-------------|-------|------------|
| ম্যালেরিয়া | পোলিও | গুটি বসন্ত |
|-------------|-------|------------|
- ১৫। মায়ের প্রথম দুধ (হলুদ রঙের) ফেলে দিয়ে তারপর বাচ্চাকে খাওয়ানো উচিত হ্যাঁ না
- ১৬। গর্ভবতী মায়ের টিটেনাস ইনজেকশন দিলে কেবলমাত্র নবজাত শিশুদের ধনুষ্টঙ্কার হয় না হ্যাঁ না
- ১৭। গর্ভবতী ও প্রসূতি মায়ের বেশি খাদ্যের প্রয়োজন হ্যাঁ না
- ১৮। প্রত্যেক শিশুদের উল্লিখিত ভ্যাকসিন (টিকা) নেওয়া উচিত
- | | | |
|-----------|-----------|-------|
| বি.সি.জি. | ডি.পি.টি. | পোলিও |
|-----------|-----------|-------|
- | | | |
|-----|-----------|---------|
| হাম | কোনটাই না | সবগুলিই |
|-----|-----------|---------|
- ১৯। সকল প্রকার কুষ্ঠ রোগই ছোঁয়াচে হ্যাঁ না
- ২০। শিশুকে নরম ও শক্ত আহার অভ্যাস করানোর উপযুক্ত সময়
- | | | |
|-------|-------|-------|
| ৭ মাস | ৬ মাস | ৪ মাস |
|-------|-------|-------|
- ২১। ম্যালেরিয়া ছোঁয়াচে রোগ হ্যাঁ না
- ২২। বক্ষ্যাক্রম অপারেশন একটি সাময়িক জনানিয়ন্ত্রণ পদ্ধতি হ্যাঁ না
- ২৩। জন সংযোগের (স্বাস্থ্য সম্পর্কীয়) অন্যতম লক্ষ্য স্বাস্থ্য চেতনা হ্যাঁ না

পরবর্তী পৃষ্ঠায়

২৪। ভিটামিন এ - র অভাবে কি রোগ হয় ?

টি.বি.	লেপ্তিসি
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২৫। কুকুরের কামড়ে এডস্ রোগ হয়

রাতকানা	ডিপথেরিয়া
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২৬। দম্পতির কয়টি বাচ্চা হওয়া বাঞ্ছনীয়

হ্যাঁ না

০ ১ ২ ৩

২৭। অমর্ত্য সেন নোবেল পুরস্কার পেয়েছেন

সাহিত্যে	বিজ্ঞানে	জনহিতকর অর্থনীতিতে
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২৮। জাতীয় সংগীতের রচয়িতা

বঙ্কিমচন্দ্র চট্টোপাধ্যায়	রবীন্দ্রনাথ ঠাকুর
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কাজী নজরুল ইসলাম

২৯। পালস্ পোলিও কর্মসূচী পাঁচ বছর পর্যন্ত প্রত্যেক
শিশুরই পোলিও ভ্যাকসিন নেওয়া উচিত

হ্যাঁ না

৩০। নবজাত শিশুর শ্রেষ্ঠ খাদ্য

গরুর দুধ	মায়ের দুধ
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ছাগলের দুধ	কৌটোর দুধ
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..... পৌরসভা

স্বাস্থ্যকর্মীর নাম

..... তারিখ

সমষ্টিভিত্তিক প্রাথমিক স্বাস্থ্য পরিষেবা
বৃহত্তর কলকাতার বাইরে ৬৩টি পৌরসভা
স্বেচ্ছাসেবী স্বাস্থ্যকর্মীদের 'প্রাক প্রশিক্ষণ পরীক্ষা'
সঠিক উত্তরে টিক (✓) দিন

মোট নং - ৩০

১।	স্বাস্থ্য মানে কেবলমাত্র রোগহীনতা		হ্যাঁ	না	
২।	আমাদের দেশে অনেক রোগই প্রতিরোধ করা সম্ভব		হ্যাঁ	না	
৩।	মেয়েদের ক্ষেত্রে কত বছরের নিচে বিবাহকে বাল্য বিবাহ বলা হয়		১৫	১৮	
৪।	জন্ম নিয়ন্ত্রনে কৃত্রিম পদ্ধতি ব্যবহার করা স্বাস্থ্যের পক্ষে ক্ষতিকারক		হ্যাঁ	না	
৫।	শরীরের রক্ত চলাচলে প্রধান ভূমিকা	ফুসফুস	<input type="text"/>	অন্ত্র	<input type="text"/>
		যকৃত	<input type="text"/>	হৃৎপিণ্ড	<input type="text"/>
৬।	শ্বাস-প্রশ্বাসের মূল যন্ত্র	হৃৎপিণ্ড	<input type="text"/>	ফুসফুস	<input type="text"/>
		যকৃত	<input type="text"/>	পাকস্থলী	<input type="text"/>
৭।	স্বাস্থ্য সম্মত পরিবেশ মানে কেবলমাত্র স্যানিটারি পায়খানা		হ্যাঁ	না	
৮।	পানীয় জলই কেবলমাত্র পরিশ্রুত হওয়া প্রয়োজন		হ্যাঁ	না	
৯।	ডায়ারিয়া রোগের একমাত্র চিকিৎসা স্যালাইন ইনজেকশন		হ্যাঁ	না	
১০।	যক্ষা রোগ ছড়ায়	জলের মাধ্যমে	<input type="text"/>	বায়ুর মাধ্যমে	<input type="text"/>
		মশার কামড়ে	<input type="text"/>	কোনটি দিয়েই নয়	<input type="text"/>

পরবর্তী পৃষ্ঠায়

১১। পোলিও রোগ প্রতিরোধে ও.আর.এস. অন্যতম

হ্যাঁ না

১২। ডায়ারিয়া হলে মায়ের দুধ একেবারে বন্ধ করা উচিত

হ্যাঁ না

১৩। জনগণনা কত বছর অন্তর হয়

১	৫	১০
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১৪। পৃথিবী থেকে যে রোগ নির্মূল করা সম্ভব হয়েছে

ম্যালেরিয়া	পোলিও	গুটি বসন্ত
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১৫। মায়ের প্রথম দুধ (হলুদ রঙের) ফেলে দিয়ে
তারপর বাচ্চাকে খাওয়ানো উচিত

হ্যাঁ না

১৬। গর্ভবতী মাকে টিটেনাস ইনজেকশন দিলে
নবজাত শিশু ও মায়ের ধনুষ্কার হয় না

হ্যাঁ না

১৭। গর্ভবতী ও প্রসূতি মায়ের বেশি খাদ্যের প্রয়োজন

হ্যাঁ না

১৮। প্রত্যেক শিশুদের উল্লিখিত ভ্যাকসিন (টিকা)
নেওয়া উচিত

বি.সি.জি.	ডি.পি.টি.	পোলিও
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হাম	কোনটাই না	সবগুলিই
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১৯। কুষ্ঠ রোগ ছোঁয়াচে

হ্যাঁ না

২০। শিশুকে নরম ও শক্ত আহার অভ্যাস করানোর
উপযুক্ত সময়

৭ মাস	৬ মাস	৪ মাস
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২১। হাম সংক্রামক রোগ

হ্যাঁ না

২২। বক্ষ্যাত্মকরণ অপারেশন একটি সাময়িক জনুনিয়ন্ত্রণ পদ্ধতি

হ্যাঁ না

২৩। জন সংযোগের (স্বাস্থ্য সম্পর্কীয়) অন্যতম লক্ষ্য স্বাস্থ্য চেতনা

হ্যাঁ না

পরবর্তী পৃষ্ঠায়

২৪। ভিটামিন এ - র অভাবে কি রোগ হয় ?

টি.বি.

লেপ্রসি

রাতকানা

ডিপথেরিয়া

২৫। কুকুরের কামড়ে এডস্ রোগ হয়

হ্যাঁ

না

২৬। শিশু জন্মের কতক্ষণ পরে মায়ের

যত তাড়াতাড়ি সম্ভব

১ ঘঃ

২ ঘঃ

৩ ঘঃ

বুকের দুধ খাবে

২৭। দুটি শিশু জন্মের মধ্যে কত বছরের ব্যবধান থাকা উচিত

১ - ২

২ - ৩

৩ - ৪

২৮। জাতীয় সংগীতের রচয়িতা

বঙ্কিমচন্দ্র চট্টোপাধ্যায়

রবীন্দ্রনাথ ঠাকুর

কাজী নজরুল ইসলাম

২৯। পালস্ পোলিও কর্মসূচী পাঁচবছর পর্যন্ত প্রত্যেক

হ্যাঁ

না

শিশুরই পোলিও ভ্যাকসিন নেওয়া উচিত

৩০। নবজাত শিশুর শ্রেষ্ঠ খাদ্য

গরুর দুধ

মায়ের দুধ

ছাগলের দুধ

কৌটোর দুধ

..... পৌরসভা

স্বাস্থ্যকর্মীর নাম

..... তারিখ

সমষ্টিভিত্তিক প্রাথমিক স্বাস্থ্য পরিষেবা
বৃহত্তর কলকাতার বাইরে ৬৩টি পৌরসভা

..... পৌরসভা

স্বচ্ছাসেবী স্বাস্থ্যকর্মীদের 'প্রশিক্ষণোত্তর পরীক্ষা'

সময় : ৪০ মিনিট

মোট নম্বর : ৪০

ক্রমিক সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (✓) দিন ও যথাযথ জায়গায় উত্তর দিন	প্রশ্নের মান
১।	স্বাস্থ্যকর্মীর প্রধান কাজ	রোগ নির্ণয় করা / রোগের চিকিৎসা করা / স্বাস্থ্য সচেতনতা বাড়ানো।	১
২।	ভিটামিন 'এ' - র অভাব জনিত রোগ	গলগণ্ড / রিকট / রাতকানা	১
৩।	কোন ভিটামিন সূর্যের আলোতে চামড়ার নিচে তৈরী হয়	ভিটামিন 'ডি' / ভিটামিন 'সি' / ভিটামিন 'বি-২'	১
৪।	খাদ্যের তিনটি মূল উপাদানগুলি কি কি	• • •	৩
৫।	শিশুর জন্মের পর মায়ের বুকের হলুদ গাঢ় দুধ ফেলে দেওয়া উচিত	হ্যাঁ / না	১
৬।	শিশুকে নরম ও শক্ত আহার অভ্যাস করানোর উপযুক্ত সময়	৪ মাস / ৬ মাস / ৭ মাস বয়সে	১
৭।	শিশুর জন্ম ওজন কত কেজির নিচে হলে কম ওজনের শিশু বলা হয় ? কেজি	১
৮।	একটি সুস্থ শিশুর জন্ম ওজন ৬ মাসে বৃদ্ধি পাবে	এক গুন / দুই গুন / তিন গুন	১
৯।	শিশু কিছু ধরে দাঁড়াতে পারে, কথা বলতে পারে	৭ / ৮ / ১০ / ১২ মাসে	১
১০।	প্রজননশীল দম্পতি বলতে বোঝায়	স্ত্রীর বয়স ৪৫ বছরের কম / স্বামী ও স্ত্রী উভয়ের বয়স ৪৫ বছরের কম / স্ত্রীর বয়স ১৫ - ৪৪ র মধ্যে	১
১১।	একজন গর্ভবতী মহিলার শেষ মাসিকের তারিখ বিগত ৬ মাস জানুয়ারী, ২০০৮ সাল হলে সম্ভাব্য প্রসবের তারিখ	১০ই নভেম্বর, ২০০৮ / ৯ই অক্টোবর, ২০০৮ / ১১ই ডিসেম্বর, ২০০৮ ১২ ডিসেম্বর ২০০৮ / ১০ই ডিসেম্বর ২০০৮ / ১১ই ২০০৮	১
১২।	গর্ভবতী মায়ের বাচ্চা ছেলে না মেয়ে হবে তা নির্ভরশীল	মায়ের উপর / বাবার উপর / কারোর উপর নয়	১
১৩।	গর্ভবতী মায়ের চেক আপ করাতে হবে অন্তত পক্ষে	৩ / ৫ / ৭ বার	১
১৪।	প্রসবের পর থেকে কত সপ্তাহ পর্যন্ত সময়কে প্রসবোত্তর সময় বলে	৪ / ৬ / ৮ / ১০ সপ্তাহ	১

পরবর্তী পৃষ্ঠায় দেখুন

ক্র.সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (✓) দিন ও যথাযথ জায়গায় উত্তর দিন	প্রশ্নের মান
১৫।	যে মহিলা আগের গর্ভকালীন সময় টি.টি. - ২টি ডোজ নিয়েছেন, তাঁর পরেরবার গর্ভবতী অবস্থায় টি.টি. - ১ টি বুটীর ডোজ দেওয়া হবে যদি	৩ / ৪ / ৫ বছরের মধ্যে তিনি আবার গর্ভবতী হন	১
১৬।	মেয়ের বিষের বয়স	৬-১০মাস / ১-২ বছর	১
১৭।	যন্ত্রপাতি জীবানুমুক্ত করতে হলে ফোটাতে হবে	৫ / ১০ / ২০ / ৩০ মিনিট	১
১৮।	প্রতিবেশক টাকা দিয়ে এক বছরের কম শিশুকে কোন কোন সংক্রামক রোগের হাত থেকে বাঁচানো যায় ?		৬
১৯।	শিশুর কোন বয়সে হামের টাকা দেওয়া হয়		১
২০।	বি.সি.জি. টীকার দ্বারা কোন রোগ প্রতিরোধ করা সম্ভব	হাম / পোলিও / টি.বি. / হুপিং কাশি	১
২১।	যক্ষা রোগের সংক্রমণের মাধ্যম	কীটপতঙ্গ / জল / শ্বাসপ্রশ্বাস ও বাতাস	১
২২।	পোলিও রোগের জীবানু সংক্রামিত হয়	বাতাস / খুঁত / মল ও জলের মাধ্যমে	১
২৩।	এইডস রোগ সংক্রমণ হয়	মশার কামড়ে / যৌন সংসর্গে / খাদ্য ও পানীয় জলের মাধ্যমে	১
২৪।	১ প্যাকেট ও.আর.এস. গোলায় জন্য কতটা জল দরকার	হাক / এক / দেড় লিটার	১
২৫।	ও.আর.এস. একবার গোলা হলে ঐ পানীয় কতক্ষণ ব্যবহার করা যায়	১২ / ২৪ / ৪৮ ঘণ্টা	১
২৬।	অ্যান্‌লেক্সোজেন বড়ি যে অসুখে দেয়	ডায়ারিয়া / এ.আর.আই. / কৃমি	১
২৭।	গর্ভনিরোধক বড়ি মাসিকের কোন দিন থেকে খাওয়া আবশ্যক	৪র্থ / ৫ম / ৬ষ্ঠ দিন	১
২৮।	ভাসেকটমির পরে পুরুষের কর্মক্ষমতা ও যৌনক্ষমতা	হ্রাস পায় / হ্রাস পায় না / খানিকটা হ্রাস পায়	১
২৯।	পালস্ পোলিও দেবার জন্য বাফার বয়স হতে হবে	৩ / ৫ / ৭ বছর পর্যন্ত	১
৩০।	কোনো এক জায়গায় নির্দিষ্ট বছরে ২ জন মহিলা মারা গেছেন হার্টের রোগে, ২ জন মহিলা যক্ষা রোগে, ২ জন গর্ভবতী মহিলা প্রসবকালে, ১ জন মহিলা আগুনে পুড়ে ও ১ জন প্রসূতি মা মারা গেছেন প্রসবের ৪২ দিনের মধ্যে রক্ত্রাবের কারণে। ঐ নির্দিষ্ট বছরে মোট জীবিত শিশুর জন্মসংখ্যা ৫০০ হলে মাতৃ মৃত্যুর হার কত ?		৪
	মোট		৪০

স্বাক্ষর কর্তার নাম ও স্বাক্ষর :

তারিখ : ০০

সমষ্টিভিত্তিক প্রাথমিক স্বাস্থ্য পরিষেবা
বৃহত্তর কলকাতার বাইরে ৬৩টি পৌরসভা

..... পৌরসভা

স্বেচ্ছাসেবী স্বাস্থ্যকর্মীবৃন্দের 'প্রশিক্ষণোত্তর পরীক্ষা'

সময় : ৪০ মিনিট

মোট নম্বর : ৪০

ক্রমিক সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (√) দিন ও যথাযথ জায়গায় উত্তর দিন	প্রশ্নের মান
১।	স্বাস্থ্যকর্মীর প্রধান কাজ	রোগ নির্ণয় করা / রোগের চিকিৎসা করা / স্বাস্থ্য সচেতনতা বাড়ানো।	১
২।	ভিটামিন 'ডি' - র অভাব জনিত রোগ	গলগণ্ড / রিকেট / রাতকানা	১
৩।	কোন ভিটামিন সূর্যের আলোতে চামড়ার নিচে তৈরী হয়	ভিটামিন 'ডি' / ভিটামিন 'সি' / ভিটামিন 'বি-২'	১
৪।	খাদ্যের তিনটি মূল উপাদানগুলি কি কি	• • •	৩
৫।	শিশুর জন্মের পর মায়ের বুকের হলুদ গাঢ় দুধ ফেলে দেওয়া উচিত	হ্যাঁ / না	১
৬।	শিশুকে নরম ও শক্ত আহার অভ্যাস করানোর উপযুক্ত সময়	৪ মাস / ৬ মাস / ৭ মাস বয়সে	১
৭।	শিশুর জন্ম ওজন কত কেজির নীচে হলে কম ওজনের শিশু বলা হয় ? কেজি	১
৮।	একটি সুস্থ শিশুর জন্ম ওজন ১ বছরে বৃদ্ধি পাবে	এক গুন / দুই গুন / তিন গুন	১
৯।	শিশু কিছু ধরে দাঁড়াতে পারে, কথা বলতে পারে	৭ / ৮ / ১০ / ১২ মাসে	১
১০।	প্রজননশীল দম্পতি বলতে বোঝায়	স্ত্রীর বয়স ৪৫ বছরের কম / স্বামী ও স্ত্রী উভয়ের বয়স ৪৫ বছরের কম / স্ত্রীর বয়স ১৫ - ৪৪ র মধ্যে	১
১১।	একজন গর্ভবতী মহিলার শেষ মাসিকের তারিখ বিগত ৩রা মার্চ, ২০০৬ সাল হলে সম্ভাব্য প্রসবের তারিখ	৯ই জানুয়ারী, ২০০৭ / ১০ই ডিসেম্বর, ২০০৬ / ১০ই নভেম্বর, ২০০৬	১
১২।	গর্ভবতী মায়ের বাচ্চা ছেলে না মেয়ে হবে তা নির্ভরশীল	মায়ের উপর / বাবার উপর / কারোর উপর নয়	১
১৩।	গর্ভবতী মায়ের চেক আপ করতে হবে অন্তত পক্ষে	৩ / ৫ / ৭ বার	১
১৪।	প্রসবের পর থেকে কত সপ্তাহ পর্যন্ত সময়কে প্রসবোত্তর সময় বলে	৪ / ৬ / ৮ / ১০ সপ্তাহ	১

পরবর্তী পৃষ্ঠায় দেখুন

ক্রমিক সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (√) দিন ও যথাযথ জায়গায় উত্তর দিন	প্রশ্নের মান
১৫।	যে মহিলা আগের গর্ভকালীন সময় টি.টি. - ২টি ডোজ নিয়েছেন, তাঁর পরেরবার গর্ভবতী অবস্থায় টি.টি. - ১ টি বুস্টার ডোজ দেওয়া হবে যদি	৩ / ৪ / ৫ বছরের মধ্যে তিনি আবার গর্ভবতী হন	১
১৬।	শিশু হামা দেয়	৮ মাস / ৯ মাস / ১১ মাস	১
১৭।	যন্ত্রপাতি জীবানুমুক্ত করতে হলে ফোটাতে হবে	৫ / ১০ / ২০ / ৩০ মিনিট	১
১৮।	প্রতিষেধক টীকা দিয়ে এক বছরের কম শিশুকে কোন কোন সংক্রামক রোগের হাত থেকে বাঁচানো যায় ?		৬
১৯।	শিশুর কোন বয়সে ভিটামিন-এ তেল খাওয়ানো হয়		১
২০।	বি.সি.জি. টীকার দ্বারা কোন রোগ প্রতিরোধ করা সম্ভব	হাম / পোলিও / টি.বি. / ছপিং কাশি	১
২১।	ডায়েরিয়া রোগের সংক্রমণের মাধ্যম	কীটপতঙ্গ / জল / শ্বাসপ্রশ্বাস ও বাতাস	১
২২।	পোলিও রোগের জীবানু সংক্রামিত হয়	বাতাস / খুতু / মল ও জলের মাধ্যমে	১
২৩।	এইডস্ রোগ সংক্রমণ হয়	মশার কামড়ে / যৌন সংসর্গে / খাদ্য ও পানীয় জলের মাধ্যমে	১
২৪।	১ প্যাকেট ও.আর.এস. গোলার জন্য কতটা জল দরকার	হাফ / এক / দেড় লিটার	১
২৫।	ও.আর.এস. একবার গোলা হলে ঐ পানীয় কতক্ষণ ব্যবহার করা যায়	১২ / ২৪ / ৪৮ ঘন্টা	১
২৬।	অ্যালবেনডাজোল বড়ি যে অসুখে দেয়	ডায়েরিয়া / এ.আর.আই. / কৃমি	১
২৭।	গর্ভনিরোধক বড়ি মাসিকের কোন দিন থেকে খাওয়া আবশ্যিক	৪র্থ / ৫ম / ৬ষ্ঠ দিন	১
২৮।	ভাসেকটমির পরে পুরুষের কর্মক্ষমতা ও যৌনক্ষমতা	হ্রাস পায় / হ্রাস পায় না / খানিকটা হ্রাস পায়	১
২৯।	পালস্ পোলিও দেবার জন্য বাচ্চার বয়স হতে হবে	৩ / ৫ / ৭ বছর পর্যন্ত	১
৩০।	কোনো এক জায়গায় নির্দিষ্ট বছরে ৬ জন মহিলা মারা গেছেন হার্টের রোগে, ২ জন মহিলা যক্ষা রোগে, ২ জন গর্ভবতী মহিলা প্রসবকালে, ১ জন মহিলা আগুনে পুড়ে ও ১ জন প্রসূতি মা মারা গেছেন প্রসবের ৪২ দিনের মধ্যে রক্ত স্রাবের কারণে। ঐ নির্দিষ্ট বছরে মোট জীবিত শিশুর জন্মসংখ্যা ৬০০ হলে মাতৃ মৃত্যুর হার কত ?		৪
	মোট		৪০

স্বাস্থ্য কর্মীর নাম ও স্বাক্ষর :

তারিখ :

সমষ্টিভিত্তিক প্রাথমিক স্বাস্থ্য পরিষেবা
বৃহত্তর কলকাতার বাইরে ৬৩টি পৌরসভা

..... পৌরসভা

স্বেচ্ছাসেবী স্বাস্থ্যকর্মীদের 'প্রশিক্ষণোত্তর পরীক্ষা'

সময় : ৪০ মিনিট

মোট নম্বর : ৪০

ক্রমিক সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (✓) দিন ও যথাযথ জায়গায় উত্তর দিন	প্রশ্নের মান
১।	স্বাস্থ্যকর্মীর প্রধান কাজ	রোগ নির্ণয় করা / রোগের চিকিৎসা করা / স্বাস্থ্য সচেতনতা বাড়ানো।	১
২।	ভিটামিন 'এ' - র অভাব জনিত রোগ	গলগণ্ড / রিকট / রাতকানা	১
৩।	কোন ভিটামিন সূর্যের আলোতে চামড়ার নিচে তৈরী হয়	ভিটামিন 'ডি' / ভিটামিন 'সি' / ভিটামিন 'বি-২'	১
৪।	খাদ্যের তিনটি মূল উপাদানগুলি কি কি	• • •	৩
৫।	শিশুর জন্মের পর মায়ের বুকের হলুদ গাঢ় দুধ ফেলে দেওয়া উচিত	হ্যাঁ / না	১
৬।	শিশুকে নরম ও শক্ত আহার অভ্যাস করানোর উপযুক্ত সময়	৪ মাস / ৬ মাস / ৭ মাস বয়সে	১
৭।	শিশুর জন্ম ওজন কত কেজির নীচে হলে কম ওজনের শিশু বলা হয় ? কেজি	১
৮।	একটি সুস্থ শিশুর জন্ম ওজন ৬ মাসে বৃদ্ধি পাবে	এক গুন / দুই গুন / তিন গুন	১
৯।	শিশু কিছু ধরে দাঁড়াতে পারে, কথা বলতে পারে	৭ / ৮ / ১০ / ১২ মাসে	১
১০।	প্রজননশীল দম্পতি বলতে বোঝায়	স্ত্রীর বয়স ৪৫ বছরের কম / স্বামীর ও স্ত্রী উভয়ের বয়স ৪৫ বছরের কম / স্ত্রীর বয়স ১৫ - ৪৪ র মধ্যে	১
১১।	একজন গর্ভবতী মহিলার শেষ মাসিকের তারিখ বিগত ২রা জানুয়ারী, ২০০৮ সাল হলে সম্ভাব্য প্রসবের তারিখ	১০ই নভেম্বর, ২০০৮ / ৯ই অক্টোবর, ২০০৮ / ১১ই ডিসেম্বর, ২০০৮	১
১২।	গর্ভবতী মায়ের বাচ্চা ছেলে না মেয়ে হবে তা নির্ভরশীল	মায়ের উপর / বাবার উপর / কারোর উপর নয়	১
১৩।	গর্ভবতী মায়ের চেক আপ করাতে হবে অন্তত পক্ষে	৩ / ৫ / ৭ বার	১
১৪।	প্রসবের পর থেকে কত সপ্তাহ পর্যন্ত সময়কে প্রসবোত্তর সময় বলে	৪ / ৬ / ৮ / ১০ সপ্তাহ	১

পরবর্তী পৃষ্ঠায় দেখুন

ক্র.সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (✓) দিন ও যথাযথ জায়গায় উত্তর দিন	প্রশ্নের মান
১৫।	যে মহিলা আগের গর্ভকালীন সময় টি.টি. - ২টি ডোজ নিয়েছেন, তাঁর পরেরবার গর্ভবতী অবস্থায় টি.টি. - ১ টি বুটীর ডোজ দেওয়া হবে যদি	৩ / ৪ / ৫ বছরের মধ্যে তিনি আবার গর্ভবতী হন	১
১৬।	মেয়ের বিয়ের বয়স	১৪ / ১৫ / ১৮ / ২১ বছরের আগে নয়	১
১৭।	যন্ত্রপাতি জীবানুমুক্ত করতে হলে ফোটাতে হবে	৫ / ১০ / ২০ / ৩০ মিনিট	১
১৮।	প্রতিষেধক টীকা দিয়ে এক বছরের কম শিশুকে কোন্ কোন্ সংক্রামক রোগের হাত থেকে বাঁচানো যায় ?		৬
১৯।	শিশুর কোন্ বয়সে হামের টীকা দেওয়া হয়		১
২০।	বি.সি.জি. টীকার দ্বারা কোন্ রোগ প্রতিরোধ করা সম্ভব	হাম / পোলিও / টি.বি. / ছপিং কাশি	১
২১।	যক্ষা রোগের সংক্রমণের মাধ্যম	কীটপতঙ্গ / জল / শ্বাসপ্রশ্বাস ও বাতাস	১
২২।	পোলিও রোগের জীবানু সংক্রামিত হয়	বাতাস / খুতু / মল ও জলের মাধ্যমে	১
২৩।	এইডস্ রোগ সংক্রমণ হয়	মশার কামড়ে / যৌন সংসর্গে / খাদ্য ও পানীয় জলের মাধ্যমে	১
২৪।	১ প্যাকেট ও.আর.এস. গোলার জন্য কতটা জল দরকার	হাক / এক / দেড় লিটার	১
২৫।	ও.আর.এস. একবার গোলা হলে এ পানীয় কতক্ষণ ব্যবহার করা যায়	১২ / ২৪ / ৪৮ ঘন্টা	১
২৬।	অ্যালবেনডাজোল বড়ি যে অসুখে দেয়	ডায়ারিয়া / এ.আর.আই. / কৃমি	১
২৭।	গর্ভনিরোধক বড়ি মাসিকের কোন দিন থেকে খাওয়া আবশ্যিক	৪র্থ / ৫ম / ৬ষ্ঠ দিন	১
২৮।	ভাসেকটমির পরে পুরুষের কর্মক্ষমতা ও যৌনক্ষমতা	হ্রাস পায় / হ্রাস পায় না / খানিকটা হ্রাস পায়	১
২৯।	পালস্ পোলিও দেবার জন্য বাচ্চার বয়স হতে হবে	৩ / ৫ / ৭ বছর পর্যন্ত	১
৩০।	কোনো এক জায়গায় নির্দিষ্ট বছরে ২ জন মহিলা মারা গেছেন হার্টের রোগে, ১ জন মহিলা যক্ষা রোগে, ১ জন গর্ভবতী মহিলা প্রসবকালে, ১ জন মহিলা আগুনে পুড়ে ও ১ জন প্রসূতি মা মারা গেছেন প্রসবের ৪২ দিনের মধ্যে রক্ত্র প্রাবের কারণে। এ নির্দিষ্ট বছরে মোট জীবিত শিশুর জন্মসংখ্যা ৫০০ হলে মাতৃ মৃত্যুর হার কত ?		৪
	মোট		৪০

স্বাস্থ্য কর্মীর নাম ও স্বাক্ষর :

তারিখ :

১১। পোলিও রোগ প্রতিরোধে ও.আর.এস. অন্যতম

হ্যাঁ না

১২। ডায়ারিয়া হলে ~~খাদ্য এবং পানীয়~~ একাবারে বন্ধ করা উচিত

হ্যাঁ না

১৩। জনগণনা কত বছর অন্তর হয়

১	৫	১০
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১৪। পৃথিবী থেকে যে রোগ নির্মূল করা সম্ভব হয়েছে

ম্যালেরিয়া	পোলিও	গুটি বসন্ত
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১৫। মায়ের প্রথম দুধ (হলুদ রঙের) ফেলে দিয়ে

হ্যাঁ না

তারপর বাচ্চাকে খাওয়ানো উচিত

১৬। গর্ভবতী মায়ের টিটেনাস ইনজেকশন দিলে

হ্যাঁ না

~~কেবলমাত্র~~ নবজাত শিশুদের ^{এবং মায়ের} শনুষ্কার হয় না

২	২	৬
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১৭। গর্ভবতী ও প্রসূতি মায়ের বেশি খাদ্যের প্রয়োজন

হ্যাঁ না

১৮। প্রত্যেক শিশুদের উল্লিখিত ভ্যাকসিন (টিকা) নেওয়া উচিত

বি.সি.জি.	ডি.পি.টি.	পোলিও
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হাম	কোনটাই না	সবগুলিই
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১৯। ~~সকল~~ প্রকার কুষ্ঠ রোগই ছোঁরাচে

হ্যাঁ না

২০। শিশুকে নরম ও শক্ত আহাার অভ্যাস করানোর উপযুক্ত সময়

৭ মাস	৬ মাস	৪ মাস
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২১। ~~ম্যালেরিয়া~~ ^{মাঝে SD ফোমক} ছোঁরাচে রোগ

হ্যাঁ না

২২। বন্ধাত্বকরণ অপারেশন একটি সাময়িক জন্মনিয়ন্ত্রণ পদ্ধতি

হ্যাঁ না

২৩। জন সংযোগের (স্বাস্থ্য সম্পর্কীয়) অন্যতম লক্ষ্য স্বাস্থ্য চেতনা

হ্যাঁ না

পরবর্তী পৃষ্ঠায়

২৪। ভিটামিন এ - র অভাবে কি রোগ হয় ?

টি.বি.	লেপ্‌সি
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রাতকানা	ডিপথেরিয়া
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২৫। কুকুরের কামড়ে এডস্ রোগ হয়

হ্যাঁ না

২৬। ~~দম্পতির কয়টি বাচ্চা হওয়া বাঞ্ছনীয়~~ ^{২৩ এডস্ রোগ} ^{২৪ ভিটামিন} ^{২৫ কুকুরের কামড়ে} ^{২৬ দম্পতির কয়টি বাচ্চা হওয়া বাঞ্ছনীয়} ^{২৭ অমর্ত্য সেন নোবেল পুরস্কার পেয়েছেন} ^{২৮ জাতীয় সংগীতের রচয়িতা} ^{২৯ পালস্ পোলিও কর্মসূচী পাঁচ বছর পর্যন্ত প্রত্যেক} ^{৩০ নবজাত শিশুর শ্রেষ্ঠ খাদ্য}

২৩ এডস্ রোগ / ২৪ ভিটামিন / ২৫ কুকুরের কামড়ে / ২৬ দম্পতির কয়টি বাচ্চা হওয়া বাঞ্ছনীয়

২৭। অমর্ত্য সেন নোবেল পুরস্কার পেয়েছেন

সাহিত্যে	বিজ্ঞানে	জনহিতকর
২-২	২-৩	অর্থনীতিতে
২৪০	২৪০	৩-৪০২০

২৮। জাতীয় সংগীতের রচয়িতা

বক্রিমচন্দ্র চট্টোপাধ্যায়	রবীন্দ্রনাথ ঠাকুর
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কাজী নজরুল ইসলাম

২৯। পালস্ পোলিও কর্মসূচী পাঁচ বছর পর্যন্ত প্রত্যেক শিশুরই পোলিও ভ্যাকসিন নেওয়া উচিত

হ্যাঁ না

৩০। নবজাত শিশুর শ্রেষ্ঠ খাদ্য

গরুর দুধ	মায়ের দুধ
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ছাগলের দুধ	কৌটোর দুধ
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..... পৌরসভা

স্বাস্থ্যকর্মীর নাম

..... তারিখ

..... পৌরসভা

প্রথম সারির পরিদর্শিকার 'প্রশিক্ষণোত্তর মূল্যায়ণ'

সময় : ২৫ মিনিট

মোট নম্বর : ৩০

ক্রমিক সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (✓) দিন ও যথাযথ জায়গায় উত্তর লিখুন	প্রশ্নের মান
১।	এক গর্ভবতী মহিলার শেষ মাসিকের প্রথম দিনের তারিখ কিভাবে ৩০শে জানুয়ারী, ২০০৫ সাল হলে, তার প্রসবের সম্ভাব্য তারিখ লিখুন।		১
২।	প্রধান চারটি কি কি পরিষেবা সাব-সেন্টার থেকে দেওয়া হয় ?		৪
৩।	তিন বার এ.এন.সি. চেক আপে বাঙ্কনীয় সময় সূচী কি ?		৩
৪।	একটি সুস্থ শিশুর জন্ম ওজন ১ বছরে স্বাভাবিক ভাবে কতটা বৃদ্ধি পাবে ?	২ গুন / ৩ গুন / ৪ গুন	১
৫।	কোন ভিটামিন সূর্যের আলোতে চামড়ার নীচে তৈরি হয় ?		১
৬।	বাচ্চাদের কোন বয়স থেকে কত বয়স পর্যন্ত ভিটামিন এ তেল খাওয়ানো হয় ? মোট কতগুলি ডোজ ?		২
৭।	মিজিল্‌স ও বিসিজি টীকা গোলার পর কতক্ষণ পর্যন্ত ব্যবহার করা যায় ?		১
৮।	খাদ্যে প্রোটিনের ঘাটতির জন্যে শিশুর যে অপুষ্টিজনিত রোগটি হয় তার নাম কি ?		১
৯।	শিশুর সর্দি কাশি হলে কোন তিনটি বিপদের লক্ষণ লক্ষ্য রাখতে হবে ?		২

পরবর্তী পৃষ্ঠায় দেখুন

ক্রমিক সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (✓) দিন ও যথাযথ জায়গায় উত্তর লিখুন	প্রশ্নের মান
১০।	বিসিজি টীকা দেওয়া হয় ?	চামড়ার মধ্যে / চামড়ার তলায় / মাংস পেশীর মধ্যে	১
১১।	কপার টি কাকে দেবেন না ?		১
১২।	প্রসবোত্তর সময়ে প্রসূতি মায়ের বিপদ সংকেত কি কি ?		২
১৩।	যক্ষা রোগের লক্ষণ কি কি ?		২
১৪।	এইডস রোগের ক্ষেত্রে ঝুঁকি সম্পন্ন জীবনযাপন করী কারা ?		২
১৫।	কোনো এক জায়গায় নির্দিষ্ট বছরে ২ জন মহিলা হার্টের রোগে মারা গেছেন, ১ জন মহিলা যক্ষ্মা রোগে, ১ জন গর্ভবতী মহিলা প্রসবকালে, ১ জন মহিলা আগুনে পুড়ে ও ১ জন প্রসূতি মা প্রসবের ৪২ দিনের মধ্যে রক্তপ্রাবের কারণে। ঐ নির্দিষ্ট বছরে মোট জীবিত শিশুর জনসংখ্যা ৫০০ হলে মাতৃ মৃত্যুর হার কত ?		৩
১৬।	কোনো এলাকায় ২০০ জন প্রজননশীল দম্পতির মধ্যে নির্দিষ্ট বছরে ২৫ জন মহিলা লাইগেশন করিয়েছেন, ৫ জন পুরুষ ভ্যাসেক্টোমি করিয়েছেন, ১২ জন মহিলা ওরাল পিল খান, ৮ জন পুরুষ নিয়মিত কন্ডোম ব্যবহার করেন - এক্ষেত্রে প্রজননশীল দম্পতির সুরক্ষা হার কত ?		৩
	মোট		৩০

প্রথম সারির পরিদর্শিকার নাম :

এস. সি. নং :

তারিখ :

প্রথম সারির পরিদর্শিকা নির্বাচনের প্রশ্নপত্র

সময় : ৩০ মিনিট

মোট নম্বর : ২৫

ক্রমিক সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (✓) দিন ও যথাযথ জায়গায় উত্তর লিখুন	প্রশ্নের মান
১।	ভিটামিন এ -র দুটি উৎসের নাম লিখুন।		২
২।	রক্তে হিমোগ্লোবিনের মাত্রা কম হলে যে অসুখ হয়	ক্যানসার / অ্যানিমিয়া / জলাতর / একজিমা	১
৩।	পোলিও রোগের জীবাণু সংক্রামিত হয়	বাতাসের মাধ্যমে / মল ও জলের মাধ্যমে / খুতুর মাধ্যমে	১
৪।	গর্ভবতী মায়ের দুটি বিপদ সংকেত লিখুন।		২
৫।	এক গর্ভবতী মহিলার শেষ মাসিকের প্রথম দিনের তারিখ বিগত ৭ই জানুয়ারী, ২০০৫ সাল হলে, তার প্রসবের সম্ভাব্য তারিখ লিখুন।		১
৬।	প্রসবের সময় যে কোনো দুটি বিপদ সংকেত লিখুন।		২
৭।	জন্ম ওজন কত কেজির নীচে হলে তাকে কম ওজনের নবজাতক বলা হয়		১
৮।	একটি সুস্থ শিশুর জন্ম ওজন ৬ মাসে স্বাভাবিক বৃদ্ধি পাবে	দেড়গুন / দুইগুন / আড়াইগুন	১
৯।	৯ - ১২ মাস বয়সে শিশুকে কি কি প্রতিষেধক টীকা ও প্রতিরোধক ভিটামিন দেওয়া হয়		২
১০।	বি.সি.জি. টীকা দেওয়া হয়	চামড়ার মধ্যে / চামড়ার তলায় / মাংস পেশির মধ্যে	১
১১।	দুই মাসের একটি বাচ্চা আছে এমন প্রজননশীল দম্পতিকে কোন্ পরিবার পরিকল্পনা পদ্ধতি গ্রহণের জন্য উপদেশ দেন।		১

পরবর্তী পৃষ্ঠায় দেখুন

ক্রমিক সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (✓) দিন ও যথাযথ জায়গায় উত্তর লিখুন	প্রশ্নের মান
১২।	এক প্যাকেট ও.আর.এস. পাউডার কত পরিমাণ জলে গুলতে হয় এবং গোলার পর কতক্ষণ পর্যন্ত এই পানীয় ব্যবহার করা যায় ?		২
১৩।	এইচ.আই.ভি. সংক্রমণ কি কি ভাবে হয় ?		৩
১৪।	৫ বছরের বাচ্চার কৃমি হলে কি ঔষুধ, কি পরিমাণে দেওয়া যেতে পারে ?		২
১৫।	কোনো এক এলাকায় গত এক বছরে জীবিত শিশুর জন্ম সংখ্যা ৪০০, এক বছরের নীচে শিশুর মৃত্যুর সংখ্যা ২ এবং দুই থেকে পাঁচ বছরের বাচ্চার মৃত্যু সংখ্যা ৩ হলে, ঐ নির্দিষ্ট বছরে ঐ এলাকায় শিশু মৃত্যুর হার কত ?		২
১৬।	হোম ভিজিট করার পরে পরিবার ভিত্তিক যে তথ্য সংগ্রহ করবেন তা কোথায় লিখে রাখবেন ?		১
	মোট		২৫

স্বাস্থ্য কর্মীর নাম :

ওয়ার্ড নং :

সাব-সেন্টার নং :

তারিখ :

সি.বি.পি.এইচ.সি. প্রোগ্রাম

..... পৌরসভা

প্রথম সারির পরিদর্শিকা নির্বাচনের প্রশ্নপত্র

সময় : ৩০ মিনিট

মোট নম্বর : ২৫

ক্রমিক সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (√) দিন ও যথাযথ জায়গায় উত্তর লিখুন	প্রশ্নের মান
১।	ভিটামিন এ -র দুটি উৎসের নাম লিখুন।	- -	২
২।	খাদ্যের তিনটি মূল উপাদানগুলি কি কি	• • •	৩
৩।	রক্তে হিমোগ্লোবিনের মাত্রা কম হলে যে অসুখ হয়	ক্যানসার / অ্যানিমিয়া / জলাতঙ্ক / একজিমা	১
৪।	পোলিও রোগের জীবাণু সংক্রামিত হয়	বাতাসের মাধ্যমে / মল ও জলের মাধ্যমে / খুতুর মাধ্যমে	১
৫।	গর্ভবতী মায়ের দুটি বিপদ সংকেত লিখুন।	- -	২
৬।	এক গর্ভবতী মহিলার শেষ মাসিকের প্রথম দিনের তারিখ বিগত ৭ই জানুয়ারী, ২০১১ সাল হলে, তার প্রসবের সম্ভাব্য তারিখ লিখুন।		১
৭।	কোন ভিটামিন সূর্যের আলোতে চামড়ার নীচে তৈরি হয় ?		১
৮।	জন্ম ওজন কত কেজির নীচে হলে তাকে কম ওজনের নবজাতক বলা হয়		১
৯।	একটি সুস্থ শিশুর জন্ম ওজন ৬ মাসে স্বাভাবিক বৃদ্ধি পাবে	দেড়গুণ / দুইগুণ / আড়াইগুণ	১
১০।	৯ - ১২ মাস বয়সে শিশুকে কি কি প্রতিষেধক টীকা ও প্রতিরোধক ভিটামিন দেওয়া হয়		২

পরবর্তী পৃষ্ঠায় দেখুন

ক্রমিক সংখ্যা	প্রশ্ন	সঠিক উত্তরে টিক (√) দিন ও যথাযথ জায়গায় উত্তর লিখুন	প্রশ্নের মান
১১।	মিজিলস টীকা দেওয়া হয়	চামড়ার মধ্যে / চামড়ার তলায় / মাংস পেশির মধ্যে	১
১২।	গর্ভনিরোধক বড়ি মাসিকের কোন দিন থেকে খাওয়া আবশ্যিক	৪র্থ / ৫ম / ৬ষ্ঠ দিন	১
১৩।	এক প্যাকেট ও.আর.এস. পাউডার কত পরিমাণ জলে গুলতে হয় এবং গোলার পর কতক্ষণ পর্যন্ত এই পানীয় ব্যবহার করা যায় ?		২
১৪।	এইডস্ রোগ সংক্রমণ হয়	মশার কামড়ে / যৌন সংসর্গে / খাদ্য ও পানীয় জলের মাধ্যমে	১
১৫।	৫ বছরের বাচ্চার কৃমি হলে কি ওষুধ, কি পরিমাণে দেওয়া যেতে পারে ?		২
১৬।	কোনো এক এলাকায় গত এক বছরে জীবিত শিশুর জন্ম সংখ্যা ৪০০, এক বছরের নিচে শিশুর মৃত্যুর সংখ্যা ২ এবং দুই থেকে পাঁচ বছরের বাচ্চার মৃত্যু সংখ্যা ৩ হলে, ঐ নির্দিষ্ট বছরে ঐ এলাকায় শিশু মৃত্যুর হার কত ?		২
১৭।	হোম ভিজিট করার পরে পরিবার ভিত্তিক যে তথ্য সংগ্রহ করবেন তা কোথায় লিখে রাখবেন ?		১
	মোট		২৫

স্বাস্থ্য কর্মীর নাম :

ওয়ার্ড নং :

তারিখ :

**के. यु. एस. पी- हेल्थ कम्पोनेन्टको
डी. एफ. आई. डी.-को सहयोगमा
दार्जीलिङ नगरपालिका**

PRE TRAINING/ POST TRAINING QUESTION PAPER

समय : १५ मिनट

मोठ नम्बर : २५

क्रम संख्या	प्रश्न	सही उत्तरमा टिक (✓) दिनहवस् र उत्तर लेखनुहोस्	प्रश्नको मान
१.	Vitamin A को एउटा प्राणीज र एउटा उद्भिद् स्रोतको नाम लेख्नुहवस्।		२
२.	एउटा स्वास्थ्य शिशुको जन्म ओजन ६ महीनामा स्वाभाविक वृद्धि पाउँछ।	डेङ गुणा/ दुई गुणा/ अढाई गुणा	१
३.	“उडिङ फुड” केलाई भनिन्छ?		२
४.	नानीहरूको 'Spring Balance' ओजन लिँदा कुन कुन कुरालाई सावधानीसँग हेर्नुपर्छ?		४
५.	पौष्टिकताका उपकरणहरू के के हुन्?		६
६.	कुनै पनि शिशुको ओजनको गतिरेखा Grade - 4 मा भए उनीहरूको निम्ति कुन व्यवस्था अप्नाउनु पर्छ?		३
७.	रगतमा Hemoglobin को मात्रा कम हुँदा कुन रोग हुने गर्छ?		२
८.	अपौष्टिकताका कारणहरू के के हुन्?		५

स्वास्थ्य कर्मीको नाम :

एच.ए.यू. संख्या:

दिनांक :.....

**के. यु. एस. पी- हेल्थ कम्पोनेन्टको
डी. एफ. आई.-को सहयोगमा
दार्जीलिङ नगरपालिका**

प्रजनन औ शिशु एवं परिवार योजना

समय : ४० मिनट

मोठ नम्बर : २६

क्रम संख्या	प्रश्न	सटीक उत्तरमा टिक (✓) दिनहवस् र उत्तर लेखनुहवस्	प्रश्नको मान
१.	कुनै गर्भवती स्त्रीको अन्तिम मासिकको पहिलो दिनको तारीख यदि पहिलो जनवरी २००५ साल भए,उसको प्रसवको सम्भवना तारीख लेखनुहवस्।		१
२.	तीनपल्ट ए. एन. सी. चेक-अपको अनिवार्य समय सूची कुन कुन हुन्?		३
३.	गर्भवती आमाको दुईवटा विपद् संकेत लेख्नुहोस्।		२
४.	पूर्ण, गर्भवस्यामा एक स्वाभाविक आमाको ओजन कतिसम्म बढ्न सक्छ?		१
५.	प्रसव भएपछि कति दिनसम्मलाई प्रसुतिकाल भनिन्छ?	६ हप्ता/ ६ महीना/ ८ हप्ता	१
६.	टीककरण कार्यक्रमको कुन विशेष दुई विषयमा ध्यान दिन जरूरी छ?	आमालाई जनाउनु/ कोल्ट चेइन बचाई राख्नु/ पिढाको औषधी दिनु/ टिका दिनको लागि सूई जीवाणु मुक्त गर्नु।	२
७.	९-१२ महिना उमेरमा शिशुलाई कुन कुन टीका दिइन्छ?		२
८.	कोल्ट चेइन कसलाई भनिन्छ?		२

पछिल्लो पृष्ठमा हेर्नुहोस्

क्रम संख्या	प्रश्न	सहीक उत्तरमा टिक (✓) दिनहवस् र उत्तर लेखनुहवस्	प्रश्नको मान
९.	काँचको सूई र यस्ता प्रकारका सामग्रीहरू कम से कम कति समयम्म उमाली जिवाणु मुक्त भयो भन्न सकिन्छ?	१५ मिनट/ २० मिनट/ २५ मिनट	१
१०.	बी.सी.जी.को टीका कहाँ लगाइन्छ?	छाला भित्र/ छाला मुनि/ मांसपेशी भित्र	१
११.	डायरिया भएको रोगीको कुन, कुन दुइवटा विपद लक्षण देखे अर्को स्थानमा पठाउने व्यवस्था गर्नुपर्छ?		२
१२.	सर्दी, खोकी भएको खण्डमा शिशुको विशेष कुन तीनवटा विपद लक्षणहरू याद राख्नु पर्छ?		२
१३.	क्षय रोग कसरी सर्छ?		२
१४.	दुई महिनाको एउटा नानी अघिबाटै छ यस्ता प्रजननीय दम्पतिलाई कुन परिवार योजना पद्धति अपनाउनु सल्लाह दिनुहुन्छ?		१
१५.	गर्भपात (एम.टि.पि.) कतिदिन भित्र गराउनु उचित हुन्छ?		१
१६.	गर्भ निरोधको गोली खुवाउने तरीका के हो?		२

स्वास्थ्य कर्मीको नाम :

एच.ए.यू. संख्या:

दिनांक :.....

**के. यु. एस. पी- हेल्थ कम्पोनेन्टको
डी. एफ. आई. डी.-को सहयोगमा
दार्जीलिङ नगरपालिका**

PRE TRAINING/ POST TRAINING QUESTION PAPER

समय : १५ मिनट

मोठ नम्बर : २५

क्रम संख्या	प्रश्न	सठीक उत्तरमा टिक (✓) दिनहवस् र उत्तर लेखनुहोस्	प्रश्नको मान
१.	Vitamin A को एउटा प्राणीज र एउटा उद्भिद् स्रोतको नाम लेख्नुहवस्।		२
२.	एउटा स्वास्थ्य शिशुको जन्म ओजन ६ महीनामा स्वाभाविक वृद्धि पाउँछ।	डेङ गुणा/ दुई गुणा/ अढाई गुणा	१
३.	“उडिनिङ फुड” केलाई भनिन्छ?		२
४.	नानीहरूको 'Spring Balance' ओजन लिँदा कुन कुन कुरालाई सावधानीसँग हेर्नुपर्छ?		४
५.	पौष्टिकताका उपकारणहरू के के हुन्?		६
६.	कुनै पनि शिशुको ओजनको गतिरेखा Grade - 4 मा भए उनीहरूको निम्ति कुन व्यवस्था अप्नाउनु पर्छ?		३
७.	रगतमा Hemoglobin को मात्रा कम हुँदा कुन रोग हुने गर्छ?		२
८.	अपौष्टिकताका कारणहरू के के हुन्?		५

स्वास्थ्य कर्मीको नाम :

एडच.ए.यू. संख्या:

दिनांक :.....

**के. यु. एस. पी- हेल्थ कम्पोनेन्टको
डी. एफ. आई.-को सहयोगमा
दार्जीलिङ नगरपालिका**

प्रजनन औ शिशु एवं परिवार योजना

समय : ४० मिनट

मोठ नम्बर : २६

क्रम संख्या	प्रश्न	सठीक उत्तरमा टिक (✓) दिनहवस् र उत्तर लेखनुहवस्	प्रश्नको मान
१.	कुनै गर्भवती स्त्रीको अन्तिम मासिकको पहिलो दिनको तारीख यदि पहिलो जनवरी २००५ साल भए,उसको प्रसवको सम्भवना तारीख लेखनुहवस्।		१
२.	तीनपल्ट ए. एन. सी. चेक-अपको अनिवार्य समय सूची कुन कुन हुन्?		३
३.	गर्भवती आमाको दुईवटा विपद् संकेत लेखनुहोस्।		२
४.	पूर्ण, गर्भवस्यामा एक स्वाभाविक आमाको ओजन कतिसम्म बढ्न सक्छ?		१
५.	प्रसव भएपछि कति दिनसम्मलाई प्रसुतिकाल भनिन्छ?	६ हप्ता/ ६ महीना/ ८ हप्ता	१
६.	टीककरण कार्यक्रमको कुन विशेष दुई विषयमा ध्यान दिन जरूरी छ?	आमालाई जनाउनु/ कोल्ट चेइन बचाई राख्नु/ पिढाको औषधी दिनु/ टिका दिनको लागि सूई जीवाणु मुक्त गर्नु।	२
७.	९-१२ महिना उमेरमा शिशुलाई कुन कुन टीका दिइन्छ?		२
८.	कोल्ट चेइन कसलाई भनिन्छ?		२

पछिल्लो पृष्ठमा हेर्नुहोस्

क्रम संख्या	प्रश्न	सटीक उत्तरमा टिक (✓) दिनहवस् र उत्तर लेखनुहवस्	प्रश्नको मान
९.	काँचको सूई र यस्ता प्रकारका सामग्रीहरू कम से कम कति समयम्म उमाली जिवाणु मुक्त भयो भन्न सकिन्छ?	१५ मिनट/ २० मिनट/ २५ मिनट	१
१०.	बी.सी.जी.को टीका कहाँ लगाइन्छ?	छाला भित्र/ छाला मुनि/ मांसपेशी भित्र	१
११.	डायरिया भएको रोगीको कुन, कुन दुइवटा विपद लक्षण देखे अर्को स्थानमा पठाउने व्यवस्था गर्नुपर्छ?		२
१२.	सर्दी, खोकी भएको खण्डमा शिशुको विशेष कुन तीनवटा विपद लक्षणहरू याद राख्नु पर्छ?		२
१३.	क्षय रोग कसरी सछ?		२
१४.	दुई महिनाको एउटा नानी अघिबाटै छ यस्ता प्रजननीय दम्पतिलाई कुन परिवार योजना पद्धति अपनाउनु सल्लाह दिनुहुन्छ?		१
१५.	गर्भपात (एम.टि.पि.) कतिदिन भित्र गराउनु उचित हुन्छ?		१
१६.	गर्भ निरोधको गोली खुवाउने तरीका के हो?		२

स्वास्थ्य कर्मको नाम :

एच.ए.यू. संख्या:

दिनांक :

COMMUNITY BASED PRIMARY HEALTH CARE SERVICES
AN OUTLINE FOR TRAINERS
REGARDING
TRAINING OF HONORARY HEALTH WORKER

AT MUNICIPALITY

TIME : 11 A.M. to 1 P.M. & 2 P.M. to 4 P.M.

VENUE :

COURSE CO-ORDINATOR :

OF THE MUNICIPALITY

Session	SUBJECTS FOR DISCUSSION	SPEAKERS / RESOURCE PERSONS
1.	Registration and inauguration, pre-training evaluation.	
2.	Pre-training examination and evaluation.	
3 & 4.	General introduction to Community Based Primary Health Care Services in 63 Non-KMA ULBs, Aim of the project. Organisational set up. Service strategy - community drafted female HHWs to pay home visit twice in a month, to provide basic curative care for minor ailments at the door step of the beneficiaries & to promote uptake of preventive, promotive and family planning services at local health facilities through interpersonal communication, HHW is the first contact point between the community and the existing health facilities, HHW to act as depot holder for distribution of Oral Pill, Condom, ORS, IFA tablets etc. The HHW is to be supervised by First Tier Supervisor. Services from Sub-Centre. Referral services to the existing Govt. health facilities. Responsibility of HHW.	
5 & 6.	What is Nutrition ? Nutritious food and its importance ? Classification of food - Protein, fat, carbohydrate, Vitamins, Minerals - Local sources of each of them, importance, deficiency diseases, What is Balance Diet ? Causes of malnutrition. Faulty practices. Diseases due to malnutrition. Awareness on nutrition - right method of cutting and cooking.	
7 & 8.	Conditions in which more Nutrition is required. Effect of proper nutrition on pregnant women to offspring. Benefit of breast milk, emphasis on colostrum, weaning food. What is Anaemia ? Symptoms. National Anaemia control programme for mothers and children.	
9 & 10.	Definition of Health, explanation on preventive, promotive and curative health with example.	
11 & 12.	Definition of communicable and contagious diseases with example. Description of different transmission factors.	

Session	SUBJECTS FOR DISCUSSION	SPEAKERS / RESOURCE PERSONS
13.	What is hygiene ? Personal Hygiene - Daily bath, care of tooth, hair, eye, nail cutting, hand washing with soap before food handling and after toilet, spitting, cleanliness of cloths, bed linen, napkins - Diseases caused by each of the faulty habit and preventive measures. Home waste disposal. How environment can be made less pollutant - role of individual, family and community.	
14.	What is Adolescence ? Physical and psychological changes during adolescent period, Importance of health awareness - Danger of early marriage, teenage pregnancy, iron deficiency anemia, complications in adolescence pregnancy and delivery. Minimum age of marriage and child birth.	
15.	Maternal care - Symptoms of pregnancy. Ante-natal Care - early registration of all pregnancies by 12 weeks, importance of early registration, LMP, EDD, at least 3 ante-natal check ups, components of check ups, increase in body weight of pregnant woman, Do's during pregnancy, Immunisation against Tetanus, Danger signals during pregnancy. High risk mother.	
16.	High risk pregnancy - General factors - Maternal age below 18 yrs. and above 35 yrs. specially in case of First Pregnancy, short stature less than 140 cms. height, parity more than 4, less than 38 kg. body weight, previous history of abortion/ pre-term delivery/any complication / difficult labour , still birth, any medical disorders. Complication during pregnancy like, bleeding, severe Anaemia, high BP, multiple pregnancies, pre-term labour etc.	
17.	Maternal care - symptoms of labour, intranatal care - promotion of institutional delivery, danger signals during labour. Post natal care - Post natal period, Care of new born and mother, danger signals during post natal period. Referral system - When to refer ? Where to refer?	
18.	Revision on Maternal Care.	
19.	Child care - Essential new born care - Delivery at Health Facility, adequate cloth covering, early breast feeding, avoid bathing till cord falls off. High risk neonates - Weight less than 2.5 kg. (LBW), twin / multiple babies, baby born by forceps, baby lost mother after birth, baby whose previous siblings died in infancy or early childhood, acute illness, congenital anomaly, repeated child birth of mother, baby not getting mother's milk, baby of mentally ill mother. Referral system.	
20.	Child care - breast feeding - advantage of breast feeding, exclusive breast feedings upto 6 months, beneficial effect of colostrum, proper weaning, mode and food items at weaning, Vitamin A prophylaxis. Child IFA.	
21.	Growth monitoring chart, Developmental mile stones.	
22.	Revision on Child Care.	

Session	SUBJECTS FOR DISCUSSION	SPEAKERS / RESOURCE PERSONS
23.	Vaccine preventable diseases - What are the Vaccines available under Routine Immunisation ? Prevention from six vaccine preventable diseases. T.B. and Polio - Agent, host, environmental factors, mode of spread, general symptoms, prevention.	
24.	Diphtheria and Whooping Cough - Agent, host, environmental factors, mode of spread, general symptoms, prevention.	
25.	Tetanus and Measles - Agent, host, environmental factors, mode of spread, general symptoms, prevention.	
26 & 27.	Routine Immunisation - Schedule, dosage, diluents etc., target Disinfection of syringes & needles, conduction of immunisation session, follow up, precaution during immunisation, immunisation card, complete immunisation.	
28.	Cold chain system - for storage, distribution at Sub-Centre Level. Vaccine carrier / Day carrier / Ice pack.	
29.	Family Planning Programme - Introduction, eligible couple, importance of Family Planning. Small family norm - Spacing, hazards of too frequent child - birth, different contraceptive and birth control measures suitable for (a) newly married couple, (b) mother of one child and (c) mother of two or more living children. Causes of increased birth rate.	
30.	FP Methods - Choice of contraception, spacing methods - Oral Pill, IUD, Condom and permanent methods - Ligation, Vasectomy - mode of action, clientele, complication, contraindications. MTP. Role of HHW.	
31.	ARI - Mode of infection & its transmission, management of mild cases in domestic level; identification of serious cases by HHW & mothers (for immediate medical help) on all or any of the signs e.g. hurried resp. rate, indrawing of chest muscles, and / or stridor / wheezing / rumbling sound & inability to suck breast / swallow - preventive & control measures. Why it is important ?	
32.	Role of HHWs - Strategies - Train mothers to recognise danger signals for immediate medical care / improve maternal knowledge about home management of cough & cold / promote immunisation, including measles, breast feeding, weaning & Vit. A. prophylaxis.	
33.	Diarrhoea - Definition, Recognition of Danger Signs for immediate Medical Care - Repeated purging & vomiting, inability to drink / swallow, blood in stool, semiconscious, hurried respiration, diarrhoea within 6 weeks of measles. Signs of dehydration - sunken eyes, dry tongue, anuria, tears absent, decreased skin turgor and increased thirst.	

Session	SUBJECTS FOR DISCUSSION	SPEAKERS / RESOURCE PERSONS
34.	Video Show, Group work on important messages, preparation of chart and presentation.	
35.	<p>Reproductive Tract Infection :- Identification - Discharge per vagina, may be white or purulent or mixed with blood , soreness , itching, swelling, pain, tenderness or burning sensation in any part of the reproductive organs, or swelling of inguinal lymph glands or pain and tenderness in lower abdomen.</p> <p>Causes- unhygienic sex practices, bathing in dirty tank / pond, using dirty pad, not properly cleansing the part after defaecation or micturition.</p> <p>Preventive & Control measures: Hygienic practices with regard to above mentioned factors, early treatment.</p>	
36 & 37.	<p>STDs (Sexually Transmitted Diseases) - common STDs are Gonorrhoea and Syphilis.(a) Syphilis - Soreness in or around the external genitalia. (b) Gonorrhoea- discharge per vagina</p> <p>Mode of transmission - by sexual act with an infected person</p> <p>Prevention & Control - avoid sexual act with persons of unknown character. Use of condom, early treatment</p> <p>HIV infection - This infection damages the natural immune mechanism of the infected person who gradually become less resistant and more susceptible to various infections.</p> <p>Common signs and symptoms - suffering repeatedly from one or more of the following i.e cold & cough, diarrhoea, skin infection, eye infection , infection of oral cavity , painful swelling of the lymph glands , loss of body weight, fever etc.</p> <p>Mode of transmission- sex with infected person, use of not properly sterilised medical or dental instruments, contaminated blood transfusion or use of blood products, infected mother to foetus, mother's milk</p> <p>Prevention & control : Avoid sex with any person of unknown characters, use of properly sterilised instruments , use of condom , awareness generation of the people</p>	
38.	<p>RNTCP - About 1% of the population of India are suffering from T.B. Total no. of sufferers are about 1 Crore, every year there are about 5 lakhs new cases and 5 lakhs death.</p> <p>Identification - Any person showing one or more of the following symptoms should be referred :- (a) fever for more than 3 weeks (b) cough for more than 3 weeks, (c) blood with sputum.</p> <p>These persons should be immediately linked with chest clinic of a Govt. Hospital, where diagnosis and full treatment is done free of cost. At present, DOTS (Direct Observation Treatment - Short course) is done with multi-drugs which gives high cure rate. All infants are given BCG vaccine under that Routine Immunisation programmes.</p>	

Session	SUBJECTS FOR DISCUSSION	SPEAKERS / RESOURCE PERSONS
39.	<p>NLEP- Case detection – (a) Lepromatous cases - facial disfigurement , depressed nose, Irregular skin thickening , oily skin with reddish patches at places , may be congestion of eyes, soreness and shortening of fingers and toes.</p> <p>(b) Non lepromatous cases - (1) Hypopigmented and anaesthetic patches on the skin, or, (2) Polyneuritic superficial nerves i.e greater auricular / popliteal / ulnar nerves are thickened , or , (3) Tuberculoid type nodules scattered on the skin all over the body .</p> <p>Referral to the Govt. Hospitals.</p> <p>Awareness - stress on - Leprosy is a very mild infectious disease, cure rate is very high, diagnosis and full treatment is done free of cost at all hospitals.</p>	
40.	<p>NBCP- India has the largest blind population. Under NBCP : Vitamin A prophylaxis for under 3 years children, organisation of cataract operation camps in outreach areas, publicity for motivation of people for donation of eyes, extending specialist services in rural hospitals. Free treatment of eye diseases in hospitals.</p>	
41.	<p>NMCP- As malaria case are increasing , any fever cases unless otherwise diagnosed, blood slide should be examined and presumptive treatment with chloroquin be started.</p> <p>The salient feature of the programme are :- all fever cases should be early diagnosed and promptly treated , prevention of mosquito breeding by not allowing water to remain stagnant in small or large quantity for more than a week, Malaria is transmitted by female anopheles mosquito, which breeds in clear water, protection from mosquito bites by use of mosquito net or use of repellent cream.</p> <p>Diagnosis and treatment are free of cost in Govt. Health facilities.</p>	
42.	<p>NFCP- The line of preventive measures are similar as in case of NMCP. Filaria is transmitted by culex mosquitoes which breed in dirty water,; prevent mosquito breeding and protect from mosquito bites; early case detection and prompt treatment.</p>	
43.	<p>HIV infection - First case was found in USA in 1982, and in India in 1986. It is rapidly increasing.</p> <p>Salient feature of this programme are as follows :- awareness generation in public about its transmission and prevention , promotion of use of condom among the high risk groups, control measures imposed on Blood Bank, involvement of NGOs in awareness generation and condom distribution programme among the commercial sex workers, research for development of vaccine and curative medicine. Adequate nutrition, hygienic practices and early treatment of diseases can prolong life of the HIV infected persons.</p>	

Session	SUBJECTS FOR DISCUSSION	SPEAKERS / RESOURCE PERSONS
44.	<p>National IDD Control Programme- Iodine deficiency is prevalent in sub-Himalayan and sub -Vindhya region . It is also prevailing in sub acute form all over India. Natural sources of iodine are food & water; rich source is sea food, both animal and vegetable. Some food items such as, cabbage, mustard or rye leaves etc. are known as goitreogenic food.</p> <p>Iodine takes part in (1) synthesis of thyroid hormone and (2) development of brain.</p> <p>Endemic goitre may present manifestations like lethargy, obesity, pain in joints and muscles, hoarseness of voice etc. In female, there may be birth of handicapped baby, known as cretin baby.</p> <p>GOI has made it mandatory for production and sell of Iodised edible salt. People to be educated to buy fresh stock of Iodised Salt and store in closed container, as Iodine is volatile.</p>	
45.	<p>Pulse Polio Immunisation Programme :</p> <p>Poliomyelitis elimination is a National Health Programme of India. Under this programme, besides, routine immunisation programme additional doses of OPV are administered to all under 5 years children. This programme is held in few rounds every year. Each round is held on one fixed date all over the country. Each round continues for 4 to 5 days; on 1st day OPV is given in Vaccination booth, this is followed by subsequent 3 to 4 days home visits by health workers to detect missed children, if any. If such child is found, then on-the-spot immunisation is done.</p> <p>For this adequate publicity is done in advance. This is a multisectorial approach by involvement of General Administration of the Govt., Municipalities, Panchayati Raj, NGOs, Voluntary organisations and if necessary religious establishments for making it successful.</p> <p>Our target is elimination of Polio from India by 2005.</p> <p>What is VVM ?</p>	
46.	Revision on National Health Programmes.	

Session	SUBJECTS FOR DISCUSSION	SPEAKERS / RESOURCE PERSONS
47 - 49.	<p>Minor Ailments : (Fever, Pain, Pain in abdomen, ARI, Diarrhoea, Intestinal Worms Infestation, Acute conjunctivitis, Scabies)</p> <p>General rules for all diseases -</p> <p>HHW should not treat for more than 72 hours, if there is no improvement or there is deterioration in anyway, then immediately transfer to hospital / a qualified physician. All patients must be given full bed-rest, nutritious easily digestible food e.g. breast milk for babies, or rice with easily digestible fish or vegetables. Give plenty of fluid (drinks) to every patients. Be careful about personal hygiene and environmental sanitation of the patients. Be careful about disposal of excreta of the patients. Arrange head-wash and sponging of the whole body of the patient; change his clothings and bed-sheet every day. Keep the windows open to allow ventilation and sunlight in the room. In infectious cases, keep the patient separate from others. If necessary, keep the patient covered with cotton / woolen sheets. Keep the patient happy, give him mental support to generate will-force for recovery. It is advisable to keep daily record of signs and symptoms of the cases.</p>	
50.	HHW Kit - contents and its uses	
51 & 52.	<p>First Aid and HHW role</p> <p>Cut injury , Boil, Burn, Unconsciousness, Fracture & sprain, Bites, Electric Shock.</p>	
53.	<p>Information, Education and Communication :-</p> <p>Principle : Awareness generation of the people is very important in any Health Programme.</p> <p>Material & Media are as follows -</p> <p>(a) Spoken Words - Easy local language, inter-personal communication, group discussion, etc.</p> <p>(b) Written Words - News papers, hand-bills, posters, festoons, magazines etc.</p> <p>(c) Electronic Media - slide show, cinema show, radio, TV, video cassetts.</p> <p>(d) Performing arts - drama, dance, songs, role-play.</p> <p>HHWs Role - During interpersonal communication the following must be remembered -</p> <p>(a) Language should be local & simple,</p> <p>(b) Contents should be brief but clear,</p> <p>(c) Talk should be relevant to the topic,</p> <p>(d) Participatory discussion instead of lecturing.</p>	

Session	SUBJECTS FOR DISCUSSION	SPEAKERS / RESOURCE PERSONS
54-57	Family Schedule What is Family Schedule, Importance, Filling up.	
58-60	Report and returns proforma (HIMIS) - Importance, use of statistics in community health, CBR, CDR, MMR, IMR, CPR - collection and compilation of data.	
61-62.	Baseline Survey – its importance, each question of the format be discussed thoroughly and practised amongst the trainees.	
63.	Allotment of ward-wise BPL population to HHWs.	
64.	Weighing of under 5 children and plotting in growth monitoring chart - Practical session.	
65.	IEC – communication channel be demonstrated. Interpersonal communication and group discussion be practised on health issues.	
66.	Diarrhoeal cases (Under 5 yrs. children), ORS / HAF demonstration.	
67.	Practical session on First Aid.	
68.	Practical session on dosage schedule.	
69.	MCH & FW Clinic and Post partum Unit.	
70.	Immunisation Clinic, vaccines and cold chain system.	
71.	ARI cases (Under 5 yrs. children).	
72.	Leprosy / Filaria clinic.	
73.	STD and Malaria clinic, drawing of blood slide.	
74 - 80.	Visit to field and Family Schedule filling up.	
81 - 86.	Practice on preparation of HMIS based on filled in Family Schedule and consolidation of baseline survey data.	
87 - 88.	Summarization / recapitulation on previous classes.	
89.	Post training evaluation.	
90.	Valedictory session.	

Job placement training schedule
for
FTSs under DFID assisted Honorary Health Worker Scheme

Day	11 A.M. to 1 P.M.	2 P.M. to 4 P.M.
Day - 1	<ul style="list-style-type: none"> Registration Inauguration Introduction on the scheme, objectives, target group, organizational structure Pre-valuation test 	<ul style="list-style-type: none"> Exercise on listing of jobs vis-à-vis identification of responsibilities - presentation by the participants Duties and responsibilities of FTS - detailing by the trainer
Day - 2	<ul style="list-style-type: none"> Different clinics at SHP Role of FTS in organizing clinics at SHP 	<ul style="list-style-type: none"> Reproductive health
Day - 3	<ul style="list-style-type: none"> Reproductive health (contd.) Food & Nutrition. 	<ul style="list-style-type: none"> Under-Five child health
Day - 4	<ul style="list-style-type: none"> Under-Five child health (Contd.) Growth Monitoring 	<ul style="list-style-type: none"> Immunization Cold chain
Day - 5	<ul style="list-style-type: none"> Diarrhoea Acute Respiratory Infection 	<ul style="list-style-type: none"> Family planning - importance, acceptance, methods
Day - 6	<ul style="list-style-type: none"> Exercise on filling up of Family Schedule and HMIS on RCH, Immunization, Diarrhoea, ARI & FP 	<ul style="list-style-type: none"> STD / HIV / AIDS, RNTCP, NLEP
Day - 7	<ul style="list-style-type: none"> NBCP, NMCP, NFCP 	<ul style="list-style-type: none"> IEC - principle, general & specific, materials and media
Day - 8	<ul style="list-style-type: none"> Documentation - Registers / Cards to be maintained at SHP Exercise on documentation 	<ul style="list-style-type: none"> Discussion & exercise on filling up of Family Schedule
Day - 9	<ul style="list-style-type: none"> Discussion & exercise on filling up of Family Schedule (Contd.) 	<ul style="list-style-type: none"> Discussion & exercise on filling up of Family Schedule (Contd.)
Day - 10	<ul style="list-style-type: none"> Clinic visit - Ante natal / Post natal clinic / Immunization clinic, Growth Monitoring Clinic 	<ul style="list-style-type: none"> Discussion & exercise on filling up of Family Schedule (Contd.)
Day - 11	<ul style="list-style-type: none"> Discussion & exercise on Family Schedule 	<ul style="list-style-type: none"> Discussion & exercise on Family Schedule (Contd.)
Day - 12	<ul style="list-style-type: none"> Discussion & exercise on HMIS 	<ul style="list-style-type: none"> Discussion & exercise on HMIS (Contd.)
Day - 13	<ul style="list-style-type: none"> Technique of group discussion with the community Group exercise 	<ul style="list-style-type: none"> Monitoring & supervision at block level
Day - 14	<ul style="list-style-type: none"> Monitoring & supervision at SHP level 	<ul style="list-style-type: none"> Group management - team building Role play on group behaviour by the participants
Day - 15	<ul style="list-style-type: none"> Discussion session on different queries 	<ul style="list-style-type: none"> Post training evaluation Valedictory session

- * From Day -1 to Day - 10 the training classes will be held at the respective ULB level, which should preferably be completed by August, 2005.
- * From Day - 11 to Day - 15 the training classes will be held at SUDA in consultation with the Project Officer, Health, SUDA.

**AN OUT LINE OF BASIC TRAINING COURSE FOR FIRST TIER
SUPERVISORS UNDER IPP-VIII-(Extn.) – Duration 30 days**

Days	I	Duties of First Tier Supervisors
1-2	II	Reporting system : Knowledge about different forms, schedules & registers of IPP-VIII.
	A.	To fill Up :
		1) Family schedule.
		2) Daily working (Family Registration) Form .
		3) Baseline data collection form for the family (Bengali) 9. E. C. C. R.
		4) Baseline data collection form for the block . 10. All registers of sub-centres.
		5) Weekly report form for the block (Bengali) 11. Monthly report forms.
		6) Road-to health card plotting, 12. Data presentation at subcentres by diagrams.
	B.	To check and keep updated:
		1) Antenatal & Postnatal registers.
		2) Birth and death registers.
		3) Immunisation register.
		4) Immunisation clinic register:-
		a) 0 - 1 Year.
		b) 1 - 5 Years
		5) Family welfare register.
3	C.	Practical exercise in the community.
4	A.	Educational components:
		a) Techniques of teaching;
		b) Course Planning;
		c) Evaluation.
	B.	Technique of Supervision, Monitoring, Guidance (corrective measures), Evaluation & Feed-Back.
5-6		Child Survival and Safe Motherhood (CSSM) programme comprises of:-
	a)	UIP plus package (UIP, ORT, prophylaxis services like Vitamin A in oil, Iron Folic Acid Tablets, ARI control programme). Pulse polio immunisation.
	b)	Care of the mother and the infant (neonate and post -neonate)
	i)	Care of the mother: Ante-natal, intra-natal and post-natal care, training of traditional birth attendants (TBA).
	ii)	Identification of
	(a)	Danger signs in pregnancy— Severe anaemia, haemorrhage, oedema (sudden weight-gain), no foetal movement for 12 hours., fainting attacks and any acute illness, vaginal bleeding
	(b)	Nearest First referral unit having qualified obstetrician and operation theatre.
	iii)	Post-natal follow up services- Nutrition, FWP services, health education and care in sickness.
	iv)	Identification of danger signs of ARI - e.g. hurried resp. rate, indrawing of chest muscles, stridor/whizing, rumbling sound and inability to suck breast/swallow and prev. & control measures (and also ++ temp. and cough).
	B.	Care of the new born (0-1month) (neo-nate) exclusive breast feeding (BFH) and care of the breast, prevention of infection, referral care of the sick new born, identification of Nearest /First referral unit.

(C) Care of the infant (1-2 months) (post-neonate)- Immunisation, prevention of infection, Vit. A prophylaxis, breast feeding, weaning food, medical care of minor ailments, identification of First Referral Unit.

- (i) identification of a risk group.
- (ii) nutritional requirement.
- (iii) medical care, if required.
- (iv) immunisation.
- (v) Vit "A" oil administration and children I.P. tablets.
- (vi) growth monitoring is very important.
- (vii) local referral system having facilities for resuscitation.
- (viii) Vit A oil administration :-

(a) Objective.

(b) Age and dose e.g. at 9 months on the day of measles immunisation 1/2 (one lakh I.U.), 16-18 months-1 full dose, then subsequent full doses at 24, 30 and 36 months.

(ix) Iron folic acid tab

(a) Objective.

(b) Composition

(i) Mother tablet

(ii) Child tablet.

D) R.C.H.

(i) Antenatal

(ii) Intranatal

(iii) Postnatal care

I) Antenatal-

(a) Identification of high risk group

(i)

(b) Practical training on-

i) B.L. pressure check up

ii) Urine exam. (albumin test)

iii) Talquist test- for b1.Hb%

iv) Drawing the bl. slide

(c) Referral system for the locality

(d) Nutritional requirement of pregnant mother, information about for antenatal check up and intranatal care(5Cs)- clean surface(room & bed), clean razor, clean hands and nails, clean cord tie and cleancord stump, logistic, institution, nearest Blood bank..

(e) Immunisation.

(ii)

Intranatal care- advantage of institutional delivery vis-a-vis home delivery.

(iii)

Postnatal care-

(a) Care of the mothers-

(i) Nutrition

(ii) Medical Care, if necessary.

(iii) Motivation for F.W.P.

Visit to the maternity hospital.

Immunisation-

Steps to be followed to pack vaccines in cold box/ carriers:-

Take out Cold/box/ carriers & confirm that there are no cracks; Clean the cold box/ carrier.

Take out required number of fully frozen ice packs from the deep freezer and wipe them dry.

Place the ice packs in the cold box/ carrier and wait for few minutes for temperature to stabilize.

Put the vaccines along with diluents in a carton/ polythene bag and place them in the box/ carrier.

Place packing material between vials containing TT, DPT, and DT and ice packs so that these vaccines do not get frozen.

Do not keep the box/ carrier in sunlight or near a source of heat.

Do not keep heavy object on them or sit on them.

Open them only when required.

Vaccines handling:-

The objective of good vaccine handling is to minimize:-

The period of time in which all vaccines are exposed to temperatures above + 8°C and DPT, D.T. & TT vaccines below 0°C

The period of time in which any vaccine remains in cold chain stores without being used.

Vaccines are not stored at the sub-centre level and must be supplied on the day of use.

In order to keep vaccines safe at this level:-

Only required quantities must be supplied.

The vaccine carrier must have frozen ice packs.

Immunisation must be carried out in the shade, and the vaccines OPV and measles must be kept on an ice pack or in ice during the session.

Only one vial of each vaccine should be out at a time.

Vaccines vials opened for a session must never be used during subsequent sessions.

For each vaccination, single sterile syringe and needle must be used.

Date expired vaccines should not be used.

Check that DPT,DT or TT vaccines have not been frozen. If these have been frozen, do not use them. You can confirm the shake test. Shake the vial so that the sediment is completely mixed into the vial. If the vaccine is not uniformly mixed, or the sediment settles down at the bottom of the vial completely within 15 minutes, then do not use it.

Diluent must be kept in IIR and issued to the field in vaccine carrier.

The ice packs used for lining the vaccing carriers should be fully frozen.

Discard unused vaccines after schedule hours as for example -

Reconstituted measles vaccines 3 hours and reconstituted B.C.G.vaccines after 5 hours.

For carrying the vaccines to the sub-centres the following points should be noted:-

Carry the vaccines in a vaccine carrier (for 16-20 vials) having 4 fully frozen ice packs in four sides or in a day carries (for 6-8 vials) having 2 fully frozen ice packs on two sides.. Transport the vaccines through the shortest route to the sub-centre without opening the lid of the carrier.

12-13 Method of Vaccine Administration:-

- (A) (a) UIP Schedule (age-wise).
- (b) Proper dosage of vaccines.
- (c) Technique of intra-dermal, sub-cutaneous and intra-muscular injection. Practice- Class room demonstration and field exercises.
- (d) Identification of contra-indications.

Risk of embolism and its prevention

Post-immunisation adversity-

- i) Local infection
- ii) TSS- causes thereof and preventive measures.
- iii) Anaphylactic shock.- immediate management and nearest referral services, if necessary.

(B) Visit to the local sub- centre.

15

How to use a steam sterilizer: Sterilisation of Equipment:

Clean the syringes and needles with mixed mild soap water and rinse them with plain water.

Place the barrels, pistons and needles in the holes of the syringe rack.

Put the rack lid on the loaded rack and press the clip so that it fixes with the rack.

Fill water in the sterilizer base upto the mark.

Place the loaded sterilizer rack into the sterilizer.

Put a pairs of forceps on the rack lid.

Put the sterilizer lid on the sterilizer base, matching the arrow marks on the base and the lid and turn it clockwise to close it.

Put the sterilizer on stove.

As steam starts coming out of pressure valves, wait for 5 minutes, reduce the flame.

Keep it on flame for another 15 minutes.

Remove the sterilizer from the stove and allow it to cool.

Open the lid only when the syringes and needles required.

Turn the lid upside down and keep the forceps on it.

Use the forceps to assemble the syringe.

BOILING:

(If unwrapped 20 minutes, but if wrapped 30 minutes boiling is necessary.)

Only when autoclaving or pressure sterilising is not possible boil for at least 20 minutes after water starts boiling. Drain off all the hot water, and allow syringes and needles to cool before use, keeping it covered.

Since it takes long time before syringes and needles to cool, try to sterilize them well in advance of the session. Never use hot syringes and needles as heat will destroy the vaccines.

16

Visit to the sub-centres;

17-18 (A)

Baby weighing (growth monitoring)-

i) Objectives

ii) Different methods of weighing

iii) Checking accurateness of machines.

iv) Can set the machines & can set the baby properly on the machine and read the scale correctly.

v) Weighing techniques upto 100 gms. of weight.

vi) Ascertaining actual age of the child -

a) Date of birth.

b) If not available, then by corresponding with any important social, religious or disastrous event.

c) By corresponding with the age of a neighbouring child.

d) By asking a literate house-wife of the locality.

e) Plotting of Road-to-Health' card by taking into account the actual age and the body weight its interpretation.

and

(B) Practice in the community.

Breast feeding-

- 1) Objectives
- 2) Benefits of breast feeding-

a) On the new born-

- i) Gets immunoglobulin thereby less susceptibility to infection.
- ii) Nutritious for the baby (balanced food for him)
- iii) Digestive enzymes.
- iv) Contains growth promoting hormone.
- v) No other food or water necessary for first 4 months and thereby lessens risk of exogenous infection.
- vi) Sterile (free from pathogenic organism).
- vii) Has adequate temperature for the child.
- viii) Promotes jaw formation.
- ix) Makes a bondage between mothers and the child.
- x) Quantity adequate for the first four months of the child.
- xi) Quantity and quality of milk changes as per need of new born.

b) On the Mothers-

- i) Prevents breast cancer
- ii) Helps rapid involution of the uterus.
- iii) In great majority there is amenorrhoea and consequent contraception during breast feeding period.
- iv) Psychological bondage between mother and the child.

Encourage:

- a) Breast feeding for the new born within half to 1 hour of delivery. (even after Caesarean section)
- b) Feeding the mother within half hour after delivery.
- c) Encourage and help the mother for breast feeding.
- d) Allow the mother and new born to remain together 24 hours a day excepting for medical reasons.
- e) Educate the mother on the importance of colostrum.
- f) Train the mother on the art of giving breast in the mouth of the baby i.e. not only the nipple but also the areola in the mouth so that the chin touches the breast.
- g) Train the mother about breast feeding alternatively from both breasts.
- h) 5-6 breast feeding in a day and no feeding during sleep.
- i) Train the mother about eructation of air/gases after each feeding.

- 21 I. Different types of weaning food e. g. smashed banana, other fruits and fruit juices, potato and other boiled vegetables, suji, soft cooked rice, dal, daliah etc.

After the age of 1 year child should receive solid foods consumed by older children in their families. Defective weaning may lead to deleterious synergistic inter-action of malnutrition and infection followed by diarrhoea and growth failure leading to protein energy malnutrition and immuno-deficiency which may be fatal.

II. Supplementary nutrition packet under IPP: VIII:-

a) Objectives

- b) Composition: (500 gms. containing 1732 calories, additional nutrients in which there are the following proximate principles e.g.

Cbh- 344.7 gm.
 Prtn- 31.2 gm.
 Fat- 7.2 gm.

* besides vits and minerals.

- c) Eligibility- i) pregnant mothers- 7 months of pregnancy to 4 months of lactation.
ii) Children - grade 2 malnutrition and onwards- for 3 successive months.

22 IX. Oral rehydration therapy-

a) Objective

b) Composition-	i) WHO formula -Common salt	3.5 gms.
	Sod-Bi- Carb	2.5 "
	Pot. Chloride	1.5 "
	Glucose	20.0 "
	Safe water	1.0. ltr.

ii) Home made formula-

Sugar 1 t.s.f.

Common salt small pinchful.

Safe water- 200 ml.. If possible add 1 pinchful of Sod-Bi-Carb and lemon juice of 1/4th lemon of standard size.

iii) Administration of O.R.S. for different age group.

iv) Alternatives O.R.S.

v) Maintenance of nutrition during oral rehydration therapy.

vi) Identification of severe dehydration- danger signs for immediate medical care.

vii) Nearest/Referral system.

23. X. A. R. I. i) Home management

ii) Identification of danger signs for immediate medical care

iii) Nearest/ Referral system.

24-27 XI. F.W.P. Services:-

a) Definition of family planning.

b) Objectives of family planning

c) Impact of population explosion on the socio-economic condition at the:-

i) family level.

ii) community level.

iii) national level

d) Goal by 2000 A.D. and strategies thereof.

e) Identification of target group and contraceptive methods suitable for different groups of couples.

f) Contra-indications and complications of different contraceptive devices/birth control methods.

g) management of complications, if any.

28 XII. Personal hygiene:-

Practice of

Hygienic way of living.

XIII. Environmental Sanitation:-

a) healthful housing- e.g. site, ventilation, lighting arrangements, safe water supply, disposal of solid and liquid wastes, privacy, overcrowding etc.

b) Food sanitation.

c) Disinfection of water at domestic level.

d) Control of house fly and mosquito nuisance and their breeding.

- e) First aid.
- f) Home nursing.
- g) Treatment of common ailments e.g. fever, diarrhoea, ARI, skin diseases, conjunctivitis, nutritional anaemia etc.
- h) Mode of transmission of communicable diseases: their preventive and control measures.

XV. Health statistics:

i) Definition (ii) Present rates and goal by 2000 A.D. (iii) calculation:-

- a) Crude birth rate
- b) Crude death rate
- c) I.M.R.
- d) M.M.R.
- e) C.P.R.
- f) Growth rate.

30. 15) I.E.C. activities (including health education methods)
- 16 i) Notification of diseases- what and why?
 ii) Surveillance system- what and why?
 iii) Coordination between i) staff and ii) Different programmes.

Reading Materials.

- 1) IIIWs Manual (Nirdeshika)
- 2) Family schedule.
- 3) Weekly reporting proforma & monthly reporting proforma.
- 4) Baseline survey format.
- 5) Growth monitorship chart.
- 6) E.C.C.R. format.
- 7). Cassettes on different health problems.

N.B. Subject to modifications in consultation with the Chief of Health, C.M.D.A., if felt necessary on local needs.

COMMUNITY BASED PRIMARY HEALTH CARE SERVICES

AN OUTLINE FOR TRAINERS

REGARDING TRAINING OF HONORARY HEALTH WORKER

SESSION	SUBJECTS FOR DISCUSSION
1.	Registration and inauguration, pre-training evaluation.
2.	Pre-training examination and evaluation.
3 & 4.	<p>General introduction to Community Based Primary Health Care Services in 63 Non-KMA ULBs,</p> <p>Aim of the project.</p> <p>Organisational set up.</p> <p>Service strategy - community drafted female HHWs to pay home visit twice in a month, to provide basic curative care for minor ailments at the door step of the beneficiaries & to promote uptake of preventive, promotive and family planning services at local health facilities through interpersonal communication, HHW is the first contact point between the community and the existing health facilities, HHW to act as depot holder for distribution of Oral Pill, Condom, ORS, IFA tablets etc. The HHW is to be supervised by First Tier Supervisor.</p> <p>Services from Sub-Centre.</p> <p>Referral services to the existing Govt. health facilities.</p> <p>Responsibility of HHW.</p>
5 & 6.	<p>What is Nutrition ? Nutritious food and its importance ? Classification of food - Protein, fat, carbohydrate, Vitamins, Minerals - Local sources of each of them, importance, deficiency diseases, What is Balance Diet ? Causes of malnutrition. Faulty practices. Diseases due to malnutrition. Awareness on nutrition - right method of cutting and cooking.</p>
7 & 8.	<p>Conditions in which more Nutrition is required. Effect of proper nutrition on pregnant women to offspring. Benefit of breast milk, emphasis on colostrum, weaning food. What is Anaemia ? Symptoms. National Anaemia control programme for mothers and children.</p>
9 & 10.	<p>Definition of Health, explanation on preventive, promotive and curative health with example.</p>
11 & 12.	<p>Definition of communicable and contagious diseases with example. Description of different transmission factors.</p>
13.	<p>What is hygiene ?</p> <p>Personal Hygiene - Daily bath, care of tooth, hair, eye, nail cutting, hand washing with soap before food handling and after toilet, spitting, cleanliness of cloths, bed linen, napkins - Diseases caused by each of the faulty habit and preventive measures.</p> <p>Home waste disposal. How environment can be made less pollutant - role of individual, family and community.</p>
14.	<p>What is Adolescence ? Physical and psychological changes during adolescent period, Importance of health awareness - Danger of early marriage, teenage pregnancy, iron deficiency anemia, complications in adolescence pregnancy and delivery. Minimum age of marriage and child birth.</p>
15.	<p>Maternal care - Symptoms of pregnancy. Ante-natal Care - early registration of all pregnancies by 12 weeks, importance of early registration, LMP, EDD, at least 3 ante-natal check ups, components of check ups, increase in body weight of pregnant woman, Do's during pregnancy, Immunisation against Tetanus, Danger signals during pregnancy. High risk mother.</p>
16.	<p>High risk pregnancy - General factors - Maternal age below 18 yrs. and above 35 yrs. specially in case of First Pregnancy, short stature less than 140 cms. height, parity more than 4, less than 38 kg. body weight, previous history of abortion/ pre-term delivery/any complication / difficult labour , still birth, any medical disorders. Complication during pregnancy like, bleeding, severe Anaemia, high BP, multiple pregnancies, pre-term labour etc.</p>

SESSION	SUBJECTS FOR DISCUSSION
17.	Maternal care - symptoms of labour, intranatal care - promotion of institutional delivery, danger signals during labour. Post natal care - Post natal period, Care of new born and mother, danger signals during post natal period. Referral system - When to refer ? Where to refer?
18.	Revision on Maternal Care.
19.	Child care - Essential new born care - Delivery at Health Facility, adequate cloth covering, early breast feeding, avoid bathing till cord falls off. High risk neonates - Weight less than 2.5 kg. (LBW), twin / multiple babies, baby born by forceps, baby lost mother after birth, baby whose previous siblings died in infancy or early childhood, acute illness, congenital anomaly, repeated child birth of mother, baby not getting mother's milk, baby of mentally ill mother. Referral system.
20.	Child care - breast feeding - advantage of breast feeding, exclusive breast feedings upto 6 months, beneficial effect of colostrum, proper weaning, mode and food items at weaning, Vitamin A prophylaxis. Child IFA.
21.	Growth monitoring chart, Developmental mile stones.
22.	Revision on Child Care.
23.	Vaccine preventable diseases - What are the Vaccines available under Routine Immunisation ? Prevention from six vaccine preventable diseases. T.B. and Polio - Agent, host, environmental factors, mode of spread, general symptoms, prevention.
24.	Diphtheria and Whooping Cough - Agent, host, environmental factors, mode of spread, general symptoms, prevention.
25.	Tetanus and Measles - Agent, host, environmental factors, mode of spread, general symptoms, prevention.
26 & 27.	Routine Immunisation - Schedule, dosage, diluents etc., target Disinfection of syringes & needles, conduction of immunisation session, follow up, precaution during immunisation, immunisation card, complete immunisation.
28.	Cold chain system - for storage, distribution at Sub-Centre Level. Vaccine carrier / Day carrier / Ice pack.
29.	Family Planning Programme - Introduction, eligible couple, importance of Family Planning. Small family norm - Spacing, hazards of too frequent child - birth, different contraceptive and birth control measures suitable for (a) newly married couple, (b) mother of one child and (c) mother of two or more living children. Causes of increased birth rate.
30.	FP Methods - Choice of contraception, spacing methods - Oral Pill, IUD, Condom and permanent methods - Ligation, Vasectomy - mode of action, clientele, complication, contraindications. MTP. Role of HHW.
31.	ARI - Mode of infection & its transmission, management of mild cases in domestic level; identification of serious cases by HHW & mothers (for immediate medical help) on all or any of the signs e.g. hurried resp. rate, indrawing of chest muscles, and / or stridor / wheezing / rumbling sound & inability to suck breast / swallow - preventive & control measures. Why it is important ?
32.	Role of HHWs - Strategies - Train mothers to recognise danger signals for immediate medical care / improve maternal knowledge about home management of cough & cold / promote immunisation, including measles, breast feeding, weaning & Vit. A. prophylaxis.
33.	Diarrhoea - Definition, Recognition of Danger Signs for immediate Medical Care - Repeated purging & vomiting, inability to drink / swallow, blood in stool, semiconscious, hurried respiration, diarrhoea within 6 weeks of measles. Signs of dehydration - sunken eyes, dry tongue, anuria, tears absent, decreased skin turgor and increased thirst.

SESSION	SUBJECTS FOR DISCUSSION
34.	Video Show, Group work on important messages, preparation of chart and presentation.
35.	<p>Reproductive Tract Infection :- Identification - Discharge per vagina, may be white or purulent or mixed with blood , soreness , itching, swelling, pain, tenderness or burning sensation in any part of the reproductive organs, or swelling of inguinal lymph glands or pain and tenderness in lower abdomen.</p> <p>Causes- unhygienic sex practices, bathing in dirty tank / pond, using dirty pad, not properly cleansing the part after defaecation or micturition.</p> <p>Preventive & Control measures: Hygienic practices with regard to above mentioned factors, early treatment.</p>
36 & 37.	<p>STDs (Sexually Transmitted Diseases) - common STDs are Gonorrhoea and Syphilis.(a) Syphilis - Soreness in or around the external genitalia. (b) Gonorrhoea- discharge per vagina</p> <p>Mode of transmission - by sexual act with an infected person</p> <p>Prevention & Control - avoid sexual act with persons of unknown character. Use of condom, early treatment</p> <p>HIV infection - This infection damages the natural immune mechanism of the infected person who gradually become less resistant and more susceptible to various infections.</p> <p>Common signs and symptoms - suffering repeatedly from one or more of the following i.e cold & cough, diarrhoea, skin infection, eye infection , infection of oral cavity , painful swelling of the lymph glands , loss of body weight, fever etc.</p> <p>Mode of transmission- sex with infected person, use of not properly sterilised medical or dental instruments, contaminated blood transfusion or use of blood products, infected mother to foetus, mother's milk</p> <p>Prevention & control : Avoid sex with any person of unknown characters, use of properly sterilised instruments , use of condom , awareness generation of the people</p>
38.	<p>RNTCP - About 1% of the population of India are suffering from T.B. Total no. of sufferers are about 1 Crore, every year there are about 5 lakhs new cases and 5 lakhs death.</p> <p>Identification - Any person showing one or more of the following symptoms should be referred :- (a) fever for more than 3 weeks (b) cough for more than 3 weeks, (c) blood with sputum.</p> <p>These persons should be immediately linked with chest clinic of a Govt. Hospital, where diagnosis and full treatment is done free of cost. At present, DOTS (Direct Observation Treatment - Short course) is done with multi-drugs which gives high cure rate. All infants are given BCG vaccine under that Routine Immunisation programmes.</p>
39.	<p>NLEP- Case detection _ (a) Lepromatous cases - facial disfigurement , depressed nose, Irregular skin thickening , oily skin with reddish patches at places , may be congestion of eyes, soreness and shortening of fingers and toes.</p> <p>(b) Non lepromatous cases - (1) Hypopigmented and anaesthetic patches on the skin, or, (2) Polyneuritic superficial nerves i.e greater auricular / popliteal / ulnar nerves are thickened , or , (3) Tuberculoid type nodules scattered on the skin all over the body .</p> <p>Referral to the Govt. Hospitals.</p> <p>Awareness - stress on - Leprosy is a very mild infectious disease, cure rate is very high, diagnosis and full treatment is done free of cost at all hospitals.</p>
40.	<p>NBCP- India has the largest blind population. Under NBCP : Vitamin A prophylaxis for under 3 years children, organisation of cataract operation camps in outreach areas, publicity for motivation of people for donation of eyes, extending specialist services in rural hospitals. Free treatment of eye diseases in hospitals.</p>
41.	<p>NMCP- As malaria case are increasing , any fever cases unless otherwise diagnosed, blood slide should be examined and presumptive treatment with chloroquin be started.</p> <p>The salient feature of the programme are :- all fever cases should be early diagnosed and promptly treated , prevention of mosquito breeding by not allowing water to remain stagnant in small or large quantity for more than a week, Malaria is transmitted by female anopheles mosquito, which breeds in clear water, protection from mosquito bites by use of mosquito net or use of repellent cream.</p> <p>Diagnosis and treatment are free of cost in Govt. Health facilities.</p>

SESSION	SUBJECTS FOR DISCUSSION
42.	NFCP- The line of preventive measures are similar as in case of NMCP. Filaria is transmitted by culex mosquitoes which breed in dirty water.; prevent mosquito breeding and protect from mosquito bites; early case detection and prompt treatment.
43.	<p>HIV infection - First case was found in USA in 1982, and in India in 1986. It is rapidly increasing.</p> <p>Salient feature of this programme are as follows :- awareness generation in public about its transmission and prevention , promotion of use of condom among the high risk groups, control measures imposed on Blood Bank, involvement of NGOs in awareness generation and condom distribution programme among the commercial sex workers, research for development of vaccine and curative medicine. Adequate nutrition, hygienic practices and early treatment of diseases can prolong life of the HIV infected persons.</p>
44.	<p>National IDD Control Programme- Iodine deficiency is prevalent in sub-Himalayan and sub - Vindhya region . It is also prevailing in sub acute form all over India. Natural sources of iodine are food & water; rich source is sea food, both animal and vegetable.</p> <p>Some food items such as, cabbage, mustard or rye leaves etc. are known as goitreogenic food. Iodine takes part in (1) synthesis of thyroid hormone and (2) development of brain.</p> <p>Endemic goitre may present manifestations like lethargy, obesity, pain in joints and muscles, hoarseness of voice etc. In female, there may be birth of handicapped baby, known as cretin baby.</p> <p>GOI has made it mandatory for production and sell of Iodised edible salt. People to be educated to buy fresh stock of Iodised Salt and store in closed container, as Iodine is volatile.</p>
45.	<p>Pulse Polio Immunisation Programme :</p> <p>Poliomyelitis elimination is a National Health Programme of India. Under this programme, besides, routine immunisation programme additional doses of OPV are administered to all under 5 years children. This programme is held in few rounds every year. Each round is held on one fixed date all over the country. Each round continues for 4 to 5 days; on 1st day OPV is given in Vaccination booth, this is followed by subsequent 3 to 4 days home visits by health workers to detect missed children, if any. If such child is found, then on-the-spot immunisation is done.</p> <p>For this adequate publicity is done in advance. This is a multisectorial approach by involvement of General Administration of the Govt., Municipalities, Panchayati Raj, NGOs, Voluntary organisations and if necessary religious establishments for making it successful.</p> <p>Our target is elimination of Polio from India by 2005.</p> <p>What is VVM ?</p>
46.	Revision on National Health Programmes.
47 - 49.	<p>Minor Ailments : (Fever, Pain, Pain in abdomen, ARI, Diarrhoea, Intestinal Worms Infestation, Acute conjunctivitis, Scabies)</p> <p>General rules for all diseases -</p> <p>HHW should not treat for more than 72 hours, if there is no improvement or there is deterioration in anyway, then immediately transfer to hospital / a qualified physician. All patients must be given full bed-rest, nutritious easily digestible food e.g. breast milk for babies, or rice with easily digestible fish or vegetables. Give plenty of fluid (drinks) to every patients. Be careful about personal hygiene and environmental sanitation of the patients. Be careful about disposal of excreta of the patients. Arrange head-wash and sponging of the whole body of the patient; change his clothings and bed-sheet every day. Keep the windows open to allow ventilation and sunlight in the room. In infectious cases, keep the patient separate from others. If necessary, keep the patient covered with cotton / woolen sheets. Keep the patient happy, give him mental support to generate will-force for recovery. It is advisable to keep daily record of signs and symptoms of the cases.</p>
50.	HHW Kit - contents and its uses

SESSION	SUBJECTS FOR DISCUSSION
51 & 52.	First Aid and HHW role Cut injury, Boil, Burn, Unconsciousness, Fracture & sprain, Bites, Electric Shock.
53.	Information, Education and Communication :- Principle : Awareness generation of the people is very important in any Health Programme. Material & Media are as follows - (a) Spoken Words - Easy local language, inter-personal communication, group discussion, etc. (b) Written Words - News papers, hand-bills, posters, festoons, magazines etc. (c) Electronic Media - slide show, cinema show, radio, TV, video cassetts. (d) Performing arts - drama, dance, songs, role-play. HHWs Role - During interpersonal communication the following must be remembered - (a) Language should be local & simple, (b) Contents should be brief but clear, (c) Talk should be relevant to the topic, (d) Participatory discussion instead of lecturing.
54-57	Family Schedule What is Family Schedule, Importance, Filling up.
58-60	Report and returns proforma (HMIS) - Importance, use of statistics in community health, CBR, CDR, MMR, IMR, CPR - collection and compilation of data.
61-62.	Baseline Survey – its importance, each question of the format be discussed thoroughly and practised amongst the trainees.
63.	Allotment of ward-wise BPL population to HHWs.
64.	Weighing of under 5 children and plotting in growth monitoring chart - Practical session.
65.	IEC – communication channel be demonstrated. Interpersonal communication and group discussion be practised on health issues.
66.	Diarrhoeal cases (Under 5 yrs. children), ORS / HAF demonstration.
67.	Practical session on First Aid.
68.	Practical session on dosage schedule.
69.	MCH & FW Clinic and Post partum Unit.
70.	Immunisation Clinic, vaccines and cold chain system.
71.	ARI cases (Under 5 yrs. children).
72.	Leprosy / Filaria clinic.
73.	STD and Malaria clinic, drawing of blood slide.
74 - 80.	Visit to field and Family Schedule filling up.
81 - 86.	Practice on preparation of HMIS based on filled in Family Schedule and consolidation of baseline survey data.
87 - 88.	Summarization / recapitulation on previous classes.
89.	Post training evaluation.
90.	Valedictory session.

Basic Training Course for Honorary Health Workers (HHWs)
(Both Regular and Panel Candidates)

Training Venue :

Course Co-ordinator :

Trainers name :

1.

2.

3.

4.

Total Duration : 45 days

Time Table :

Class room - 62 sessions, Practical - 28 sessions

Date	11 A.M. to 1 P.M.	Recess	2 P.M. to 4 P.M.
	1. Registration, Inauguration		2. Pre-training examination and evaluation.
	3. Community Based Primary Health Care Services - introduction, aims,		4. Organisational set-up, Service strategy, Job responsibility of HHW
	5. Elementary knowledge on Food & Nutrition.		6. Contd.
	7. Nutritional requirement for vulnerable groups, importance of Maternal and Child nutrition, breast feeding, colostrum & weaning practices.		8. Contd.
	9. Concept of health - preventive, promotive, curative health		10. Contd.
	11. Elementary knowledge on communicable and contagious diseases, transmission factor.		12. Contd.
	13. Personnel hygiene, family and community level hygiene, environmental sanitation.		14. Adolescent Girls' health care.
	15. Reproductive & Child Health, Maternal care - antenatal care,		16. Maternal care Contd.- high-risk pregnancy, diet in pregnancy.
	17. Maternal care -/ intra / post natal care		18. Revision on Maternal Care.
	19. Child care - Essential new born care, high risk neonates,		20. Child care- breast feeding, colostrum, weaning, vitamin A prophylaxis.

Contd. to P-2.

Date	11 A.M. to 1 P.M.	Recess	2 P.M. to 4 P.M.
	21. Child care - Contd. - Growth monitoring chart - Developmental Mile stones		22. Revision on child care
	23. Six Vaccine preventable diseases T.B., Polio.		24. Six Vaccine preventable diseases- Diphtheria, Whooping Cough
	25. Six Vaccine preventable diseases Tetanus and Measles.		26. Routine Immunisation - Schedule, conduction of immunisation session, follow up
	27. Routine Immunisation Contd.		28. Routine Immunisation - Cold Chain
	29. Family Welfare programme - Concept of Eligible Couple, small family norm,		30. F.P. methods (spacing and terminal), MTP
	31. ARI - Identification, management and prevention.		32. Roles of HHW in ARI management
	33. Diarrhoeal diseases - Definition, assessment of dehydration, management, ORS therapy, home available fluid.		34. Video Show , Group work on important messages
	35. RTI - Identification, mode of transmission, and prevention.		36. STDs / HIV / AIDS - Identification, mode of transmission, and prevention.
	37. STDs / HIV / AIDS - Continued.		38. National Health Programme - RNTCP - Brief knowledge, identification of cases, linkage.
	39. National Health Programme - NLEP - Brief knowledge, identification of cases, linkage		40. National Health Programme - NBCP - Brief knowledge, identification of cases, linkage.
	41. National Health Programme - NMCP - Brief knowledge, identification of cases, linkage.		42. National Health Programme - NFCP - Brief knowledge, identification of cases, linkage.
	43. National Health Programme - AIDS Control Prog - Brief knowledge, identification of cases, linkage.		44. National Iodine Deficiency Disorders Control Programme - Brief knowledge, identification of cases, linkage.
	45. Pulse Polio Immunisation (PPI) Control Programme - Brief knowledge, involvement with linkage.		46. Revision on National Health Programme.
	47. Minor ailments - Identification, management at HHWs level, drug therapy, dosage schedule, referral.		48. Minor ailments - Contd.
	49. Minor ailments - Contd.		50. HHWs kit - Knowledge about contents, demonstration.

Contd. to P-3.

Date	11 A.M. to 1 P.M.	Recess	2 P.M. to 4 P.M.
	51. First Aid and role of HHWs		52. First Aid - Continued.
	53. Information, Education & Communication (I.E.C.) - Principles, General and specific, materials and media, HHW's role - inter personnel communication.		54. Family Schedule - Filling up.
	55. Family Schedule - Contd.		56. Family Schedule - Contd.
	57. Family Schedule - Contd.		58. Report and returns proforma (HMIS) - Importance, use of statistics in community health, collection and compilation of the data.
	59. HMIS -Contd.		60. HMIS -Contd.
	61. Baseline Survey Format - discussion and practice within the trainees		62. Baseline Survey - Contd.
	63. Allotment of Ward-wise BPL families to HHWs.		64. Weighing of under 5 children and plotting in the growth monitoring chart.
	65. Demonstration on IEC communication channels, particularly interpersonal communication and group discussion.		66. Diarrhoeal cases (Under 5 yrs. children), ORS / HAF demonstration.
	67. Practical session on First Aid.		68. Practical session on dosage schedule.
	69. MCH / FW Clinic and Post partum Unit.		70. Immunisation Clinic, vaccines and cold chain system.
	71. ARI cases (Under 5 yrs. children).		72. Leprosy / Filaria clinic.
	73. STD and Malaria clinic, drawing of blood slide.		74. Visit to field and filling up of Family Schedule and Baseline Survey Format.
	75. Discussion on filled-in Family Schedule and Baseline Survey Format.		76. Visit to field and filling up of Family Schedule and Baseline Survey Format.
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	79. Discussion on filled-in Family Schedule and Baseline Survey Format.		80. Visit to field and filling up of Family Schedule and Baseline Survey Format.
	81. Preparation of HMIS based on filled-in Family Schedule.		82. Contd.
	83. Contd.		84. Contd.
	85. Contd.		86. Contd.
	87. Summarization / recapitulation on previous classes.		88. Contd.
	89. Post training evaluation.		90. Valedictory session.

Basic Training Course for Honorary Health Workers (HHWs)
(Both Regular and Panel Candidates)

Training Venue :

Course Co-ordinator :

Trainers name :

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	5. Elementary knowledge on Food & Nutrition.		6. Contd.
	7. Nutritional requirement for vulnerable groups, importance of Maternal and Child nutrition, breast feeding , colostrum & weaning practices.		8. Contd.
	9. Concept of health - preventive, promotive, curative health		10. Contd.
	11. Elementary knowledge on communicable and contagious diseases, transmission factor.		12. Contd.
	13. Personnel hygiene, family and community level hygiene, environmental sanitation.		14. Adolescent Girls' health care.
	15. Reproductive & Child Health, Maternal care - antenatal care,		16. Maternal care Contd.- high-risk pregnancy, diet in pregnancy.
	17. Maternal care -/ intra / post natal care		18. Revision on Maternal Care.
	19. Child care - Essential new born care, high risk neonates,		20. Child care- breast feeding, colostrum, weaning, vitamin A prophylaxis.

Contd. to P-2.

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	47. Minor ailments - Identification, management at HHWs level, drug therapy, dosage schedule, referral.		48. Minor ailments - Contd.
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Contd. to P-3.

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	53. Information, Education & Communication (I.E.C.) - Principles, General and specific, materials and media, HHW's role - inter personnel communication.		54. Family Schedule - Filling up.
	55. Family Schedule - Contd.		56. Family Schedule - Contd.
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	89. Post training evaluation.		90. Valedictory session.

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091****West Bengal**Ref No: **SUDA-Health/63 ULBs/07/08(9)**Date: **09.04.2007****From : Director, SUDA****To : The Chairman
Rampurhat / Nabadwip / Raniganj / Tufanganj / Dalkhola
Beldanga / Santipur / Memari / Jamuria Municipality****Sub. : Honorary Health Workers (HHWs) training under Community
Based Primary Health Care Services.****Sir,**

As the trainers' training will be completed centrally by SUDA on 10.04.2007 in respect of your ULB, you are requested to start HHWs' (both regular & panel candidates) training as per prescribed schedule of basic training course for HHWs and outline of course curriculum (vide enclosures *) by 23rd April, 2007.

- 1. The following training materials are to be provided to each HHW including panel candidates :**
 - a. Suitable folder or bag – 1,
 - b. Exercise book no. 12 – 1,
 - c. Ball pen, pencil, eraser, sharpener, scale – 1 each,
 - d. Nirdeshika for HHWs – to be Xeroxed from the training material booklet already provided to the trainers, if the printed material is not supplied in the mean time,
 - e. Family Schedule – 1 (already supplied),
 - f. Form A – 1 set,
 - g. Baseline Survey Format – 1 set.
- 2. The rates of expenditure to carry out during the said training are detailed below :**
 - a. Training materials per HHW not exceeding Rs. 300/- (Rupees three hundred) only (total no. of HHWs + 5),
 - b. Tea & tiffin @ Rs. 30/- (Rupees thirty) only for the participants per head per day (total no. of HHWs + 5),
 - c. Mobility support @ Rs. 20/- (Rupees twenty) only per HHW trainees per day,
 - d. Trainers fees @ Rs. 200/- per trainer for two hours session,
 - e. Contingency not exceeding 10% of the total expenditure.

The expenditure is to be met out of the fund already provided to you and booked under the A/C head "Training - HHWs". Statement of Expenditure (SOE) is to be forwarded as per the prescribed proforma, already provided to you.

Contd. to P-2.

- 2 -

3. You are requested to conduct a pre-training examination & evaluation on 1st day of training and post-training examination & evaluation on last day of training. Questionnaire for both the pre & post training evaluation are enclosed in a separate sealed envelopes which are to be Xeroxed and kept ready before conduction of such examination. The score sheet for each of HHWs training is to be forwarded to the undersigned within 7 days on completion of examination.
4. A set of 4 (four) Charts consisting of (a) Human Body (b) Female Reproductive System (c) Genito - Urinary Organ - Male, (d) Balance Diet is sent to you along with this letter for use during HHWs' training.

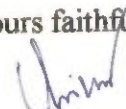
The schedule dates for each day long sessions are to be indicated along with training venue, course co-ordinator, trainers name in the prescribed training schedule and a copy of the same may kindly be forwarded to the undersigned. After completion of training of HHWs for 45 days, and on receipt of Score Sheet of the above mentioned post evaluation examination, further instruction towards engagement of regular HHWs will be issued by this office.

You are also requested to send the information with regard to date of commencement of the training for HHWs, so that monitoring officer of SUDA could visit your ULB.

Thanking you.

Enclo. : *

Yours faithfully,


Director, SUDA

Dt. .. 09.04.2007

SUDA-Health/63 ULBs/07/08(9)/1(6)

Copy forwarded for information and necessary action to :

1. CMOH, Burdwan
2. CMOH, Cooch Behar
3. CMOH, Murshidabad
4. CMOH, Nadia
5. CMOH, Birbhum
6. CMOH, Uttar Dinajpur

SUDA-Health/63 ULBs/07/08(9)/2(3)

Copy forwarded for information to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

Director, SUDA

Dt. .. 09.04.2007

Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No: **SUDA-Health/63 ULBs/07/08(9)**Date **09.04.2007****From : Director, SUDA****To : The Chairman****Rampurhat / Nabadwip / Raniganj / Tufanganj / Dalkhola
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 - c. Mobility support @ Rs. 20/- (Rupees twenty) only per HHW trainees per day,
 - d. Trainers fees @ Rs. 200/- per trainer for two hours session,
 - e. Contingency not exceeding 10% of the total expenditure.

The expenditure is to be met out of the fund already provided to you and booked under the A/C head "Training - HHWs". Statement of Expenditure (SOE) is to be forwarded as per the prescribed proforma, already provided to you.

Contd. to P-2.

o/c

- 2 -

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You are also requested to send the information with regard to date of commencement of the training for HHWs, so that monitoring officer of SUDA could visit your ULB.

Thanking you.

Enclo. : *

Yours faithfully,

Director, SUDA

Dt. .. 09.04.2007

SUDA-Health/63 ULBs/07/08(9)/1(6)

Copy forwarded for information and necessary action to :

1. CMOH, Burdwan
2. CMOH, Cooch Behar
3. CMOH, Murshidabad
4. CMOH, Nadia
5. CMOH, Birbhum
6. CMOH, Uttar Dinajpur

Director, SUDA

Dt. .. 09.04.2007

SUDA-Health/63 ULBs/07/08(9)/2(3)

Copy forwarded for information to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

Director, SUDA

SUDA

ATTENTION DR. K. K. DAS

o/c

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No SUDA-Health/63 ULBs/06/312(7)

Date 30.03.2007

From : Director, SUDA

To : The Chairman
Rampurhat / Tufanganj / Beldanga / Nabadwip /
Santipur / Dalkhola / Jamuria Municipality

Sub. : Training of trainers under Community Based
Primary Health Care Services.

Sir,

I am to inform you that one day training programme for the trainers has been organized centrally by SUDA and scheduled on 10.04.2007 at Conference Hall, SUDA, ILGUS Bhawan, HC Block, Sector - III, Salt Lake at 11 A.M. You are aware that these trainers will in turn conduct training of Honorary Health Workers at your municipal level.

You are requested to make necessary arrangement for participation of the said trainers in the training programme on the above mentioned date & time.

If any of the participants require hostel accommodation at SUDA, you may kindly forward the names of such participants indicating days of staying.

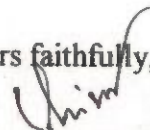
Expenditure towards traveling and daily allowance is to be provided by the ULB concerned to each of the participants as per existing Govt. norms.

The said expenditure is to be met out of the existing fund of CBPHC already provided to you and to be booked under the A/C head "Training - trainers training".

A line in conformation with regard to participation of the trainers and requirement of hostel accommodation of the participants, if any, may please be communicated to the Project Officer, Health, SUDA through Fax (No. 033 2359 3184) by 5.04.2007 positively.

Thanking you.

Yours faithfully,



Director, SUDA

Contd. to P-2.

CBPHC

TRAINING OF TRAINERS ON 27.03.2007


Venue - SUDA Conference Hall / ILGUS Bhavan

Received Rs. 200/- (Rupees Two hundred only)

As Trainee Participant Fee

Sl. No.	Name of ULBs	Name	Phone No.	Designation	Signature
1	Old Malda	Dr. R. Bhattacharya	-	M.O.	[Signature] 27/3/07
2	"	Dr. M. Goswami	-	M.O.	[Signature] 27/3/07
3	"	Kabari Basak	-	P.H.N.	Kabari Basak 27/3/07
4	"	Aparna Kundu	-	H.S(F).	[Signature] 27.3.07
5	"	Dr. M. A. Rashid	-	M.O.	[Signature] 27/3/07
6	Baduria	Dr. C. K. Gain	-	M.O.	[Signature] 27/3/07
7	"	Sanghamitra Mukherjee	-	B.P.H.N.	[Signature] 27/3/07
8	"	Uma Kabari	-	H.S.(F)	U. Kabari 27/3/07
9	"	Dr. M. P. Basak	-	M.O.	[Signature] 27/3/07
10	Matha-bhanga	Lipika Chakraborty	-	G.N.M.	[Signature] 27/3/07
11	"	Indrani Paul	-	G.N.M.	I. Paul 27/3/07
12	"	Dr. Anurima Saha	-	M.O.	Anurima Saha 27/3/07
13	Bivenagar	Shikha Saha	-	H.S.(F)	Shikha Saha 27/3/07
14	"	Dr. Mayank Saha	-	M.O.	[Signature] 27/3/07
15	"	Ratna Pramanick (Kundu)	-	A.N.M.	R. Kundu 27/3/07
16	Contai	Dr. Subhasis Panda	-	B.N.M.S	[Signature] 27/3/07
17	"	Dr. Ananya Pal	-	M.O.	[Signature] 27/3/07
18	"	Kakali Das.	-	P.H.N.	Kakali Das 27/3/07
19	"	Bina Das	-	H.A.(F)	Bina Das 27/3/07
20	"	Himansu Manng	-	H.A.	[Signature] 27/3/07
21	Gobar-danga	Dr. Benkim Adhikari	-	M.O.	[Signature] 27/3/07
22	"	Dr. Asim Kumar Das	-	M.O.	[Signature] 27/3/07
23	"	Hasi Maiti	-	Nurse	Hasi Maiti
24	"	Reba Poddar	-	Nurse	Reba Poddar 27/3/07
25	Tufangia	Dr. N. Ghosh	-	A.C.M.O.H.	[Signature] 27/3/07

CBPHC
TRAINING OF TRAINERS ON 27.03.2007
Venue – SUDA Conference Hall / ILGUS Bhavan
Received Rs. 200/- (Rupees Two hundred only)
As Trainee Participant Fee

Sl. No.	Name of ULBs	Name	Phone No.	Designation	Signature
26	Rampur-hat	S. Mandol	-	S. S.	 27/3/07
27					
28					
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STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. **SUDA-Health/63 ULBs/06/298(9)**Date **26.03.2007**.....**From : Director, SUDA****To : The Chairman****Rampurhat / Jamuria / Mathabhanga / Tufanganj / Old Malda /
Contai / Birnagar / Baduria / Dalkhola Municipality****Sub. : Honorary Health Workers (HHWs) training under Community
Based Primary Health Care Services.****Sir,**

As the trainers' training will be completed centrally by SUDA on 27.03.2007 in respect of your ULB, you are requested to start HHWs' (both regular & panel candidates) training as per prescribed schedule of basic training course for HHWs and outline of course curriculum (vide enclosures) by 9th April, 2007.

1. The following training materials are to be provided to each HHW including panel candidates :
 - a) Suitable folder or bag - 1,
 - b) Exercise book no. 12 - 1,
 - c) Ball pen, pencil, eraser, sharpener, scale - 1 each,
 - d) Nirdehika for HHWs - to be Xeroxed from the training material booklet already provided to the trainers, if the printed material is not supplied in the mean time,
 - e) Family Schedule - 1 (already supplied),
 - f) Form A - 1 set,
 - g) Baseline Survey Format - 1 set.
2. The rates of expenditure to carry out during the said training are detailed below :
 - a) Training materials per HHW not exceeding Rs. 300/- (Rupees three hundred) only (total no. of HHWs + 5),
 - b) Tea & tiffin @ Rs. 30/- (Rupees thirty) only for the participants per head per day (total no. of HHWs + 5),
 - c) Mobility support @ Rs. 20/- (Rupees twenty) only per HHW trainees per day,
 - d) Trainers fees @ Rs. 200/- per trainer for two hours session,
 - e) Contingency not exceeding 10% of the total expenditure.

The expenditure is to be met out of the fund already provided to you and booked under the A/C head "Training - HHWs". Statement of Expenditure (SOE) is to be forwarded as per the prescribed proforma, already provided to you.

Contd. to P-2.

- 2 -

3. You are requested to conduct a pre-training examination & evaluation on 1st day of training and post-training examination & evaluation on last day of training. Questionnaire for both the pre & post training evaluation are enclosed in a separate sealed envelopes which are to be Xeroxed and kept ready before conduction of such examination. The score sheet for each of HHWs training is to be forwarded to the undersigned within 7 days on completion of examination.
4. A set of 4 (four) Charts consisting of (a) Human Body (b) Female Reproductive System (c) Genito - Urinary Organ - Male, (d) Balance Diet is sent to you along with this letter for use during HHWs' training.

The schedule dates for each day long sessions are to be indicated along with training venue, course co-ordinator, trainers name in the prescribed training schedule and a copy of the same may kindly be forwarded to the undersigned. After completion of training of HHWs for 45 days, and on receipt of Score Sheet of the above mentioned post evaluation examination, further instruction towards engagement of regular HHWs will be issued by this office.

You are also requested to send the information with regard to date of commencement of the training for HHWs, so that monitoring officer of SUDA could visit your ULB.

Thanking you.

Yours faithfully,

Director, SUDA

Dt. .. 26.03.2007

SUDA-Health/63 ULBs/06/298(9)/1(7)

Copy forwarded for information and necessary action to :

1. CMOH, Birbhum
2. CMOH, Burdwan
3. CMOH, Cooch Behar
4. CMOH, Malda
5. CMOH, Medinipur (East)
6. CMOH, Nadia
7. CMOH, Uttar Dinajpur

SUDA-Health/63 ULBs/06/298(9)/2(3)

Copy forwarded for information to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

Director, SUDA

Dt. .. 26.03.2007

Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. **SUDA-Health/63 ULBs/06/279**Date **07.03.2007****From : Director, SUDA****To : The Chairman
Baduria Municipality****Sub. : Training of trainers under Community Based
Primary Health Care Services.**

Sir,

With reference to telephonic discussion held between you and Project Officer, Health, SUDA, I am to inform you one day training programme for the trainers has been organized centrally by SUDA and scheduled on 16.03.2007 at Conference Hall, ILGUS Bhawan, HC Block, Sector – III, Salt Lake at 11 A.M. You are aware that these trainers will in turn conduct training of Honorary Health Workers at your municipal level.

You are requested to make necessary arrangement for participation of the said trainers in the training programme on the above mentioned date & time.

If any of the participants requires hostel accommodation at SUDA, you may kindly forward the names of such participants indicating days of staying.

Expenditure towards traveling and daily allowance is to be provided by the ULB concerned to each of the participants as per existing Govt. norms.

The said expenditure is to be met out of the existing fund of CBPHC already provided to you and to be booked under the A/C head "Training – trainers training".

A line in conformation with regard to participation of the trainers and requirement of hostel accommodation of the participants, if any, may please be communicated to the Project Officer, Health, SUDA through Fax (No. 033 2359 3184) by 12.03.2007 positively.

Thanking you.

Yours faithfully,


Director, SUDA**Contd. to P-2.**

o/e

- 2 -

SUDA-Health/63 ULBs/06/279/1(1)**Dt. .. 07.03.2007**

Copy forwarded for kind information to :

CMOH, North 24 Parganas

✓

Director, SUDA**Dt. .. 07.03.2007****SUDA-Health/63 ULBs/06/279/2(3)**

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

✓ 7/3/07

Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. **SUDA-Health/63 ULBs/06/278**Date **06.03.2007****From : Director, SUDA****To : The Chairman
Rampurhat Municipality****Sub. : Training of trainers under Community Based
Primary Health Care Services.****Sir,**

With reference to telephonic discussion held between you and Project Officer, Health, SUDA, I am to inform you one day training programme for the trainers has been organized centrally by SUDA and scheduled on 16.03.2007 at Conference Hall, ILGUS Bhawan, HC Block, Sector – III, Salt Lake at 11 A.M. You are aware that these trainers will in turn conduct training of Honorary Health Workers at your municipal level.

You are requested to make necessary arrangement for participation of the said trainers in the training programme on the above mentioned date & time.

If any of the participants requires hostel accommodation at SUDA, you may kindly forward the names of such participants indicating days of staying.

Expenditure towards traveling and daily allowance is to be provided by the ULB concerned to each of the participants as per existing Govt. norms.

The said expenditure is to be met out of the existing fund of CBPHC already provided to you and to be booked under the A/C head "Training – trainers training".

A line in conformation with regard to participation of the trainers and requirement of hostel accommodation of the participants, if any, may please be communicated to the Project Officer, Health, SUDA through Fax (No. 033 2359 3184) by 12.03.2007 positively.

Thanking you.

Yours faithfully,

(Signature)
7/3/07
Director, SUDA

Contd. to P-2.

- 2 -

SUDA-Health/63 ULBs/06/278/1(1)

Copy forwarded for kind information to :

CMOH, Birbhum

Dt. .. 06.03.2007

✓
7/3/07**Director, SUDA**

Dt. .. 06.03.2007

SUDA-Health/63 ULBs/06/278/2(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

✓
7/3/07**Director, SUDA**

SUDA

o/c

● STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No. SUDA-Health/63 ULBs/06/275(9)

Date 02.03.2007.....

From : Director, SUDA

To : The Chairman
Jamuria / Mathabhanga / Tufanganj / Memari / Nabadwip
Dalkhola / Old Malda / Birnagar / Contai Municipality

Sub. : Training of trainers under Community Based
Primary Health Care Services.

Sir,

With reference to telephonic discussion held between you and Project Officer, Health, SUDA, I am to inform you one day training programme for the trainers has been organized centrally by SUDA and scheduled on 16.03.2007 at Conference Hall, ILGUS Bhawan, HC Block, Sector – III, Salt Lake at 11 A.M. You are aware that these trainers will in turn conduct training of Honorary Health Workers at your municipal level.

You are requested to make necessary arrangement for participation of the said trainers in the training programme on the above mentioned date & time.

If any of the participants requires hostel accommodation at SUDA, you may kindly forward the names of such participants indicating days of staying.


Expenditure towards traveling and daily allowance is to be provided by the ULB concerned to each of the participants as per existing Govt. norms.

The said expenditure is to be met out of the existing fund of CBPHC already provided to you and to be booked under the A/C head "Training – trainers training".

A line in conformation with regard to participation of the trainers and requirement of hostel accommodation of the participants, if any, may please be communicated to the Project Officer, Health, SUDA through Fax (No. 033 2359 3184) by 12.03.2007 positively.

Thanking you.

Yours faithfully,


Director, SUDA

Contd. to P-2.

- 2 -

SUDA-Health/63 ULBs/06/275(9)/1(6)

Dt. .. 02.03.2007

Copy forwarded for kind information to :

1. CMOH, Burdwan
2. CMOH, Cooch Behar
3. CMOH, Uttar Dinajpur
4. CMOH, Malda
5. CMOH, Nadia
6. CMOH, Medinipur (East)

✓
Director, SUDA

Dt. .. 02.03.2007

SUDA-Health/63 ULBs/06/275(9)/2(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

✓
5/3/07
Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal****Ref No. SUDA-Health/63 ULBs/06/272(11)****Date 26.02.2007****From : Director, SUDA****To : The Chairman****Memari / Taki / Jhalda / Jaynagar Mazilpur /
Dalkhola / Tufanganj / Sainthia / Jiaganj Azimganj /
Dubrajpur / Coopers Camp / Chakdah Municipality****Sub. : Honorary Health Workers (HHWs) training under Community
Based Primary Health Care Services.****Sir,**

As the trainers' training will be completed centrally by SUDA on 28.02.2007 in respect of your ULB, you are requested to start HHWs' (both regular & panel candidates) training as per prescribed schedule of basic training course for HHWs and outline of course curriculum (vide enclosures) by 12th March, 2007.

- 1. The following training materials are to be provided to each HHW including panel candidates :**
 - a. Suitable folder or bag – 1,
 - b. Exercise book no. 12 – 1,
 - c. Ball pen, pencil, eraser, sharpener, scale – 1 each,
 - d. Nirdeshika for HHWs – to be Xeroxed from the training material booklet already provided to the trainers, if the printed material is not supplied in the mean time,
 - e. Family Schedule – 1 (already supplied),
 - f. Form A – 1 set,
 - g. Baseline Survey Format – 1 set.
- 2. The rates of expenditure to carry out during the said training are detailed below :**
 - a. Training materials per HHW not exceeding Rs. 300/- (Rupees three hundred) only (total no. of HHWs + 5),
 - b. Tea & tiffin @ Rs. 30/- (Rupees thirty) only for the participants per head per day (total no. of HHWs + 5),
 - c. Mobility support @ Rs. 20/- (Rupees twenty) only per HHW trainees per day,
 - d. Trainers fees @ Rs. 200/- per trainer for two hours session,
 - e. Contingency not exceeding 10% of the total expenditure.

The expenditure is to be met out of the fund already provided to you and booked under the A/C head "Training - HHWs". Statement of Expenditure (SOE) is to be forwarded as per the prescribed proforma, already provided to you.

Contd. to P-2.

- 2 -

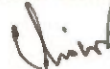
3. You are requested to conduct a pre-training examination & evaluation on 1st day of training and post-training examination & evaluation on last day of training. Questionnaire for both the pre & post training evaluation are enclosed in a separate sealed envelopes which are to be Xeroxed and kept ready before conduction of such examination. The score sheet for each of HHWs training is to be forwarded to the undersigned within 7 days on completion of examination.
4. A set of 4 (four) Charts consisting of (a) Human Body (b) Female Reproductive System (c) Genito - Urinary Organ - Male, (d) Balance Diet is sent to you along with this letter for use during HHWs' training.

The schedule dates for each day long sessions are to be indicated along with training venue, course co-ordinator, trainers name in the prescribed training schedule and a copy of the same may kindly be forwarded to the undersigned. After completion of training of HHWs for 45 days, and on receipt of Score Sheet of the above mentioned post evaluation examination, further instruction towards engagement of regular HHWs will be issued by this office.

You are also requested to send the information with regard to date of commencement of the training for HHWs, so that monitoring officer of SUDA could visit your ULB.

Thanking you.

Yours faithfully,




Director, SUDA

SUDA-Health/63 ULBs/06/272(11)/1(3)

26.02.2007

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA


Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091****West Bengal**Ref No. **SUDA-Health/63 ULBs/06/272(11)**Date **26.02.2007****From : Director, SUDA****To : The Chairman
Memari / Taki / Jhalda / Jaynagar Mazilpur /
Dalkhola / Tufanganj / Sainthia / Jiaganj Azimganj /
Dubrajpur / Coopers Camp / Chakdah Municipality****Sub. : Honorary Health Workers (HHWs) training under Community
Based Primary Health Care Services.****Sir,**

As the trainers' training will be completed centrally by SUDA on 28.02.2007 in respect of your ULB, you are requested to start HHWs' (both regular & panel candidates) training as per prescribed schedule of basic training course for HHWs and outline of course curriculum (vide enclosures) **by 12th March, 2007.**

- 1. The following training materials are to be provided to each HHW including panel candidates :**
 - a. Suitable folder or bag – 1,
 - b. Exercise book no. 12 – 1,
 - c. Ball pen, pencil, eraser, sharpener, scale – 1 each,
 - d. Nirdeshika for HHWs – to be Xeroxed from the training material booklet already provided to the trainers, if the printed material is not supplied in the mean time,
 - e. Family Schedule – 1 (already supplied),
 - f. Form A – 1 set,
 - g. Baseline Survey Format – 1 set.
- 2. The rates of expenditure to carry out during the said training are detailed below :**
 - a. Training materials per HHW not exceeding Rs. 300/- (Rupees three hundred) only (total no. of HHWs + 5),
 - b. Tea & tiffin @ Rs. 30/- (Rupees thirty) only for the participants per head per day (total no. of HHWs + 5),
 - c. Mobility support @ Rs. 20/- (Rupees twenty) only per HHW trainees per day,
 - d. Trainers fees @ Rs. 200/- per trainer for two hours session,
 - e. Contingency not exceeding 10% of the total expenditure.

The expenditure is to be met out of the fund already provided to you and booked under the A/C head "Training - HHWs". Statement of Expenditure (SOE) is to be forwarded as per the prescribed proforma, already provided to you.

Contd. to P-2.

- 2 -

3. You are requested to conduct a pre-training examination & evaluation on 1st day of training and post-training examination & evaluation on last day of training. Questionnaire for both the pre & post training evaluation are enclosed in a separate sealed envelopes which are to be Xeroxed and kept ready before conduction of such examination. The score sheet for each of HHWs training is to be forwarded to the undersigned within 7 days on completion of examination.
4. A set of 4 (four) Charts consisting of (a) Human Body (b) Female Reproductive System (c) Genito - Urinary Organ - Male, (d) Balance Diet is sent to you along with this letter for use during HHWs' training.

The schedule dates for each day long sessions are to be indicated along with training venue, course co-ordinator, trainers name in the prescribed training schedule and a copy of the same may kindly be forwarded to the undersigned. After completion of training of HHWs for 45 days, and on receipt of Score Sheet of the above mentioned post evaluation examination, further instruction towards engagement of regular HHWs will be issued by this office.

You are also requested to send the information with regard to date of commencement of the training for HHWs, so that monitoring officer of SUDA could visit your ULB.

Thanking you.

Yours faithfully,



Director, SUDA

26.02.2007

SUDA-Health/63 ULBs/06/272(11)/1(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA



Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. **SUDA-Health/63 ULBs/06/265(3)**Date **23.02.2007****From : Director, SUDA****To : The Chairman
Dubrajpur / Nabadwip / Coopers Camp Municipality****Sub. : Training of trainers under Community Based
Primary Health Care Services.**

Sir,

With reference to telephonic discussion held between you and Project Officer, Health, SUDA, I am to inform you one day training programme for the trainers has been organized centrally by SUDA and scheduled on 28.02.2007 at Conference Hall, ILGUS Bhawan, HC Block, Sector – III, Salt Lake at 11 A.M. You are aware that these trainers will in turn conduct training of Honorary Health Workers at your municipal level.

You are requested to make necessary arrangement for participation of the said trainers in the training programme on the above mentioned date & time.

If any of the participants requires hostel accommodation at SUDA, you may kindly forward the names of such participants indicating days of staying.

Expenditure towards traveling and daily allowance is to be provided by the ULB concerned to each of the participants as per existing Govt. norms.

The said expenditure is to be met out of the existing fund of CBPHC already provided to you and to be booked under the A/C head "Training – trainers training".

A line in conformation with regard to participation of the trainers and requirement of hostel accommodation of the participants, if any, may please be communicated to the Project Officer, Health, SUDA through Fax (No. 033 2359 3184) by 26.02.2007 positively.

Thanking you.

Yours faithfully,

23/2/07
Director, SUDA

Contd. to P-2.

- 2 -

SUDA-Health/63 ULBs/06/265(2)/1(2)

Dt. .. 23.02.2007

Copy forwarded for kind information to :

1. CMOH, Birbhum
2. CMOH, Nadia

23/2/07
Director, SUDA

Dt. .. 23.02.2007

SUDA-Health/63 ULBs/06/265(2)2(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

23/2/07
Director, SUDA

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref.No. ...SUDA-Health/63 ULBs/06/262(2)

Date21.02.2007

From : Director, SUDA

**To : The Chairman
Sainthia / Jiaganj-Azimganj Municipality**

**Sub. : Training of trainers under Community Based
Primary Health Care Services.**

Sir,

With reference to telephonic discussion held between you and Project Officer, Health, SUDA, I am to inform you one day training programme for the trainers has been organized centrally by SUDA and scheduled on 28.02.2007 at Conference Hall, ILGUS Bhawan, HC Block, Sector – III, Salt Lake at 11 A.M. You are aware that these trainers will in turn conduct training of Honorary Health Workers at your municipal level.

You are requested to make necessary arrangement for participation of the said trainers in the training programme on the above mentioned date & time.

If any of the participants requires hostel accommodation at SUDA, you may kindly forward the names of such participants indicating days of staying.

Expenditure towards traveling and daily allowance is to be provided by the ULB concerned to each of the participants as per existing Govt. norms.

The said expenditure is to be met out of the existing fund of CBPHC already provided to you and to be booked under the A/C head "Training – trainers training".

A line in conformation with regard to participation of the trainers and requirement of hostel accommodation of the participants, if any, may please be communicated to the Project Officer, Health, SUDA through Fax (No. 033 2359 3184) by 26.02.2007 positively.

Thanking you.

Yours faithfully,


Director, SUDA

Contd. to P-2.

- 2 -

SUDA-Health/63 ULBs/06/262(2)/1(2)

Dt. .. 21.02.2007

Copy forwarded for kind information to :

1. CMOH, Birbhum
2. CMOH, Murshidabad

21/2/07
Director, SUDA

Dt. .. 21.02.2007

SUDA-Health/63 ULBs/06/262(2)2(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

21/2/07
Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. **SUDA-Health/63 ULBs/06/261(6)**Date**19.02.2007****From : Director, SUDA****To : The Chairman
Memari / Taki / Jhalda / Jaynagar Mazilpur /
Dalkhola / Tufanganj Municipality****Sub. : Training of trainers under Community Based
Primary Health Care Services.****Sir,**

Reference is invited to your letter forwarding the names of Doctors & Nurses as trainers with regard to Community Based Primary Health Care (CBPHC) Services. One day training programme for the trainers has been organized centrally by SUDA and scheduled on 28.02.2007 at Conference Hall, ILGUS Bhawan, HC Block, Sector - III, Salt Lake at 11 A.M. You are aware that these trainers will in turn conduct training of Honorary Health Workers at your municipal level.

You are requested to make necessary arrangement for participation of the said trainers in the training programme on the above mentioned date & time.

If any of the participants requires hostel accommodation at SUDA, you may kindly forward the names of such participants indicating days of staying.

Expenditure towards traveling and daily allowance is to be provided by the ULB concerned to each of the participants as per existing Govt. norms.

The said expenditure is to be met out of the existing fund of CBPHC already provided to you and to be booked under the A/C head "Training - trainers training".

A line in conformation with regard to participation of the trainers and requirement of hostel accommodation of the participants, if any, may please be communicated to the Project Officer, Health, SUDA through Fax (No. 033 2359 3184) by 23.02.2007 positively.

Thanking you.

Yours faithfully,

Director, SUDA

Contd. to P-2.

- 2 -

SUDA-Health/63 ULBs/06/261(6)/1(6)

Dt. .. 19.02.2007

Copy forwarded for kind information to :

1. CMOH, Burdwan
2. CMOH, North 24 Parganas
3. CMOH, Purulia
4. CMOH, South 24 Parganas
5. CMOH, Uttar Dinajpur
6. CMOH, Cooch Behar


Director, SUDA

Dt. .. 19.02.2007

SUDA-Health/63 ULBs/06/261(6)2(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA


Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal****Ref No. SUDA-Health/63 ULBs/06/271(10)****Date26.02.2007****From : Director, SUDA****To : The Chairman
Nalhati / Katwa / Arambag / Egra /
Panskura / Tamluk / Jhargram / Kharar /
Ranaghat / Bangaon Municipality****Sub. : Honorary Health Workers (HHWs) training under Community
Based Primary Health Care Services.****Sir,**

As the trainers' training will be completed centrally by SUDA on 27.02.2007 in respect of your ULB, you are requested to start HHWs' (both regular & panel candidates) training as per prescribed schedule of basic training course for HHWs and outline of course curriculum (vide enclosures) by 12th March, 2007.

- 1. The following training materials are to be provided to each HHW including panel candidates :**
 - a. Suitable folder or bag – 1,
 - b. Exercise book no. 12 – 1,
 - c. Ball pen, pencil, eraser, sharpener, scale – 1 each,
 - d. Nirdeshika for HHWs – to be Xeroxed from the training material booklet already provided to the trainers, if the printed material is not supplied in the mean time,
 - e. Family Schedule – 1 (already supplied),
 - f. Form A – 1 set,
 - g. Baseline Survey Format – 1 set.
- 2. The rates of expenditure to carry out during the said training are detailed below :**
 - a. Training materials per HHW not exceeding Rs. 300/- (Rupees three hundred) only (total no. of HHWs + 5),
 - b. Tea & tiffin @ Rs. 30/- (Rupees thirty) only for the participants per head per day (total no. of HHWs + 5),
 - c. Mobility support @ Rs. 20/- (Rupees twenty) only per HHW trainees per day,
 - d. Trainers fees @ Rs. 200/- per trainer for two hours session,
 - e. Contingency not exceeding 10% of the total expenditure.

The expenditure is to be met out of the fund already provided to you and booked under the A/C head "Training - HHWs". Statement of Expenditure (SOE) is to be forwarded as per the prescribed proforma, already provided to you.

Contd. to P-2.

- 2 -

3. You are requested to conduct a pre-training examination & evaluation on 1st day of training and post-training examination & evaluation on last day of training. Questionnaire for both the pre & post training evaluation are enclosed in a separate sealed envelopes which are to be Xeroxed and kept ready before conduction of such examination. The score sheet for each of HHWs training is to be forwarded to the undersigned within 7 days on completion of examination.
4. A set of 4 (four) Charts consisting of (a) Human Body (b) Female Reproductive System (c) Genito - Urinary Organ - Male, (d) Balance Diet is sent to you along with this letter for use during HHWs' training.

The schedule dates for each day long sessions are to be indicated along with training venue, course co-ordinator, trainers name in the prescribed training schedule and a copy of the same may kindly be forwarded to the undersigned. After completion of training of HHWs for 45 days, and on receipt of Score Sheet of the above mentioned post evaluation examination, further instruction towards engagement of regular HHWs will be issued by this office.

You are also requested to send the information with regard to date of commencement of the training for HHWs, so that monitoring officer of SUDA could visit your ULB.

Thanking you.

Yours faithfully,


Director, SUDA

SUDA-Health/63 ULBs/06/271(10)/1(3)

26.02.2007

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA


Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091****West Bengal**Ref No. **SUDA-Health/63 ULBs/06/271(10)**Date**26.02.2007****From : Director, SUDA****To : The Chairman**
Nalhati / Katwa / Arambag / Egra /
Panskura / Tamluk / Jhargram / Kharar /
Ranaghat / Bangaon Municipality**Sub. : Honorary Health Workers (HHWs) training under Community**
Based Primary Health Care Services.**Sir,**

As the trainers' training will be completed centrally by SUDA on 27.02.2007 in respect of your ULB, you are requested to start HHWs' (both regular & panel candidates) training as per prescribed schedule of basic training course for HHWs and outline of course curriculum (vide enclosures) by 12th March, 2007.

1. **The following training materials are to be provided to each HHW including panel candidates :**
 - a. Suitable folder or bag – 1,
 - b. Exercise book no. 12 – 1,
 - c. Ball pen, pencil, eraser, sharpener, scale – 1 each,
 - d. Nirdeshika for HHWs – to be Xeroxed from the training material booklet already provided to the trainers, if the printed material is not supplied in the mean time,
 - e. Family Schedule – 1 (already supplied),
 - f. Form A – 1 set,
 - g. Baseline Survey Format – 1 set.
2. **The rates of expenditure to carry out during the said training are detailed below :**
 - a. Training materials per HHW not exceeding Rs. 300/- (Rupees three hundred) only (total no. of HHWs + 5),
 - b. Tea & tiffin @ Rs. 30/- (Rupees thirty) only for the participants per head per day (total no. of HHWs + 5),
 - c. Mobility support @ Rs. 20/- (Rupees twenty) only per HHW trainees per day,
 - d. Trainers fees @ Rs. 200/- per trainer for two hours session,
 - e. Contingency not exceeding 10% of the total expenditure.

The expenditure is to be met out of the fund already provided to you and booked under the A/C head "Training - HHWs". Statement of Expenditure (SOE) is to be forwarded as per the prescribed proforma, already provided to you.

Contd. to P-2.

- 2 -

3. You are requested to conduct a pre-training examination & evaluation on 1st day of training and post-training examination & evaluation on last day of training. Questionnaire for both the pre & post training evaluation are enclosed in a separate sealed envelops which are to be Xeroxed and kept ready before conduction of such examination. The score sheet for each of HHWs training is to be forwarded to the undersigned within 7 days on completion of examination.
4. A set of 4 (four) Charts consisting of (a) Human Body (b) Female Reproductive System (c) Genito - Urinary Organ - Male, (d) Balance Diet is sent to you along with this letter for use during HHWs' training.

The schedule dates for each day long sessions are to be indicated along with training venue, course co-ordinator, trainers name in the prescribed training schedule and a copy of the same may kindly be forwarded to the undersigned. After completion of training of HHWs for 45 days, and on receipt of Score Sheet of the above mentioned post evaluation examination, further instruction towards engagement of regular HHWs will be issued by this office.

You are also requested to send the information with regard to date of commencement of the training for HHWs, so that monitoring officer of SUDA could visit your ULB.

Thanking you.

Yours faithfully,



Director, SUDA

26.02.2007

SUDA-Health/63 ULBs/06/271(10)/1(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA



Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. **SUDA-Health/63 ULBs/06/260(11)**Date **19.02.2007****From : Director, SUDA****To : The Chairman
Nalhati / Katwa / Arambag / Egra / Panskura / Tamluk / Jhargram /
Kharar Dhulian / Ranaghat / Bangaon Municipality****Sub. : Training of trainers under Community Based
Primary Health Care Services.**

Sir,

Reference is invited to your letter forwarding the names of Doctors & Nurses as trainers with regard to Community Based Primary Health Care (CBPHC) Services. One day training programme for the trainers has been organized centrally by SUDA and scheduled on 27.02.2007 at Conference Hall, ILGUS Bhawan, HC Block, Sector - III, Salt Lake at 11 A.M. You are aware that these trainers will in turn conduct training of Honorary Health Workers at your municipal level.

You are requested to make necessary arrangement for participation of the said trainers in the training programme on the above mentioned date & time.

If any of the participants requires hostel accommodation at SUDA, you may kindly forward the names of such participants indicating days of staying.

Expenditure towards traveling and daily allowance is to be provided by the ULB concerned to each of the participants as per existing Govt. norms.

The said expenditure is to be met out of the existing fund of CBPHC already provided to you and to be booked under the A/C head "Training - trainers training".

A line in conformation with regard to participation of the trainers and requirement of hostel accommodation of the participants, if any, may please be communicated to the Project Officer, Health, SUDA through Fax (No. 033 2359 3184) by 23.02.2007 positively.

Thanking you.

Yours faithfully,

Director, SUDA

Contd. to P-2.

- 2 -

SUDA-Health/63 ULBs/06/260(11)/1(8)

Dt. .. 19.02.2007

Copy forwarded for kind information to :

1. CMOH, Birbhum
2. CMOH, Burdwan
3. CMOH, Hooghly
4. CMOH, Medinipur (East)
5. CMOH, Medinipur (West)
6. CMOH, Murshidabad
7. CMOH, Nadia
8. CMOH, North 24 Pgs.

Director, SUDA

Dt. .. 19.02.2007

SUDA-Health/63 ULBs/06/260(11)/2(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. **SUDA-Health/63 ULBs/06/244(11)**Date**29.01.2007****From : Director, SUDA****To : The Chairman****Kalimpong / Tarakeswar / Mal / Chandrokona /
Ghatal / Ashoknagar Kalyangar / Basirhat /
Mekhliganj / Kandi / Gushkara / Mirik Municipality****Sub. : Honorary Health Workers (HHWs) training under Community
Based Primary Health Care Services.****Sir,**

As the trainers' training will be completed centrally by SUDA on 31.01.2007 in respect of your ULB, you are requested to start HHWs' (both regular & panel candidates) training as per prescribed schedule of basic training course for HHWs and outline of course curriculum (vide enclosures) by 12th February, 2007.

- 1. The following training materials are to be provided to each HHW including panel candidates :**
 - a. Suitable folder or bag – 1,
 - b. Exercise book no. 12 – 1,
 - c. Ball pen, pencil, eraser, sharpener, scale – 1 each,
 - d. Nirdeshika for HHWs – to be Xeroxed from the training material booklet already provided to the trainers, if the printed material is not supplied in the mean time,
 - e. Family Schedule – 1 (already supplied),
 - f. Form A – 1 set,
 - g. Baseline Survey Format – 1 set.
- 2. The rates of expenditure to carry out during the said training are detailed below :**
 - a. Training materials per HHW not exceeding Rs. 300/- (Rupees three hundred) only (total no. of HHWs + 5),
 - b. Tea & tiffin @ Rs. 30/- (Rupees thirty) only for the participants per head per day (total no. of HHWs + 5),
 - c. Mobility support @ Rs. 20/- (Rupees twenty) only per HHW trainees per day,
 - d. Trainers fees @ Rs. 200/- per trainer for two hours session,
 - e. Contingency not exceeding 10% of the total expenditure.

The expenditure is to be met out of the fund already provided to you and booked under the A/C head "Training - HHWs". Statement of Expenditure (SOE) is to be forwarded as per the prescribed proforma, already provided to you.

Contd. to P-2.

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No. **SUDA-Health/63 ULBs/06/244(11)**

Date29.01.2007

From : Director, SUDA

To : The Chairman

Kalimpong / Tarakeswar / Mal / Chandrokona /
Ghatal / Ashoknagar Kalyangar / Basirhat /
Mekhliganj / Kandi / Gushkara / Mirik Municipality

Sub. : Honorary Health Workers (HHWs) training under Community
Based Primary Health Care Services.

Sir,

As the trainers' training will be completed centrally by SUDA on 31.01.2007 in respect of your ULB, you are requested to start HHWs' (both regular & panel candidates) training as per prescribed schedule of basic training course for HHWs and outline of course curriculum (vide enclosures) by 12th February, 2007.

1. The following training materials are to be provided to each HHW including panel candidates :
 - a. Suitable folder or bag – 1,
 - b. Exercise book no. 12 – 1,
 - c. Ball pen, pencil, eraser, sharpener, scale – 1 each,
 - d. Nirdeshika for HHWs – to be Xeroxed from the training material booklet already provided to the trainers, if the printed material is not supplied in the mean time,
 - e. Family Schedule – 1 (already supplied),
 - f. Form A – 1 set,
 - g. Baseline Survey Format – 1 set.
2. The rates of expenditure to carry out during the said training are detailed below :
 - a. Training materials per HHW not exceeding Rs. 300/- (Rupees three hundred) only (total no. of HHWs + 5),
 - b. Tea & tiffin @ Rs. 30/- (Rupees thirty) only for the participants per head per day (total no. of HHWs + 5),
 - c. Mobility support @ Rs. 20/- (Rupees twenty) only per HHW trainees per day,
 - d. Trainers fees @ Rs. 200/- per trainer for two hours session,
 - e. Contingency not exceeding 10% of the total expenditure.

The expenditure is to be met out of the fund already provided to you and booked under the A/C head "Training - HHWs". Statement of Expenditure (SOE) is to be forwarded as per the prescribed proforma, already provided to you.

Contd. to P-2.

- 2 -

3. You are requested to conduct a pre-training examination & evaluation on 1st day of training and post-training examination & evaluation on last day of training. Questionnaire for both the pre & post training evaluation are enclosed in a separate sealed envelopes which are to be Xeroxed and kept ready before conduction of such examination. The score sheet for each of HHWs training is to be forwarded to the undersigned within 7 days on completion of examination.
4. A set of 5 (five) Charts consisting of (a) Human Body (b) Female Reproductive System (c) Male Reproductive System (d) Human Physiology (e) Balance Diet is sent to you along with this letter for use during HHWs' training.

The schedule dates for each day long sessions are to be indicated along with training venue, course co-ordinator, trainers name in the prescribed training schedule and a copy of the same may kindly be forwarded to the undersigned. After completion of training of HHWs for 45 days, and on receipt of Score Sheet of the above mentioned post evaluation examination, further instruction towards engagement of regular HHWs will be issued by this office.

You are also requested to send the information with regard to date of commencement of the training for HHWs, so that monitoring officer of SUDA could visit your ULB.

Thanking you.

Yours faithfully,

[Signature]
29/1/07
Director, SUDA

29.01.2007

SUDA-Health/63 ULBs/06/244(11)/1(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

[Signature]
Director, SUDA

- 2 -

3. You are requested to conduct a pre-training examination & evaluation on 1st day of training and post-training examination & evaluation on last day of training. Questionnaire for both the pre & post training evaluation are enclosed in a separate sealed envelopes which are to be Xeroxed and kept ready before conduction of such examination. The score sheet for each of HHWs training is to be forwarded to the undersigned within 7 days on completion of examination.
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The schedule dates for each day long sessions are to be indicated along with training venue, course co-ordinator, trainers name in the prescribed training schedule and a copy of the same may kindly be forwarded to the undersigned. After completion of training of HHWs for 45 days, and on receipt of Score Sheet of the above mentioned post evaluation examination, further instruction towards engagement of regular HHWs will be issued by this office.

You are also requested to send the information with regard to date of commencement of the training for HHWs, so that monitoring officer of SUDA could visit your ULB.

Thanking you.

Yours faithfully,

o/c
✓
29/1/07
Director, SUDA

29.01.2007

SUDA-Health/63 ULBs/06/244(11)/1(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

✓
29/1/07
Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. **SUDA-Health/63 ULBs/06/240**Date **19.01.2007****From : Director, SUDA****To : The Chairman
Kalimpong / Tarakeswar / Mal / Chandrokona / Ghatal /
Ashoknagar Kalyangar / Basirhat / Mekhliganj Municipality****Sub. : Training of trainers under Community Based
Primary Health Care Services.**

Sir,

Reference is invited to your letter forwarding the names of doctors & nurses as trainers with regard to Community Based Primary Health Care (CBPHC) Services. One day training programme for the trainers has been organized centrally by SUDA and scheduled on 31.01.2007 at SUDA Conference Hall, ILGUS Bhawan, HC Block, Sector - III, Salt Lake at 11 A.M. You are aware that these trainers will in turn conduct training of Honorary Health Workers at your municipal level.

You are requested to make necessary arrangement for participation of the said trainers in the training programme on the above mentioned date & time.

If any of the participants requires hostel accommodation at SUDA, you may kindly forward the names of such participants indicating days of staying.

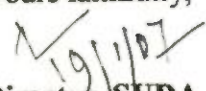
Expenditure towards traveling and daily allowance is to be provided by the ULB concerned to each of the participants as per existing Govt. norms.

The said expenditure is to be met out of the existing fund of CBPHC already provided to you and to be booked under the A/C head "Training - trainers training".

A line in conformation with regard to participation of the trainers and requirement of hostel accommodation of the participants, if any, may please be communicated to the Project Officer, Health, SUDA through Fax (No. 033 2359 3184) by 25.01.2007 positively.

Thanking you.

Yours faithfully,


Director, SUDA

Contd. to P-2.

- 2 -

SUDA-Health/63 ULBs/06/240/1(6)

19.01.2007

Copy forwarded for kind information to :

1. CMOH, Darjeeling
2. CMOH, Hooghly
3. CMOH, Jalpaiguri
4. CMOH, West Medinipur
5. CMOH, North 24 Parganas
6. CMOH, Cooch Behar

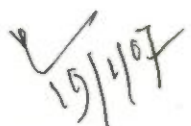

Director, SUDA

19.01.2007

SUDA-Health/63 ULBs/06/240/2(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA


Director, SUDA

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No. : **SUDA-Health/63 ULBs/06/239**

Date **17.01.2007**

From : Director, SUDA

To : The Chairman

Gangarampur / Haldia / Taherpur / Habra / Dainhat / Kurseong /
Ramjibanpur / Khirpai / Kaliaganj / Haldibari / Sonamukhi Municipality

**Sub. : Honorary Health Workers (HHWs) training under Community
Based Primary Health Care Services.**

Sir,

As the trainers' training will be completed centrally by SUDA on 19.01.2007 in respect of your ULB, you are requested to start HHWs' (both regular & panel candidates) training as per prescribed schedule of basic training course for HHWs and outline of course curriculum (vide enclosures) by 29th January, 2007. 27.01.07

1. The following training materials are to be provided to each HHW including panel candidates :
 - a) Suitable folder or bag - 1,
 - b) Exercise book no. 12 - 1,
 - c) Ball pen, pencil, eraser, sharpener, scale - 1 each,
 - d) Nirdeshika for HHWs - to be Xeroxed from the training material booklet already provided to the trainers, if the printed material is not supplied in the mean time,
 - e) Family Schedule - 1 (already supplied),
 - f) Form A - 1 set,
 - g) Baseline Survey Format - 1 set.
2. The rates of expenditure to carry out during the said training are detailed below :
 - a) Training materials per HHW not exceeding Rs. 300/- (Rupees three hundred) only (total no. of HHWs + 5),
 - b) Tea & tiffin @ Rs. 30/- (Rupees thirty) only for the participants per head per day (total no. of HHWs + 5),
 - c) Mobility support @ Rs. 20/- (Rupees twenty) only per HHW trainees per day,
 - d) Trainers fees @ Rs. 200/- per trainer for two hours session,
 - e) Contingency not exceeding 10% of the total expenditure.

The expenditure is to be met out of the fund already provided to you and booked under the A/C head "Training - HHWs". Statement of Expenditure (SOE) is to be forwarded as per the prescribed proforma, already provided to you.

- 2 -

3. You are requested to conduct a pre-training examination & evaluation on 1st day of training and post-training examination & evaluation on last day of training. Questionnaire for both the pre & post training evaluation are enclosed in a separate sealed envelopes which are to be Xeroxed and kept ready before conduction of such examination. The score sheet for each of HHWs training is to be forwarded to the undersigned within 7 days on completion of examination.

The schedule dates for each day long sessions are to be indicated along with training venue, course co-ordinator, trainers name in the prescribed training schedule and a copy of the same may kindly be forwarded to the undersigned. After completion of training of HHWs for 45 days, and on receipt of Score Sheet of the above mentioned post evaluation examination, further instruction towards engagement of regular HHWs will be issued by this office.

You are also requested to send the information with regard to date of commencement of the training for HHWs, so that monitoring officer of SUDA could visit your ULB.

Thanking you.

Yours faithfully,



Director, SUDA

SUDA-Health/63 ULBs/06/239/1(3)

17.01.2007

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. **SUDA-Health/63 ULBs/06/239**Date**17.01.2007****From : Director, SUDA****To : The Chairman
Gangarampur / Haldia / Taherpur / Habra / Dainhat / Kurseong /
Ramjibanpur / Khirpai / Kaliaganj / Haldibari / Sonamukhi Municipality****Sub. : Honorary Health Workers (HHWs) training under Community
Based Primary Health Care Services.****Sir,**

As the trainers' training will be completed centrally by SUDA on 19.01.2007 in respect of your ULB, you are requested to start HHWs' (both regular & panel candidates) training as per prescribed schedule of basic training course for HHWs and outline of course curriculum (vide enclosures) by 29th January, 2007.

1. **The following training materials are to be provided to each HHW including panel candidates :**
 - a) Suitable folder or bag - 1,
 - b) Exercise book no. 12 - 1,
 - c) Ball pen, pencil, eraser, sharpener, scale - 1 each,
 - d) Nirdeshika for HHWs - to be Xeroxed from the training material booklet already provided to the trainers, if the printed material is not supplied in the mean time,
 - e) Family Schedule - 1 (already supplied),
 - f) Form A - 1 set,
 - g) Baseline Survey Format - 1 set.
2. **The rates of expenditure to carry out during the said training are detailed below :**
 - a) Training materials per HHW not exceeding Rs. 300/- (Rupees three hundred) only (total no. of HHWs + 5),
 - b) Tea & tiffin @ Rs. 30/- (Rupees thirty) only for the participants per head per day (total no. of HHWs + 5),
 - c) Mobility support @ Rs. 20/- (Rupees twenty) only per HHW trainees per day,
 - d) Trainers fees @ Rs. 200/- per trainer for two hours session,
 - e) Contingency not exceeding 10% of the total expenditure.

The expenditure is to be met out of the fund already provided to you and booked under the A/C head "Training - HHWs". Statement of Expenditure (SOE) is to be forwarded as per the prescribed proforma, already provided to you.

- 2 -

3. You are requested to conduct a pre-training examination & evaluation on 1st day of training and post-training examination & evaluation on last day of training. Questionnaire for both the pre & post training evaluation are enclosed in a separate sealed envelopes which are to be Xeroxed and kept ready before conduction of such examination. The score sheet for each of HHWs training is to be forwarded to the undersigned within 7 days on completion of examination.

4. The schedule dates for each day long sessions are to be indicated along with training venue, course co-ordinator, trainers name in the prescribed training schedule and a copy of the same may kindly be forwarded to the undersigned. After completion of training of HHWs for 45 days, and on receipt of Score Sheet of the above mentioned post evaluation examination, further instruction towards engagement of regular HHWs will be issued by this office.

You are also requested to send the information with regard to date of commencement of the training for HHWs, so that monitoring officer of SUDA could visit your ULB.

Thanking you.

Yours faithfully,

Director, SUDA

17.01.2007

SUDA-Health/63 ULBs/06/239/1(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

Director, SUDA

A set of 5 charts, consisting of (a) Female Human body, (b) Female Repro. sys., (c) Male Reproduct. sys., (d) Human physiology, (e) Balance Diet. is forwarded sent to you along with this letter for use during training.

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. **SUDA-Health/63 ULBs/06/239**Date**17.01.2007****From : Director, SUDA****To : The Chairman****Gangarampur / Haldia / Taherpur / Habra / Dainhat / Kurseong /
Ramjibanpur / Khirpai / Kaliaganj / Haldibari / Sonamukhi Municipality****Sub. : Honorary Health Workers (HHWs) training under Community
Based Primary Health Care Services.****Sir,**

As the trainers' training will be completed centrally by SUDA on 19.01.2007 in respect of your ULB, you are requested to start HHWs' (both regular & panel candidates) training as per prescribed schedule of basic training course for HHWs and outline of course curriculum (vide enclosures) **by 29th January, 2007.**

1. The following training materials are to be provided to each HHW including panel candidates :

- a) Suitable folder or bag – 1,
- b) Exercise book no. 12 – 1,
- c) Ball pen, pencil, eraser, sharpener, scale – 1 each,
- d) Nirdeshika for HHWs – to be Xeroxed from the training material booklet already provided to the trainers, if the printed material is not supplied in the mean time,
- e) Family Schedule – 1 (already supplied),
- f) Form A – 1 set,
- g) Baseline Survey Format – 1 set.

2. The rates of expenditure to carry out during the said training are detailed below :

- a) Training materials per HHW not exceeding Rs. 300/- (Rupees three hundred) only (total no. of HHWs + 5),
- b) Tea & tiffin @ Rs. 30/- (Rupees thirty) only for the participants per head per day (total no. of HHWs + 5),
- c) Mobility support @ Rs. 20/- (Rupees twenty) only per HHW trainees per day,
- d) Trainers fees @ Rs. 200/- per trainer for two hours session,
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The expenditure is to be met out of the fund already provided to you and booked under the A/C head "Training - HHWs". Statement of Expenditure (SOE) is to be forwarded as per the prescribed proforma, already provided to you.

- 2 -

3. You are requested to conduct a pre-training examination & evaluation on 1st day of training and post-training examination & evaluation on last day of training. Questionnaire for both the pre & post training evaluation are enclosed in a separate sealed envelopes which are to be Xeroxed and kept ready before conduction of such examination. The score sheet for each of HHWs training is to be forwarded to the undersigned within 7 days on completion of examination.

The schedule dates for each day long sessions are to be indicated along with training venue, course co-ordinator, trainers name in the prescribed training schedule and a copy of the same may kindly be forwarded to the undersigned. After completion of training of HHWs for 45 days, and on receipt of Score Sheet of the above mentioned post evaluation examination, further instruction towards engagement of regular HHWs will be issued by this office.

You are also requested to send the information with regard to date of commencement of the training for HHWs, so that monitoring officer of SUDA could visit your ULB.

Thanking you. 7

Yours faithfully,

Director, SUDA

17.01.2007

SUDA-Health/63 ULBs/06/239/1(3)

Copy forwarded for information and necessary action to : ✓

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. **SUDA-Health/63 ULBs/06/239**Date**17.01.2007****From : Director, SUDA****To : The Chairman****Gangarampur / Haldia / Taherpur / Habra / Dainhat / Kurseong /
Ramjibanpur / Khirpai / Kaliaganj / Haldibari / Sonamukhi Municipality****Sub. : Honorary Health Workers (HHWs) training under Community
Based Primary Health Care Services.****Sir,**

As the trainers' training will be completed centrally by SUDA on 19.01.2007 in respect of your ULB, you are requested to start HHWs' (both regular & panel candidates) training as per prescribed schedule of basic training course for HHWs and outline of course curriculum (vide enclosures) by **29th January, 2007**.

1. **The following training materials are to be provided to each HHW including panel candidates :**
 - a) Suitable folder or bag – 1,
 - b) Exercise book no. 12 – 1,
 - c) Ball pen, pencil, eraser, sharpener, scale – 1 each,
 - d) Nirdeshika for HHWs – to be Xeroxed from the training material booklet already provided to the trainers, if the printed material is not supplied in the mean time,
 - e) Family Schedule – 1 (already supplied),
 - f) Form A – 1 set,
 - g) Baseline Survey Format – 1 set.
2. **The rates of expenditure to carry out during the said training are detailed below :**
 - a) Training materials per HHW not exceeding Rs. 300/- (Rupees three hundred) only (total no. of HHWs + 5),
 - b) Tea & tiffin @ Rs. 30/- (Rupees thirty) only for the participants per head per day (total no. of HHWs + 5),
 - c) Mobility support @ Rs. 20/- (Rupees twenty) only per HHW trainees per day,
 - d) Trainers fees @ Rs. 200/- per trainer for two hours session,
 - e) Contingency not exceeding 10% of the total expenditure.

The expenditure is to be met out of the fund already provided to you and booked under the A/C head "Training - HHWs". Statement of Expenditure (SOE) is to be forwarded as per the prescribed proforma, already provided to you.

- 2 -

3. You are requested to conduct a pre-training examination & evaluation on 1st day of training and post-training examination & evaluation on last day of training. Questionnaire for both the pre & post training evaluation are enclosed in a separate sealed envelopes which are to be Xeroxed and kept ready before conduction of such examination. The score sheet for each of HHWs training is to be forwarded to the undersigned within 7 days on completion of examination.

The schedule dates for each day long sessions are to be indicated along with training venue, course co-ordinator, trainers name in the prescribed training schedule and a copy of the same may kindly be forwarded to the undersigned. After completion of training of HHWs for 45 days, and on receipt of Score Sheet of the above mentioned post evaluation examination, further instruction towards engagement of regular HHWs will be issued by this office.

You are also requested to send the information with regard to date of commencement of the training for HHWs, so that monitoring officer of SUDA could visit your ULB.

Thanking you.

Yours faithfully,

Sd/x


Director, SUDA

17.01.2007

SUDA-Health/63 ULBs/06/239/1(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA


Director, SUDA

o/c

● STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No. **SUDA-Health/63 ULBs/06/235**

Date**11.01.2007**

From : Director, SUDA

**To : The Chairman
Haldibari Municipality**

**Sub. : Training of trainers under Community Based
Primary Health Care Services.**

Sir,

Reference is invited to your letter bearing no. 39/107 dt. 10.01.2007 forwarding the names of doctor & nurses of Govt. Hospital as trainers with regard to Community Based Primary Health Care (CBPHC) Services. One day training programme for the trainers has been organized centrally by SUDA and scheduled on 19.01.2007 at SUDA Conference Hall, ILGUS Bhawan, HC Block, Sector - III, Salt Lake at 11 A.M. You are aware that these trainers will in turn conduct training of Honorary Health Workers at your municipal level. It is noticed from your letter that you have not forwarded the name of one doctor of the municipal town, identified by you, who will be overall responsible for the whole process of conduction of the training programme of Honorary Health Workers. Hence, you may kindly identify and detail one such doctor positively to undergo trainer's training.

You are requested to make necessary arrangement for participation of the said trainers in the training programme on the above mentioned date & time.

If any of the participants requires hostel accommodation at SUDA, you may kindly forward the names of such participants indicating days of staying.

Expenditure towards traveling and daily allowance is to be provided by the ULB concerned to each of the participants as per existing Govt. norms.

The said expenditure is to be met out of the existing fund of CBPHC already provided to you and to be booked under the A/C head "Training - trainers training".

A line in conformation with regard to participation of the trainers and requirement of hostel accommodation of the participants, if any, may please be communicated to the Project Officer, Health, SUDA through Fax (No. 033 2359 3184) by 15.01.2007 positively.

Thanking you.

Yours faithfully,

11/1/07
Director, SUDA

Contd. to P-2.

- 2 -

SUDA-Health/63 ULBs/06/235/1(1)

11.01.2007

Copy forwarded for kind information to :
CMOH, Cooch Behar

✓
11/1/07

Director, SUDA

11.01.2007

SUDA-Health/63 ULBs/06/235/2(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

✓
11/1/07

Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. ...**SUDA-Health/63 ULBs/06/230**Date**10.01.2007****From : Director, SUDA****To : The Chairman
Dainhat / Kurseong / Ramjibanpur / Khirpai / Kaliaganj Municipality****Sub. : . Training of trainers under Community Based
Primary Health Care Services.**

Sir,

Reference is invited to your letter forwarding the names of doctor & nurses of Govt. Hospital as trainers with regard to Community Based Primary Health Care (CBPHC) Services. One day training programme for the trainers has been organized centrally by SUDA and scheduled on 19.01.2007 at SUDA Conference Hall, ILGUS Bhawan, HC Block, Sector - III, Salt Lake at 11 A.M. You are aware that these trainers will in turn conduct training of Honorary Health Workers at your municipal level. It is noticed from your letter that you have not forwarded the name of one doctor of the municipal town, identified by you, who will be overall responsible for the whole process of conduction of the training programme of Honorary Health Workers. Hence, you may kindly identify and detail one such doctor positively to undergo trainer's training.

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If any of the participants requires hostel accommodation at SUDA, you may kindly forward the names of such participants indicating days of staying.

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Thanking you.

Yours faithfully,

Director, SUDA

Contd. to P-2.

6/2

- 2 -

SUDA-Health/63 ULBs/06/230/1(4)

10.01.2007

Copy forwarded for kind information to :

1. CMOH, Burdwan
2. CMOH, Darjeeling
3. CMOH, West Medinipur
4. CMOH, Uttar Dinajpur

✓
10/1/07

Director, SUDA

10.01.2007

SUDA-Health/63 ULBs/06/230/2(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

✓
10/1/07

Director, SUDA

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

**H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**

Ref No. ...SUDA-Health/63 ULBs/06/231

Date10.01.2007

From : Director, SUDA

**To : The Chairman
Gangarampur / Haldia / Taherpur / Habra Municipality**

**Sub. : Training of trainers under Community Based
Primary Health Care Services.**

Sir,

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The said expenditure is to be met out of the existing fund of CBPHC already provided to you and to be booked under the A/C head "Training - trainers training".

A line in conformation with regard to participation of the trainers and requirement of hostel accommodation of the participants, if any, may please be communicated to the Project Officer, Health, SUDA through Fax (No. 033 2359 3184) by 15.01.2007 positively.

Thanking you.

Yours faithfully,

10/1/07
Director, SUDA

Contd. to P-2.

- 2 -

SUDA-Health/63 ULBs/06/231/1(4)

10.01.2007

Copy forwarded for kind information to :

1. CMOH, Dakshin Dinajpur
2. CMOH, East Medinipur
3. CMOH, Nadia
4. CMOH, North 24 Parganas

✓
10/1/07
Director, SUDA

10.01.2007

SUDA-Health/63 ULBs/06/231/2(3)

Copy forwarded for information and necessary action to :

1. Director, Directorate of Local Bodies
2. P.O., Health, SUDA
3. F.O, SUDA

✓
10/1/07
Director, SUDA