

Placed opposite communication of MD, NRHM vide memo no. H/SFWB/182-02-2012/ dt. 21.08.2014 (Marked at Flag "A") wherein it is informed that National Urban Health Mission (NUHM) is going to be implemented in 2014-15 and thereon, in different ULBs having more than 50,000 populations in each civic area. The basic need is to strengthen the health care delivery system existed in those areas. The proposal of starting of the new project has been duly approved by Hon'ble Chief Minister and MIC, DHFW, Govt. of West Bengal (Marked at flag "B").

1. Regarding fund flow system as, pointed at serial no.-1 in the above mentioned letter, it is proposed that both the monitoring agency and the implementing agencies will open a separate bank account at their respective end for passing on the fund to ULBs and to the beneficiaries respectively. It may be mentioned that SUDA is only concerned in respect of 05 nos. of Municipal Corporations excluding Kolkata Municipal Corporation. In this regard, it may be worthwhile to mention that in terms of order from Finance Department, new bank account is to be opened with the concurrence of the Finance Department.
 - 1.1 Now, it is proposed that we may move the Department of Municipal Affairs seeking approval for opening of a separate bank account in approved bank, with the name and style "National Urban Health Mission", operated jointly by 'Director, SUDA' and 'Project Officer, SUDA-Health' with the concurrence of Finance Department.
 - 1.2 After obtaining the said approval from Municipal Affairs Department, we may request different Municipal Corporations under the purview for opening a dedicated bank account, for this purpose.
 - 1.3 Interim, it is suggested that, we may utilise one of our existing bank account namely "Community Based Primary Health Care Services" for receiving fund from DHFW and releasing to different Municipal Corporations, for the sake of smooth at meaningful implementation of the aforesaid programme.
2. The second (2) point of the letter emphasizes the formation of City Urban Health Society under Society Registration Act, 1961. The composition of the Society has also been suggested in the letter of DHFW.
 - 2.1 In this regard, it is proposed that we may write to Department of Municipal Affairs for permission so that directives may be given to all Municipal Corporations for formation of respective City Urban Health Society. However, the composition of the said Committee is indicative one and the members of the proposed Society may be enlarged if the Department of Municipal Affairs thinks more appropriate.

- 3. Regarding point no. (3), the H & FW Deptt has informed the modus operandi for the purpose of procurement of drug and equipments for Municipalities only. But no such instructions have been given as regards to Municipal Corporation. Necessary instruction from DHFW regarding nature of procurement is still awaited albeit our several request.
- 4. DHFW has also suggested either for upgradation of existing health care centre having area of 3,000 sq. ft. or new construction with the same size of space to cater the National Urban Health Mission. We may write to Municipal Corporations after obtaining approval from Department of Municipal Affairs to prepare a DPR duly vetted by Municipal Engineering Directorate (MED).
- 5. Memorandum of Understanding (MoU)
 - 5.1 A draft Memorandum of Understanding (MOU) between SUDA and DHFW is placed (at Flag - B) for perusal and approval.
 - 5.2 After signature of the MOU between SUDA and DHFW, we may in turn send the draft MoU to all Municipal Corporations excluding Kolkata Municipal Corporation for under the aegis of SUDA for signature between SUDA and respective Corporations separately.
- 6. For recruitment of Health personnel at ULB level, DHFW has already formed District Level Committee unilaterally excluding the representative from ULB concerned (copy of the relevant order placed below and marked at Flag - C). In this regard DHFW may be requested through Municipal Affairs Department for inclusion of representative from the Municipal Corporations in the said Committee; at least for recruitment of personnel who are supposed to work in the primary health services being run by the Corporations concerned.

Submitted.

foregoing note

[Signature]
04/09/2014

The Municipal Affairs Department may be moved for perusal and necessary approval, if considered.

[Signature]
04/09/14

Whether draft MoU, has been consulted with H&FW Deptt Official.

[Signature]
07/11/14

F.A.L. C.O.
addl. Director
(Finance)

Director

PO (C)

NOTE SHEET

SUDA

Queries at NSP-2 bottom.

This is to state that draft MoU needs some addition & alteration, the copy of which had been sent to Department of Health & Family Welfare through email on 14.08.2014. Furthermore, the undersigned had a discussion on revised MoU with the Nodal Officer, NUHM, DHFW on 09.09.2014. The necessary correction have been made by the Nodal Officer. The revised MoU has been sent to SUDA on 16.09.2014 (placed at **Flag-D**) (CP 23 to 31).

This file may be sent to the Department of Municipal Affairs for undertaking some of the immediate actions as detailed below on the basis of communication of MD, NHM vide no. H/SFWB/28R-02-2012/4806 dt. 21.08.2014 :

1. Fund flow to the ULBs under NUHM and opening of Bank A/C.

MD, NHM has requested Director, SUDA to facilitate opening of Bank A/C by the concerned 05 Municipal Corporations (Asansol, Chandernagore, Durgapur, Howrah & Siliguri MC) and SUDA.

1.1 Department of Municipal Affairs is requested to accord approval for (a) opening of a separate Bank A/C by SUDA in the name of "**National Urban Health Mission**" operated jointly by Director, SUDA and Project Officer, Health, SUDA and (b) opening of separate Bank A/C by each of the 05 Municipal Corporations as mentioned above in the name of "**National Urban Health Mission**" operated jointly by Mayor / Dy. Mayor and Commissioner / Finance Officer.

2. Formation of City Urban Health Society

Composition of the Society has been spelt out by NUHM at serial no. 2 of **Flag - A** (CP 18).

2.1 Department of Municipal Affairs may be requested to issue directives to all the 05 Municipal Corporation for formation of City Urban Health Society.

3. Procurement of Drugs & Equipments

Modus operandi for procurement of Drugs & Equipments in case of Municipal Corporations will be issued by DHFW.

4. New construction, repair & renovation.

DHFW will issue model plan & cost estimate for UPHC.

5. Signing of MoU - Draft revised MoU placed at **Flag - D** (CP 23 to 31) to be executed between West Bengal State Health Samiti & SUDA and at **Flag - E** (CP 32 to 39) to be executed between SUDA & the respective 05 Municipal Corporations excepting Kolkata Municipal Corporation may be approved by the Department.

6. Recruitment of HR

Detail is given at **Flag - A**, Annexure - I (CP 16).

Submitted.

17.09.2014

D/Dr. Goswami/NHM/Notesheet.doc

Director, SUDA

[Signature]
17.09.14

Letter of MD,NRHM dated 21.08.2014 (CP 01 - 19) regarding various proposed activities including formation of City Urban Health Society and opening of Bank Account in respect of five Municipal Corporations (Howrah, Durgapur, Asansol, Chandannagar and Siliguri) etc. may kindly be perused.

The immediate actions which are required to be taken from Municipal Affairs Department/State Urban Development Agency/ concerned Municipal Corporation have been stated at para 1-6 at nsp.-3. Accordingly, following actions are proposed for kind consideration and approval.

1) Opening of Bank Account :

As stated in para 1 and 1.1 (nsp. 3) dedicated bank account may be opened at SUDA to be operated jointly by Director, SUDA and Project Officer, Health, SUDA and for Municipal Corporations (other than KMC) the ULBs may be communicated to open dedicated bank account to be operated jointly by Mayor/Dy. Mayor and Commissioner/Finance Officer.

2) City Urban Health Society :

Proposal at para 2 and 2.1 may be considered regarding formation of City Urban Health Society in respect of each of five Municipal Corporations and necessary Order/Notification may be issued from Municipal Affairs Department.

3) Other proposal regarding procurement of drugs and equipments (para 3), construction and operation of UPSC (para 4), recruitment of HR (para 6) may be approved.

4) A MoU required to be signed between Department of Health and Family Welfare and SUDA and also similar MoU between SUDA and each of five Municipal Corporations.

Draft MoUs are placed under Flag - 'D' (CP 23 - 31) and 'E' (CP 32 - 39) respectively which may kindly be approved.

U.O.No.SUDA: 903/2014
Dated...17/09/2014

Director 17/9/2014

Principal Secretary
M. A. Department
and
Chairman, SUDA

Pl - examine & purrup
me
18/9

File Health/AH/P-12/14

CRD ADS

1. Regarding opening of bank Accounts separate file be moved from SUDA, in line with norm/cels A and be sent to F.D, with all relevant papers and files in format.
2. Regarding the formation of City Urban

Health Society; HCM has approved in the Health Dept note sheet (CP/20). Accordingly, an order may be issued from MA Dept in respective file. Copy of the ^{CP} note/20-22 and copy of NSP/1-4 is kept in Dept file & will be processed accordingly.

3. About procurement of drug etc, MA Dept has nothing to spare. SUDA may wait / discuss with DH & FW. for 5 MCF.

4. upgradation / construction of UPHC - DH & FW
 be requested to obtain model plan & estimate for new UPHC from the end of SUDA. The fund for this purpose to be released to SUDA & who in turn will release the same to concerned S MCF in installments, on the basis of progress. The work of construction/upgradation may be done by the concerned MCF. Operation following the URBEMT pattern.

5. About HR - Regarding this issue, Dr. Goswami may be informed to note the process on the note sheet side of this file & resubmit for further action from his end.

6. ON draft MOU, some suggestions / issues have been indicated. Dr. Goswami may be informed to discuss [if the suggestions/issues are considered] with me undressed before finalisation.

[Signature]
22/10/14.

[Signature]
31/10/14

[Signature]

Seen *[Signature]* Dia/SUDA
 SA/10
 31/10/14

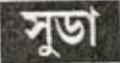
Observation / instruction of the Department at NSP-04 & 05.

Discussed with OSD & DS on 19.11.2014. Seriatim reply / action taken report are as under :

- 1) **Regarding opening of Bank A/C** – Separate file will be placed shortly.
- 3) **Procurement of Drugs etc.** – SUDA is keeping close liaison with DHFW for 05 Municipal Corporations.
- 4) **Up-gradation / construction of UPHC** – for construction of UPHC model plan & cost estimate has been sent by DHFW vide memo no. HF/NRHM/497/2014/5024 dt. 16.09.2014, copy of which is enclosed at Flag – F.
- 5) **About HR** – HR of different category to be recruited under NUHM at different level has been forwarded by the DHFW vide memo no. H/SFWB/28R-02-2012/4806 dt. 21.08.2014 – the details are as under :

Sl. No.	Name of the Post	Remuneration Per Month in Rs.	No. of Post	To be posted at	Recruiting Authority
At State Programme Management Unit (SPMU, DHFW)					
1	State Urban Health Planning Manager	40,000/-	1	State PMU	State H & FWS
2	Consultant (M & E)	40,000/-	1	State PMU	State H & FWS
3	Consultant (Community Process)	40,000/-	1	State PMU	State H & FWS
4	State Finance Manager	40,000/-	1	State PMU	State H & FWS
5	Health MIS Manager	25,000/-	1	State PMU	State H & FWS
6	Computer Assistant	13,560/-	1	State PMU	State H & FWS
7	Data Entry Operator	13,560/-	1	State PMU	State H & FWS
At District Programme Management Unit (DPMU, Dist. Health Office)					
1	Consultant (Epidemiologist)	37,000/-	23	District PMU	State H & FWS
2	Accounts Manager	23,270/-	23	District PMU	State H & FWS
3	Computer Assistant	13,560/-	23	District PMU	District H & FWS
At City Programme Management Unit (CPMU, Municipal Corp.)					
1	Consultant (Epidemiologist)	37,000/-	6	City PMU	State H & FWS
2	Accounts Manager	23,270/-	5	City PMU	State H & FWS
3	Data Manager	23,270/-	2	City PMU	State H & FWS
4	Computer Assistant	13,560/-	5	City PMU	District H & FWS
5	Data Entry Operator	13,560/-	3	City PMU	District H & FWS

NOTE SHEET



Sl. No.	Name of the Post	Remuneration Per Month in Rs.	No. of Post	To be posted at	Recruiting Authority
At Urban Primary Health Centre (UPHC, Municipal Corp. & Municipality)					
1	Medical Officer (Full Time)	40,000/-	169	UPHC	State H & FWS
2	Medical Officer (Part Time)	24,000/-	142	UPHC	State H & FWS
3	Staff Nurse	17,220/-	507	UPHC	State H & FWS
4	Pharmacist	16,860/-	169	UPHC	State H & FWS
5	Lab. Technician	9,380/-	169	UPHC	District H & FWS
6	ANM	9,380/-	488	UPHC	District H & FWS
7	LDC	9,000/-	169	UPHC	District H & FWS
8	Group - D	5,000/-	169	UPHC	District H & FWS
At Community					
1	ASHA	Performance based incentive	3366	UPHC	District H & FWS

6) **Draft MOU** - Suggestions / issues discussed with OSD & DS.

Necessary correction have been made in both the MOU i.e. between WB State Health Samity & SUDA and between Municipal Corporation & SUDA and placed at Flag - G & H respectively for obtaining approval of the Department. After obtaining approval the said MOUs will be sent to the DHFW for concurrence.

Submitted.

OSD & DS

[Signature]
19.11.14

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

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

West Bengal

Ref No. SUDA-Health/411(Pt.-I)/14/196

Date 14.10.2014

From : Director, SUDA

To : The AMD, NIM &
Jt. Secretary to Govt. of West Bengal
Department of Health & Family Welfare
Swasthya Bhawan.

Sub. : Release of fund under NUHM.

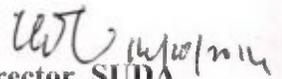
Sir,

This is to inform you that dedicated Bank A/C for NUHM will be opened on receipt of approval from the Department of Municipal Affairs. However, for smooth implementation of NUHM activities in 05 Municipal Corporations, fund may be released for the present to the Bank A/C of SUDA as detailed below :

Bank : State Bank of India.
Branch : Salt Lake, Sector -- I.
A/C No. : 31227510436
IFS Code : SBIN0001612

Thanking you.

Yours faithfully,


Director, SUDA

**Memorandum of Understanding (MoU) between State Urban Development Agency
and Municipal Corporation for implementation of National Urban
Health Mission (NUHM)**

1. Preamble

1.1 *WHEREAS* the National Urban Health Mission, a sub mission under the National Health Mission, hereinafter referred to as NUHM aims to provide accessible, affordable, and equitable primary health care to people living in the cities and towns, with special focus on the urban poor and other vulnerable sections like destitute, beggars, street children, construction workers, rickshaw pullers, etc.

1.2 *AND WHEREAS* the NUHM would achieve its objectives through

- (a) mapping of the urban poor and vulnerable populations,
- (b) establishment of new Primary Health Centres to serve the un-served population;
- (c) strengthening of the existing primary health care services, with special focus on the urban poor
- (d) greater involvement of the community, especially the slum and other underprivileged community through community groups like Mahila Arogya Samiti (MAS);
- (e) involvement of the Urban Local Bodies in mapping, planning and implementation; and
- (f) convergence with schemes relating to housing, sanitation, water supply, nutrition, etc. (social determinants of health)

1.3 *AND WHEREAS* the NUHM will be implemented in theMunicipal Corporation through the respective City Urban Health Society under the supervision of the State Urban Development Agency (SUDA).

1.4 *AND WHEREAS* the City Urban Health Society of Municipal Corporation with the State Urban Development Agency (SUDA), before started implementation of the approved activities under NUHM.

1.5 *NOW THEREFORE* the signatories to this Memorandum of Understanding (hereinafter referred to as MoU) have agreed as set out herein below, between the State Urban Development Agency (SUDA), represented by the Director, SUDA and the Municipal Corporations, represented by the Mayor / Commissioner.

2. Duration of the MoU

2.1 This MoU will be operative with effect from the date of its signing by the parties concerned and will remain in force till 31.03.2017 and such extended period as may be approved by the Government of India.

3. City NUHM Programme Implementation Plan (PIP) and its financing

3.1 NUHM recognizes the need for a city specific, decentralized planning process whereby the city would be required to develop a City PIP, under the supervision of State Urban Development Agency (SUDA) based on the Framework for Implementation of NUHM, with due regards to the assessment of local health needs.

3.2 The City Urban Health Society ofMunicipal Corporation in association with State Urban Development Agency (SUDA) will set their own annual level of achievement for the outcomes/ outputs in consultation with the State Health Society.

3.3 The implementation of the approved action plan as set out in the PIP shall be reviewed at the appropriate level once in every quarter.

3.4 The funds released under NUHM are for additional inputs and processes and are not to be substituted for existing budgets. This implies that the ULB budgetary

allocations for provision of health care would continue and the NUHM funds can be used as additionally to expand health care services specifically for the urban poor.

4. Funds Flow arrangements

4.1. The first installment of grant-in-aid to the Municipal Corporation shall be released by State Urban Development Agency upon signing of this MoU.

4.2 Subsequent releases shall be regulated on the basis of a written report to be submitted by the Municipal Corporation to the State Urban Development Agency including the following:

- Physical progress against targets referred to in the City PIP by the City urban Health Society.
- Statement of Expenditure confirming utilization of at least 50% of the previous release(s).
- Utilization Certificate(s) and Audit reports wherever they have become due as per agreed procedures under General Financial Rules (GFR).

4.3 The Municipal Corporation will keep its funds in a separate interest bearing account in any nationalized bank.

4.4 The Municipal Corporation will organize the audit of its accounts within six-months of the close of every financial year. The Municipal Corporation will prepare and provide to the State Urban Development Agency (SUDA), a consolidated statement of expenditure, including the interest accrued on the funds provided by the State Urban Development Agency.

4.5 The funds released under NUHM will also be subject to statutory audit by the Comptroller and Auditor General of India.

5. Institutional Arrangements

- 5.1 City Urban Health Society of Municipal Corporation should be constituted at the city level, to be headed by the Mayor, to provide policy guidance for the implementation of the NUHM in the city.
- 5.3 A City Programme Management Unit (CPMU) will be established with adequate staffing for the day to day management of NUHM activities in the Municipal Corporation. The CPMU may consist of urban health and programme management professionals hired on contractual basis.
- 5.4 All the health care facilities supported under NUHM would be required to constitute a Rogi Kalyan Samiti (RKS) at the facility level.
- 5.5 The HR under NUHM will be recruited as per memo no H/SFWB/28R-02-2012/4806 dated 21/08/2014. The State Health and Family Welfare Samiti/SPMU will be associated in the evaluation of the performance of the contractual staff at the end of every financial year, and, based on the joint review, the contracts will be renewed.

6. Commitments of the State Urban Development Agency (SUDA)

- 6.1 **The State Urban Development Agency commits to:**
- (a) Ensure that existing budgetary support under state budget for urban health facilities and programmes shall continue and are not substituted by the NUHM funds.
 - (b) Co-ordinate technical assistance provided by various state level agencies like State Health Systems Resource Centre, State Institute of Health & Family Welfare, State ASHA Resource Centre, etc. in consultation with State Health & Family Welfare Samiti.
 - (c) Dissemination of various research works, evaluation, reports etc., that have a bearing on the planning and implementation of NUHM.

- (d) Build the capacity of the City Urban Health Society and CPMU of the Municipal Corporation to plan and implement NUHM effectively.

7. Commitments of the City Urban Health Society:

7.1 The City Urban Health Samiti commits to ensure that the funds made available to take up the activities approved under NUHM PIP are used for financing only the approved activities in accordance with the NHM Implementation Framework, NUHM Framework for Implementation, Guidelines issued by the Government of India and the State Government from time to time.

7.2 The City Urban Health Society also commits to ensure the following:

(a) Steps for improving reach of health care services to urban poor

- i. Map all the existing slums (listed and unlisted) with a provision for yearly updation of the same.
- ii. Organise regular outreach sessions in the slums and special outreach sessions for the vulnerable populations.
- iii. Develop strategies for reaching out to the highly vulnerable section like destitute, beggars, street children, construction workers, coolies, rickshaw pullers, sex workers and other such migrant workers category who do not reside in slums but reside in temporary settlements, or elsewhere in any part of the city or are homeless are clearly developed and make separate budget outlay for them in the City NUHM PIP.

(b) Steps for improving service delivery

- i. Operationalising Urban Primary Health Centers (UPHC)
 - a. Functional for a population of approximately 50,000-60,000 the UPHC may be located preferably within a slum or within half a kilometer radius of the slum, catering to a slum population of approximately 25,000-30,000.

- b. At the UPHC level services provided should include out-patient consultation, basic lab diagnosis, drug/contraceptive dispensing, apart from distribution of health education material and counselling for all communicable and non-communicable diseases. In order to ensure access to the urban slum population at convenient timings, the UPHC may provide services from 12 noon to 8 pm in the evening.
- c. All the primary health care services shall be provided free of cost.
- ii. Operationalising Urban Community Health Centers (UCHC)
 - a. Urban Community Health Centre (UCHC) may be set up as first referral units to cater to a population of 2, 50,000. The UCHCs will have 30-100 beds to provide in-patient care. These would be in addition to the existing facilities (SDH/DH) to cater to the urban population in the locality.
 - b. The UCHC would provide referral medical care, surgical facilities and facilities for institutional delivery.
- iii. Strengthening Outreach Services
 - a. Apart from routine outreach sessions for the urban population, special outreach sessions may be organised once in a week by the ANMs covering slum/vulnerable populations. It may include the services of other health professionals including doctors/pharmacist/technicians/nurses – deputed by the government or engaged from the private sector. The services may include screening and follow-up, basic lab investigations (using portable /disposable kits), drug dispensing, and counselling.

iv. Strengthening Community Process

a. Accredited Social Health Activist (ASHA): Each slum/community would have one frontline community worker called ASHA, covering about 200-500 households. The ASHA would help the ANM in delivering outreach services in the vicinity of the doorsteps of the beneficiaries. The City Urban Health Samati would initiate the process of ASHA selection and engage them as per the Community Processes Guidelines issued by the Ministry of Health & Family Welfare, Government of India.

b. Mahila Arogya Samiti (MAS): The MAS may be constituted as per the Government of India guidelines on Community Processes under NUHM. It would be a group of 10-12 women selected from a catchment of around 50-100 households with an elected Chairperson and a Treasurer, supported by an ASHA. It would be involved in community awareness, interpersonal communication, community based monitoring and linkages with the services and referral.

(c) Convergence of all national health programmes, and convergence between health programmes and various social determinants of health.

(d) Put in place a transparent mechanism and follow sound financial management practices and internal control mechanisms.

7.3 TheMunicipal Corporation, agrees to abide by all the existing manuals, guidelines, instructions and circulars issued in connection with implementation of the NUHM, which are not contrary to the provisions of this MoU.

7.4 The Municipal Corporation also commits to take prompt corrective action in the event of any discrepancies or deficiencies being pointed out in the

audit. Every audit report and the report of action taken thereon shall be tabled in the next ensuing meeting of the Governing Body of the City Health Society.

8. Suspension

8.1 Non-compliance of the commitments and obligations set hereunder and/or upon failure to make satisfactory progress may require State Urban Development Agency, to review the assistance committed through this MoU leading to suspension, reduction or cancellation thereof. The State Urban Development Agency in consultation with Health & Family Welfare Department, Government of West Bengal commits to issue sufficient alert to the Municipal Corporation before contemplating any such action.

Signed this day, the of(month), 20.....

For and on behalf of the

Municipal Corporation

For and on behalf of the State Urban

Development Agency (SUDA)

Mayor / Commissioner

Director, SUDA

Date: _____

Date: _____

3

Memorandum of Understanding (MoU) between West Bengal State Health Samity
and State Urban Development Agency for (SUDA) implementation of National Urban
Health Mission (NUHM)

1. Preamble

- 1.1 *WHEREAS* the National Urban Health Mission, a sub mission under the National Health Mission, hereinafter referred to as NUHM aims to provide accessible, affordable, and equitable primary health care to people living in the cities and towns, with special focus on the urban poor and other vulnerable sections like destitute, beggars, street children, construction workers, rickshaw pullers, etc.
- 1.2 *AND WHEREAS* the NUHM would achieve its objectives through
- (a) mapping of the urban poor and vulnerable populations,
 - (b) establishment of new Primary Health Centres to serve the un-served population;
 - (c) strengthening of the existing primary health care services, with special focus on the urban poor
 - (d) greater involvement of the community, especially the slum and other underprivileged community through community groups like Mahila Arogya Samiti (MAS);
 - (e) involvement of the Urban Local Bodies in mapping, planning and implementation; and
 - (f) convergence with schemes relating to housing, sanitation, water supply, nutrition, etc. (social determinants of health)
- 1.3 *AND WHEREAS* the NUHM will be implemented in the Municipal Corporations of Howrah, Chandannagar, Durgapur, Asansol and Siliguri cities through the

respective City Urban Health Society under the supervision of the State Urban Development Agency (SUDA).

1.4 *AND WHEREAS* the City Urban Health Society of the respective Municipal Corporations, as mentioned in 'para 1.3' of this MoU have to sign a separate Memorandum of Understanding (MoU) with the State Urban Development Agency (SUDA), before started implementation of the approved activities under NUHM.

1.5 *NOW THEREFORE* the signatories to this Memorandum of Understanding (hereinafter referred to as MoU) have agreed as set out herein below, between the State Health and Family Welfare Samiti, represented by the Principal Secretary to the Government of West Bengal, Health & Family Welfare Department, and the State Urban Development Agency (SUDA), represented by the Director, SUDA.

2. Duration of the MoU

2.1 This MoU will be operative with effect from the date of its signing by the parties concerned and will remain in force till 31.03.2017 and such extended period as may be approved by the Government of India.

3. City NUHM Programme Implementation Plan (PIP) and its financing

3.1 NUHM recognizes the need for a city specific, decentralized planning process whereby the city (i.e. 05 Municipal Corporations) would be required to develop a City PIP, under the supervision of State Urban Development Agency (SUDA) based on the Framework for Implementation of NUHM, with due regards to the assessment of local health needs.

3.2 The City Urban Health Society of Howrah, Chandannagar, Durgapur, Asansol and Siliguri Municipal Corporations in association with State Urban Development

Agency (SUDA) will set their own annual level of achievement for the outcomes/ outputs in consultation with the State Health Society.

3.3 The implementation of the approved action plan as set out in the PIP shall be reviewed at the appropriate level once in every quarter.

3.4 The funds released under NUHM are for additional inputs and processes and are not to be substituted for existing budgets. This implies that the ULB budgetary allocations for provision of health care would continue and the NUHM funds can be used as additionality to expand health care services specifically for the urban poor.

4. Funds Flow arrangements

4.1. The first installment of grant-in-aid to the State Urban Development Agency (SUDA) for Howrah, Chandannagar, Durgapur, Asansol and Siliguri under this MoU shall be made upon signing of this MoU.

4.2 Subsequent releases shall be regulated on the basis of a written report to be submitted by the State Urban Development Agency (SUDA) to the State Health and Family Welfare Samiti including the following:

- Physical progress against targets referred to in the City PIP by the respective City urban Health Society.
- Statement of Expenditure confirming utilization of at least 50% of the previous release(s).
- Utilization Certificate(s) and Audit reports wherever they have become due as per agreed procedures under General Financial Rules (GFR).

4.3 The State Urban Development Agency (SUDA) will keep its funds in a separate interest bearing account in any nationalized bank.

- 4.4 The State Urban Development Agency (SUDA) will organize the audit of its accounts within six-months of the close of every financial year. The State Urban Development Agency (SUDA) will prepare and provide to the State Health and Family Welfare Samiti, a consolidated statement of expenditure, including the interest accrued on the funds provided by the State Health and Family Welfare Samiti.
- 4.5 The funds released under NUHM will also be subject to statutory audit by the Comptroller and Auditor General of India.

5. Institutional Arrangements

- 5.1 City Urban Health Society for each of the Municipal Corporations should be constituted at the city level, to be headed by the Mayor, to provide policy guidance for the implementation of the NUHM in the city.
- 5.3 A City Programme Management Unit (CPMU) will be established with adequate staffing for the day to day management of NUHM activities in the respective Municipal Corporations. The CPMU may consist of urban health and programme management professionals hired on contractual basis.
- 5.4 All the health care facilities supported under NUHM would be required to constitute a Rogi Kalyan Samiti (RKS) at the facility level.
- 5.5 The HR under NUHM will be recruited as per memo no H/SFWB/28R-02-2012/4806 dated 21/08/2014. The State Health and Family Welfare Samiti/SPMU will be associated in the evaluation of the performance of the contractual staff at the end of every financial year, and, based on the joint review, the contracts will be renewed.

6. Commitments of the State Health and Family Welfare Samiti

6.1 The State Health and Family Welfare Samiti commits to:

- (a) Ensure that existing budgetary support under state budget for urban health facilities and programmes shall continue and are not substituted by the NUHM funds.
- (b) Co-ordinate technical assistance provided by various state level agencies like State Health Systems Resource Centre, State Institute of Health & Family Welfare, State ASHA Resource Centre, etc.
- (c) Dissemination of various research works, evaluation, reports etc., that have a bearing on the planning and implementation of NUHM.
- (d) Build the capacity of the City Urban Health Society and CPMU of the Municipal Corporations to plan and implement NUHM effectively.

7. Commitments of the City Urban Health Society:

7.1 The City Urban Health Samiti commits to ensure that the funds made available to take up the activities approved under NUHM PIP are used for financing only the approved activities in accordance with the NHM Implementation Framework, NUHM Framework for Implementation, Guidelines issued by the Government of India and the State Government from time to time.

7.2 The City Urban Health Society also commits to ensure the following:

(a) **Steps for improving reach of health care services to urban poor**

- i. Map all the existing slums (listed and unlisted) with a provision for yearly updation of the same.

- 26
- ii. Organise regular outreach sessions in the slums and special outreach sessions for the vulnerable populations.
 - iii. Develop strategies for reaching out to the highly vulnerable section like destitute, beggars, street children, construction workers, coolies, rickshaw pullers, sex workers and other such migrant workers category who do not reside in slums but reside in temporary settlements, or elsewhere in any part of the city or are homeless are clearly developed and make separate budget outlay for them in the City NUHM PIP.

(b) Steps for improving service delivery

- i. Operationalising Urban Primary Health Centers (UPHC)
 - a. Functional for a population of approximately 50,000-60,000 the UPHC may be located preferably within a slum or within half a kilometer radius of the slum, catering to a slum population of approximately 25,000-30,000.
 - b. At the UPHC level services provided should include out-patient consultation, basic lab diagnosis, drug/contraceptive dispensing, apart from distribution of health education material and counselling for all communicable and non-communicable diseases. In order to ensure access to the urban slum population at convenient timings, the UPHC may provide services from 12 noon to 8 pm in the evening.
 - c. All the primary health care services shall be provided free of cost.
- ii. Operationalising Urban Community Health Centers (UCHC)

- a. Urban Community Health Centre (UCHC) may be set up as first referral unitsto cater to a population of 2, 50,000. The UCHCs will have 30-100 beds to provide in-patient care. These would be in addition to the existing facilities (SDH/DH) to cater to the urban population in the locality.
 - b. The UCHC would provide referral medical care, surgical facilities and facilities for institutional delivery.
- iii. Strengthening Outreach Services
- a. Apart from routine outreach sessions for the urban population, special outreach sessions may be organised once in a week by the ANMs covering slum/vulnerable populations. It may include the services of other health professionals including doctors/pharmacist/technicians/nurses – deputed by the government or engaged from the private sector. The services may include screening and follow-up, basic lab investigations (using portable /disposable kits), drug dispensing, and counselling.
- iv. Strengthening Community Process
- a. Accredited Social Health Activist (ASHA): Each slum/community would have one frontline community worker called ASHA, covering about 200-500 households. The ASHA would help the ANM in delivering outreach services in the vicinity of the doorsteps of the beneficiaries. The City Urban Health Samati would initiate the process of ASHA selection and engage them

as per the Community Processes Guidelines issued by the Ministry of Health & Family Welfare, Government of India.

- b. Mahila Arogya Samiti (MAS): The MAS may be constituted as per the Government of India guidelines on Community Processes under NUHM. It would be a group of 10-12 women selected from a catchment of around 50-100 households with an elected Chairperson and a Treasurer, supported by an ASHA. It would be involved in community awareness, interpersonal communication, community based monitoring and linkages with the services and referral.
 - (c) Convergence of all national health programmes, and convergence between health programmes and various social determinants of health.
 - (d) Put in place a transparent mechanism and follow sound financial management practices and internal control mechanisms.
- 7.3 The Municipal Corporations, as mentioned in Para 1.3 of this document, agrees to abide by all the existing manuals, guidelines, instructions and circulars issued in connection with implementation of the NUHM, which are not contrary to the provisions of this MoU.
- 7.4 The Municipal Corporations also commits to take prompt corrective action in the event of any discrepancies or deficiencies being pointed out in the audit. Every audit report and the report of action taken thereon shall be tabled in the next ensuing meeting of the Governing Body of the City Health Society.

8. Suspension

8.1 Non-compliance of the commitments and obligations set hereunder and/or upon failure to make satisfactory progress may require West Bengal State Health and Family Welfare Samiti, to review the assistance committed through this MoU leading to suspension, reduction or cancellation thereof. The Health and Family Welfare Department, Government of West Bengal commits to issue sufficient alert to the State Urban Development Agency (SUDA) before contemplating any such action.

Signed this day, the of(month), 20.....

For and on behalf of the State Urban
Development Agency(SUDA)

For and on behalf of the West Bengal State
Health and Family Welfare Samiti

Director, SUDA

Principal Secretary (HFW)

Government of West Bengal

Date: _____

Date: _____

Activity under National Urban Health Mission (NUHM) may be initiated as per approved State Plan to strengthen the Primary Health Care delivery system. For effective implementation of the programme involvement of different ULBs are required. As convergence is concerned both intra and inter departmental convergence is an important issue. In the above context following proposals may please be considered:

1. **Fund flow to the ULBS under NUHM and opening of bank account:** Fund for Municipal Corporations (MC) other than Kolkata (Siliguri, Asansol, Durgapur, Chandannagar and Howrah) may be released to SUDA by the State Health Samity (SHS). SUDA may release fund to these MCs as per requirement. The Municipal Corporations will submit monthly Statement of Expenditure (SOE) and quarterly Utilisation Certificate (UC) to SUDA. SUDA will submit quarterly UC to SHS. Separate Bank Account will be maintained by the City Urban Health Society for fund under NUHM.

Fund for the other Municipalities may be released to CMOHs (District Health Samity). CMOHs will release fund to respective Municipalities as per requirement. These Municipalities will submit monthly Statement of Expenditure (SOE) and quarterly Utilisation Certificate (UC) to the respective CMOHs. CMOHs will submit quarterly UC to State Health Samity. Separate Bank Account will be maintained by the Municipalities for the fund under NUHM.

Fund for Kolkata Municipal Corporation (KMC) may be sent directly to KMC by the State Health Samity.

2. **Formation of City Urban Health Society:** As per NUHM Implementation Framework (no. L. 19017/1/2008-UH), the Municipal Corporations may be requested to form a City NUHM Society and registered under Society Registration Act. At the city level, the management of NUHM activities will be coordinated by a City level Urban Health Society headed by the Mayor of respective MC. Representative of DM/SDO may be the member of the society depending up on the nature of city, whether it is a District or Sub divisional Headquarters.

A framework for City NUHM Society may be proposed as follows. This is applicable for all the Municipal Corporations (Siliguri, Asansol, Durgapur, Chandannagar and Howrah) ^{of Kolkata.}
Proposed composition of City Urban Health Society

- | | |
|----------------------------|----------------------------------------------------|
| i. Chairman | : Mayor of the Municipal Corporation |
| ii. Vice Chairman | : Commissioner/Secretary of MC |
| iii. Vice Chairman | : MIC Health |
| iv. Secretary cum Convener | : Health Officer |
| v. Treasurer | : Accounts Officer/Finance Officer |
| vi. Member | : Representative of DM/SDO |
| vii. Member | : Dy. CMOH-I in District/ACMOH of the Sub division |
| viii. Member | : Superintendent of the Hospital |

If required additional no. of members may be included as per requirement.

SUDA may send necessary directives to the MCs for formation of society.

3. **Procurement of Drugs and equipments:** The CMOH of the district may procure drugs and equipments for the U-PHC and CHC run under NUHM. The MO in-charge of the U-PHC and CHC may place quarterly indent to respective CMOH through their ULBS and CMOH may supply the stock accordingly. As the procurement of the smaller ULBs may not be bulk enough to get their supply from the CMS approved firm. Therefore this procedure will help ULBS to get quality medicine from CMS approved firm.

CMOH of the districts may disburse an amount of fund for procuring drugs and equipments to the selected ULBs for procuring drugs or equipments on emergency basis.

4. **New construction, repair and renovation:** U-PHCs may be constructed as per the model drawing prepared by the Health department. This model plan is prepared following the guideline of IPHS (Indian Public Health Standard). At least 3000² ft space may be required

for construction of new U-PHC. Execution of construction work may be done in the following ways:

Plan estimate for new construction as well as repair renovation may be prepared by the respective Municipal Corporations and Municipalities. These ULBs may be entrusted with execution of construction work. This arrangement is proposed because these U-PHCs/CHCs would be the assets of the respective ULBs. Therefore if the ULBs are entrusted with the construction and renovation, they would be able to carry out the maintenance work of these buildings constructed/renovated under NUHM.

5. **Signing of MOU:** An MOU will be executed between State Health Department and SUDA to implement NUHM in the 5 Municipal Corporations (Siliguri, Asansol, Durgapur, Chandannagar and Howrah) and SUDA in turn will Sign an MOU with these 5 MCs. An MOU will also be executed between the State Health Samity and Kolkata Municipal Corporation.
6. **Recruitment of HR (Human Resources) under NUHM:** The details of approved HR, their level of recruitment, place of posting and recruitment authority have been mentioned in the table below-

HR of different category to be recruited Under NUHM at different level as per NUHM approval

At State Programme Management Unit (SPMU)					
S	Name of the Post	Remuneration /Month (in Rs)	No of Posts	To be posted at	Recruiting Authority
1	State Urban Health Planning Manager	40000.00	1	State PMU	State H&FWS
2	Consultant (M&E)	40000.00	1	State PMU	State H&FWS
3	Consultant (Community Process)	40000.00	1	State PMU	State H&FWS
4	State Finance Manager	40000.00	1	State PMU	State H&FWS
5	Health MIS Manager	25,000.00	1	State PMU	State H&FWS
6	Computer Assistant	13,560.00	1	State PMU	State H&FWS
7	Data Entry Operator	13,560.00	1	State PMU	State H&FWS
At District Programme Management Unit (DPMU)					
1	Consultant (Epidemiologist)	37,000.00	23	District PMU	State H&FWS/KMC
2	Accounts Manager	23,270.00	23	District PMU	State H&FWS/KMC
3	Computer Assistant	13,560.00	23	District PMU	District H&FWS/KMC
At City Programme Management Unit (City PMU)					
1	Consultant (Epidemiologist)	37,000.00	6	City PMUs	State H&FWS/ KMC (for Kolkata)
2	Accounts Manager	23,270.00	5	City PMUs	State H&FWS/ KMC (for Kolkata)
3	Data Manager	23,270.00	2	City PMUs	State H&FWS/ KMC (for Kolkata)
4	Computer Assistant	13,560.00	5	City PMUs	District H&FWS/KMC
5	Data Entry Operator	13,560.00	3	City PMUs	District H&FWS/KMC
At Urban Primary Health Centre (U-PHC)					
1	Medical Officer (Full time)	40,000.00	169	U-PHC	State H&FWS/ KMC (for Kolkata)
2	Medical Officer (Part time)	24,000.00	142	U-PHC	State H&FWS/ KMC (for Kolkata)
3	Staff Nurse	17,220.00	507	U-PHC	State H&FWS / KMC (for Kolkata)
4	Pharmacist	16,860.00	169	U-PHC	State H&FWS / KMC (for Kolkata)
5	Lab Technician	9380.00	169	U-PHC	District H&FWS / KMC (for Kolkata)
6	ANM	9380.00	488	U-PHC	District H&FWS/ KMC (for Kolkata)
7	LDC	9000.00	169	U-PHC	District H&FWS / KMC (for Kolkata)
8	Group-D	5000.00	169	U-PHC	District H&FWS / KMC (for Kolkata)
At Community					
1	ASHA	Performance based incentive	3366	U-PHC	District H&FWS / KMC (for Kolkata)

There is a recruitment committee for all the district, for recruitment of various category of staffs under NHM at district and facility level, formed vide order No. HFW/NRHM-34/2014/660, dated 18.02.2014. This order is attached (flag 'K'). There is also a committee for recruitment of ASHA in each district, formed vide Memo no. HFW/NRHM/20//2006/(Pt.II)/1631, dated June 27, 2012, Memo no. HFW/NRHM/20/06/Pt.II/1844 dated 24 July, 2012, Memo no. HFW/NRHM-20/06/(Pt.III)/250, dated, 27.01.2014 and Memo no. HFW/NRHM-20/06/(Pt.III)/735, dated, 20.02.2014. These orders are attached (flag 'M').

While recruiting HR under NUHM for the City PMU, Urban Primary Health Centre and ASHA at Community level, these district level recruitment committee may include the Mayor/Chairman or their representative from the concerned Municipal Corporation/Municipality.

All category of recruitment for the Kolkata Municipal Corporation would be done by the KMC.

Submitted for Kind perusal.

3/7/14

Dr TK Saha

AMD

Detailed procedure for implementation of NUHM may be perused at n.s.p 16-18 above. Govt has already appd fund to the tune of Rs. 61.00 crore for 2013-14 for implementation of the Scheme in 26 Municipalities and 6 Municipal Corporations of the State. Proposals expressed under point no. 1 to 6 may be appd.

MD

3/7/14

The proposals contained in points ① to ⑥ on n.s.p 16-18, regarding the modalities for executing projects under the National Urban Health Mission, are submitted for kind approval.

3/7

Principal Secretary

Detailed procedure for implementation of National Urban Health Mission as mentioned at n.s.p. 16, 17 & 18 (points 1 to 6) may be approved.

Hon'ble CM & MIC

4/7/14

CS Praveen
8/7/14

MD, NHM

16/7

Pa. Secy

AMS

22/7

CM & MIC

May kindly approve.

Sanjay Mitra

11/7



GOVERNMENT OF WEST BENGAL

HEALTH & FAMILY WELFARE DEPARTMENT

NATIONAL HEALTH MISSION (NHM)

1ST FLOOR, GRANTHAGAR BHAWAN,
SWASTHYA BHAWAN PREMISES

GN-29, SECTOR-V, SALT LAKE CITY, KOLKATA - 700 091.

Phone: 033-2357 3625 Fax: 2357 7909

e-mail : mdnrhm@wbhealth.gov.in/cfw@wbhealth.gov.in

Memo No. H/SFWB/28R-02-2012/4806

Date: 21/08/2014

From: Sanghamitra Ghosh
Mission Director, NHM,
Health and Family Welfare Department,
Government of West Bengal.

Ro (APO) (H)
PI mt 4 early
P 21/8/14

To: 1. Director State Urban Development Agency &
Ex-officio Jt. Secretary Govt. of West Bengal
Department of Municipal Affairs

2. The Chief Medical Officer of Health (All district)

Sir,

Activity under National Urban Health Mission (NUHM) has been initiated as per approved State PIP to strengthen the Primary Health Care delivery system in urban area. For effective implementation of the programme, Department of Health & Family Welfare, WB has finalised following modalities to be followed by all concerned.

- 1. Fund flow to the ULBS under NUHM and opening of bank account:** Fund for Municipal Corporations (MC) other than Kolkata (Siliguri, Asansol, Durgapur, Chandannagar and Howrah) will be released to SUDA by the State Health & Family Welfare Samity. SUDA will release fund to these MCs as per requirement. The Municipal Corporations will submit monthly Statement of Expenditure (SOE) and quarterly Utilisation Certificate (UC) to SUDA. SUDA will submit quarterly UC to State Health & Family Welfare Samity. Separate bank accounts are to be maintained by Municipal Corporations for fund under NUHM. Kolkata Municipal Corporation (KMC) will receive fund directly from the State Health & Family Welfare Samity.

Fund for all the Municipalities will be released to CMOHs (District Health & Family Welfare Samity). CMOHs will release fund to respective Municipalities as per requirement. These Municipalities will submit monthly Statement of Expenditure (SOE) and quarterly Utilisation Certificate (UC) to the respective CMOHs. CMOHs will submit quarterly UC to State Health & Family Welfare Samity. Separate Bank Account will be maintained by the Municipalities for the fund under NUHM.

Director SUDA is requested to facilitate the opening of Bank account by the concerned Municipal Corporations. Similarly the CMOHs are requested to facilitate the opening of Bank account by the concerned Municipalities.

2. **Formation of City Urban Health Society:** As per NUHM Implementation Framework (no. L. 19017/1/2008-UH), the Municipal Corporations (MC) (Siliguri, Asansol, Durgapur, Chandannagar and Howrah & Kolkata) are required to form a City Urban Health Society which is to be registered under Certificate of Registration of Societies, West Bengal Act XXVI of 1961. The title of the society will be " ——— (name of the city) Urban Health Society". At the city level, the management of NUHM activities will be coordinated by the said Society headed by the Mayor of respective MC. District Magistrate (DM)/Sub divisional Officer (SDO) or their representative will be the member of the society depending on the nature of city, whether it is a District or Sub divisional Headquarters.

The structure of the society is as follows.

i. Chairman	: Mayor of the Municipal Corporation
ii. Vice Chairman	: Commissioner/Secretary of MC
iii. Vice Chairman	: Mayor-in-Council, Health
iv. Secretary cum Convener	: Health Officer
v. Treasurer	: Accounts Officer/Finance Officer
vi. Member	: Representative of DM/SDO
vii. Member	: Dy. CMOH-I in District/ACMOH of the Sub division
viii. Member	: Superintendent of the Hospital (District /Sub-Divisional Hospital)

If required additional number of members may be included as per requirement.

Director SUDA may be requested to send necessary directives to the MCs for formation of society. For Municipalities the District Health & Family Welfare Samity will coordinate and monitor the NUHM activities.

3. **Procurement of Drugs and equipments:** The CMOH of the district will procure drugs and equipments for the U-PHC and CHC run under NUHM for the Municipalities. The MO in-charge of the U-PHC and CHC will place quarterly indent to respective CMOH through their ULBS and CMOH will supply the stock accordingly.

Out of total amount approved for drugs for a particular municipality, CMOH of the concerned district will purchase medicines with the 80% fund earmarked for medicine. Rest 20% of the fund will be transferred to concerned ULB for emergency drug procurement by the ULB for the U-PHCs and U-CHS under NUHM.

4. **New construction, repair and renovation:** U-PHCs may be constructed as per the model drawing prepared by the State Health & Family Welfare department. This model plan has been prepared following the guideline of IPHS (Indian Public Health Standard). At least 3000 Sq.ft space is required for construction of new U-PHC. Plan estimate for new construction as well as repair renovation will be prepared by the respective Municipal Corporations and Municipalities. The ULBs will also execute the construction work.
5. **Signing of MOU:** An MOU will be executed between State Health & Family Welfare Department and SUDA to implement NUHM in the 5 Municipal Corporations (Siliguri, Asansol, Durgapur, Chandannagar and Howrah) and SUDA in turn will execute an MOU with these 5 MCs. An MOU will also be executed between the State Health & Family Welfare Samity and Kolkata Municipal Corporation.
6. **Recruitment of HR (Human Resources) under NUHM:** The details of approved HR, place of posting and recruiting authority have been mentioned in the annexure-I

There is a recruitment committee for all the districts for recruitment of various categories of staffs under NHM at district and facility level, formed vide this Department's order No. HFW/NRHM-34/2014/660, dated 18.02.2014. There is also a committee for recruitment of ASHA in each district, formed vide this Department's Memo no. HFW/NRHM/20//2006/(Pt.II)/1631, dated June 27, 2012, Memo no. HFW/NRHM/20/06/Pt.II/1844 dated 24 July, 2012, Memo no. HFW/NRHM-20/06/(Pt.III)/250, dated, 27.01.2014 and Memo no. HFW/NRHM-20/06/(Pt.III)/735, dated, 20.02.2014. These district level committees will recruit HR for the Municipal Corporations as well as Municipalities. **(All these memos are enclosed).**

While recruiting HR under NUHM for the City Programme Management Unit, Urban Primary Health Centre and ASHA at Community level, these district level recruitment committee will include the Mayor/Chairman or their representative from the concerned Municipal Corporation/Municipality as member of the said committee.

All category of recruitment for the Kolkata Municipal Corporation will be done by the KMC.

Yours faithfully,

Sanghamitra Ghosh

(Sanghamitra Ghosh)

Enclosed: **As stated.**

Memo No. H/SFWB/28R-02-2012/4806/1(14)

Date: 21/08/2014

Copy forwarded for kind information and necessary action to:

1. The Director of Health Services & e.o. Secretary, Govt. of West Bengal
2. The Director of Medical Education & e.o. Secretary, Govt. of West Bengal
3. The Addl. Mission Director NHM and Jt. Secretary to Govt. of west Bengal
4. The Addl Director of Health Services (Admn), West Bengal
5. The Addl Director of Health Services (TB), West Bengal
6. The Jt. Director of Health Services and SFWO, West Bengal
7. The Jt. Director of Health Services (PH & CD), West Bengal
8. The Jt. Director Of Health Service and CHO, KMUHO, Kolkata
9. The Jt. Director Of Health Service (P & D), west Bengal
10. The P. O. NHM, West Bengal
11. The Director Financial Management Group (FMG), NHM
12. The Senior Accounts Officer (Sr. A. O.), NHM
13. PS to Principal Secretary, Department of Health & Family Welfare, WB
14. Office copy

Sanghamitra Ghosh
(Sanghamitra Ghosh)

Contd.....P/4

Annexure-I

HR of different category to be recruited Under NUHM at different level.

At State Programme Management Unit (SPMU)					
Sl	Name of the Post	Remuneration/ Month (in Rs)	No of Posts	To be posted at	Recruiting Authority
1	State Urban Health Planning Manager	40000.00	1	State PMU	State H&FWS
2	Consultant (M&E)	40000.00	1	State PMU	State H&FWS
3	Consultant (Community Process)	40000.00	1	State PMU	State H&FWS
4	State Finance Manager	40000.00	1	State PMU	State H&FWS
5	Health MIS Manager	25,000.00	1	State PMU	State H&FWS
6	Computer Assistant	13,560.00	1	State PMU	State H&FWS
7	Data Entry Operator	13,560.00	1	State PMU	State H&FWS
At District Programme Management Unit (DPMU)					
1	Consultant (Epidemiologist)	37,000.00	23	District PMU	State H&FWS/KMC
2	Accounts Manager	23,270.00	23	District PMU	State H&FWS/KMC
3	Computer Assistant	13,560.00	23	District PMU	District H&FWS/KMC
At City Programme Management Unit (City PMU)					
1	Consultant (Epidemiologist)	37,000.00	6	City PMUs	State H&FWS/ KMC (for Kolkata)
2	Accounts Manager	23,270.00	5	City PMUs	State H&FWS/ KMC (for Kolkata)
3	Data Manager	23,270.00	2	City PMUs	State H&FWS/ KMC (for Kolkata)
4	Computer Assistant	13,560.00	5	City PMUs	District H&FWS/KMC
5	Data Entry Operator	13,560.00	3	City PMUs	District H&FWS/KMC
At Urban Primary Health Centre (U-PHC)					
1	Medical Officer (Full time)	40,000.00	169	U-PHC	State H&FWS/ KMC (for Kolkata)
2	Medical Officer (Part time)	24,000.00	142	U-PHC	State H&FWS/ KMC (for Kolkata)
3	Staff Nurse	17,220.00	507	U-PHC	State H&FWS / KMC (for Kolkata)
4	Pharmacist	16,860.00	169	U-PHC	State H&FWS / KMC (for Kolkata)
5	Lab Technician	9380.00	169	U-PHC	District H&FWS / KMC (for Kolkata)
Sl	Name of the Post	Remuneration/ Month (in Rs)	No of Posts	To be posted at	Recruiting Authority
6	ANM	9380.00	488	U-PHC	District H&FWS/ KMC (for Kolkata)
7	LDC	9000.00	169	U-PHC	District H&FWS / KMC (for Kolkata)
8	Group-D	5000.00	169	U-PHC	District H&FWS / KMC (for Kolkata)
At Community					
1	ASHA	Performance based incentive	3366	U-PHC	District H&FWS / KMC (for Kolkata)

Government of West Bengal
Department of Health & Family Welfare
National Health Mission
1st Floor, Granthagar Bhawan, GN-29
Sector-V, Salt Lake, Kolkata – 700 091

No. HFW/NRHM-34/2014/660

Date: 18.02.14

ORDER

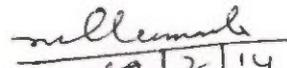
Sub : Revised Guideline for Recruitment to fill up different District & Facility level vacant posts under National Health Mission (NHM).

In supersession to all orders issued in this regard the Recruitment Committee to fill up different district and facility level vacant posts of National Health Mission of different districts will be chaired by Hon'ble Members as per the list enclosed herewith.

The other members of the Recruitment Committee will be as follows:

1. Chief Medical Officer of Health, Member Secretary
2. Representative of the District Magistrate
3. Programme Officer of the respective Programme for which the engagement has been initiated (Dy. CMoH-I/II/III)
4. MSVP in case of Medical Colleges
5. Expert of different discipline, as required.

This revised Committee will start functioning with immediate effect and even in cases where such recruitment process is underway or almost completed, the reconstituted Committee shall conclude the recruitment process.


 Principal Secretary
 Department of Health & Family Welfare
 Government of West Bengal

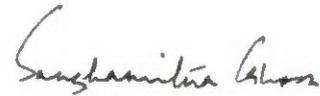
:: 2 ::

No. HFW/NRHM-34/2014/660/1(2A)

Date: 18.02.14

Copy forwarded for information to:-

1. Director of Health Service & e.o. Secretary to the Govt. of West Bengal.
2. Director of Medical Education & e.o. Secretary to the Govt. of West Bengal.
3. Additional Mission Director, National Health Mission & Joint Secretary to the Govt. of West Bengal
4. State Family Welfare Officer, Family Welfare Bureau.
5. PS to Hon'ble MIC North Bengal Development Department with the request to place it before Hon'ble MIC.
6. PS to Hon'ble MOS, Health & Family Welfare Department with the request to place it before Hon'ble MOS.
7. Shri Biplab Mitra, Chairperson of the Recruitment Committee Dakshin Dinajpur District
8. Shri Biplab Mitra, Chairperson of the Recruitment Committee Uttar Dinajpur District
9. Shri Rabindra Nath Ghosh, Chairperson of the Recruitment Committee Coochbehar District
10. Shri Nasirudding Ahmed (Lal), Chairperson of the Recruitment Committee Mrushidabad District
11. Dr. Asish Banerjee, Chairperson of the Recruitment Committee Malda District
12. Shri Monirul Islam, Chairperson of the Recruitment Committee Birbhum District
13. Shri Tapan Dasgupta, Chairperson of the Recruitment Committee Hooghly District
14. Shri Jyotirmoy Kar, Chairperson of the Recruitment Committee Purba Medinipur District
15. Shri Shankar Dolai, Chairperson of the Recruitment Committee Paschim Medinipur District
16. Shri Arup Kumar Khan, Chairperson of the Recruitment Committee Bankura District
17. Shri Ujjal Pramanick (Rural), Chairperson of the Recruitment Committee Burdwan District
18. Shir Subhasis Batabyal (Urban), Chairperson of the Recruitment Committee Burdwan District
19. Shri Silbhadra Datta, Chairperson of the Recruitment Committee North 24 Parganas District
20. Shir Nirmal Maji, Chairperson of the Recruitment Committee South 24 Parganas District
21. Smt. Nilima Nag (Mallick), Chairperson of the Recruitment Committee Nadia District
22. Shri Pulak Roy, Chairperson of the Recruitment Committee Howrah District
23. Smt. Sandhya Tudu, Chairperson of the Recruitment Committee Purulia District
24. Chief Medical Officer of Health (All Districts)



State Mission Director
National Health Mission

Sl. No.	Name of the District	Name of the Chairperson
1.	Dakshin Dinajpur	Shri Biplab Mitra
2.	Uttar Dinajpur	Shri Biplab Mitra
3.	Choochbehar	Shri Rabindra Nath Ghosh
4.	Murshidabad	Shri Nasiruddin Ahmed (Lal)
5.	Malda	Dr. Asish Banerjee
6.	Darjeeling	Shri Goutam Deb
7.	Jalpaiguri	Shri Goutam Deb
8.	Birbhum	Shri Monirul Islam
9.	Hooghly	Shri Tapan Dasgupta
10.	Purba Medinipur	Shri Jyotirmoy Kar
11.	Paschim Medinipur	Shri Shankar Dolai
12.	Bankura	Shri Arup Kumar Khan
13.	Burdwan	Shri Ujjal Pramanick (Rural) Shri Subhasis Batabyal (Urban)
14.	North 24-Pgs.	Shri Silbhadra Datta
15.	South 24-Pgs.	Shri Nirmal Maji
16.	Nadia	Smt. Nilima Nag (Mallick)
17.	Howrah	Shri Pulak Roy
18.	Purulia	Smt. Sandhya Tudu

GOVERNMENT OF WEST BENGAL
HEALTH AND FAMILY WELFARE DEPARTMENT
NATIONAL RURAL HEALTH MISSION
GN-29, SECTOR-V, SALT LAKE
KOLKATA-700091

Memo No: HFW/NRHM-20/2006/(Part II)/1631

June 27, 2012

From: Dilip Ghosh, IAS
State Mission Director (NRHM) &
Secretary to Govt. of West Bengal

To: 1. District Magistrate,.....District.
2. CMOH,District.

Sir/Madam,

Sub: Revised Guideline for Selection of ASHAs

In West Bengal, ASHA Programme has lived up to its role as one of the major components of NRHM. As per 2001 census, the total no. of ASHAs to be selected in West Bengal is around 61008, out of which around 46818 ASHAs have already been selected. With ASHAs being introduced as a change agent in transforming the health seeking behavior of the community, the demand for health services provided by the government is on the rise.

It has been decided to modify the guideline for selection of ASHAs. The order for revised guideline for selection of ASHAs is being issued herewith. This order supersedes all other guidelines and orders issued in this context. The revised guideline for selection of ASHAs will be effective on and from 15th July, 2012. All selections initiated from the aforementioned date onwards will follow this guideline.

You are being requested to take necessary steps regarding the same.

Thanking you,

Yours faithfully,


(Dilip Ghosh)

State Mission Director (NRHM) &
Secretary to Govt. of West Bengal

Memo No: HFW/NRHM-20/2006/(Part II)/1631/1(150)

June 27, 2012

Copy forwarded for information and necessary action to:

1. Principal Secretary, DWCD
2. Principal Secretary, P & RD
3. Director of Health Services
4. Director of Medical Education
5. Executive Director, WBSH&FWS
6. Director, SPSRC - with a request to circulate copies to all members of SPSRC
7. Joint Secretary (FW) & Additional Mission Director (NRHM)
8. Addl. DHS & SFWO - with a request to circulate copies to all members of SFWB
9. Jt. DHS, PH & CD
10. Sr. Accounts Officer, NRHM
11. DDHS, Malaria
12. DDHS, Leprosy
13. Jt. DHS, RNTCP
14. DDHS, NPCB

- 15. Mr. Subhra Chakraborty, PO, NRHM
- 16. Ms. Srabani Majumder, State NGO Coordinator
- 17. Dr. Kaninika Mitra, P.O. Health, UNICEF
- 19-36. Chairperson.....District
- 37-54. Deputy CMOH-III,.....District
- 55-72. DMCHO,.....District
- 73-90. DPO (ICDS) District
- 91-108. DPHNO,.....District
- 109-126. District Programme Coordinator, PMU.....District
- 127. All SDOs,..... Sub Division,.....District
- 128. All BMOHs,Block, District
- 129-143. Secretary/Director, District Training Centre (DTC's)
- 144. CINI-STC State Training Centre
- 145. PA to MIC
- 146. PA to MOS
- 147. PA to Principal Secretary
- 148. In charge, IT cell - with a request to upload the guideline in the website
- 149. Guard File
- 150. Office copy


 (Dilip Ghosh)
 State Mission Director (NRHM) &
 Secretary to Govt. of West Bengal

(9)

**GOVERNMENT OF WEST BENGAL
HEALTH AND FAMILY WELFARE DEPARTMENT
NATIONAL RURAL HEALTH MISSION
SWASTHYA BHAVAN, 4TH FLOOR
GN-29, SECTOR-V, SALT LAKE
KOLKATA – 700091**

Memo no. HFW/NRHM-20/2006/(Part II)/1631

Dated: 27th June 2012

ORDER

Sub: Revised Guideline for Selection of ASHAs

It has been decided to modify the guideline for selection of ASHAs. This order supersedes all other guidelines and orders issued in this context.

The revised guideline for selection of ASHAs, to be effective on and from 15th July 2012, is hereby issued.

All selections initiated from the aforementioned date onwards will follow this guideline.

A. Population to be covered by ASHA:

A.1: Considering the pattern of population distribution, one ASHA is to serve 800 - 1200 population.

B. Eligibility for being an ASHA:

B.1: Should be a married/divorced or widowed woman

B.2: Should be a resident of the same village for which she will be selected

B.3: Should be within the age group of 30-40. In case of SC and ST candidates, the lower age limit may be relaxed to 22 years.

B.4: Should be Madhyamik appeared or equivalent

B.5: Women candidates who are Madhyamik pass or possessing higher qualification are also eligible. However, in case of candidates possessing higher qualification, only marks obtained in Madhyamik or equivalent examination will be considered.

C. Documents to be submitted/shown mandatorily by the applicant:

C.1: The proof of residence (Voters Identity Card/Ration Card)

C.2: Original mark sheet of Madhyamik or equivalent examination as applicable. Mark sheet is to be provided by the candidates even in case of failure in the exam.

D: Process of selecting an ASHA:

D.1: Selection of ASHA will be done at the sub division level.

D.2: Selection will be done by ASHA Selection Committee at the sub divisional level comprising of the following members:

- MICs / other public representatives of the district – Chairperson (District wise names of MICs / other public representatives of the district attached in *Annexure I*)
- Sub Divisional Officer (SDO) - Member Secretary
- DPHNO - Member
- DPO (ICDS) - Member
- BMOH of the concerned blocks - Members

(8)

D.3: The selection would be based on

- Marks obtained by the candidate in the Madhyamik or equivalent examination (90% weightage).
- Score in the interview (10% weightage)

D.4: Areas where the majority of the population belongs to ST/SC, preference to be given to women from that category keeping the selection criteria (detailed in **Section B**) fixed.

D.5: Preference to be given to Grade I and Grade II SHG members / trained dais / link workers keeping the selection criteria (detailed in **Section B**) fixed.

E: Steps to be followed for filling up of vacant areas:

E.1: A detailed analysis of area demarcated and assigned to each ASHA in the Gram Panchayat is to be taken up by the BDO and BMOH with support from BPHN and GP Supervisors of his/her block to check that the demarcation and subsequent assignment was done within the purview of the programme guideline and as per Census, 2001.

E.2: In case of any discrepancy in the allotted area, the BDO and BMOH will rationally re-allot the area to be covered by each ASHA as per the programme guideline with guidance from the District Magistrate (DM) and Chief Medical Officer of Health (CMOH).

E.3: After ensuring that the existing population distribution of the ASHAs is as per programme guideline, the areas lying vacant need to be identified along with the no. of vacancies based on which extensive publicity regarding the nature of service being sought and eligibility criteria is to be done by the BDO at the block, Gram Panchayat and the village level. The publicity will include the following:

- Advertisement in local newspapers,
- Postering at the BDO office, BPHC/RH, and Gram Panchayat office, and
- Miking at the village level.

E.4: The BDO office will receive applications from the prospective candidates. A separate register is to be maintained at the BDO office for documenting all the applications. After initial shortlisting and scrutiny at the BDO office, the list of eligible candidates along with their applications will be sent to the SDO office for final selection by the ASHA Selection Committee as stated in **Section D.2**. The BDO office will retain a receipt copy of the list of eligible candidates sent to the SDO office. All relevant documents should be maintained properly and made available for any future verification if necessary.

E.5: On receiving the list of eligible candidates from the BDO office, an interview is to be held at the SDO office by the ASHA Selection Committee comprising of members as stated in **Section D.2**.

E.6: SDO will seek the convenience of the Chairperson and convene the meeting of the ASHA Selection Committee with the members stated above in **Section D.2**.

E.7: Based on the marks obtained in Madhyamik or equivalent examination and scores in interview, the ASHA Selection Committee is to draw up a GP wise final list with a panel of three candidates for each position in **Proforma ASHA_P1** as provided by the State ASHA Cell under NRHM (attached along with this order as *Annexure 2*). All sections of the **Proforma ASHA_P1** should be properly filled up failing which the selection will not be approved at the State level.

E.8: At the SDO office, all relevant documents (e.g. list of eligible candidates received from the BDO office, photocopies of mark sheets and proofs of residence of candidates selected in the panel, etc.) should be maintained properly and made available for any future verification if necessary.

E.9: The GP wise **Proforma ASHA_P1** is to be duly approved and signed by all the members of the ASHA Selection Committee and the SDO office will send it to the CMOH for further processing.

E.10: After receipt of the approved panel in prescribed format **Proforma ASHA_P1** from the SDO office, it is to be forwarded by the CMOH, within 30 days of receipt, to the State Mission Director (NRHM), Dept. of Health & Family Welfare, Govt. of West Bengal, along with a forwarding letter, for final approval.

E.11: On receipt of the final approval from the state, the engagement of ASHA will be done by the BMOH as Member Secretary of the Block Health & Family Welfare Samiti.

E.12: Standard format for engagement will be provided by the State ASHA Cell under NRHM along with the approved list.

F. Others:

F.1: Total no. of ASHAs to be selected per block as per Census, 2001, has already been communicated to the districts vide the initiation letters issued for the different phases.

F.2: The detailed analysis of area demarcated and assigned to each ASHA in the Gram Panchayat and subsequent reallocation, if any, has to be done as per Census, 2001.

F.3: Preference as mentioned in **Section D.4** will precede that in **Section D.5**.

F.4: In case of non-availability of candidates matching the selection criteria, specific relaxations may be approved on a case to case basis by NRHM, DoH&FW, GoWB, upon submission of a written request along with requisite proof from the Block Health & Family Welfare Samiti, by the CMOH.

F.5: After receiving engagement letter from the Block Health & Family Welfare Samiti, the ASHAs will undergo a complete residential training in various rounds as part of the capacity building mechanism. She will be entitled for a performance based incentive only after completion stipulated round of training as per guideline.

F.6: The revised order for selection of ASHAs will be effective on and from 15th July 2012. All selections initiated from this date onwards will follow this guideline.

Sanjay Mitra
SANJAY MITRA 29/6/12
PRINCIPAL SECRETARY
DoH&FW GoWB

**List of Chairpersons of Sub-Divisional Committees for the
engagement of ASHAs**

Sl.No	District	Name of Chairpersons
1.	South 24 Parganas	Sri Arup Biswas
2.	North 24 Parganas	Sri Jyotipriya Mallick
3.	Nadia	Sri Ujjal Biswas
4.	Purba Medinipur	Sri Suvendu Adhikari
5.	Paschim Medinipur	Sri Santiram Mahato
6.	Purulia	Sri Santiram Mahato
7.	Malda	Smt.Sabitri Mitra
8.	Murshidabad	Sri Subrata Saha
9.	Uttar Dinajpur	Janab Karim Chowdhury
10.	Dakshin Dinajpur	Sri Sankar Chakraborty
11.	Darjeeling (Siliguri)	Sri Goutam Deb
12.	Darjeeling (Hills)	Sri Goutam Deb
13.	Jalpaiguri	Sri Goutam Deb
14.	Coochbehar	Sri Hiten Barman
15.	Birbhum	Smt. Satabdi Roy
16.	Burdwan	Sri Moloy Ghatak
17.	Hooghly	Dr.Ratna Nag
18.	Howrah	Sri Arup Roy

**GOVERNMENT OF WEST BENGAL
HEALTH AND FAMILY WELFARE DEPARTMENT
NATIONAL RURAL HEALTH MISSION
SWASTHYA BHAVAN, 4TH FLOOR
GN-29, SECTOR-V, SALT LAKE
KOLKATA - 700091**

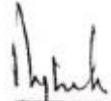
Memo no: HFW/NRHM/20/06/Pt II/1844

Dated: 24th July 2012

Corrigendum

In partial modification of order no. HFW/NRHM-20/2006/Pt II/1631 dated June 27, 2012 regarding Revised Guidelines for Selection of ASHAs, it is ordered that the revised list of Chairpersons of Sub-Divisional Committees for the selection of ASHAs stands modified as follows:

1. Shri. Sukumar Hansda for Paschim Midnapore instead of Shri. Santiram Mahato and
2. Shri. Shyam Mukherjee for Bankura district.



Dilip Ghosh

State Mission Director (NRHM) &
Secretary to Govt. of West Bengal

Memo no: HFW/NRHM/20/06/Pt II/1844

Dated: 24th July 2012

Copy forwarded for information and necessary action to:

1. Principal Secretary, DWCD
2. Principal Secretary, P & RD
3. Director of Health Services
4. Director of Medical Education
5. Executive Director, WBSH&FWS
6. Director, SPSRC - with a request to circulate copies to all members of SPSRC
7. Joint Secretary (FW) & Additional Mission Director (NRHM)
8. Addl. DHS & SFWO - with a request to circulate copies to all members of SFWB
9. Jt. DHS, PH & CD
10. Sr. Accounts Officer, NRHM
11. DDHS, Malaria
12. DDHS, Leprosy
13. Jt. DHS, RNTCP
14. DDHS, NPCB
15. Mr. Subhra Chakraborty, PO, NRHM
16. Ms. Srabani Majumder, State NGO Coordinator
17. Dr. Kaninika Mitra P.O. Health, UNICEF



- 18-35. Chairperson.....District
36-53. Deputy CMOH-III,.....District
54-71. DMCHO,.....District
72-89. DPO (ICDS) District
90-107. DPHNO,.....District
108-125. District Programme Coordinator, PMU.....District
126. All SDOs,..... Sub Division,.....District
127. All BMOHs,Block, District
128-142. Secretary/Director, District Training Centre (DTC's)
143. CINI-STC State Training Centre
144. PA to MIC
145. PA to MOS
146. PA to Principal Secretary
147. In charge, IT cell - with a request to upload the guideline in the website
148. Guard File
149. Office copy

Dilip Ghosh

State Mission Director (NRHM) &
Secretary to Govt. of West Bengal

(4)

**GOVERNMENT OF WEST BENGAL
DEPARTMENT OF HEALTH & FAMILY WELFARE
SWASTHYA BHAVAN, WING B, 4th FLOOR
GN 29, SECTOR V, SALT LAKE
KOLKATA 700091**

Memo No: HFW/NRHM-20/06/(Part III)/250

Dated: 27.01.14

ORDER

Sub: Revised Guideline for Selection of ASHAs

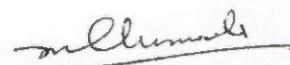
Ref: 1. Memo no. HFW/NRHM-20/2006/Part II/1631 Dated: 27th June 2012 and
2. Memo no. HFW/NRHM-20/06/Part II/1844 Dated: 24th July 2012, of State Mission Director

In partial modification to the memos under reference regarding Revised Guideline for Selection of ASHAs, and with reference to Point No.D.2 of Memo No.1, the list of MICs/other public representatives of the district as Chairperson, is hereby revised. The same is being enclosed as Annexure 1 herewith.

It is being intimated that where such selection process is underway or almost completed, the existing committee may conclude the process.

The changes as proposed may be effected for all selection for which advertisement has already been published or is to be published or applications have been received but the subsequent stages of the process of selection have not yet started.

Other points laid out in the memo under reference remain unchanged.


Principal Secretary
DoH&FW GoWB

Enclo: As above

2

Memo No: HFW/NRHM-20/06/(Pt III)/250/1(26)

Dated: 27.1.14

Copy forwarded for kind information and necessary action to:

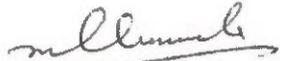
1. Director of Health Services
- 2-19. CMOH – All districts
20. PS to Hon'ble MIC, Dept. of Forests, GoWB with the request to kindly place this before Hon'ble MIC
21. PS to Hon'ble MIC, Dept. of Fisheries, GoWB with the request to kindly place this before Hon'ble MIC
22. PS to Hon'ble MIC, Dept. of Water Resources, Investigation & Development, GoWB with the request to kindly place this before Hon'ble MIC
23. PS to Hon'ble MOS, Dept. of Health & Family Welfare, GoWB with the request to kindly place this before Hon'ble MIC
24. Sri Tapan Dasgupta, Parliamentary Secretary, Dept. of Labour, GoWB
25. Office of State ASHA Cell
26. Guard file


State Mission Director, NHM

**Revised List of Chairpersons of Sub-Divisional Committees for the
engagement of ASHAs**

Sl.No	District	Name of Existing Chairpersons	Name of the Chairpersons now
1.	Purba Medinipur	Sri. Suvendu Adhikari	Dr. Soumen Mahapatra
2.	Coochbehar	Sri. Hiten Barman	Sri Binoy Burman
3.	Birbhum	Smt. Satabdi Roy	Sri Chandranath Sinha
4.	Hooghly	Dr. Ratna Nag	Sri. Tapan Dasgupta

Other names remain unchanged as issued vide Memo no. HFW/NRHM-20/2006/Part II/1631 Dated: 27th June 2012 and Memo no. HFW/NRHM-20/06/Part II/1844 Dated: 24th July 2012 memo under reference.


Principal Secretary

1

**GOVERNMENT OF WEST BENGAL
DEPARTMENT OF HEALTH & FAMILY WELFARE
SWASTHYA BHAVAN, WING B, 4th FLOOR
GN 29, SECTOR V, SALT LAKE
KOLKATA 700091**

Memo No: HFW/NRHM-20/06/(Part III)/735

Dated: 20.02.14

ORDER

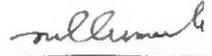
Sub: Revised Guideline for Selection of ASHAs

Ref: Memo No: HFW/NRHM-20/06/(Part III)/250 dated: 27.01.14

In partial modification to the memo under reference regarding Revised Guideline for Selection of ASHAs, it is being intimated that Chairperson for the ASHA Selection Committee of Purba Medinipur stands modified as follows:

1. Shri Suwendu Adhikari instead of Dr. Soumen Mahapatra

Other points laid out in the memo under reference remain unchanged.


Principal Secretary
DoH&FW GoWB

Memo No: HFW/NRHM-20/06/(Part III)/735

Dated: 20.02.14

Copy forwarded for kind information and necessary action to:

1. Director of Health Services
2. District Magistrate – Purba Medinipur
3. CMOH – Purba Medinipur
4. PS to Hon'ble MOS, Dept. of Health & Family Welfare, GoWB with the request to kindly place this before Hon'ble MIC
5. Office of State ASHA Cell
6. Guard file


for State Mission Director, NHM