



असाधारण

EXTRAORDINARY

प्राधिकार से प्रकाशित

Published by Authority

सं. 327, पोर्ट ब्लेयर, शुक्रवार, 06 अगस्त, 2010

No. 327, Port Blair, Friday, August 06, 2010

अण्डमान तथा निकोबार संघ राज्यक्षेत्र स्वास्थ्य मिशन

एवं

राज्य स्वास्थ्य सोसाईटी का कार्यालय (अण्डमान तथा निकोबार द्वीपसमूह)

पोर्ट ब्लेयर - 744101

अधिसूचना

पोर्ट ब्लेयर, दिनांक 06 अगस्त, 2010

सं. 311/2010/फा.सं 2-2/डी.एफ. एवं ए./यू.टी.एच.एम./2009.-भारत सरकार, स्वास्थ्य एवं परिवार कल्याण मंत्रालय की दिनांक 01 मई, 2007 की पत्र संख्या 118/आर.सी.एच.-वित्त/2006-07 के अनुसरण में, राष्ट्रीय ग्रामीण स्वास्थ्य मिशन के अंतर्गत प्रत्यायोजित प्रशासनिक एवं वित्तीय शक्तियों के संबंध में, दिनांक 19 जून, 2010 को मुख्य सचिव, अण्डमान तथा निकोबार प्रशासन की अध्यक्षता में हुई छठी शासी निकाय की बैठक में राज्य स्वास्थ्य सोसाईटी (अण्डमान तथा निकोबार द्वीपसमूह), जिला स्वास्थ्य सोसाईटी एवं रोगी कल्याण समितियों (दिनांक 15 जून, 2010 की अधिसूचना के हवाले से) की मौजूदा उप विधियों को संशोधित कर, अनुमोदन किया गया है। राज्य स्वास्थ्य सोसाईटी (अण्डमान तथा निकोबार द्वीपसमूह), जिला स्वास्थ्य सोसाईटी एवं रोगी कल्याण समिति की उप विधि इस प्रकार है :

राज्य स्वास्थ्य सोसाईटी (अण्डमान तथा निकोबार द्वीपसमूह), जिला स्वास्थ्य सोसाईटी एवं रोगी कल्याण समिति की उप विधि

1. लघु शीर्ष

- 1.1 राज्य स्वास्थ्य सोसाईटी (अण्डमान तथा निकोबार द्वीपसमूह), जिला स्वास्थ्य सोसाईटी एवं रोगी कल्याण समिति की मौजूदा उप विधियों के संशोधन।
- 1.2 मौजूदा उप विधियों में, राज्य स्वास्थ्य सोसाईटी (अण्डमान तथा निकोबार द्वीपसमूह), जिला स्वास्थ्य सोसाईटी एवं रोगी कल्याण समितियों के प्रदत्त शक्तियों को, इस संशोधन से अतिक्रमण (सूपरसीड) करते हैं, हालांकि राज्य स्वास्थ्य सोसाईटी (अण्डमान तथा निकोबार द्वीपसमूह), जिला स्वास्थ्य सोसाईटी एवं रोगी कल्याण समिति के नियम एवं विनियमों में कोई बदलाव नहीं होगा।
- 1.3 यह संशोधित उप विधियाँ, राज्य स्वास्थ्य सोसाईटी (अण्डमान तथा निकोबार द्वीपसमूह) की शासी निकाय बैठक में अनुमोदन की तारीख से लागू होंगे।

ह./-

मिशन निदेशक
संघ राज्यक्षेत्र स्वास्थ्य मिशन

BYE-LAWS OF STATE HEALTH SOCIETY (A&N ISLANDS)

राष्ट्रीय ग्रामीण स्वास्थ्य मिशन के अंतर्गत प्रशासनिक एवं वित्तीय अधिकारों का प्रत्यायोजन ।

राज्य स्वास्थ्य सोसाईटी की शासी निकाय, कार्यकारी समिति, कार्यक्रम समिति तथा अन्य पदाधिकारियों की वित्तीय अधिकार ।

टेबल - 1

विवरण	अधिकारों का प्रसार	
	प्राधिकारी	
ए-1 : भारत सरकार भेजे जाने वाले राज्य कार्यक्रम कार्यान्वयन योजना (राज्य पी.आई.पी.) का अनुमोदन ।	शासी निकाय	पूर्ण अधिकार
ए-2 : भारत सरकार द्वारा राज्य पी.आई. पी. के आधार पर अनुमोदित कार्यक्रमवार तथा जिलावार आबंटन ।	कार्यकारी समिति	पूर्ण अधिकार
बी-1 : जिला स्वास्थ्य सोसाईटियों को धन मुहैया करने हेतु वित्तीय मंजूरी ।	मिशन निदेशक	पूर्ण अधिकार
बी-2 : जिला स्तर पर मूल आबंटन की 10 प्रतिशत से ज्यादा का पुनः विनियोजन । (संदर्भ : शासकीय सिद्धांत - 4)	मिशन निदेशक	पूर्ण अधिकार
	संयुक्त सचिव, कार्यक्रम अधिकारी (राज्य कार्यक्रम अधिकारी)	मौजूदा कार्यक्रम के दिशा-निर्देशों में शक्तियों का पुनः आबंटन अनुसार ।
सी-1 : (क) राज्य पी.आई.पी. में अनुमोदन अनुसार ड्रग्स तथा उपभोग्य वस्तुओं की खरीद अनुमोदन ।	कार्यकारी समिति मिशन निदेशक	रेट कॉन्ट्रैक्ट के बिना, रु. 05 लाख तक के प्रत्येक आदेश । 1. स्वास्थ्य सेवा निदेशालय/डी.जी.एस. एण्ड डी. /स्वास्थ्य एवं परिवार कल्याण मंत्रालय के अनुमोदित दरों के अनुसार पूर्ण अधिकार । 2. रेट कॉन्ट्रैक्ट के बगैर 05 लाख रुपये प्रत्येक आदेश ।
सी-1 : (ख) राज्य पी.आई.पी. में अनुमोदन अनुसार उपकरणों की खरीद अनुमोदन ।	कार्यकारी समिति अध्यक्ष (कार्यकारी समिति, रा.स्वा.सो.) मिशन निदेशक	रु. 10 लाख प्रति उपकरण से ज्यादा । रु. 05 लाख से ज्यादा तथा रु 10 लाख तक प्रति उपकरण । रु. 05 लाख तक के उपकरण ।
सी-1 : (ग) राज्य पी.आई.पी. में अनुमोदन अनुसार अन्य वस्तुएं एवं सेवाओं की खरीद अनुमोदन ।	कार्यकारी समिति अध्यक्ष (कार्यकारी समिति, रा.स्वा.सो.)	रु. 10 लाख से अधिक की प्रति मामले । रु. 05 लाख से ज्यादा एवं रु. 10 लाख तक की प्रति मामले ।
नोट-1: जहाँ तक संभव हो, खरीद डीजीएस एण्ड डी या राज्य सरकार/ राज्य स्वास्थ्य सोसाईटी द्वारा अंगीकृत दरों पर हो ।	मिशन निदेशक	रु. 05 लाख तक की प्रति मामले ।
नोट-2: जो वस्तुएं रेट कॉन्ट्रैक्ट में नहीं हैं, उसे नियुक्त खरीद समिति के सिफारिशों पर अनुमोदन प्राधिकारी ही व्यय मंजूरी भी प्रदान करें ।		
नोट-3: सभी खरीद फरोक्त, जी.एफ.आर. में दी गई औपचारिकताएँ पूरा करके ही		

सी-2 : लेखन सामग्री, कम्प्यूटर सामग्री, कार्यालयीन उपकरण, कार्यालयीन फर्नीचर, ब्रॉडबैंड, इंटरनेट कनेक्शन आदि।	अध्यक्ष (कार्यकारी समिति, रा.स्वा.सो.) मिशन निदेशक	अनुमोदित बजट के अनुसार प्रत्येक मामले में रु. 50,000 /- से अधिक रु. 50,000 /- तक के प्रत्येक मामले में।
नोट-1: अनुमोदित बजट/निधि के अनुसार तथा जी.एफ.आर. में दी गई नियमों के अनुसार।	संयुक्त सचिव / पी.एम. राज्य पी.एम.एस.यू. के राज्य कार्यक्रम प्रबंधक	रु. 25,000 /- तक के प्रत्येक मामले में। रु. 1,000 /- तक के प्रत्येक मामले में।
सी-3 : खरीद समिति।	<p>दवाईयाँ/चिकित्सा उपकरण/सर्जिकल/उपभोग्य तथा अन्य चिकित्सा वस्तुओं के लिए स्वास्थ्य सेवा निदेशालय के लिए बनी वही खरीद समिति होगी। (संबंधित-संयुक्त सचिव को इसमें शामिल किया जाना है।)</p> <p>चिकित्सा उपकरणों के अलावा जैसे लेखन सामग्री, आई.ई.सी. वस्तुओं आदि के लिए राज्य स्वास्थ्य सोसाईटी की खरीद समिति इस प्रकार है।</p> <ol style="list-style-type: none"> 1. संयुक्त सचिव (आर.सी.एच. - 2) 2. संयुक्त सचिव (आर.एन.टी.सी.पी.) 3. संयुक्त सचिव (एन.पी.सी.बी.) 4. राज्य कार्यक्रम प्रबंधक (राज्य स्वास्थ्य सोसाईटी) 5. राज्य वित्तीय प्रबंधक (राज्य स्वास्थ्य सोसाईटी) 	
सी-4 : बड़ी/नई निर्माण (सिविल) कार्यों के लिए वित्तीय मंजूरियाँ।	अध्यक्ष (कार्यकारी समिति, रा.स्वा.सो.)	नोट 1 से 4 के अनुसार प्रति स्थान के लिए रु. 50 लाख से अधिक।
नोट-1: मूल्य निरूपण (एस्टिमेंट्स) इस आधार पर तैयार किया जाए।	मिशन निदेशक	नोट 1 से 4 के अनुसार प्रति स्थान के लिए रु. 50 लाख तक।
(क) अनुमोदित प्रकार की डिजाइन, तथा (ख) राज्यों की दर अनुसूची (एस.ओ.आर.)		
नोट-2 : लोक निर्माण विभाग (पी.डब्ल्यू. डी.) के अलावा कार्य निष्पादन के अन्य विकल्प अपनाने चाहिए। हालांकि, अमिकरण का चयन, खुली निविदा/बोली प्रणाली की प्रक्रिया के माध्यम से होनी चाहिए।		
नोट-3 : राज्य स्तर पर कार्यों को गठ्ठा किया जा सकता है (जिले के समूह या सभी जिलों के लिए) या जिला स्वास्थ्य सोसाईटी को प्रत्यायोजित किया जाए।		
नोट-4 : जहाँ तक संभव हो, ठेकों को टर्न की आधार पर दिया जाए। (डिजाइन, निष्पादन एवं सौंपे जाने तक) तथा लागत बढ़ने के साथ (समय सीमा की बढ़ने पर) जुर्माना खण्ड हो।		
नोट-5 : अनुरक्षण का कार्य, किसी सरल स्तर की प्रबंधन सोसाईटी को आवश्यक दिशा-निर्देशों के साथ दिया जाए।		
नोट-6 : संघशासित प्रदेश प्रशासन के अंतर्गत के सक्षम तकनीकी प्राधिकारी से सभी मूल्य निरूपण तैयार करवाया जाए।		

सी-5 :राज्य स्तर पर छोटे निर्माण कार्य: मरम्मत एवं नवीकरण (सिविल एवं इलेक्ट्रिकल कार्य सहित) ।	मिशन निदेशक	पूर्ण शक्तियाँ
नोट-1: पहले से मौजूद संस्थान/संरचना तथा जिसकी कीमत रु. 20 लाख है, में किसी भी प्रकार की सिविल कार्य हो, उसे लघु सिविल कार्य समझा जाए ।	संयुक्त सचिव / राज्य कार्यक्रम अधिकारी	रु. 05 लाख तक प्रति स्थान के लिए ।
नोट-2 : रु. 5 लाख तक के लघु सिविल कार्य को साधारणतः अस्पताल प्रबंधन समिति को सौंपा जाए (रोगी कल्याण समिति)।		
नोट-3 :संघशासित प्रदेश प्रशासन के अंतर्गत के सक्षम तकनीकी प्राधिकारी से सभी मूल्य निरूपण (एस्टिमेट्स) तैयार करवाया जाए ।		
सी-6 : राज्य पी.आई.पी में अनुमोदित पदों पर कर्मचारियों को कॉन्ट्रैक्ट पर नियुक्ति, क्षतिपूर्ति की मंजूरी, पात्रता, कॉन्ट्रैक्ट की नवीकरण, टी.ओ.आर. आदि सहित ।	शासी निकाय	क्षतिपूर्ति पैकेज की मंजूरी के लिए पूर्ण अधिकार ।
	अध्यक्ष (कार्यकारी समिति)	शासी निकाय द्वारा अनुमोदित क्षतिपूर्ति पैकेज के अध्याधीन विशेषज्ञ/जी.डी.एम.ओ./प्रबंधकीय तथा समकक्ष स्टाफ के लिए पूर्ण अधिकार ।
नोट : राज्य स्वास्थ्य सोसाईटी के पदों को खुले बाजार से या नियमित अधिकारियों में से प्रतिनियुक्ति के आधार पर भरा जा सकता है । (संदर्भ : स्वास्थ्य एवं परिवार कल्याण मंत्रालय की डी.ओ. संख्या 37018/6/2003-ई.ए.जी. (भाग-4) दिनांक 20 जून, 2005)	अध्यक्ष (कार्यकारी समिति)	अनुमोदित पी.आई.पी. के अध्याधीन परामर्शदाताओं के लिए पूर्ण शक्तियाँ ।
	मिशन निदेशक	अनुमोदित पी.आई.पी. के अध्याधीन तथा शासी निकाय द्वारा अनुमोदित क्षतिपूर्ति पैकेज के अनुसार लिपिकीय कर्मचारी या समकक्ष के संबंध में पूर्ण अधिकार ।
सी-7 : एन.आर.एच.एम. के अंतर्गत कर्मचारी चयन ।	अध्यक्ष (कार्यकारी समिति), मिशन निदेशक, संयुक्त सचिव/ को-ऑप्टेड सदस्य ।	
1. कार्यकारी स्तर के कर्मचारियों के लिए कर्मचारी चयन समिति । (विशेषज्ञ, डॉक्टर, परामर्शदाता तथा प्रबंधकीय स्टाफ आदि)	मिशन निदेशक, संयुक्त सचिव/ को-ऑप्टेड सदस्य	
2. एस.एम.पी.यू. के अंतर्गत अन्य कॉन्ट्रैक्ट स्टाफ जैसे लिपिक कर्मचारी या समकक्ष के लिए कर्मचारी चयन समिति ।		
सी-8 : अनुमोदित कॉन्ट्रैक्ट स्टाफ के लिए मासिक वेतन/मानदेय/पारिश्रमिक आदि की अनुमोदन/मंजूरी ।	मिशन निदेशक	अनुमोदित राज्य पी.आई.पी. के बजट के अनुसार पूर्ण शक्तियाँ ।
	संयुक्त सचिव / राज्य कार्यक्रम अधिकारी	उनके कार्यक्रम के अधीन कार्य कर रहे कॉन्ट्रैक्ट स्टाफ के लिए पूर्ण अधिकार ।
सी-9: टी.ए. /डी.ए. तथा अन्य स्वीकार्य भत्तों की मंजूरी	मिशन निदेशक	पूर्ण अधिकार ।
नोट-1: संघशासित प्रदेश के मानदंडों के अनुसार टी.ए. / डी.ए. स्वीकार्य होगा ।	संयुक्त सचिव / कार्यक्रम अधिकारी/ राज्य कार्यक्रम प्रबंधक (पी.एम.एस.यू)	उनके अधीन कार्य कर रहे कॉन्ट्रैक्ट स्टाफ के लिए पूर्ण अधिकार ।
नोट-2: सोसाईटी की निधियाँ टी.ए./डी.ए. देने के लिए केवल उन्हीं कर्मचारियों के लिए दिए जाएंगे जो राज्य स्वास्थ्य सोसाईटी से वेतन ले रहे हैं		

<p>सी-10: राज्य स्तर के कार्यक्रम अधिकारी या पदाधिकारी / राज्य स्वास्थ्य सोसाईटी के अधिकारियों की पर्यवेक्षण संबंधी दौरों के लिए वाहन/ किराये पर टैक्सी आदि की अनुमोदन ।</p> <p>नोट-1: राज्य सरकार या परियोजना / कार्यक्रम के अंतर्गत वाहन उपलब्ध न होने पर ही वाहन को भाड़े पर लेने का प्रावधान होगा ।</p>	<p>अध्यक्ष (कार्यकारी समिति)</p>	<p>अनुमोदित बजट के अध्याधीन में रु. 1000 /- प्रति दिन से अधिक की कीमत वाले वाहनों के लिए पूर्ण अधिकार ।</p>
<p>नोट-2: वाहन किराया प्रभार को वेतन, टी.ए./डी.ए. कार्यालयीन खर्चों एवं प्रबंधन खर्चों की 6 प्रतिशत की राशि से ही पूरा करना होगा ।</p> <p>नोट-3: राज्य पी.आई.पी. को राज्य, जिला तथा उप जिलों के लिए वाहनों को किराये पर लेने की समग्र आबंटन के लिए प्रावधान करनी होगी ।</p> <p>नोट-4: संघशासित प्रदेश प्रशासन द्वारा अनुमोदित टैक्सी ऑपरेटरों की स्वीकार की गई पैनल को राज्य स्वास्थ्य सोसाईटी प्रयोग करें ।</p>	<p>मिशन निदेशक</p>	<p>पूर्ण अधिकार बशर्ते अनुमोदित बजट के अध्याधीन में रु. 1000 /- प्रति दिन से अधिक की कीमत वाले वाहनों के लिए अध्यक्ष (कार्यकारी समिति) से अनुमोदन की आवश्यकता होगी ।</p>
<p>सी-11: अनुमोदित कार्यशाला, बैठकें आदि तथा कार्यक्रम के दिशा-निर्देशों के अनुसार इससे संबंधित खर्चों तथा अनुमोदित मानदंडों के अनुसार प्रशिक्षण सामग्री की खरीद, टी.ए./डी.ए. का भुगतान एवं अनुमोदित प्रशिक्षण गतिविधियाँ तथा इससे संबंधित अन्य खर्च ।</p>	<p>अध्यक्ष (कार्यकारी समिति)</p>	<p>रु. 2 लाख से अधिक प्रत्येक मामले में ।</p>
	<p>मिशन निदेशक</p>	<p>रु. 2 लाख तक प्रत्येक मामले में ।</p>
	<p>राज्य कार्यक्रम अधिकारी / संयुक्त सचिव / राज्य कार्यक्रम प्रबंधक</p>	<p>रु. 50000 तक प्रत्येक मामले में ।</p>
<p>सी-12: उपर्युक्त कहे गए विषयों के अलावा विविध खर्च ।</p> <p>नोट : इस शीर्ष के अंतर्गत कोई भी आस्ति अर्जित नहीं की जाएगी । आस्ति आर्जन से संबंधित कोई भी प्रस्ताव पैरा सी-9 में दी गई दिशा-निर्देशों के अनुसार राज्य पी.आई.पी. में रखा जाए या अन्य ऊपर प्रस्तुत प्रावधान (जो भी मामला हो) जिसकी अनुमोदन इच्छित की गई हो ।</p>	<p>अध्यक्ष (कार्यकारी समिति)</p>	<p>रु. 1 लाख से अधिक प्रत्येक मामले में ।</p>
	<p>मिशन निदेशक</p>	<p>रु. 1 लाख तक प्रत्येक मामले में ।</p>
	<p>राज्य कार्यक्रम अधिकारी/संयुक्त सचिव/राज्य कार्यक्रम प्रबंधक</p>	<p>रु. 10000 तक प्रत्येक मामले में ।</p>
<p>सी-13: अवकाश मंजूरी ।</p>	<p>अध्यक्ष (कार्यकारी समिति)</p>	<p>60 दिनों से अधिक ।</p>
<p>नोट 1 : राज्य स्वास्थ्य सोसाईटी के अंतर्गत संविदा नियुक्ति के अनुसार इसमें 2.5 दिन प्रति माह की पात्र आवकाश शामिल है ।</p>	<p>मिशन निदेशक</p>	<p>60 दिन तक ।</p>

भारत सरकार के सिफारिशों के अनुसार चेक जारी करने वाले प्राधिकारी ।

- तीन संयुक्त हस्ताक्षरियों को अधिसूचित किया जाएगा, चेक की भुगतान के लिए, जिनमें दो हस्ताक्षरियों के हस्ताक्षर काफी होंगे ।

निम्नलिखित पद्धति अपनायी जाए ।

(क) मिशन फ्लेक्सी पूल के लिए :

मिशन निदेशक एवं राज्य वित्त प्रबंधक एवं राज्य कार्यक्रम प्रबंधक ।

ऊपर कहे गए हस्ताक्षरियों में से कोई भी दो हस्ताक्षरी चेक पर हस्ताक्षर कर सकते हैं, बशर्ते मिशन निदेशक के हस्ताक्षर अनिवार्य होंगे ।

(ख) राष्ट्रीय रोग नियंत्रण कार्यक्रम तथा अन्य कार्यक्रम के लिए :

मिशन निदेशक, संयुक्त सचिव/ कार्यक्रम अधिकारी एवं राज्य वित्त प्रबंधक ।

ऊपर कहे गए हस्ताक्षरियों में से, कोई भी दो हस्ताक्षरी चेक पर हस्ताक्षर कर सकते हैं, बशर्ते संयुक्त सचिव/ कार्यक्रम अधिकारी के हस्ताक्षर अनिवार्य होंगे ।

BYE-LAWS OF DISTRICT HEALTH SOCIETY

जिला स्वास्थ्य सोसाईटी की शासी निकाय, कार्यकारी समिति तथा अन्य पदाधिकारियों की वित्तीय शक्तियाँ ।

जिला स्वास्थ्य सोसाईटी के पदाधिकारियों को प्रत्यायोजित प्रशासनिक एवं वित्तीय शक्तियों को समिति ने निम्नलिखित टेबल 2 में सूचित करने की सिफारिश की है ।

टेबल - II

विवरण	शक्तियों का प्रसार	
	प्राधिकारी	
ए : जिला कार्यवाही योजना (डी.ए.पी.) का अनुमोदन ।	शासी निकाय, जिला स्वास्थ्य सोसाईटी	पूर्ण अधिकार ।
बी-1 : वार्षिक अनुरक्षण, अनुदान तथा आर.के. एस. के अंतर्गत जिला अस्पताल, सी.एच.सी., पी. एच.सी. उप-केन्द्र तथा वी.एच.एस.सी. आदि के लिए शर्त रहित निधि मुहैया करने का अनुमोदन ।	अध्यक्ष (शासी निकाय, जि.स्वा.सो.)	पूर्ण अधिकार बशर्ते निर्धारण अनुमोदित जिला कार्यवाही योजना के अध्याधीन हो ।
बी-2 : कार्यान्वयन अभिकरण जैसे जिला अस्पताल, सी.एच.सी./पी.एच.सी./उप-केन्द्र/वी.एच.एस.सी./एन.जी.ओ. को (शर्त रहित निधि के अलावा) निधि मुक्त करने का अनुमोदन तथा अन्य कार्यान्वयन अभिकरणों एवं चिकित्सा अधिकारियों, ए.एन.एम. तथा आशा आदि को स्थायी पेशगी मुक्त करने से संबंधित अनुमोदन ।	अध्यक्ष (शासी निकाय, जि.स्वा.सो.)	पूर्ण अधिकार बशर्ते निर्धारण अनुमोदित जिला कार्यवाही योजना के अध्याधीन हो ।
बी-3 : जिला स्तर पर मूल आबंटन का पुनः विनियोजन ।		
सी-1 : जिला कार्यवाही योजना (डी.ए.पी.) में सम्मिलित बड़ी/नई निर्माण (सिविल) कार्य । नोट-1: मूल्य निरूपण (एस्टिमेंट) इस आधार पर किया जाए । (क) अनुमोदित प्रकार की डिजाइन तथा (ख) राज्यों की दर अनुसूची (एस.ओ.आर) नोट-2 : लोक निर्माण विभाग (पी.डब्ल्यू.डी.) के अलावा कार्य निष्पादन के अन्य विकल्प अपनाने चाहिए । हालांकि, निष्पादन अभिकरण का चयन, खुली निविदा/बोली प्रणाली की प्रक्रिया के माध्यम से होनी चाहिए जिसमें पी.डब्ल्यू.डी. इस खुली निविदा/बोली प्रणाली में भाग ले सकें । नोट-3 : जहाँ तक संभव हो, ठेकों को टर्न की आधार पर दिया जाए । (डिजाइन, निष्पादन एवं सौंपे जाने तक) तथा लागत बढ़ने के साथ (समय सीमा की बढ़ने पर) जुर्माना खण्ड हो । नोट-4 : अनुरक्षण का कार्य, किसी सरल स्तर की प्रबंधन सोसाईटी को आवश्यक दिशा-निर्देशों के साथ दिया जाए । नोट-5 : संघशासित प्रदेश प्रशासन के अंतर्गत सक्षम तकनीकी प्राधिकारी से सभी मूल्य निरूपण तैयार करवाया जाए ।	अध्यक्ष (शासी निकाय, जि.स्वा.सो.)	नोट 1 से 5 के अनुसार प्रति स्थान के लिए रु. 50 लाख तक ।
सी-2 : छोटे निर्माण कार्य : मरम्मत एवं	अध्यक्ष (शासी निकाय, जि.स्वा.सो.)	डी.ए.पी. के अंतर्गत अनुमोदित बजट के अध्याधीन पूर्ण अधिकार ।

<p>नोट-1: पहले से मौजूद संस्थान / संरचना तथा जिसकी कीमत रु. 20 लाख है, में किसी भी प्रकार की सिविल कार्य हो, उसे लघु सिविल कार्य समझा जाए ।</p> <p>नोट-2 : रु. 5 लाख तक के लघु सिविल कार्य को साधारणतः अस्पताल प्रबंधन समिति को सौंपा जाए (रोगी कल्याण समिति)।</p> <p>नोट-3 : संघशासित प्रदेश प्रशासन के अंतर्गत सक्षम तकनीकी प्राधिकारी से सभी मूल्य निरूपण तैयार करवाया जाए ।</p>		
<p>सी-3 : (क) जिला पी.आई.पी. में अनुमोदन अनुसार ड्रग्स तथा उपभोग्य वस्तुओं की खरीद अनुमोदन ।</p>	<p>अध्यक्ष (शासी निकाय, जि.स्वा.सो.)</p>	<p>1. स्वास्थ्य सेवा निदेशालय / डी.जी.एस. एण्ड डी./स्वास्थ्य एवं परिवार कल्याण मंत्रालय के अनुमोदित दरों के अनुसार प्रत्येक आदेश रु. 10 लाख तक ।</p> <p>2. रेट कॉन्ट्रैक्ट के बगैर प्रत्येक आदेश 01 लाख रुपये तक ।</p>
<p>सी-3 : (ख) जिला पी.आई.पी. में अनुमोदन अनुसार उपकरणों की खरीद अनुमोदन ।</p>	<p>कार्यकारी समिति (रा. स्वा.सो.)</p> <p>अध्यक्ष (कार्यकारी समिति, रा.स्वा.सो.)</p> <p>मिशन निदेशक</p> <p>अध्यक्ष (शासी निकाय, जि.स्वा.सो.)</p>	<p>रु. 10 लाख से ज्यादा की प्रति उपकरण ।</p> <p>रु. 05 लाख से ज्यादा एवं रु. 10 लाख तक प्रति उपकरण ।</p> <p>रु. 05 लाख तक के उपकरण ।</p> <p>रु. 01 लाख तक के उपकरण ।</p>
<p>सी-3 : (ग) जिला पी.आई.पी. में अनुमोदन अनुसार अन्य वस्तुएं एवं सेवाओं की खरीद अनुमोदन ।</p> <p>नोट-1: जहाँ तक संभव हो, खरीद डी.जी.एस. एण्ड डी. या राज्य सरकार/राज्य स्वास्थ्य सोसाईटी द्वारा अंगीकृत दरों पर हो ।</p> <p>नोट-2: जो वस्तुएं रेट कॉन्ट्रैक्ट में नहीं है, उसे संबंधित अनुमोदन प्राधिकारी, नियुक्त खरीद समिति के अनुमोदित से ही व्यय मंजूरी दी जाए ।</p> <p>नोट-3: राज्य स्वास्थ्य सोसाईटी को अपने लिए एवं जिला स्वास्थ्य सोसाईटियों के लिए विस्तृत खरीद नियमावली बनाकर अपनाने चाहिए ।</p> <p>नोट-4: सभी खरीद फरोक्त, जी.एफ.आर. में दी गई औपचारिकताओं पूरा करके ही की जाए ।</p>	<p>कार्यकारी समिति, रा. स्वा.सो.</p> <p>शासी निकाय, जि.स्वा. सो.)</p> <p>अध्यक्ष (कार्यकारी समिति, जि.स्वा.सो.)</p>	<p>रु. 10 लाख से अधिक के प्रत्येक मामले ।</p> <p>रु. 10 लाख तक के प्रत्येक मामले ।</p> <p>रु. 05 लाख तक के प्रत्येक मामले ।</p>
<p>सी-4 : लेखन सामग्री, कम्प्यूटर सामग्री, कार्यालयीन उपकरण, कार्यालयीन फर्नीचर, ब्राडबैंड, इंटरनेट कनेक्शन आदि ।</p>	<p>अध्यक्ष (कार्यकारी समिति, जि.स्वा.सो.)</p>	<p>डी.ए.पी. में अनुमोदन अनुसार, बजट के अध्याधीन पूर्ण अधिकार ।</p>
<p>नोट-1: अनुमोदित बजट/निधि के अनुसार तथा जी.एफ.आर. में दी गई नियमों के अनुसार ।</p>	<p>उप-अध्यक्ष (कार्यकारी समिति, जि.स्वा.सो.)</p>	<p>अनुमोदित बजट के अनुसार रु 50,000/- तक प्रत्येक मामले में ।</p>
<p>नोट-2: जहाँ तक संभव हो, खरीद डी.जी.एस. एण्ड डी. या राज्य सरकार/राज्य स्वास्थ्य सोसाईटी द्वारा अंगीकृत दरों पर हो ।</p>	<p>शासी निकाय, राज्य</p>	<p>क्षतिपूर्ति पैकेज की मंजूरी के लिए पूरा</p>

नोट : जिला स्वास्थ्य सोसाईटी के पदों को खुले बाजार से या नियमित अधिकारियों में से प्रतिनियुक्ति के आधार पर भरा जा सकता है । (संदर्भ : स्वास्थ्य एवं परिवार कल्याण मंत्रालय की डी.ओ. संख्या 37018/6/2003-ई.ए.जी. (भाग-4) दिनांक 20 जून, 2005)	अध्यक्ष (शासी निकाय, जिला स्वास्थ्य सोसाईटी)	शासी निकाय द्वारा अनुमोदित क्षतिपूर्ति पैकेज के अनुसार (विशेषज्ञ, जी.डी.एम.ओ. तथा परामर्शदाता को छोड़कर) पूर्ण अधिकार । कॉन्ट्रैक्ट पर सभी नियुक्तियाँ राज्य स्वास्थ्य सोसाईटी द्वारा निर्धारित किए गए मानदंड/दिशा-निर्देशों के अनुसार हों ।
सी-6 : कॉन्ट्रैक्ट स्टॉफ के लिए मासिक मानदेय तथा उनको टी.ए./डी.ए. का भुगतान । नोट-1: संघशासित प्रदेश के मानदंडों के अनुसार टी.ए. / डी.ए. स्वीकार्य होगा । नोट-2: सोसाईटी की निधियाँ टी.ए./डी.ए. देने के लिए केवल उन्ही कर्मचारियों के लिए दिए जाएंगे जो राज्य स्वास्थ्य सोसाईटी से वेतन ले रहे हैं अन्यथा उस संबंधित कार्यक्रम के लिए हो जो एन.आर.एच.एम. में सम्मिलित हो ।	अध्यक्ष (शासी निकाय, जिला स्वास्थ्य सोसाईटी)	राज्य स्वास्थ्य सोसाईटी के मानदंडों के अनुसार पूर्ण अधिकार ।
सी-7: पर्यवेक्षण संबंधी दौरों के लिए वाहन/ टैक्सी आदि की किराये पर लेने का अनुमोदन । नोट-1: राज्य सरकार या परियोजना/कार्यक्रम के अंतर्गत वाहन उपलब्ध न होने पर ही वाहन को भाड़े पर लेने का प्रावधान होगा । नोट-2: वाहन किराया प्रभार को वेतन, टी.ए./डी.ए. कार्यालयीन खर्चों एवं प्रबंधन खर्चों की 6 प्रतिशत की राशि से ही करनी होगी । नोट-3: डी.ए.पी.पी. को जिला तथा उप-जिलों के लिए वाहनों को किराये पर लेने की समग्र आवंटन के लिए प्रावधान करना होगा ।	अध्यक्ष (कार्यकारी समिति, जि.स्वा.सो.)	अनुमोदित बजट के अध्याधीन में पूर्ण अधिकार ।
सी-8: जिला स्तर पर कार्यशाला, बैठकें, प्रशिक्षण आदि की तथा कार्यक्रम के दिशा-निर्देशों के अनुसार इससे संबंधित खर्चों तथा अनुमोदित मानदंडों के अनुसार प्रशिक्षण सामग्री की खरीद, टी.ए./डी.ए. का भुगतान एवं अनुमोदित प्रशिक्षण गतिविधियाँ तथा इससे संबंधित अन्य खर्चें ।	अध्यक्ष (शासी निकाय, जिला स्वास्थ्य सोसाईटी) उप-अध्यक्ष (शासी निकाय, जिला स्वास्थ्य सोसाईटी)	अनुमोदित बजट के अध्याधीन में पूर्ण शक्तियाँ । रु. 10000 तक प्रत्येक मामले में ।
सी-10: अवकाश मंजूरी । नोट 1 : राज्य स्वास्थ्य सोसाईटी / जिला स्वास्थ्य सोसाईटी के अंतर्गत संविदा नियुक्ति के अनुसार इसमें 2.5 दिन प्रति माह की पात्र अवकाश शामिल है ।	अध्यक्ष (कार्यकारी समिति, जिला स्वास्थ्य सोसाईटी) उप-अध्यक्ष (शासी निकाय, जिला स्वास्थ्य सोसाईटी)	जिला स्वास्थ्य सोसाईटी के अंतर्गत कार्य कर रहे सभी कॉन्ट्रैक्ट स्टाफ के लिए पूर्ण शक्तियाँ । 30 दिन तक ।

भारत सरकार के सिफारिशों के अनुसार चेक जारी करने वाले प्राधिकारी ।

- चार संयुक्त हस्ताक्षरियों को अधिसूचित किया जाएगा, चेक की भुगतान के लिए, जिनमें दो हस्ताक्षरियों के हस्ताक्षर काफी होंगे ।

निम्नलिखित पद्धति अपनायी जाए :-

(क) मिशन फ्लेक्सी पूल एवं राष्ट्रीय रोग नियंत्रण कार्यक्रम तथा अन्य कार्यक्रम के लिए :

अध्यक्ष (कार्यकारी समिति, जिला स्वास्थ्य सोसाईटी), उप-अध्यक्ष (शासी निकाय, जिला स्वास्थ्य सोसाईटी), उप-अध्यक्ष (कार्यकारी समिति, जिला स्वास्थ्य सोसाईटी) एवं जिला लेखा प्रबंधक ।

ऊपर कहे गए हस्ताक्षरियों में से कोई भी दो हस्ताक्षरी चेक पर हस्ताक्षर कर सकते हैं, बशर्ते अध्यक्ष (कार्यकारी समिति, जिला स्वास्थ्य सोसाईटी) के हस्ताक्षर अनिवार्य होगा ।

फुटनोट-1 : सभी उपर्युक्त वित्तीय एवं प्रशासनिक शक्तियाँ, अनुमोदित जिला कार्यवाही योजना के अंतर्गत दिए गए मानदंडों के अनुसार सीमित होगी ।

फुटनोट-2 : चेक हस्ताक्षर करने/ निधियाँ स्थानांतरण के लिए इलेक्ट्रॉनिक ई-बैंकिंग औथोराइजेशन, राष्ट्रीय ग्रामीण स्वास्थ्य मिशन में वित्तीय, लेखा-जोखा, लेखा परीक्षा, फण्ड फ्लो तथा बैंकिंग प्रबंध आदि से संबंधित दिशा-निर्देश में दी गई पद्धतियाँ लागू होंगी । सभी फण्ड फ्लो तथा अन्य संबंधित प्रक्रिया भी उसी अधिसूचना के अनुसार ही होगी ।

फुटनोट-3 : प्रबंधन खर्चें प्रत्येक वर्ष की कुल खर्च की 06 प्रतिशत से अधिक नहीं होनी चाहिए ।

BYE-LAWS OF ROGI KALYAN SAMITI/HOSPITAL MANAGEMENT SOCIETY

अस्पताल प्रबंधन सोसाइटी (रोगी कल्याण समिति) की शासी निकाय, कार्यकारी समिति तथा अन्य पदाधिकारियों की वित्तीय अधिकार ।

अस्पताल प्रबंधन सोसाइटी (रोगी कल्याण सोसाइटी) के पदाधिकारियों को प्रत्यायोजित प्रशासनिक एवं वित्तीय शक्तियों को समिति ने निम्नलिखित टेबल 3 में सूचित करने की सिफारिश की है ।

टेबल - III

विवरण	अधिकारों का प्रसार	
	प्राधिकारी	
ए-1 : एन.आर.एच.एम. द्वारा प्राप्त शर्त रहित निधियों तथा अनुरक्षण निधियों की खर्च योजना का अनुमोदन । ए-2 : उपयोगकर्ता शुल्क, वसूली एवं अन्य प्राप्तियों की खर्च योजना अनुमोदन ।	शासी निकाय, रोगी कल्याण समिति	पूर्ण अधिकार ।
बी-1 : ड्रग्स, वस्तुएं तथा उपभोग्य वस्तुओं की खरीद अनुमोदन । बी-2 : उपकरणों की मरम्मत एवं अनुरक्षण । बी-3 : साफ-सफाई, स्वच्छता, सुरक्षा सेवाओं का आउटसोर्सिंग । बी-4 : रु. 5 लाख तक के लघु निर्माण कार्यों की मरम्मत एवं अनुरक्षण । नोट : चिकित्सा उपकरणों की खरीद के लिए कोई भी अधिकार नहीं होगा ।	शासी निकाय, रोगी कल्याण समिति	रु. 50000 प्रतिवर्ष ।
सी-1 : जिला स्वास्थ्य सोसाइटी की तरफ से कॉन्ट्रैक्ट मेडिकल, पैरा मेडिकल तथा नॉन-मेडिकल स्टाफ एवं उनकी वेतन एवं टी.ए. /डी.ए. का भुगतान । नोट : जिला स्वास्थ्य सोसाइटी द्वारा अंगीकृत मानदंडों के अनुसार टी.ए./डी.ए. की योग्यता होगी ।	अध्यक्ष, कार्यकारी समिति, रोगी कल्याण समिति	मानदंडों तथा अनुमोदित बजट के अनुसार पूर्ण अधिकार ।
सी-2 : जननी सुरक्षा योजना के अंतर्गत लाभ भुगतान अनुमोदन । नोट-1: जननी सुरक्षा योजना के दिशा-निर्देशों के अनुसार, रो.क.स. को अलग बैंक खाता रखना होगा । नोट-2: अध्यक्ष (कार्यकारी समिति, रोगी कल्याण समितियाँ) वी.एच.एस.सी. की पूर्व अनुमोदन से यह अधिकार उप-केन्द्र के ए.एन.एम. को प्रत्यायोजित कर सकते हैं ।	अध्यक्ष (कार्यकारी समिति, रोगी कल्याण समिति)	पूर्ण अधिकार, वितरित की गई निधियों का लेखा-जोखा शासी निकाय के बैठक की कार्य सूची में शामिल करनी होगी ।

फुटनोट-1 : रोगी कल्याण समिति के संबंधित खाते में दी गई शर्त रहित राशि को संबंधित चिकित्सा अधिकारी, अध्यक्ष (कार्यकारी समिति, रोगी कल्याण समिति) के बिल, नोट या अन्य दस्तावेजों के हस्ताक्षर के बगैर एवं चेक माध्यम के बिना निकाला नहीं जाना चाहिए ।

**ANDAMAN AND NICOBAR UNION TERRITORY HEALTH MISSION
&
OFFICE OF THE STATE HEALTH SOCIETY (A&N ISLANDS)
PORT BLAIR—744101
NOTIFICATION**

Port Blair, dated the 06th August, 2010

No.311/2010/F.No.2-2/DF&AP/UTHM/2009.—In pursuance to the letter received from the Ministry of Health & Family Welfare, Govt. of India vide No. 118/RCH-Fin/2006-07 dated 1st May, 2007 regarding "Delegation of Administrative & Financial Powers under NRHM", the existing Bye-laws of State Health Society (A&N Islands), District Health Societies & Rogi Kalyan Samitis (vide Notification dated 15th June, 2006) has been amended and approved in the 6th Governing Body Meeting of State Health Society (A&N Islands) held on 19th June, 2010 under the Chairmanship of Chief Secretary, A&N Administration. The Bye-laws of State Health Society (A&N Islands), District Health Societies & Rogi Kalyan Samitis are as follows:

**BYE-LAWS OF STATE HEALTH SOCIETY (A&N ISLANDS),
DISTRICT HEALTH SOCIETIES & ROGI KALYAN SAMITIS**

1. Short Title

- 1.1. Amendment of existing Bye-laws of State Health Society (A&N Islands), District Health Societies & Rogi Kalyan Samitis.
- 1.2. Powers delegated under this amendment shall be superseding the existing powers mentioned in the present Bye-laws of State Health Society (A&N Islands), District Health Societies & Rogi Kalyan Samitis, however the Rules & Regulations of State Health Society (A&N Islands), District Health Societies & Rogi Kalyan Samitis shall remain unchanged.
- 1.3. The amended Bye-laws shall come into force with effect from the date of the approval by the Governing Body of State Health Society (A&N Islands).

Sd/-
**Mission Director
UT Health Mission**

BYE-LAWS OF STATE HEALTH SOCIETY (A&N ISLANDS)

DELEGATION OF ADMINISTRATIVE AND FINANCIAL POWERS UNDER NRHM

Financial Powers of the Governing Body, Executive Committee, Programme Committee, and other office bearers of the State Health Society:

Table-1

Item	Authority	Extent of power
A-1: Approval of the State Programme Implementation Plan (State PIP) for submission to GOI	Governing Body	Full powers
A-2: Approval of Programme-wise & District-wise allocations based on State PIP approved by GOI	Executive Committee	Full powers
B-1: Financial sanctions for release of funds to District Health Societies	Mission Director	Full powers
B-2: Approval of proposals for re-appropriation of the funds beyond 10% of the original allocation at the District level (ref. Governing Principal - 4)	Mission Director	Full Powers
	Jt. Secretaries, Programme Officers (States Programme Officers)	As per re-allocation powers provided under existing programme guidelines
C-1: a) Approval of procurement of Drugs and Consumables approved in the State PIP	Executive Committee	Above Rs.5/- lakh per order without rate contract
	Mission Director	i) Full powers as per approved Rate Contracts of Directorate of Health Services/ DGS&D/ Ministry of Health & Family Welfare. ii) Upto Rs. 5/- lakh per order without Rate Contracts
C-1: b) Approval of procurement of equipments approved in the State PIP	Executive Committee	Above Rs.10/- lakh per equipment
	Chairperson (EC-SHS)	Above Rs.5/- Lakh and upto Rs. 10/- lakh per equipment
	Mission Director	Upto Rs.5/- lakh per equipment
C-1: c) Approval of procurement of other goods and services approved in the State PIP	Executive Committee	Above Rs. 10/-laks per case
Note-1: As far as possible, procurement should be done using the rate contracts of the DGS&D or State Government/any other rate contract adopted by the State Health Society to the extent possible.	Chairperson (EC-SHS)	Above Rs.5/- lakh and upto Rs. 10/- lakh per case
	Mission Director	Upto Rs. 5/- lakh per case
Note-2: For items which are not available under rate contract mechanism, the respective approving authorities should approve the expenditure on the recommendations of duly appointed procurement committee.		
Note-3: All the procurements are to be done by following codal formalities as per GFR		

Item	Authority	Extent of power
C-2: Expenditure on office expenses such as stationery, computer accessories, office equipments, office furniture, broadband Internet connection, etc. Note-1: Subject to approved budget / funds and following GFR	Chairperson, EC	Above Rs. 50,000/- per case, subject to the approval budget.
	Mission Director	Upto Rs. 50,000 per case
	Joint Secretaries/PMs	Upto Rs. 25,000 per case
	State programme Manager of the State PMSU	Upto Rs. 1,000/- per case
C-3: Procurement Committee	Procurement committee for medicines / medical equipments/surgical/consumables and other medical items—Same as the Procurement Committee of Directorate of Health Services. (Concerned Joint Secretary to be co-opted as required)	
	Procurement Committee of SHS for non medical equipments such as office stationeries, IEC items etc. : 1. Joint Secretary (RCH-II) 2. Joint Secretary (RNTCP) 3. Joint Secretary (NPCB) 4. State Programme Manager (SHS) 5. State Finance Manager (SHS)	
C-4: Finance sanctions for major/new civil works Note-1: Estimates should be prepared on the basis (a) an approved type design and , (b) State schedule of rates (SORs). Note-2: Options other than executing works through Public Works Departments [PWD] can be exercised. However, the selected agency must follow the open tendering Process for selecting contractors. Note-3: Works can be bundled at the State level [for a group of districts or all districts] or delegated to District Health Societies. Note-4: As far as possible, contracts should be awarded on a turn key basis (design, execution and handing over) with 'no cost over-run' and 'penalty' (for time over run) clauses. Note-5: Maintenance should be delegated to facility level management society alongwith suitable guidelines. Note-6: All the estimates to be prepared by Competent Technical Authority under the UT Administration.	Chairperson of Executive Committee	Above Rs. 50/-lakh per site subject to notes 1 to 4.
	Mission Director	Upto Rs. 50/- lakh per site subject to notes 1 to 4.

Item	Authority	Extent of power
C-5: Minor Civil Works at the State Level: repairs and renovations (including civil & electrical works) <u>Note-1:</u> Any civil work related to already existing structure and amounting upto Rs.20 lakh per institution/structure should be considered as Minor Civil Works. <u>Note-2:</u> Minor civil works upto Rs.5/- lakhs should generally be delegated to the concerned Hospital Management Society (Rogi Kalyan Samiti). <u>Note-3:</u> All the estimates to be prepared by Competent Technical Authority under the UT Administration.	Mission Director	Full powers
	Jt. Secretary / State Programme Officer	Upto Rs.5/- lakh per site.
C-6: Hiring of contractual staff against approved posts in the State PIP, including sanction of compensation package, eligibility, renewal of contract, ToR etc. <u>Note:</u> The posts under the State Health Society can be filled up through hiring from the open market or through appointment of regular officers on deputation basis [ref:MoHFW DO No.37018/6/2003-EAG (part IV) dated 20th June, 2005.	Governing Body	Full powers for approving compensation packages.
	Chairperson Executive Committee	Full powers for Specialist / GDMOs / Managerial Staff and equivalent level staff, subject to compensation packages approved by GB.
	Chairperson Executive Committee	Full powers for Consultants, subject to approved PIP.
	Mission Director	Full powers in respect of clerical staff or equivalent positions, subject to compensation packages approved by GB and as per approved PIP.
C-7: Staff selection under NRHM 1) Staff Selection Committee for Executive level staff (Specialists, Doctors, Consultants and other managerial staff etc.) 2) Staff Selection Committee for other contractual staffs under SPMU such as Clerical staff or equivalent etc.)	Chairperson (EC) Mission Director Concerned Joint Secretary / Co-opted Member	
	Mission Director Concerned Joint Secretary Co-opted Member	
C-8: Approval/sanction of payment of monthly remuneration / honorarium /wages for approved contractual staff.	Mission Director	Full powers to the extent of the budget in the approved State PIP.
	Jt. Secretaries/ State Programme Officers	Full powers for the contractual staff specifically working under their pgm.
C-9: Sanction of TA/DA and other admissible allowances <u>Note-1:</u> TA/DA will be admissible as per UT Norms. <u>Note-2:</u> The Society funds can be used for payment of TA/DA only for the personnel who are drawing salaries from the State Health Society, unless otherwise provided in the specific programme included under the NRHM.	Mission Director	Full powers
	Jt. Secretaries/ Programme Officers / State Programme Manager (State PMSU)	Full powers in respect of contractual staff working under him/her.

Item	Authority	Extent of power
C-10: Approval for hiring of Vehicles/Taxis for supervisory visits by state level programme officers or office bearers/officials of State Health Society. Note-1: Provision for hiring is only available where vehicles are not available from the State Government or from the project/programme. Note-2: Hiring charges have to be met from the 6% management costs alongwith salaries, TA/DA and office expenses. Note-3: The state PIP should indicate the overall distribution of provisions for vehicle hiring at state, district and sub district levels. Note-4: The State Health Society should use a panel of accredited taxi operators approved by GA Department of UT Administration.	Chairperson of Executive Committee Mission Director	Full powers for the vehicles costing above Rs.1000/- per day, subject to approved budget. Full powers, subject to approved budget and the condition that payments for any vehicle costing more than Rs. 1,000/- per day shall require the approval of Chairperson, Executive Committee.
C-11: Expenditure on approved workshops, meetings etc. including associated expenses incurred as per Programme guidelines and approved training activities including payment of TA/DA as per approved norms and purchase of training material and other associated expenses.	Chairperson (EC) Mission Director State Programme Officers / Jt. Secretaries / State Programme Manager	Above Rs. 2 lakh per case Upto Rs.2 lakh per case Up to Rs.50,000 per case
C-12: Miscellaneous expenses not specifically covered above. Note: No assets shall be acquired under this head. Any proposal for acquiring assets should be specifically provided for in the State PIP under the provisions laid down in para C-9 or other relevant provisions above (as the case may be), and approval sought for the same.	Chairperson of Executive Committee Mission Director Jt. Secretaries / State Programme Officers / State Programme Manager	Above Rs.1 lakh per case Upto Rs 1 lakh per case Upto Rs. 10,000/- per case
C-13: Sanction of leave. Note 1: It covers entitled leave of 2.5 days per month as per the contract of Appointment under State Health Society	Chairperson of Executive Committee Mission Director	Above 60 days Upto 60 days

Cheque Signing Authority as per the recommendations of GOI:

- Three Joint Signatories will be notified, of which, two signatures are sufficient to release the cheque.

The following procedure may be followed:-

A. For Mission Flexi Pool:

Mission Director & State Finance Manager & State Programme Manager.

Any two of the abovementioned signatory may sign the cheque with the provision that signature of Mission Director is mandatory.

B. For National Disease Control Programme and other Programme:

Mission Director, Jt. Secretary / Programme Officer & State Finance Manager

Any two of the abovementioned signatory may sign the cheque with the provision that Jt. Secretary / Programme Officer must be a signatory.

BYE-LAWS OF DISTRICT HEALTH SOCIETY**Financial Powers of the Governing Body, Executive Committees and other office bearers of the District Health Society**

The Committee recommends that the delegated administrative and financial powers of the office bearers and staff of the District Health Society may be as indicated in Table-2 below.

Table-2

Item	Authority	Extent of power
A: Approval of District Action Plan (DAP)	Governing Body, District Health Society	Full powers
B-1 Approval for release of Untied Funds Annual Maintenance Grants and RKS fund to Dist. Hospital, CHC, PHC, Sub-Center and VHSC etc.	Chairperson, GB, District Health Society	Full powers subject to allocations in the approved DAP.
B-2: Approval for release of funds (other than Untied Funds) to implementing agencies, for example, Dist. Hospital, Societies, CHC / PHC/ Sub-center/VHSC/ NGOs and other implementing agencies and imprest money to Medical Officers, ANM and ASHA etc.	Chairperson, GB, District Health Society	Full powers subject to allocations in the approved DAP.
B-3: Approval of proposal of re-appropriation of funds of the original allocation at District level	-	-
C-1: Major/New Civil works which are included in District Action Plan. <u>Note-1:</u> Estimates should be prepared on the basis of (a) an approved type design and (b) State schedule of rates (SORs). <u>Note-2:</u> Options other than executing works through Public Works Departments [PWD] can be considered, provided selection of executing agency is done through a competitive tendering/bidding process which allows the PWD to participate in the tendering / bidding process. <u>Note-3:</u> As far as possible, contracts should be awarded on a turn key basis (design, execution and handing over) with no cost over-run and penalty (for time over run) clauses. <u>Note-4:</u> Maintenance should be delegated to facility level management society. <u>Note-5:</u> All estimates to be prepared by Competent Technical Authority under the UT Administration.	Chairperson, GB, District Health Society.	Upto Rs. 50/- lakhs per site, subject to notes 1 to 5.
C-2: Approval for minor civil works; repairs and renovations (including civil and electrical works) <u>Note-1:</u> Any civil work related to already existing structure and amounting upto Rs.20.00 Lakh per Institution/structure should be considered as Minor Civil Work. <u>Note-2:</u> Minor civil works upto Rs.5/- lakhs should generally be delegated to the concerned Hospital Management Society (Rogi Kalyan Samiti) alongwith suitable guidelines. <u>Note-3:</u> All estimates to be prepared by Competent Technical Authority under the UT Administration.	Chairperson, GB, District Health Society	Full powers, subject to approved budget under DAP.
C-3: a) Approval of procurement of Drugs and Consumables approved in the District PIP	Chairperson (GB - District Health Society)	Upto Rs.10/- lakh per order as per DGS&D / MOHFW / Dte. Of Health Services (ANI) rate contracts

Item	Authority	Extent of power
		Upto Rs.1/- lakh per order without rate contract
C-3: b) Approval of procurement of equipments approved in the District PIP	Executive Committee of SHS Chairperson (EC-SHS) Mission Director Chairperson (GB - District Health Society)	Above Rs.10/- lakh per equipment Above Rs.5/- lakh and upto Rs.10/- lakh per equipment Upto Rs.5/- lakh per equipment Upto Rs.1/- lakh per equipment
C-3: c) Approval of procurement of other goods and services approved in the District PIP. <u>Note-1:</u> As far as possible, procurement should be done using the rate contracts of the DGS&D or State Government / any other rate contract adopted by the State Health Society to the extent possible. <u>Note-2:</u> For items which are not available under rate contract mechanism, the respective approving authorities should approve the expenditure on the recommendations of a duly appointed procurement committee. <u>Note-3:</u> The State Health Society should develop and adopt detailed procurement guidelines for itself and District Health Societies. <u>Note-4:</u> All the procurements are to be done by following codal formalities as per GFR	Executive Committee of SHS Governing Body of District Health Society Chairperson (GB - District Health Society)	Above Rs.10/- lakh per case Upto Rs.10/- lakh per case Upto Rs.5/- lakh per case
C-4: Expenditure on office expenses such as stationery, computer accessories, maintenance of office equipments (AMC), broadband internet connection and other miscellaneous items not covered above. <u>Note-1:</u> Subject to approved budget / funds and following GFR	Chairperson, EC, District Health Society Vice-Chairperson, EC, District Health Society	Full powers, subject to budget in the approved DAP Up to Rs.5,000/- per case, subject to approved budget
C-5: Hiring of contractual staff against approved posts in the DAP, including sanction of compensation package. <u>Note:</u> The posts under the District Health Society can be filled up through hiring from the open market or through appointment of regular officers /staff on deputation basis [ref:MoHFW DO No. 37018/6/2003-EAG (part IV) dated 20 th June, 2005.	Governing Body of SHS Chairperson GB, District Health Society	Full powers for approving compensation packages. Full powers (except for Specialists, GDMOs & Consultants) in accordance with the compensation package approved by GB, SHS. All contract appointments will be subject to the norms / guidelines prescribed by the State Health Society.
C-6: Sanction/approval for payment of monthly remuneration for contractual staff and payment of their TADA	Chairperson, EC, District Health Society	Full powers subject to norms adopted by the State Health Society.

Item	Authority	Extent of power
<u>Note-1:</u> TA/DA will be admissible as per UT Norms.		
<u>Note-2:</u> The Society funds can be used for payment of TA/DA only for the personnel who are drawing salaries from the District Health Society, unless otherwise provided under specific programme included under NRHM.		
C-7: Approval for hiring of vehicles/taxis for supervisory visits in the district <u>Note-1:</u> Provision for hiring is only available where vehicles are not already available from the state government or from the project/ programme. <u>Note-2:</u> Hiring charges have to be met from the 6% management costs alongwith salaries, TA/DA and office expenses <u>Note-3:</u> The DAP should indicate the distribution of provisions for vehicle hiring at district and sub-district level.	Chairperson, EC, District Health Society	Full powers, subject to approved budget
C-8: Expenditures on Workshops, Meetings, Trainings etc. at District level (including TA/DA as per norms, AV equipment and logistics etc.)	Chairperson, GB, District Health Society	Full powers, subject to approved budget
	Vice-Chairperson, GB, District Health Society	Upto Rs.10,000 per case
C-10: Sanction of leave. <u>Note 1:</u> It covers entitled leave of 2.5 days per month as per the contract of Appointment under State Health Society/ District Health Society	Chairperson, EC, District Health Society	Full powers in respect of all contractual staffs working under District Health Society
	Vice-Chairperson, EC, District Health Society	Upto 30 days

Cheque Signing Authority as per the recommendations of GOI:

- There will be four Joint Signatories, of which, two signatures are sufficient to release the cheque.

The following procedure may be followed:-

For Mission Flexi Pool & National Disease Control Programme and other Programme:

Chairperson (EC-DHS), Vice Chairperson (GB-DHS), Vice Chairperson (EC-DHS) & District Accounts Manager

Any two of the abovementioned signatory may sign the cheque with the provision that Chairperson, Executive Committee of District Health Society is mandatory.

Footnote-1: All the abovementioned financial and administrative powers shall be limited by the norms provided under the approved District Action Plan.

Footnote-2: For cheque signing/electronic e-banking authorization for funds transfers, the procedures detailed in National Rural Health Mission: Guidelines on Financial, Accounting, Auditing, Fund Flow & Banking Arrangements shall apply. All funds flow and other associated processes will also be as per the same notification.

Footnote-3: Management cost cannot exceed 6% of total expenditure in a year.

BYE-LAWS OF ROGI KALYAN SAMITI/HOSPITAL MANAGEMENT SOCIETY

Financial Powers of the Governing Body, Executive Committees and other office bearers of the Hospital Management Societies (Rogi Kalyan Samiti)

The Committee recommends that the Delegated Administrative & Financial Powers of the office bearers staff of the Hospital Management Societies [Rogi Kalyan Samiti (RKS)] may be as Indicated in Table-3 below.

Table-3

Item	Authority	Extent of power
A-1: Approval of expenditure plan for the untied grants and annual maintenance grants received under NRHM	Governing Body, RKS	Full powers
A-2: Approval of expenditure plan for user fee collections and other receipts		
B-1: Approval for procurement of goods, drugs and consumables	Governing Body, RKS	Upto Rs.50,000/- per annum
B-2: Repair and maintenance of equipments.		
B-3: Outsourcing of services like sweeping, sanitation and security.		
B-4: Repairs and maintenance of minor civil works upto Rs.5/- lakh		
Note: No powers for purchase of medical equipments.		
C-1: Payment of salaries for contractual medical, paramedical and non-medical Staff and their TA/DA on behalf of District Health Society	Chairperson, EC, RKS	Full powers, subject to approved budget and norms
Note: TA/DA entitlements may be as per the norms adopted by the District Health Society.		
C-2: Approval for payments of benefits under Janani Suraksha Yojana	Chairperson, EC, RKS	Full powers. Accounts for the funds disbursed should be included in the agenda of the Governing Body Meetings.
Note 1: As per JSY Guidelines, RKS is required to keep a separate Bank Account for JSY funds.		
Note 2: Chairperson, EC-RKS may delegate this power to ANM of the Sub-Center subject to prior approval of VHSC.		

Footnote-1: All Untied Grants should be paid into the RKS's account with the appointed Bank and should not be withdrawn except by a cheque, bill note or other negotiable instrument signed by the Medical Officer In-charge of the health facility and Chairperson of Governing Body, RKS.

Duties and responsibilities of Doctors/Officials/Administrative Staff/Para-Medical Staff working under State Health Society, A&N Islands

Sl. No.	Post/Designation	Job Responsibility
1.	GDMO (Allopathy)	<ul style="list-style-type: none"> • Same as the job responsibilities of General Duty Medical Officer (Allopathy) working under the Directorate of Health Services and as decided by the State Health Society (A&N Islands).
2.	Medical Officer (DTC)	<ul style="list-style-type: none"> • To provide clinical services at OPD /IPD of district TB clinic. • To assist the District TB officer in Programme management activities,: planning, budgeting, implementing, monitoring, supervising, evaluating and reporting. • To conduct supervisory visits to the TUs, DMCs, PHIs, HWCs, treatment support centers, other TB care sites including private sector and report to district TB Officer. • To assist the district TB Officer in implementing system for TB surveillance (through NIKSHAY and other MIS, etc.). • To facilitate change management with respect to use of ICT & Nikshay tools for concerned data entry, validation & its use for public health action. • To assist district TB officer in district level procurement and supply chain management through NIKSHAY Aushadhi including psychical stock verification. • To assist District TB Officer in district level human resource management. • To link District TB centre with stake holders of the Programme within and outside the district. • To assist District TB officer in advocacy with local bodies and district administration to promote ownership for the Programme. • To facilitate in establishing inter -sectoral and inter – departmental coordination for TB control and prevention. • To facilitate community engagement and TB preventive activities. • To ensure timely payments of all DBT schemes to eligible beneficiaries. • To manage the public grievance redressal mechanism and replies to requests under right to information in the District TB office. • To manage the public relations in the District TB office and assist district TB officer in compiling information required for reports to state and district administration. • Any other job assigned by the reporting officer.
3.	Sr. Medical Officer	<ul style="list-style-type: none"> • To work in co-ordination with Nodal Officer-NDR-TB Centre under the under the guidance of the DTO. • Receive and facilitate out-patient based management or admission of DR-TB patients referred from the linked districts as per national guidelines. • Co-ordinate with the linked laboratory microbiologist/staff for timely receipt of culture and DST results at baseline and follow up time-points for every Patient. • Arrange for Pre-Treatment Evaluation and specialist consultations of the referred patients. • Monitor time to treatment initiation and provide feedback periodically to the districts in. • Organize regular NDR-TB centre committee meetings and minute the decisions. • Verify that the required information along with

		<p>the pre-treatment evaluation investigations are documented in Nikshay, in PMDT treatment book, and indoor case papers and bring it to the attention of DR-TB centre committee for cases based review and necessary action.</p> <ul style="list-style-type: none">• Ensure timely communication to the concerned district for discharged patients with complete documents and required quantity of medicines.• Ensure all transfers are documented in NIKSHAY.• Ensure treatment regimen and any modification of regimen are documented in NIKSHAY, discharge summary and patient treatment book.• Supervise the statistical assistant and counsellor of DR-TB centre in their job.• Co-ordinate with District DR-TB Centres linked to the Nodal DR-TB centre under the guidance of Nodal officer-NDR-TB Centre in managing Difficult to treat DR-TB cases.• Co-ordinate with the concerned health facility doctors from health and wellness centres or private sector and concerned DTO/MO-TU to ensure provision and continuation of quality care for the concerned DR-TB patients referred for further management to NDR-TBC.• Co-ordinate interaction between Senior DR-TB TB-HIV supervisors of the linked districts and ensure data completion in Nikshay regularly.• Conduct quarterly review of the Senior DR-TB TB-HIV supervisors using dashboards and analysis of data from Nikshay periodically to address implementation and management gaps.• Support ward staff in maintaining adequate stock of second line drugs, preparation of monthly patient wise boxes by regimen and weight band as well as initialization of MERM devices, as available, for every patient initiated on DR-TB treatment at the NDR-TBC as per guidelines.• Send monthly/quarterly indent to state/district drug store for loose second-line drugs and data entries in Nikshay- Aushadhi.• To facilitate change management with respect to use of ICT tools, Nikshay & Nikshay-Aushadhi for concerned data entry, validation & its use for public health action.• Ensure that all relevant electronic copies of PMDT records are updated on regular basis.• Strengthen the system of the follow-up cultures in co-ordination with labs/concerned DTC.• Support NDR-TBC in updating the template with information to be shared with Difficult to treat TB Clinic for selected patients as per directions from NDR-TBC committee and management of the patient based on recommended actions from the clinic.• To provide a monthly activity report to NDR-TBC Committee and STO. Any other job assigned by the reporting officer.
4.	GDMO (Dental)	<ul style="list-style-type: none">• Same as the job responsibilities of General Duty Medical Officer (Dental) working under the Directorate of Health Services and as decided by the State Health Society (A&N Islands).
5.	GDMO (Homoeo)	<ul style="list-style-type: none">• To provide OPD services to the patients in respective system of medicine.• Education about nutrition, hygiene through AYUSH systems.• Management of Worm infestation and common skin disorders in school children with AYUSH medicine and also to assist in School Health

		<p>Programme including regular check ups.</p> <ul style="list-style-type: none">• Emergency services – Appropriate management, injuries /first aid, stabilization of the condition of the patient before referral.• Referral Services.• In – patient services-If patients have been admitted.• To monitor the inflow of AYUSH medicines to pharmacy, verify the stock register and recommended to the concerned authority for their replenishment.• Additional duty such as providing assistance for MCH and family planning, prevention and control of locally endemic diseases, disease surveillance and control of epidemic etc. may also be carried out after appropriate training.• Education about contraception, essential new born care etc.• To advice for disinfection of water sources, air and prevention of mosquito breeding by methods like fumigation with medicinal herbs.• To provide ANMs/ ASHAs/ MPHW on simple AYUSH remedies and preventive and promotive health care through AYUSH.• To provide relevant services / support for National Health Programmes including RCH, Non –communicable disease control programme.• Monitoring and supervision of the implementation by AYUSH MO through regular meeting / periodic visit with ANM /ASHA / Health Worker.• In single doctor PHCs where AYUSH doctors are posted may have to take the administrative responsibilities of the dispensary also along with AYUSH intervention.• In single doctor PHCs where AYUSH doctors are posted may have to take the administrative responsibilities of the dispensary also along with AYUSH intervention.• Undertaking such other assignments, which may be assigned by the Mission Director (NHM) or Director of Health Services or the State Programme Officer (AYUSH) from time to time.
6.	Medical Officer (RBSK-Homoeo)	<ul style="list-style-type: none">• Identification and Screening of 04 D's of Children from 0-18 years i.e. Defects at birth, Diseases, Deficiencies and Development Delays including Disability.• Health Education and improvement of Health, Nutrition and Hygiene.• Management of Worm infestation and common skin disorders in school children and also assist in School Health Programme to improve the health status of the students, thus improving the academic efficiency.• To plan develop and implement a health plan under RBSK.• To provide relevant services/support for National Health Programmes including RCH, Non-communicable Disease Control Programme.• Undertaking such other assignments which may be assigned by the Mission Director, UTHM, Chairman, District Health Society and the Joint Director from time to time.• You will be a part of Mobile Health Team for conducting screening of children who will screen all the children upto 06 years of age registered with the Anganwadi Centers, Pre School and all children above 06 years enrolled in Govt. and Govt. aided schools.

7.	GDMO (Ayurveda)	<ul style="list-style-type: none"> • To provide OPD service to the patients in respective system of medicine. • Education about nutrition, hygiene through AYUSH systems. • Management of Worm infestation and common skin disorders in school children with AYUSH medicine and also to assist in School Health Programme including regular check-ups. • Emergency service- Appropriate management, injuries/first aid, stabilization of the condition of the patient before referral. • Referral Services. • In – patient service –if patients have been admitted. • To monitor the inflow of AYUSH medicines to pharmacy, verify the stock register and recommended to the concerned authority for their replenishment. • Additional duty such as providing assistance for MCH and family planning, prevention and control of locally endemic diseases, disease surveillance and control of epidemic etc may also be carried out after appropriate training. • Education about contraception, essential new born care etc. • To advice for disinfection of water sources, air and prevention of mosquito breeding by methods like fumigation with medicinal herbs. • To provide ANMs/ ASHAs/MPHW on simple AYUSH remedies and prevention and promotive health care through AYUSH. • Undertaking such other assignments which may be assigned by the Mission Director, UTHM, Chairman, District Health Society and the Joint Director from time to time.
8.	Medical Officer (RBSK-Ayurveda)	<ul style="list-style-type: none"> • Identification and Screening of 04 D's of Children from 0-18 years i.e. Defects at birth, Diseases, Deficiencies and Development Delays including Disability. • Health Education and improvement of Health, Nutrition and Hygiene. • Management of Worm infestation and common skin disorders in school children and also assist in School Health Programme to improve the health status of the students, thus improving the academic efficiency. • To plan develop and implement a health plan under RBSK. • To provide relevant services/support for National Health Programmes including RCH, Non-communicable Disease Control Programme. • Undertaking such other assignments which may be assigned by the Mission Director, UTHM, Chairman, District Health Society and the Joint Director from time to time. • You will be a part of Mobile Health Team for conducting screening of children who will screen all the children upto 06 years of age registered with the Anganwadi Centers, Pre School and all children above 06 years enrolled in Govt. and Govt. aided schools.
9.	Specialist -Microbiologist (IRL)	<p>Same as the job responsibilities of Microbiologist (IRL - NTEP) working under the Directorate of Health Services and as decided by the State Health Society (A&N Islands):</p> <ul style="list-style-type: none"> • To handle day to day correspondence pertaining to Culture and DST lab. • To maintain SOPs in CDST lab. • To do diagnostic DSTs and follow up cultures in CDST lab and send reports to District TB Centres and DRTB Centres.

		<ul style="list-style-type: none"> • To provide on the job training to the laboratory technicians in IRL. • To submit quarterly report on laboratory performance to IRL, STO, NRL and CTD. • To engage maintenance agencies for CDST lab equipments and monitor their performance. • To train the district Program Managers, STLSS and laboratory technicians on sputum sample collection transportation procedures, monitor their performance and suggest corrective action when necessary. • To establish sound laboratory management practices in the CDST lab. • To coordinate with EQA Microbiologist or RNTCP Lab Quality Assurance. • To facilitate data entry of CDST labs into the TB ICT application (NIKSHAY) in coordination with DR-TB centres. • To coordinate with partner organizations engaged in infrastructure development or culture/DST capacity development of IRL. • To provide technical support to the other culture & DST laboratories (including CBNAAT labs) in the State or of other States when assigned.
10.	District Epidemiologist (IDSP)	<ul style="list-style-type: none"> • Organize and monitor timely collection of data from all Reporting Units. Administer collection, compilation and analysis of passive surveillance data not only from peripheral health institutions but also from hospitals and colleges in the district. • Analyze surveillance data and prepare weekly surveillance graphs and charts. • Identify outbreaks of diseases targeted in IDSP for all reporting units using triggers agreed with State and Central Surveillance Unit. • Prepare and send monthly summaries of the disease situation to the State Surveillance Unit and Regional Project Coordinators. • Initiate outbreaks investigations promptly following the standard operating guidelines of IDSP. • Coordinate movement of Rapid Response Team & participate in all outbreak investigations. • Ensure timely submissions of FIR (First Information Report) and detailed Outbreak Report to SSU and Regional Project Coordinators. • Prepare and timely submit annual project report and annual surveillance report for the DSU to SSU and Regional Project Coordinators. • Support effective operational integration of disease control efforts based on the surveillance data. • Coordinate involvement of Medical Colleges, Private Sector, Community and Media in surveillance activities. • Provide regular feedback to all reporting units on disease trends and outbreaks. • Organize, coordinate & monitor training of district staff under IDSP. • Identify emerging training needs at the district and revise training calendars accordingly. • Organize dissemination of training manuals and materials for training courses. • Assist in organizing independent evaluation studies under IDSP and its outcome. • Supervise Data Entry Operators and Accountants appointed IDSP to ensure timely submission of quality information required in relation to data and finance /procurement matters. • Monitor proper use of EDUSAT facility /IT

		<p>networking towards data transfer, training, e-conferencing.</p> <ul style="list-style-type: none"> • Coordinate regular meetings of District Surveillance Committee and assist in inter-sectoral coordination for effective IDSP implementation. • Organize regular meetings of IDSP stakeholders. • Make supervisory visits to reporting units to monitor implementation of project activity. • Support district surveillance officers in carrying out other works related to effective implementation of IDSP.
11.	State Programme Manager	<ul style="list-style-type: none"> • Reporting to the Core team of technical officers led by the Mission Director. • Prepared Annual State Programme Implementation Plan consolidating the District Health Action Plans (DHAPs): Ensure timely preparation of these plans, which form the basis for NHM implementation at the State and District levels. • Regularly monitor progress and identify areas for improvement. • Ensure that plans are reviewed and approved based on appropriate criteria. • Assist in preparing and consolidating State PIP and obtaining approval from the MoHFW, Government of India. Provide technical support for the preparation of the State PIP and facilitate its approval from the relevant authorities. • Prepare annual health action plan for the state based on primary and secondary data, reports, existing health needs, disease burden and programmatic needs. The annual health action plan should include the key priority area and proposal for process improvement. • Organize at least one state level review meetings for reviewing district wise physical performance and corresponding expenditure per month. • Monitoring visits to different districts to monitor the implementation of the programmes and mitigate the issues. • Ensure submission of progress reports under various programmes to MoHFW as per time instructed by MoHFW, GoI. • Ensure adequate expenditure booking against budget approved in ROP of the respective year. • Secretariat support to State Health Mission/Society. • Monthly and quarterly Monitoring Reports prepared and analyzed before submission. • Meetings with DPMU staff for better implementation and handholding. • Arrangement of meetings of State Health Mission/Society made including preparation of agenda notes, recording of minutes. • Assisting the State Programme Officers in undertaking situational analysis & making documentation & Evaluation related proposals. • Overseeing the development and implementation of all District Action Plans. • Participating in development of policy/operational framework for Public-Private Partnership (PPP) and or NGO participation in service delivery, including operational framework for performance assessment and evaluation of technical interventions. • Mobilizing technical assistance inputs for the preparation of terms of reference, inviting proposals/applications for facilitating

		<p>recruitment etc.</p> <ul style="list-style-type: none"> • Monthly report preparation and finalization with analysis & for its sharing with the Health Society with inputs from the technical experts of the Health Society. • Associate with the JSs/Pos in training calendar designing its implementation. • Reports finalization as per GOI requirements under the NHM. • Ensure the efficient management of infrastructure and procurement activities. • Identify and secure resources to support NHM activities. • Oversee the execution of contracts, disbursement of funds and monitoring of performance related to NGO/PPP partnerships. • Work to enhance the capabilities of the State Health Society and District Health Societies through training, capacity building and recruitment of experts. • Identify and address emerging needs and challenges to ensure the effective implementation of NHM. • Engage with various stakeholders to promote health awareness and behavior change. • Provide policy/situational analysis and support for policy development, including the development of operational guidelines and proposals for policy changes. • Facilitate knowledge sharing and capacity building among stakeholders. • Ensure effective coordination with different departments and agencies involved in NHM implementation. • Administration and Establishment function for the SPMU. • To function as/assist the PIO/SPO in making replies for RTI queries for information as APIO. • Undertake joint field visits with Government, WHO and other development partners for regular learning. • Any other activity as decided by the SHS as per need of the programme.
12.	State Finance Manager	<ul style="list-style-type: none"> a) Management of Society funds, including <ul style="list-style-type: none"> • Disbursement of funds to implementing agencies. • Observance of accounting procedures. • Preparation of State of Expenditure (SoE) • Ensuring compliance with audit requirements as per the Society bye-laws. b) Development of operational manuals for management of funds in the State Health Society, District Health Societies and facility level Societies (e.g. Hospital Management Societies). Among others, this will include the procedures for disbursement, internal control systems, delineation of financial powers and reporting standards (forms/formats/frequency) etc. c) Development of systems and procedures for efficient functioning of the State Health Society and development of similar 'model' guidelines for district and facility level Societies. d) Training of staff of the State and District Health Societies in using operational manuals/guidelines. e) Budget analysis for the Health Sector and development of proposals for improving financial management systems at State and district levels covering all sources of funds.

		<ul style="list-style-type: none"> f) Management of resources of the State Health Society, procurement of assets for and on behalf of the Society. g) Assisting the Mission Directorate for improvement of financial management systems and cost analysis. h) Overseeing all District Accounts Assistants/Consultants. i) Undertaking such other assignments, which may be assigned by the Society from time to time. j) Management of District Health Society's Funds including ensuring adherence to timely Audits, issue & submission of Utilization certificates, Expenditure statement compilations & its submissions, adherence to established accounting systems
13.	Consultant (NUHM)	<ul style="list-style-type: none"> • Systematic collection, documentation & Presentation of information regarding Urban Health System, Health needs and inputs to the decision makers. • Analysis of data from HMIS & its use for decision makers. • Building capacities at district and state level for making urban health plans and for review & improving the plans, using both epidemiological and HMIS inputs. Budgeting and financial planning as required by the poor performing states. • Provide Technical Assistance in areas selected to health systems strengthening Human Resources for Health, Healthcare Financing, Quality Improvement, Community Processes, Health Information Systems, Monitoring & Evaluation, Public Private Partnership, and Governance etc. • Undertake other assignments, which may be assigned from time to time by the State Health Society.
14.	Consultant (MH/CH/RKSK)	<ul style="list-style-type: none"> • Preparation of annual plans, with respect to Maternal Health and assist in its implementation and monitoring. • Preparation of annual plans, with respect to Child Health and assist in its implementation and monitoring. • Preparation of annual plans, with respect to Family Planning and assist in its implementation and monitoring. • Preparation of annual plans, with respect to PNDT and RKSK and assist in its implementation and monitoring. • Undertake other assignments, which may be assigned from time to time by the State Health Society.
15.	Consultant (Climate Change and Quality Assurance)	<p><u>Climate Change:</u></p> <ul style="list-style-type: none"> • Responsible for providing advice and research support, mainly in the areas of climate change and its impact on health. • Manage projects in the areas of climate adaptation, community resiliency, and climate risk management. Conduct vulnerability assessments and develop adaptation strategies for urban and/or natural systems through research and community engagement. • Provide advice on a wide range of environmental issues such as green manufacturing, hazardous-waste remediation (disposal and clean-up), environmental disasters, sustainability initiatives, compliance, renewable energy, and water, air, and soil quality.

		<ul style="list-style-type: none">• Conducting research, surveys and interviews to gain understanding of the health issues• Analysing statistics.• Detecting issues and investigating ways to resolve them.• Assessing the pros and cons of possible strategies.• Compiling and presenting information orally, visually and in writing.• Any other job as assigned by the State Health Society (A&N Islands) from time to time. <p><u>Quality Assurance</u></p> <ul style="list-style-type: none">• Coordinating and promoting quality related activities and advocacy across the state.• To assist, support and conduct assessment and scoring of Public Health facilities.• Grading of healthcare facilities on the basis of score.• Facilitating selection of facilities that may go for Certification and supporting them in the process.• Estimating state's requirements (In terms of Structure, Process and outputs) for improving quality of healthcare services.• Review the status of QA activities in districts.• Providing supports to Districts in taking appropriate and time-bound actions on closure of the gaps, identified during the initial self assessment.• Conducting workshops and training for district personnel on QA and Certification of health care facilities.• Providing necessary support to DQAC/DQAU in the area of Quality Assurance and Certification.• Ensuring conduct of meetings regularly & taking follow-up actions and presenting Action Taken Report (ATR) in the SQAC meetings.• To provide technical assistance to achieve compliance to statutory requirements such as Atomic Energy Act & AERB Guidelines, Blood bank License, PC PNDT act, Biomedical (Management & handling) rules, etc.• To review the Patient's and employee's satisfaction from different districts submitted by DQAU, subsequently develop an action plan to address the concerns of patients, which led to poor satisfaction.• Advise on the further development of QA and Certification across health facilities in the state.• Monitoring of recording /reporting system through field visits and submit the visit reports with appropriate suggestions/actions for improvement.• To assist the State Nodal Officer for quality assurance in discharging his duties.• To attend to any other duties/ responsibilities assigned by the authorities and the reporting officer.• To facilitate state level assessment.• Liaison with the Central body for Certification of State's Public Health Facilities and facilitate the assessment process.• Implementation of Kayakalp & NQAS across the Health facilities of UT.• Implementation of LAQSHYA in the identified Health Institution of UT.• Implementation of MUSQAN in the identified Health Institution of UT.• Implementation of ODK tool kit for self assessment to identify the gaps of the Health Institution as per IPHS.
--	--	--

		<ul style="list-style-type: none"> • Implementation of National Accreditation Board for Testing and Calibration Laboratories in the UT. • Implementation of National Accreditation Board for Hospitals & Healthcare Providers in the UT. • Any other task assigned by the competent authority on required basis.
16.	State Epidemiologist	<ul style="list-style-type: none"> • Organize and monitor timely collection of data from all reporting districts. Administer collection, compilation and analysis of passive surveillance data not only from peripheral health institutions but also from hospitals and colleges in the State. • Analyze surveillance data and prepare weekly surveillance graphs and charts. • Identify outbreaks of diseases targeted in IDSP for all reporting districts using triggers agreed with Central surveillance Unit. • Collect monthly summaries of the disease situation from the district surveillance units. • Prepare and send monthly summaries of the disease situation to the Central Surveillance Unit and Regional Project Coordinators. • Initiate outbreak investigations promptly following the standard operating guidelines of IDSP. • Coordinate movement of Rapid Response Team & participate in all outbreak investigations. • Ensure timely submission of FIR (First Information Report) and detailed Outbreak Report to SSU/CSU and Regional Project Coordinators. • Ensure timely submission of annual project report and annual surveillance report of DSUs, prepare and timely submit annual project report and annual surveillance report for the SSU to CSU and Regional Project Coordinators. • Support effective operational integration of disease control efforts based on the surveillance data. • Coordinate involvement of Medical colleges, Private Sector, Community and Media in surveillance activities.\ • Provide regular feedback to all reporting districts on disease trends and outbreaks. • Organize, coordinate & monitor training of State/District staff under IDSP • Identify emerging training needs at the State/District and revise training calendars accordingly. • Organize dissemination of training manuals and materials for training courses. • Assist in organizing independent evaluation studies under IDSP and its outcome. • Supervise Data manager and Consultant Finance/Procurement appointed under IDSP to ensure timely submission of quality information required in relation to data and finance/procurement matters. • Monitor proper use of EDUSAT facility/IT networking towards data transfer, training, e-conferencing. • Coordinate regular meetings of State/District Surveillance Committee and assist in inter-sector coordination for effective IDSP implementation. • Organize regular meetings of IDSP stakeholders. • Make supervisory visits to DSUs to monitor implementation of project activity. • Support state surveillance officer in carrying out other works related to effective

		implementation of IDSP.
17.	State Programme Coordinator	<ul style="list-style-type: none"> • Preparing Programme Implementation Plan. • Formulating operational and financial guidelines for programme implementation including review of existing guidelines. • Organizing National & Regional level review meetings and orientation workshops. • Organizing National & Regional level review meetings and orientation workshops. • Organizing training programme for Medical Officers • Reviewing and integrating existing training material into the programme. • Visiting states & districts to monitor the NCD activities. • Reviewing program implementation at state, district and below district levels. • Collaborating with States, Medical Colleges, NGOs and other sectors. • Preparing and submitting quarterly progress report for NPCDCS to DDG (NCD). • Parliamentary questions replies including preparation of supplementary. • Any other job assigned by concerned Officers.
18.	State Finance and Logistic Consultant (NPCDCS/NVHCP)	<p><u>General:</u></p> <ul style="list-style-type: none"> • To support all matters relating to accounts, budgeting and financial matters and management of accounting procedure pertaining to NPCDCS in the Centre/State. • To organize and maintain the fund flow mechanism from Centre to State and then from State to Districts. • Accurate and timely submission of quarterly report on expenditure to Centre, annual audited statement of accounts and intensively monitoring the financial management in each District NCD society. • Financial aspects of activities in Cancer, Diabetes, CVD & Stroke and Elderly. • Undertake other assignments, which may be assigned from time to time by the State Health Society. <p><u>Specific:</u></p> <ul style="list-style-type: none"> • Preparing annual and quarterly budgets for the States & District. • Ensuring that adequate internal controls are in place to support the payments and receipts. • Ensuring timely consolidation of accounts/financial statements at the National/State/District. • Training of Finance cum Logistics Officer at State & District level in fund flow mechanism and filling up the reporting formats.
19.	Consultant (Finance & Procurement)	<p><u>General:</u></p> <ul style="list-style-type: none"> • To support all matters relating to accounts, budgeting financial and procurement matters and management of accounting procedure pertaining to IDSP in the Centre/State. • To organize and maintain the fund flow mechanism from Centre to State and then from State to Districts. • Accurate and timely submission of quarterly report on expenditure to Centre, annual audited statement of accounts and intensively monitoring the financial management in each District Health Society. • Financial/Procurement aspects of activities in IDSP.

		<ul style="list-style-type: none"> Undertake other assignments, which may be assigned from time to time by the State Health Society. <p><u>Specific:</u></p> <ul style="list-style-type: none"> Preparing annual and quarterly budgets for the States & District. Ensuring that adequate internal controls are in place to support the payments and receipts. Ensuring timely consolidation of accounts/financial statements at the National/State/District.
20.	District Consultant (NTCP)	<ul style="list-style-type: none"> To prepare District level implementation plan for Tobacco Control with clear measurable outcomes and achievable targets. To Coordinate with District Level Line Departments and other agencies for successfully implementation Tobacco Control Programme at District Level. Ensure proper implementation of plans as per programme guidelines and directions issued by STCC from time to time. To conduct training advocacy programmes, school programme and monitoring visit for ensuring compliance of COTPA, 2003 Provisions. Involve CSO, CBO, Media and other departments in tobacco control as per NTCP operational guidelines. To ensure quality and monthly reporting of all the activities including utilization of resources undertaken. Preparation of quarterly and annual reports. To take any other tasks and responsibility assigned by STCC. Undertake other assignments, which may be assigned from time to time by the State Health Society.
21.	Consultant (Training)	<ul style="list-style-type: none"> Identifying institutions for training of various categories of personnel, based on selection criteria. Collaborate and review training plans for all districts in the states. Organize dissemination of training manuals and materials for training courses. Monitor expenditure incurred on training and related activities. Assist in organizing independent evaluation of training and its outcome. Impart training to all Laboratory staff.
22.	Technical Officer	<ul style="list-style-type: none"> To increase the demand of Iodized Salt at community level through various activities. Strengthening co-ordination with supplier to ensure availability of Iodized Salt at community level. Co-coordinating with Food & Civil supply department. Monitoring of Iodized salt consumption status at community level. Organizing Training & orientation program. Increasing awareness level of consumer through promotion of various IEC materials. Facilitating/Supporting in IDD Survey to access prevalence of IDD in State. Strengthening inter sectoral (Health, ICDS, HRD, Food & Civil Supply) co-ordination. Visiting district to monitor NIDDCP. Reviewing program implementation at district and below district level. Preparing and submitting monthly program report (consumption report) of Iodized Salt. Any other job assigned by concerned

		Officer/Supervisor.
23.	Accountant	<ul style="list-style-type: none"> • Preparing the financial reporting formats received from the Government of India from time to time as specified by the GOI. • Day to day accounting work of the Directorate of Union Territory Health Mission. • Preparation of the Financial Management Reports or any other financial reports for the state by assisting the State Finance Manager as specified by the GOI. • Furnishing the financial details as specified by GOI for any other financial reporting process. • Assisting the State Finance Manager in the preparation of FMR, Utilization Certificates, Statement of Expenditure (SOEs) under NRHM. • Any other work as specified by State Health Society (A & N Islands) from time to time.
24.	State Data Manager	<ul style="list-style-type: none"> • To assist State Surveillance Officer/District Surveillance Officer and other officials in carrying out the IDSP activities. • Supervise functioning of MIS unit of Integrated Disease Surveillance Project and IDSP Portal. • Supervise functioning of Data Entry Operators. • Organize information received from District Surveillance Units. • Preparation of reports required under the project. • Organize maintenance of IT hardware, software and WAN. • Supervise & Maintain EDUSAT/VPN Network for Video Conferencing & Data Transference. • Monitoring of 1075 connectivity in State/Districts. • Familiarize and operate VC equipment, undertake preventive maintenance and trouble shooting for small problems, and coordinate with service providers for major breakdowns. • Analyze S.P.L data for time/place in spreadsheet for identifying Rising Trend of Disease over time / Early Warning signals. • Prepare Periodic and Annual Reports. • Any other work as specified by State Health Society (A & N Islands) from time to time.
25.	State Microbiologist	<ul style="list-style-type: none"> • To facilitate capacity building of laboratory technicians (LT) by periodically assessing the training needs and organize relevant training programs with support from local medical colleges/SRL. • Guide technicians for laboratory investigations of diseases of Public Health importance with special reference to diseases under IDSP. • Ensure implementation of Standard Operating Procedures (SOP) for laboratory techniques developed by IDSP. • Ensure implementation of guidelines for Biomedical Waste Management based on existing rules. • Ensure timely submission of monthly status report by DPHL on laboratory tests carried out to SSO and CSU. • Ensure timely submission of quarterly report by SRL on number of outbreaks where samples were received from designated districts and tested to SSU and CSU. • Participate in outbreak investigations as member or Rapid Response Team. • Carry out Internal Quality Assurance of laboratories and monitor implementation of External Quality Assurance. • Assist in procurement of laboratory equipment and consumable items for laboratories.

		<ul style="list-style-type: none"> • Coordinate with medical college laboratories and private laboratories in the state participating in disease surveillance. • Provide support for sample collection and transport of specimens from DPHL, Medical College Laboratories and Private Laboratories to State, Regional, National level laboratories. • Make supervisory visit to the laboratories to review the progress of project activity. • Organize regular meetings of district microbiologists and various stake holders involved in laboratory strengthening at the state. • Organize baseline assessments of district/sub-districts hospital laboratories; prepare a consolidated report for state level action for laboratories identified to be strengthened and timely submission of the same CSU. • To participate in video conferencing with CSU and DSU. • Support state surveillance unit in other works related to effective implementation of IDSP. • To carry out all IHIP-IDSP related activities in the State. • Any other work assigned by SSO as and when.
26.	Microbiologist (EQA)	<ul style="list-style-type: none"> • Same as the job responsibilities of Microbiologist (EQA-NTEP) working under the Directorate of Health Services and as decided by the State Health Society (A&N Islands). • To handle day to day correspondence in IRL pertaining to quality assurance of sputum smear microscopy. • To train the district Programme Managers, Statistical Assistants and Senior Tuberculosis, Laboratory Supervisors on NTEP Lab Quality Assurance. • To Train Laboratory Technicians and STLs on sputum smear microscopy. • To conduct on site evaluation of Districts and report to State TB Officer and National Reference Laboratory. • To Track quality assurance reports and action taken reports from the districts and provide feedback. • To assist State TB Officer in quality assurance and procurement of laboratory consumables at the State /District levels. • To engage and monitor the performance of agencies for preventive maintenance of microscopes. • To oversee preparation and maintenance of panel slides for EQA • To facilitate lab EQA in CDST (LJ, LC, LPA) of all participating CDST Laboratories in the State, in coordination with respective NRLs. • Monitor performance and quality indicators of all participating CBNAAT labs in the State. • To oversee data entry of Direct Microscopy/CDST labs into the TB ICT application (NIKSHAY) • To assist the State TB Officer and STDC in conducting review of quality of microscopy by analysis of microscopy data, EQA annexure reports and OSE reports • Any other job assigned by STO/Director STDC as per program need.
27.	Entomologist (NVBDCP)	<ul style="list-style-type: none"> • Provide technical support to State/District RRTs in Vector related issues. • Undertake Entomologist Surveillance, map and monitor Entomological Density and Bionomics and sensitivity for Insecticides. • Undertake entomological investigations including susceptibility tests, fauna studies etc.

		<ul style="list-style-type: none">• Support the preparation and implementation of integrated vector management plans.• Undertake regular field visits as per the schedule of NVBDCP to monitor and evaluate the timeliness and quality of vector control measures such as Indoor Residual Spray ,insecticide treated nets and distribution of larvivorous fish.• Liaise with block medical officers and malaria inspectors to ensure timely implementation of vector control operations.• Support preparation, implementation and monitoring of district action plan for control of vector borne disease.• Organize locally relevant behavior change communication initiatives to improve household behaviors towards vector borne diseases control.
28.	State Entomologist	<ul style="list-style-type: none">• Provide technical support to State/District RRTs in Vector related issues.• Undertake Entomologist Surveillance, map and monitor Entomological Density and Bionomics and sensitivity for Insecticides.• Undertake entomological investigations including susceptibility tests, fauna studies etc.• Support the preparation and implementation of integrated vector management plans.• Undertake regular field visits as per the schedule of NVBDCP to monitor and evaluate the timeliness and quality of vector control measures such as Indoor Residual Spray ,insecticide treated nets and distribution of larvivorous fish.• Liaise with block medical officers and malaria inspectors to ensure timely implementation of vector control operations.• Support preparation, implementation and monitoring of district action plan for control of vector borne disease.• Organize locally relevant behavior change communication initiatives to improve household behaviors towards vector borne diseases control.
29.	ACSM Officer	<ul style="list-style-type: none">• Responsible for planning ACSM activities for the entire state including budgeting and communication plan with annual activity calendar in consultation with STO and State NHM IEC Division• Facilitate events for engaging political, public and key government officials to advocate “End TB” in the State.• Prepare communication material (Posters, AV Material, Spots etc.) and plan dissemination through mass media/social media to address the set goals of NTEP and regularly monitor its progress.• To coordinate with NTEP partners in implementing ACSM activities as directed from the national programme and customize as per the local needs and requirements in the respective state.• Supervise, monitor and coordinate all the ACSM activities at district & health and wellness centre level.• Collate and analyze quarterly IEC report from districts and provide regular reports.• To provide relevant information to the media and public information systems in consultation with STO.• To coordinate with the state general health system for intersectoral coordination for TB control.

		<ul style="list-style-type: none"> Any other job assigned by the reporting officer.
30.	IEC Officer	<ul style="list-style-type: none"> Designating a suitable state level IEC Brand on NHM incorporating Gol 'logo'. Differential Demand generating Strategies for different population groups with focus on the marginalized/SC/ST/Urban slums populations incorporating female/gender sensitive approaches. Internalize a system for regular dissemination of information to the service providers. Policy planners & service recipients (community) through various tools including developing a State NHM quarterly Bulletin. Will interact with DFW, DHS & all other stake holders for regular inputs on assessing programme specific IEC requirements needing any modifications. Develop a repository of resource material (CDs, Cassettes, Films, Video spots, audiovisual other materials etc) on promotion of NHM, documenting & sharing National & International best practices in health & related sectors. Any other activity as decided by the Core team /Mission Director as per the need of the Programme. Any other work as specified by State Health Society (A & N Islands) from time to time.
31.	Bio Medical Engineer	<ul style="list-style-type: none"> Maintain the inventory details of various machines and medical equipments available in A & N Islands (Health Facility-Wise). Undertake repairs and maintenance of the non-functioning medical equipments and machineries. Same as the job responsibilities of Biomedical Engineer under the Directorate of Health Services and as decided by the State Health Society (A&N Islands). Undertake other assignments, which may be assigned from time to time by the State Health Society.
32.	Clinical Psychologist Trained	<ul style="list-style-type: none"> To examine and manage health care needs of the mentally ill patients. To do periodic follow up of the mentally ill patients. To do the outreach activity/ plan and clinical psychology clinics in PHC/CHCs and other sites periodically. To refer complicated cases to tertiary level hospitals. To impart training to the health personnel of Community Health Centre and Primary Health Center as per guidelines issued by National mental Health Cell.
33.	Psychologist Counsellor (NTCP)	<ul style="list-style-type: none"> To setup and manage tobacco cessation facilities and do advocacy for behavioral change. To work in coordination with social worker in carrying outreach activities. To support cessation activities at school/community level. To organize training for the Health Professionals and other Stakeholders. To monitor the implementation of Tobacco Control Laws in coordination with social Worker. To monitor NGO's/ groups at District level, compile reports on monthly basis. Any other work assigned by the supervisor from District / State national level. Any other work as specified by State Health Society (A & N Islands) from time to time.

34.	Clinical Psychologist (Tele Manas)	<ul style="list-style-type: none"> • Work as a mental health professional. • Deliver tele based therapeutic services, IQ assessment, facilitate disability benefits positive mental health, wellness initiatives, support, and wellbeing of entire human resource of Tele MANAS. • Conduct IEC activities, disability benefits, psycho education. • Assist PWMI and other users of Tele MANAS. • Develop curated content of social work modules and manuals for service delivery. • Training of cadres of students, workers and lay persons in mental health screening, telephonic counselling, and supervising Tier-1 cadre and nursing professionals. • Closure of loop of assessment and care. • Any other work as specified by State Health Society (A & N Islands) from time to time.
35.	Technical Project Co-ordinator (Tele Manas)	<ul style="list-style-type: none"> • To liaise between State Level Tele MANAS cells on the one hand and with IT establishments on the other, to ensure adequate equipment, infrastructure is available in the state cells, troubleshooting. Services and repairs. • To co-ordinate for smooth functioning of the State/UT level Tele MANAS cells. • Support multidisciplinary teams, with project planning, organizing, staffing, directing, reporting, and coordinating responsibilities. • Any other work as specified by State Health Society (A & N Islands) from time to time.
36.	Psychiatrist Social Worker (NMHP)	<ul style="list-style-type: none"> • To provide support to the school programme. • To facilitate in developing local IEC and building synergy with the District IEC campaign. • To organize training and capacity building programme for different set of Stakeholders including law enforcers. • To monitor NGO's/group at District level & compile reports ion monthly basis. • To develop partnership with NGO's/Organizations/PRI's/Urban Level Bodies (ULB's) for further community support. • To carry outreach activity/social Mobilization. • Any other work assigned by the supervisor from District/State/ National level. • Any other work as specified by State Health Society (A & N Islands) from time to time.
37.	Social Worker (NTCP)	<ul style="list-style-type: none"> • To facilitate in monitoring Tobacco Control Laws. • To provide support to the school programme. • To facilitate in developing local IEC and building synergy with the District IEC campaign. • To organize training and capacity building programme for different set of Stakeholders including law enforcers. • To monitor NGO's/group at District level & compile reports ion monthly basis. • To develop partnership with NGO's/Organizations/PRI's/Urban Level Bodies (ULB's) for further community support. • To carry outreach activity / social Mobilization. • Any other work assigned by the supervisor from District / State / National level. • Any other work as specified by State Health Society (A & N Islands) from time to time.
38.	Counsellor	<ul style="list-style-type: none"> • Assess mental health conditions including substance use and suicidal risk. • Provide basic psychosocial and psychological counselling. • Proactive follow-up calls with prior consent.

		<ul style="list-style-type: none"> • Liaise with specialist mental health professionals. • Triage and Refer call to Tier 2 service providers. • Escalation or referral of crisis calls. • Referral to higher level interventions. • No medical interventions will be suggested or provided by non-specialists. • Any other work as specified by State Health Society (A & N Islands) from time to time.
39.	Counselor (DRTB)	<ul style="list-style-type: none"> • Ensure that DR TB patients and family members receive constant counseling and guidance right from their admission to their discharge at the DR TB Centre about the disease, its transmission, air borne infection control, pre-treatment evaluation, treatment, follow up investigations, adverse drug reactions and treatment adherence. • Facilitate the admission process including subsequent documentation at the DR TB Centre. • Facilitate all pre and post treatment investigations as per guidelines. • Facilitate the discharge process ensuring that the parent district is informed well in advance and is in readiness to receive the patient. • To ensure drugs for transit period are provided to the patient at the time of discharge. • In coordination with the DR TB Centre statistical assistant, ensure that the original treatment cards are updated as per guidelines. • Facilitate linkages for social and financial support to DR-TB Patients. • To maintain a detailed DOT Directory with important contact details of other DR TB Centers, District TB centers and RNTCP key staff. • Maintain the documentation regarding the counseling and services provided and reporting of the same in the prescribed formats. • To facilitate change management with respect to use of ICT & Nikshay tools for concerned data entry, validation & its use for public health action • Any other job assigned as per program need. • Any other work as specified by State Health Society (A & N Islands) from time to time.
40.	Eye Donation Counsellor	<ul style="list-style-type: none"> • To liaison with medical, nursing and other personnel in all matter related to eye donation. • Motivate and counsel the family/attendants of the deceased for eye donation after death in wards/ casualty/mortuary/ICU of health institution. • Actively participate in eye donation awareness fortnight/other information, education and communication (IEC) activities. • Maintain records and send regular reports to supervision. • To coordinate and participate in training of health personnel on eye banking activities. • To participate in ophthalmology departmental meetings. • To coordinate and maintain liaison with different stakeholders including education, social welfare, development/NGO sector or promotion of eye donation/eye care services. • Any other as assigned by supervisor.

41.	Programme Assistant	<ul style="list-style-type: none"> • Overall In-charge for the Secretarial related work of the Monitoring Cell at State Level in DHS for the National Programme for Prevention and Control Deafness (NPPCD). • Secretarial Assistance to the DHS Officials /State Consultant for smooth implementation of NPPCD. • Secretarial Assistance in preparation of NPPCD progress report, expenditure statement, compilation of Utilization Certificates and other technical matters etc. • The performance of Programme Assistant will be reviewed once in a year by the Head of the Division. • The Programme Assistant shall be eligible for 8 days leave in a Calendar Year on pro-rata basis. The Programme Assistant shall not draw any remuneration in case of his/her absence beyond 8 days in a year (Calculated on pro-rata basis). Also unavailed leave in a Calendar Year cannot be carried forward to next calendar year. • The Programme Assistant shall not be entitled to any other allowance (DA, transport allowance, residential, accommodation, telephone, medical reimbursement, personal staff etc.) • Programme Assistant shall treat all official information as strictly confidential, and use the same for performance of consultancy assignment only. • The Programme Assistant shall report to the Director in-charge of NPPCD in MOHFW. • All other provisions of GFR, 2005 as amended from time to time shall be applicable. • Any other work assigned by the Reporting Officer. • Responsible for maintenance of records/file and tracking of important documents. • Keep track of important documents. • Maintain database of addresses, telephone nos. of the persons/ organizations frequently required to be contacted. • Proper maintenance of office equipment's. • Any other work as specified by State Health Society (A & N Islands) from time to time.
42.	Radiographer	<ul style="list-style-type: none"> • Taking diagnostic Radiographer of patients as required by Medical Officers. • Advising patients or ward staff regarding preparation of patient before X-Ray. • Developing and drying the exposed X-Ray films. • Loading cassettes with X-Ray films. • Storing unexposed X-Ray films properly. • Keeping account of X-Ray films and other supplies. • Maintaining record of X-Ray reports of the patients referred. • Sending Radiographers and the opinions of the Radiologist to the department concerned. • Receiving back the X-Ray films after the discharge of the patients and filing them in such a way that retrieval is easy. • Taking precautions to protect himself, patients and other workers of the department from the hazards of X-Ray. • Assisting the Radiologist in the deep X-Ray treatment. • Assisting the Radiologist in the training X-Ray Technicians. • Any other work as specified by State Health Society (A & N Islands) from time to time.

43.	Renal Technician	<ul style="list-style-type: none"> • The Renal Technician will be responsible for day-to-day maintenance of the Dialysis Machine. • He will be responsible for the supervision of the water treatment plant set up for the Dialysis Unit. • He should be able to carry out minor repair work of the Dialysis Machine as and when required. • During the procedure of Dialysis, he will be present by the bedside throughout the procedure and will assist the Doctor and the staff in starting and closing the procedure of Dialysis. • After the procedure, he will recondition the Machine and clean the Artificial Kidney and Tubes and keep them safely for reuse. • Apart from the routine duty he will be required to attend the emergency duty as and when required, emergency dialysis. • Any other work as specified by State Health Society (A & N Islands) from time to time.
44.	Audiologist (RBSK/DEIC)	<ul style="list-style-type: none"> • Provision of audio services, Speech- language assessment and rehabilitation & prescribing aids in collaboration with WENT Surgeon. • Assist in training programmes. • Monitoring and Evaluation of the Programme. • Help DNO in quarterly submission of quarterly report. • Monthly visit to accompany DNO/ENT Surgeon to CHC/PHC. • Supervision of IEC activities/camps in collaboration with ENT Surgeon /DNO.
45.	Staff Nurse	<ul style="list-style-type: none"> • To administer oxygen, medicine and injection to admitted patient as prescribed by the Pediatrician / Medical Officer. • You will be responsible for preparing beds/ warmers for babies and also responsible for daily moping/cleaning of the babies. • You will be responsible for maintenance of cleanliness in the wards. • To feed the hospitalized newborn patient and help guide the attendant of the newborn in taking medicine / breast feed etc. • To record the pulse, blood pressure, temperature and other parameters of the newborn inpatients. • To help the Doctors and Para Medical Staff in transport of newborns. • To assist the doctors in making round of the ward and admission / discharge. • You will be polite, caring and sympathetic. • Any other work as specified by State Health Society (A & N Islands) from time to time.
46.	ANM	<ul style="list-style-type: none"> • Maternal & Child Health Care in the village/community. • Conducting deliveries in S/C and Home on call. • Identify the beneficiaries and complete necessary formalities for benefits under Janani Suraksha Yojana (JSY) scheme and timely disbursement JSY benefits to eligible BPL mothers and submit utilization certificate every month for further release of funds. • Family Planning motivation and other activities. • Identify the women, requiring help for Medical Termination of Pregnancy (MTP). • Nutritional Care such as weekly IFA supplementation & Bi-annual vitamin A supplementation. • Organizing Health & Nutrition days in Anganwadi Centres.

		<ul style="list-style-type: none"> • Full coverage of routine immunization to children in time. • Treatment of minor ailments and timely referral. • Record keeping of Vital events in the village. • Implementation of all National health Programme in the community. • Training for ASHA / Anganwadi Worker / Dais of respective areas. • Work in cooperation with PRIs/NGOs in the village. • Proper maintenance of record of United fund & Annual Maintenance Grant for SC development and submit SoE & UC to MO i/c PHC/CHC. • Any other work as specified by State Health Society (A & N Islands) from time to time.
47.	Data Entry Officer (HIS)	<ul style="list-style-type: none"> • Entering the details of OPD Patients. • Managing complete Patients Registration System in OPD. • Entering details of Patients admitted in different wards (IPD). • Keeping records of stock of medicines and maintaining other hospital records. • Sample Collection Entry, Result Entry & Validation of Reports. • Generating Statistical Report on monthly / weekly basis as per the requirements. • Inventory control, technical support for the Para Medical Staffs. • Maintaining Hospital Information Records of In-patients & Out - patients. • Coordinating in DBMS (Data Base Management System) under MIS. • Any other work as assigned by the State Health Society from time to time.
48.	Data Entry Operator	<ul style="list-style-type: none"> • Preparing the reporting formats received from the Government of India from time to time as specified by the GoI. • Day to day data entry work of the State Health Society. • Preparation of the financial management reports or any other financial report for the state by assisting the State Finance Manager as specified by the GoI. • Furnishing the details as specified by GoI for any other reporting process. • Assisting the State Programme Manager in the preparation of MIS under NHM. • Any other work as specified from State Programme Manager/State Finance Manager from time to time.
49.	Data Entry Operator (IRL)	<ul style="list-style-type: none"> • To perform data entry of CDST labs into the TB ICT application (NIKSHAY/LIMS) in coordination with DR-TB Centres. • To facilitate change management with respect to use of ICT & Nikshay tools for concerned data entry, validation of its use for public health action. • To receive mails to the IRL. • To e-file the mails and attached documents. • To enter the patient details and laboratory reports in the specified IRL format and to send e-copies of culture/DST reports to the District TB Centres and DRTB Centres. • To maintain and update the contact details of districts, DRTB centres and laboratories assigned to the IRL. • To compile the District reports on external quality assurance. • To maintain computer, peripherals and connections assigned.

		<ul style="list-style-type: none"> • To install and update antivirus software as and when required. • To take periodic back up of the data stored in the system. • Any other tasks assigned as per programme needs.
50.	Data Assistant cum Clerk	<ul style="list-style-type: none"> • Preparing the reporting formats received from the Government of India from time to time as specified by the GoI. • Day to day data entry work of the State Health Society. • Preparation of the financial management reports or any other financial report for the state by assisting the State Finance Manager as specified by the GoI. • Furnishing the details as specified by GoI for any other reporting process. • Assisting the State Programme Manager in the preparation of MIS under NHM. • Any other work as specified from State Programme Manager/State Finance Manager from time to time.
51.	LDC Typist	<ul style="list-style-type: none"> • Programme related management of files, Letters (in-out), Documentation (report writing, objective based note sheets) manage all official communication with National level and within the state. • Organize meetings and over all documentation and dissemination at various level. • Others responsibilities/ instructions given by Mission Director (UTHM)/State Programme Officer NIDDCP Technical Officer. • Undertake other assignments, which may be assigned from time to time by the State Health Society.
52.	Data Analyst	<ul style="list-style-type: none"> • To generate program performance and review formats by developing suitable indicators and analyzing the data in order to compile relevant singular and composite indicators in support of monitoring and evaluation at state level. • To analyze program data for time trends and projections to provide necessary information for planning, budgeting, procurement and supply chain management. • To provide necessary support in data analysis for operational research initiative from STF, state TB cell or District TB Centres. • To facilitate change management with respect to use of ICT & Nikshay tools for concerned data entry, validation & its use for public health action • Undertake initiatives to ensure data quality in the program. • Participate in State Internal Evaluations and assist the team in Data analysis. • Assist the STO in providing analytical data during review meetings. • Any other job assigned by as per program need. • Any other work as specified by State Health Society (A & N Islands) from time to time.
53.	Statistical Assistant (NIDDCP)	<ul style="list-style-type: none"> • Data compilation of salt consumption at community level. • Data interpretation, report analysis and prepare the final report, submit to Technical Officer regarding salt and urine estimation for iodine and other reports as well. • Follow-up District Health Society/RCH for monthly salt consumption status. • Conduct training at district level regarding data entry and analysis. • Developing survey tools and methodology as per

		<p>the guide line provided.</p> <ul style="list-style-type: none"> Record keeping. Other responsibilities instructed by Concerned Official NIDDCP. Any other work as specified by State Health Society (A & N Islands) from time to time.
54.	Statistical Assistant	<ul style="list-style-type: none"> Assist Senior Medical Officer NDR-TB Centre under the guidance of Nodal Officer of NDR-TB in updating Nikshay on daily basis. Assist Sr. MO-DR-TB Centre for managing the patient wise records and reports for PMDT, analyzing the data and transmission of information to DR- TB Centre committee, laboratories, Districts, STC and Central TB Division. Liase with DEOs of IRL and Senior DR TB TB HIV Supervisors of the District for tracking of patients/ information to and from NDR TB Centre and addressing data gaps in NIKSHAY, conduct validation and flag implementation gaps based on analysis of the data from NIKSHAY reports and dashboards. To assist NDR-TB Centre committee in preparation of minutes, briefs, presentation etc. Support NDR-TBC in updating the template with information to be shared with difficult to treat TB Clinic for selected patients as per directions from NDR-TBC committee and management of the patient based on recommendation actions from the clinic. Data entry of PMDT services in NIKSHAY. Manage correspondence on NDR-TB Centre between STC, IRL/C&DST labs, SDS, Districts and Central TB Divisions. Maintenance and up keep of the computer and peripherals including anti-virus. To facilitate change management with respect to use of ICT tools, Nikshay & Nikshay Aushadhi for concerned data entry, validation and its use for public health actions. To provide a monthly activity report to NDR-TBC Committee and STO. Any other job assigned by the reporting officer.
55.	IEC Assistant	<ul style="list-style-type: none"> IEC activities carried out under various societies/programme of the State Health Society (A & N Islands). Conducting IEC meeting under the State Health Society (A & N Islands) in close coordination with the State IEC Officer. Preparation of Banners / Posters /Pamphlets or any other IEC materials in any language specified by GOI and State. Assisting the State IEC Officer in organizing any of the IEC activities under NHM. Any other work as specified by State Health Society (A & N Islands) from time to time.
56.	Administrative Assistant	<ul style="list-style-type: none"> All Administrative matters including data compilation management of reports and returns, Logistics and maintenance of record. Any other work as specified by State Health Society, A & N Islands from time to time.
57.	Secretarial Assistant	<ul style="list-style-type: none"> Dictation and transcription on typewriter/computer. Systematic maintenance of records/files. Timely submission of papers/Dak. Drafting of letters of routine nature. Maintaining record of receipt and issue of letters. Maintaining appointment diary and attend the visitors. Attending telephonic calls in a tactful manner

		<p>and keep their records.</p> <ul style="list-style-type: none"> • Maintain database of addresses, telephone nos. of the persons/organizations frequently required to be contacted. • Proper maintenance of office equipments of personal section. • Keep track of important documents. • To facilitate change management with respect to use of ICT & Nikshay tools for concerned • data entry, validation & its use for public health action • Any other job assigned as per programme need • Any other work as specified by State Health Society (A & N Islands) from time to time.
58.	Store Assistant (SDS)	<ul style="list-style-type: none"> • Assist Pharmacist in Handling of drug stores in the State Drug Stores including receipts & issues. • Arranging and shifting of Drugs quota as and when required with the help of class IV. • Recording & Reporting of drug stocks at the stores. • Maintaining and verifying the prepared CAT IV & V PWBs. • Repacking of 02nd line loose drugs into IP & CP 1 monthly boxes. • Assist for Data Entry in programme based software for drug logistics. • To facilitate change management with respect to use of ICT & Nikshay tools for concerned data entry. Validation & its use for public health action. • Imparting drug logistics trainings to district level Pharmacists. • Any other job assigned as per programme need.
59.	Pharmacist-cum-Storekeeper (SDS)	<ul style="list-style-type: none"> • To handle day to day communications pertaining to drug logistics. • To maintain registers, vouchers, issue receipts, payment receipts, physical verification reports and maintenance records. • To maintain state level drugs stock as per program guidelines. • To follow “First Expiry First Out” principle at the state drug store and monitor the same in district drug stores. • To facilitate change management with respect to use of ICT & Nikshay tools for concerned data entry, validation & its use for public health action • To assist State TB Officer in imparting drug logistics trainings to district level pharmacists • To analyze the quarterly drug and logistics report of districts. • To ensure submission of monthly district drug store reports to the State Tuberculosis Office. • To visit district/TU drugs stores and report to STO. • To prepare monthly patient wise boxes of second line drugs. • To monitor recording and maintenance of store temperature where 2nd line drugs are stored and to suggest actions for proper storage of drugs at all levels. • To maintain the computer and peripherals in the State • Any other work as specified by State Health Society (A & N Islands) from time to time.

60.	Physiotherapist	<ul style="list-style-type: none"> • To Provide Physiotherapy services in district hospital to persons affected by leprosy. • Examine the cases at risk of developing disability and monitor them by regular VMT & ST test. • Visit to CHC /PHC & Familiarize the Health Workers and Patients in Self Care Practices. • Screening of disability cases and counsel eligible for Re Constructive Surgery. • Any other work as specified by State Health Society (A&N Islands) time to time.
61.	Sr. Lab Technician	<ul style="list-style-type: none"> • To perform laboratory tests including Culture and DST as well as molecular detection of drug resistance. • To manufacture panel testing slides for EQA of sputum smear microscopy. • To assist the Microbiologist during On Site Evaluation/assessment visits and logistics. • To facilitate laboratory training programmes. • To coordinate with state labs (C &DST, NAAT & DVCs) for prompt submission of performance indicators and validate. • To monitor laboratory performance (for all technologies) in States/UTs and compile laboratory data for analysis and submission to state and NRL. • To maintenance laboratory equipment and perform periodic calibration. • To facilitate data entry of CDST labs into NIKSHAY/LIMS. • Any other tasks assigned by reporting officer.
62.	Lab Technician	<ul style="list-style-type: none"> • Field testing of household salt in schools & villages /AWC. • Testing of iodine contents of salt in laboratory by volumetric method. • Testing Urinary Excretion of Iodine (UEI) in laboratory. • Visit to all PHC/CHCs & schools for quality control of household salt. • Assist in conduction of survey of IDD prevalence in these islands. • Testing of Blood /Urine for routine & Biochemical tests in IDD patients. • Any other work as specified by State Health Society (A & N Islands) from time to time.
63.	Medical Records Asst./Case Registry Asst. (NMHP)	<ol style="list-style-type: none"> 1. Medical Record Assistant when posted to a Civil Hospital is responsible for maintenance of the following:- <ol style="list-style-type: none"> a. OPD Registers b. Death Registers c. Compilation of Accounts of medicine of the basis of issue slip received in the dispensing counter from the patients. d. Typing works related to medical records. e. He shall also assist MRT. 2. Medical Record Assistant when posted to a PHC shall perform the following works:- <ol style="list-style-type: none"> a. Issue of OPD slips to the fresh incoming patients. b. Assist the Compounder /Pharmacist in maintenance of Medical Ledger in the dispensing from while dispensing medicines to patients. c. Maintenance of all medical records of PHC. The men when attached to the Programme Officers he/she shall maintain all records relating to medical store etc. and shall also carryout typing work. 3. Any other work as specified by State Health Society (A & N Islands) from time to time.

64.	Insect Collector	<ul style="list-style-type: none"> • Day to day collection and dissection of mosquitoes. • Any other works assigned to them by their superior officers. • Any other work as specified by State Health Society (A & N Islands) from time to time.
65.	Camp Coordinator	<ul style="list-style-type: none"> • Plan implement and organize screening camps as assigned. • Implement and execute the scheduled camping program. • Coordinate with PRIs, Hospital Staffs, Village Stake Holder for screening programme and for wide publicity. • Keep proper data of the camps. • Any other job as assigned by the State Health Society (A&N Islands) from time to time.
66.	Camp Assistant	<ul style="list-style-type: none"> • To assist in organizing Health 'camps' as being planned by the State Health Society (A&N Islands). • To assist the team of health professionals for organizing the 'camp' in an area to carry out a limited health intervention. • To assist in free medical camps organized to provide health services and create an environment where the underprivileged community gets sensitized about health issues. • To assist and work out the logistics like Drugs, Other supplies and materials, required personnel to support the medical camp. • To assist in secure and hassle-free registration process of patients for the respective camps. • To assist in designing the camp program. • To ensure the health and safety of the camp team and patients. • To assist in collecting the feedback and to keep in touch with patients for follow up. • To assist in organizing Mobile Health Camps conducted in different locations of far off islands of the operational area as and when decided • When the camps & camp locations are finalized, help in disseminating information about date, time and service available in the health camp etc. • Any other job as assigned by the State Health Society (A&N Islands) from time to time.
67.	Driver	<ul style="list-style-type: none"> • Driving of Vehicle. • Upkeep and cleanliness of vehicles. • Maintenance of log book. • Routine repairs including change of wheels. • Any other job assigned as per programme need. • Any other work as specified by State Health Society (A&N Islands) from time to time.
68.	Peon	<ul style="list-style-type: none"> • Attending day to day office works with respect to the file movements. • Maintenance of Peon Book. • Up keeping of the Office. • Maintenance of Office files/records. • Any other activity as decided by the core team/Mission Director as per the need of the State Health Society.

69.	Support Staff/ Attendant	<ul style="list-style-type: none">• Day to Day Office work with respect to the file movements, Diary – Dispatch of the applications/letters etc.• Maintenance of Dairy & Dispatch Register.• Maintenance of Peon Book.• Any other activity as decided by the Core team / Mission Director (UTHM) as per the need of the Programme.• Any other work as specified by State Health Society (A & N Islands) from time to time.
70.	Attendant	<ul style="list-style-type: none">• Helping the other human resources in calls, appointments, organizing files, managing calendars.• Maintain files, arrange for meetings.• Maintenance of the workspace.• Any other work as specified by State Health Society (A & N Islands) from time to time.
71.	Para Medical Worker	<ul style="list-style-type: none">• Same as the job responsibilities of General Duty Medical Officer (Allopathy) working under the Directorate of Health Services and as decided by the State Health Society (A&N Islands).
72.	Ayah	<ul style="list-style-type: none">• Same as the job responsibilities of General Duty Medical Officer (Allopathy) working under the Directorate of Health Services and as decided by the State Health Society (A&N Islands).

Name of the Department: - National Health Mission (NHM)
Name of the Scheme & Implementing Ministry:- Ministry of Health & Family Welfare

Financial Status (Rs. In Lakhs)

Sl. No.	Year	Opening Balance	Fund Released during the year	Total fund available	Expenditure during the year	% of Expenditure	Remarks
1	2021-2022	926.19	3424.30	4350.49	3410.15	78%	Severe scarcity of Specialists and doctors and thus, Top-Up & Salaries remain unutilized. In this regard, efforts are being made at various levels to recruit Specialists. Against 50 sanctioned posts of Specialists, only 5 Specialists are working.
2	2022-2023	904.18	3444.00	4348.18	3394.49	78%	
3	2023-2024	1078.78	2682.00	3760.78	3112.87	83%	
4	2024-2025	740.11	3869.00	4609.11	3369.37	73%	



Telefax: 03192-234965, 243653
Email: nrhm.anislands@gmail.com

ANDAMAN & NICOBAR UNION TERRITORY HEALTH MISSION
&
OFFICE OF THE STATE HEALTH SOCIETY (A&N ISLANDS)
AP-111, ATLANTA POINT, SRI VIJAYA PURAM-744104

F.No.3-40/RTI/MD/UTHM/2016-17/74
SVP, Dated 26 May, 2025

To

The Assistant Secretary (AR & Trg.)
Secretariat
Andaman & Nicobar Administration.

Sub: Implementation of Suo Moto disclosure under Section 4 of RTI Act, 2005 – reg.

Sir/Madam,

This is with reference to vide letter no. Act/7/2024-ARTRG-Section-Sectt./207179 dated 8/5/2025 regarding the subject cited above, the below mentioned necessary details pertaining to Office of the State Health Society, A&N Islands with regard to Section 4(1) (b) of the RTI Act, 2005 is hereby attached/enclosed both in soft and hard copies for further necessary action please:

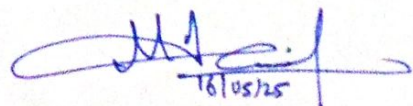
(i)	the particulars of its organization, functions and duties;	Bye-Laws and Delegation of Administrative and Financial Powers under NHM is attached.
(ii)	the powers and duties of its officers and employees;	As per the Bye-Laws and Delegation of Administrative and Financial Powers under NHM (copy attached).
(iii)	the procedure followed in the decision making process, including channels of supervision and accountability;	As per the Delegation of Administrative and Financial Powers under NHM (Copy attached).
(iv)	the norms set by it for the discharge of its functions;	As per the Bye-Laws and Delegation of Administrative and Financial Powers under NHM (copy attached) various officials under NHM are entrusted with powers of decisions making and accountability.
(v)	the rules, regulations, instruction, manuals and records, held by it or under its control or used by its employees for discharging its functions;	Bye-Laws and Delegation of Administrative and Financial Powers under NHM is attached.
(vi)	a statement of the categories of documents that are held by it or under its control;	None
(vii)	the particulars of any arrangement that exists for consultation with, or representation by, the members of the public in relation to the formulation of its policy or implementation thereof;	As per the mandates given by the Ministry of Health & Family Welfare, GoI.
(viii)	a statement of the boards, councils, committees and other bodies consisting of two or more persons constituted as its part or for the purpose of its advice, and as to whether meetings of those boards, councils committees and other bodies are open to the public, or the minutes of such meetings are accessible for public;	The Governing Body of State Health Society chaired by Chief Secretary and Executive Committee of State Health Society, A&N Islands chaired by Commissioner-cum-Secretary (Health) are functioning under State Health Society which includes Public Representatives. Minutes are circulated among all the stakeholders.

(ix)	a directory of its officers and employees;	Details attached
(x)	the monthly remuneration received by each of its officers and employees, including the system of compensation as provided in its regulations;	As per the approvals received from Ministry of Health & Family Welfare, GoI. Details of the same are available in the website of Ministry of Health & Family Welfare (MoH&FW), GoI i.e www.nhm.gov.in
(xi)	the budget allocated to each of its agency, indicating the particulars of all plans, proposed expenditures and reports on disbursements made;	Details attached
(xii)	the manner of execution of subsidy programmes, including the amounts allocated and the details of beneficiaries of such programmes;	Not applicable
(xiii)	particulars of recipients of concessions, permits authorizations granted by it;	Not applicable
(xiv)	details in respect of the information, available to or held by it, reduced in an electronic form;	The website of Ministry of Health & Family Welfare (MoH&FW), GoI i.e www.nhm.gov.in
(xv)	the particulars of facilities available to citizens for obtaining information, including the working hours of library or reading room, if maintained for public use;	Not applicable
(xvi)	the names, designations and other particulars of the Public Information Officers;	Details attached
(xvii)	Such other information as may be prescribed; and thereafter update these publications every year;	None, as of now and any updates further will be revised as per the instructions of Ministry of Health & Family Welfare (MoH&FW) GoI.

Thanking You,

Yours Sincerely,

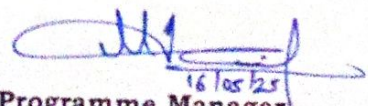
Encl:- A/A-



**State Programme Manager
State Health Society
A & N Islands**

Copy to:

1. The Mission Director (UTHM) for kind information please.
2. Concerned File.



**State Programme Manager
State Health Society
A & N Islands**

List of Appellate Authority and PIOs under State Health Society, A&N Islands

Sl No.	Designation	Appellate Authority/ Nodal Officer /PIO	Contact Number
1	Mission Director (UTHM)	Appellate Authority	233014
2	State Programme Manager, SHS	Nodal Officer & PIO	234965, 243653
3	Joint Secretary (RCH- II/PO NIDDCP/ NO-NQAS),SHS	PIO	230155
4	Joint Secretary (Immu., IDSP/ NO, NVHCP) SHS	PIO	230608
5	Joint Secretary (NTEP), SHS	PIO	242132
6	Joint Secretary (NPCB&VI, NTCP, NMHP)/NO (Tele MANAS) SHS	PIO	242132, 239053
7	Joint Secretary (NVBDCP, NLEP)/SNO NPPCCHH) SHS	PIO	232428
8	Joint Secretary NP-NCD, NPHCE)/ PO (NPPC) SHS	PIO	293991
9	Joint Secretary (NPPCD) SHS	PIO	231032
10	Nodal Officer (NOHP)/SHS	PIO	234965
11	Nodal Officer (Sickle Cell/Thalassemia)	PIO	234965
12	Nodal Officer (BMW)/ State NO (Snake Bite) SHS	PIO	231176
13	Programme Officer (AYUSH)	PIO	233488
14	DPM (DHS SA)	PIO	206807
15	DPM (DHS NMA)	PIO	262697
16	DPM (DHS Nicobar)	PIO	265044

**List of Doctors/Officials/Administrative Staff/Para-Medical Staff under
State Health Society, A&N Islands**

Sl. No.	Name	Designation	Contact Number/Address
1.	Dr. Abhishek Pal	GDMO (Allopathy)	G B Pant Hospital, SVP
2.	Dr. Farheen Begum	GDMO (Allopathy)	G B Pant Hospital, SVP
3.	Dr. Augustina	GDMO (Allopathy)	G B Pant Hospital, SVP
4.	Dr. Vivek Singh	GDMO (Allopathy)	G B Pant Hospital, SVP
5.	Dr. Rhea Augustine	GDMO (Allopathy)	G B Pant Hospital, SVP
6.	Dr. Mufshina Mazid	GDMO (Allopathy)	G B Pant Hospital, SVP
7.	Dr. Razeeda Banu	GDMO (Allopathy-NUHM)	HWC, Haddo, SVP
8.	Dr. Visudha Raman	GDMO (Allopathy-NUHM)	HWC, Delanipur, SVP
9.	Dr. Shaheen M	GDMO (Allopathy-NUHM)	HWC, Shadipur, SVP
10.	Dr. Veer Jailendar Saini	GDMO (Allopathy-NUHM)	HWC, Dairy Farm, SVP
11.	Dr. Kesavan Murugesan	GDMO (Allopathy) TELE Medicine	G B Pant Hospital, SVP
12.	Dr. Nazma Sathick	GDMO (Allopathy) TELE Medicine	G B Pant Hospital, SVP
13.	Dr. Anand C. Nair	GDMO (Allopathy) TELE Medicine	G B Pant Hospital, SVP
14.	Dr. Dency Tony	Medical Officer (DTC)	G B Pant Hospital, SVP
15.	Dr. Arjun Sivadas	Sr. Medical Officer	G B Pant Hospital, SVP
16.	Dr. Betty S Verghese	GDMO (Dental)	G B Pant Hospital, SVP
17.	Dr. Keerthivasan	Specialist -Microbiologist (IRL)	G B Pant Hospital, SVP
18.	Mr. Mohammed Ismail	State Programme Manager	03192 234965
19.	Mr. Godan Rao	State Finance Manager	03192 234965
20.	Mr. Mohammed Ismail	Consultant (NUHM)	03192 234965
21.	Mr. A. Bethrajan	Consultant (MH/CH/RKSK)	03192 234965
22.	Dr. Palak Mahajan	Consultant Climate Change and Quality Assurance	03192- 230155
23.	Dr. Tapash Kumar Dakuya	State Epidemiologist	03192-230608
24.	Dr. Robin C Oommen	State Programme Coordinator	03192-293991
25.	Mr. Sujoy Dey	State Finance and Logistic Consultant (NPCDCS / NVHCP)	03192-293991
26.	Mr. V. Navneetha Krishnan	Consultant (Finance & Procurement)	03192-230608
27.	Mr. K. V Sreerag	District Consultant (NTCP)	03192-234965
28.	Dr. Shalini Lall	Technical Officer	03192-230155
29.	Mrs. Anitha Shibi	Accountant	03192-232428
30.	Mrs. Prathibha Kumari	Accountant	03192-234965
31.	Mr. Deepak Kumar Adhikary	Accountant	03192-242132
32.	Mr. Bhuban Halder	Accountant	03192-242132
33.	Mr. Dharam Raj	Accountant	03192-230155
34.	Mr. P. Sreenu	Accountant	03192 234965
35.	Mr. N. Nayeem Fuad	Accountant	03192-234965
36.	Mr. Rokkala Srinivas	State Data Manager	03192-230608

37.	Mrs. C.H. Veena	State Microbiologist	03192-230608
38.	Mr.T. Suresh	Microbiologist (EQA)	03192-242132
39.	Dr. B. Sumit Kumar Rao	Entomologist (NVBDP)	03192-232428
40.	Mr. M. Kaliyamoorthy	State Entomologist	03192-230608
41.	Mr. Tapan Kumar Ray	ACSM Officer	03192-242132
42.	Mrs. Ganga Bavani	IEC Officer	03192 234965
43.	Ms. Banani Mridha	Bio Medical Engineer	03192-231176
44.	Ms. Hemlatha	Clinical Psychologist Trained	G B Pant Hospital, SVP
45.	Mr. Rathindra Mallick	Psychologist Counsellor (NTCP)	03192-234965
46.	Ms. Nidhi Prakash	Clinical Psychologist	03192-239053
47.	Ms. Shyamli Singh	Clinical Psychologist	03192-239053
48.	Ms. Shabnam Begum	Psychiatrist Social Worker (NMHP)	G B Pant Hospital, SVP
49.	Ms. Zeba Z	Social Worker (NTCP)	03192-234965
50.	Ms. Madhavi Nambiar	Counsellor	03192-239053
51.	Ms. Aysha Sherin	Counsellor	03192-239053
52.	Dr. Sumitra Mandal	Counsellor	03192-239053
53.	Ms. Princia	Counsellor	03192-239053
54.	Ms. Geeta Rani Saha	Counsellor	03192-239053
55.	Ms. M. Istar Lavanya	Counselor (DRTB)	03192-242132
56.	Mrs. K. Jamsira	Eye Donation Counsellor	03192-242132
57.	Ms. E. Abisha Evangelina Pushpam	Eye Donation Counsellor	03192-242132
58.	Mr. Mohammed Sabib. P	Programme Assistant	03192-231032
59.	Mrs. Salma Bibi	Radiographer	HWC, Billiground
60.	Ms. C. Selvi	Renal Technician	G B Pant Hospital, SVP
61.	Ms. Sushanta Kerketta	Renal Technician	G B Pant Hospital, SVP
62.	Ms. Lalitha Devi	Staff Nurse	G B Pant Hospital, SVP
63.	Ms. Jessy	Staff Nurse	G B Pant Hospital, SVP
64.	Ms. K. Sudha	Staff Nurse	G B Pant Hospital, SVP
65.	MS. Manitha Devi	Staff Nurse	G B Pant Hospital, SVP
66.	MS. Bisaka Mistry	Staff Nurse	G B Pant Hospital, SVP
67.	MS. Mary Job	Staff Nurse	G B Pant Hospital, SVP
68.	MS. Meena Kumari	Staff Nurse	G B Pant Hospital, SVP
69.	Ms. Ebhana Mondal	Staff Nurse	G B Pant Hospital, SVP
70.	Ms. Tejawati	Staff Nurse	G B Pant Hospital, SVP
71.	Ms. R. Neela Wati	Staff Nurse (Renal)	G B Pant Hospital, SVP
72.	Ms. Gazana Godawari	Staff Nurse (Renal)	G B Pant Hospital, SVP
73.	Ms. Priyanka	Staff Nurse	HWC, Dairy Farm, SVP
74.	Ms. Aarti Narayan	Staff Nurse	HWC, Shadipur, SVP
75.	Mrs. C. Parwathi	Staff Nurse	HWC, Haddo, SVP
76.	Ms. Smitha Aji	Staff Nurse	HWC, Delanipur, SVP
77.	Ms. S. Anitha Kumar	Staff Nurse	HWC, Junglighat, SVP
78.	Ms. Sarojini Horo	ANM	HWC, Delanipur, SVP
79.	Ms. Saida Begum	ANM	HWC, Junglighat, SVP

80.	Ms. Voilet	ANM	HWC, Shadipur, SVP
81.	Ms. Anisha Toppo	ANM	HWC, Haddo, SVP
82.	Ms. Phuldani Darden Toppo	ANM	HWC, Dairy Farm, SVP
83.	Mrs. Shakila Banu	Data Entry Operator	03192 234965
84.	Mrs. B. Padmawati	Data Entry Operator	03192-232428
85.	Mrs. Soma Anand	Data Entry Operator	03192-232428
86.	Mrs. Varahalamma	Data Entry Operator	03192-230155
87.	Mr. Rupen Ram Tiwari	Data Entry Operator	03192-230608
88.	Mr. G. Gopi	Data Entry Operator	03192 234965
89.	Ms. Gracy	Data Entry Operator	03192-242132
90.	Mrs. Manjula Tiwari	Data Entry Operator	03192-230155
91.	Mr. P.K. Abilash	Data Entry Operator	G B Pant Hospital
92.	Mr. Vincent Victor James	Data Entry Operator	G B Pant Hospital
93.	Mrs. Sini Thomas	Data Entry Operator	G B Pant Hospital
94.	Mrs. Shibani Chowdhary	Data Entry Operator	G B Pant Hospital
95.	Mrs. Usha Kumari	Data Entry Operator	G B Pant Hospital
96.	Mrs. B. Gunavathy	Data Entry Operator	G B Pant Hospital
97.	Mr. B. Ugandar Rao	Data Entry Operator	G B Pant Hospital
98.	Mrs. Kumari Baby	Data Entry Operator	G B Pant Hospital
99.	Mrs. Jostna Mistry	Data Entry Operator	G B Pant Hospital
100.	Mrs. Alpana Sarkar	Data Entry Operator	G B Pant Hospital
101.	Mrs. S. Valli	Data Entry Operator	G B Pant Hospital
102.	Ms. R. Jayanthi	Data Entry Operator	G B Pant Hospital
103.	Mrs. Farhat Begum	Data Entry Operator	03192-230608
104.	Mrs. B. Sathi Kumari	Data Entry Operator	03192-231032
105.	Mrs. K.V. Durga Syamala	Data Entry Operator (IRL)	03192-242132
106.	Mr. Jerom Kullu	Data Assistant Cum Clerk	03192 234965
107.	Mrs. Pooja Choudhary	LDC Typist	03192-230155
108.	Mr. N. Akash	Data Analyst	03192-230155
109.	Mrs. Saffiya Shabeer	Para Medical Worker	03192-232428
110.	Mr. Wincy Ninan	Statistical Assistant	03192 234965
111.	Mrs. Simmi	Statistical Assistant	DHS, Nicobar
112.	Mrs. Payal Bepari	IEC Assistant	03192 234965
113.	Mr. R Sanjay Kumar	Administrative Assistant	03192-232428
114.	Ms. Shabrez Bibi	Secretarial Assistant	03192-242132
115.	Mr. Abdul Majeed	Store Assistant (SDS)	03192-242132
116.	Mrs. Kamala Devi	Pharmacist-cum-Storekeeper (SDS)	03192-242132
117.	Ms. Jaseena Kader	Physiotherapist	03192-232428
118.	Mrs. T. Jamsheera	Sr. Lab Technician, IRL	03192-242132
119.	Mrs. Nagalakshmi	Lab Technician	03192-230155
120.	Ms. S. Krishna Wati	Lab Technician (IRL)	03192-242132
121.	Ms. Jyothi Chalam	Lab Technician	03192-242132
122.	Ms. Aneeta Kumari	Medical Records Asst./Case Registry Asst. (NMHP)	G B Pant Hospital, SVP
123.	Ms. Vijay Laxmi	Medical Records Asst./Case Registry Asst. (NMHP)	G B Pant Hospital
124.	Mr. J. Karthikeyan	Medical Records Asst./Case Registry Asst. (NMHP)	G B Pant Hospital
125.	Mr. S. Shiva Kumar	Insect Collector	03192-232428
126.	Mr. M. Shivan	Insect Collector	03192-232428
127.	Mr. E.M Shahid	Camp Coordinator	03192-242132
128.	Mr. Shabeer Akhter	Camp Assistant	03192-234965
129.	Mr. C. Narayanan	Driver	03192-232428
130.	Mr. K.M. Farooque	Driver	03192-242132
131.	Mr. P. Mohammed Ashraf	Driver	03192-242132
132.	Mr. C.H. Mohammed Rafique	Peon	03192 234965

133.	Mrs. M. Laxmi	Support Staff/ Attendant	03192 234965
134.	Ms. Basanti Gowala	Support Staff/ Attendant	03192 234965
135.	Mr. Gaurabh Bawali	Attendant	03192 234965
136.	Mrs. A. Karpaga Selvi	Ayah	G B Pant Hospital SVP
137.	Mrs. T. Azita	Ayah	G B Pant Hospital SVP
138.	Mrs. Prity Das	Ayah	G B Pant Hospital SVP
139.	Mrs. Bagwati	Ayah	G B Pant Hospital SVP
140.	Mrs. Minata Ganguly	Ayah	G B Pant Hospital SVP
141.	Ms. Neela Rani Adhikary	Ayah	G B Pant Hospital SVP

अण्डमान तथा
Andaman And



निकोबार राजपत्र
Nicobar Gazette

असाधारण
EXTRAORDINARY
प्राधिकार से प्रकाशित
Published by Authority

सं. 116, पोर्ट ब्लेयर, बृहस्पतिवार, 15 जून, 2006
No. 116, Port Blair, Thursday, June 15, 2006

OFFICE OF THE MISSION DIRECTOR
UNION TERRITORY HEALTH MISSION (A&N ISLANDS)
PORT BLAIR-744101

NOTIFICATION

Port Blair, dated the 15th June, 2006

No.111/2006/No.03/2006/F.No.1-2/SHS/MD/UTHM/2006.—In pursuance of the guidelines received from the Ministry of Health & Family Welfare, Govt. of India, vide Letter No.F.3666/Secy (H&FW)/2005 dated 06/06/2005 and Letter No. 37018/6/2003-EAG (Part-IV) dated 20/06/2005, regarding implementation of the National Rural Health Mission, launched by Govt. of India, the State Health Society (A & N Islands) has been constituted by the Andaman & Nicobar Administration and registered with the Registrar of Societies, Andaman, vide Registration Certificate No. 1241 dated 14th Nov. 2005. The Rules, Regulations and Bye-Laws of the State Health Society (A & N Islands) are as follows:

STATE HEALTH SOCIETY (ANDAMAN AND NICOBAR ISLANDS)

THE RULES AND REGULATIONS

1 SHORT TITLE :

- 1.1 These Rules and Regulations shall be called "The Rules and Regulations of the State Health Society (Andaman & Nicobar Islands) 2005".
1.2 These Rules shall come into force with effect from the date of registration of the Society by the Registrar of Societies.

2 DEFINITIONS :

- 2.1 In the interpretation of these Rules and Regulations, the following expressions shall have the following meaning unless inconsistent with subject or context:

"Act" means Societies Registration Act, 1860.

"SHSANI" means the State Health Society, Andaman & Nicobar Islands.

"Central Government" means the Government of India.

"Chief Executive Officer (CEO)" means the Chairperson of the Executive Committee of the Society.

"Executive Committee" means the Executive Committee of the Society.

"Executive Secretary" means the Executive Secretary of the Society.

"Governing Body" means the Governing Body of the Society.

"Member" means the Member of the Society.

"Rules" means these Rules and Regulations registered along with the memorandum of Association and as may be amended by the governing Body of the Society from time to time.

"Secretariat" means the Secretariat of the Society.

"State Government" means A & N Administration.

"Year" means the financial year of the A & N Administration (Andaman & Nicobar Islands).

3 OFFICE :

3.1 Registered office of the Society shall be situated in the premises of Ayush Hospital, Atlanta Point, Port Blair.

The Society may set up its branch offices in the UT.

4 MEMBERSHIP :

4.1 The following shall be the members of the society:

- First members of the Governing Body are:

<u>Sl.No.</u>	<u>Name / Designation</u>	<u>Status in Governing Body</u>
1.	Chief Secretary	Chairperson
2.	Development Commissioner	Co-Chair
3.	Commissioner-cum- Secretary (Health)	Vice-Chair
4.	Secretary (Finance)	Member
5.	Secretary (Social Welfare)	Member
6.	Director of Health Services	Member
7.	Mission Director of the State Health Mission	Convener

- Additional ex-officio members of the Governing Body
- Member Secretary of the Society, to be applied under these Rules.
- Representative(s) of the Government of India.
- Representatives of Development Partners supporting the NRHM activities in the Islands.
- Representatives of NGOs.
- Representatives of professionals' associations – IMA.
- Representative of other organizations as may be determined by the Governing Body from time to time.
- Individuals as may be nominated by the Governing Body from time to time.

4.2 The membership of an ex-officio member of the society and of the Governing Body shall terminate when he/she ceases to hold the office by virtue of which he/she was member and his/ her successor to the office shall become such member.

4.3 Non official members of the society will be nominated by the Chairperson in consultation with other members of the Governing Body. Nominated members shall hold office for a period of three years from the date of their nomination by the Chairperson. Such members will be eligible for re-nomination for another period of 3 years.

4.4 The society shall maintain a roll of members at its registered office and every member shall sign the roll and state therein his/her occupation and address. No member shall be entitled to exercise rights and privileges of a member unless he/she signed the roll as aforesaid.

4.5 All member of the Governing Body shall cease to be members if they resign, become of unsound mind, become insolvent or be convicted of a criminal offence involving moral turpitude or removal from the post by virtue of which he/she was holding the membership.

4.6 Registration of membership shall be tendered to the Governing Body in person to its Executive Secretary and shall not take effect until it has been accepted on behalf of the Governing Body by the Chairperson.

4.7 If a member of the society changes his/ her address he/she shall notify his/her new address to the Executive Secretary who shall thereupon enter his/her new address in the roll of member. But if a member fails to notify his/her new address the address in the roll of members shall be deemed to be his/her address.

4.8 Any vacancy in the Society or in the Governing Body shall be filled by the authority entitled to make such appointment. No act or proceedings of the society or of the Governing Body shall be invalid merely by reason of the existence of any vacancy therein or of any defect in appointment of any of its members.

4.9 No member of the Governing Body, except the executive secretary to be appointed as per these Rules, shall be entitled to any remuneration.

5 AUTHORITIES OF THE STATE HEALTH SOCIETY :

5.1 The following shall be the bodies and authorities of the society:

- Governing Body
- Executive Committee
- Programme Committees and such other bodies as may be prescribed by the Governing Body.
(Optional)

5.2 GOVERNING BODY :

5.2.1 All the members of the Society as set out in para 4.1 shall constitute the Governing Body of the society.

5.2.2 The first members of the Governing Body of the society shall be those mentioned in Clause 6 of the Memorandum of Association. They shall hold office until a new Governing Body is appointed according to these Rules.

5.2.3 The management of the affairs of the society shall be entrusted to Governing Body and the property of the Society shall be vested in the Governing Body.

5.2.4 The society may sue or be sued in the name of the Executive Secretary of the Society or of such other members as shall, in references to the matter concerned, be appointed by the Governing Body for the occasion.

5.3 PROCEEDINGS OF THE GOVERNING BODY :

5.3.1 The meetings of the Governing Body shall be held at least once in every six months and at such time and place as the Chairperson shall decide. If the Chairperson receives a requisition for calling a meeting signed by one-third members of the Governing Body, the Chairperson shall call such a meeting as soon as may be reasonable possible and at such places as she/he may deem fit.

5.3.2 At the annual meeting of the Governing Body the following business shall be brought and disposed of :

- Income and expenditure account and the balance sheet for the past year.
- Annual report of the Society.
- Budget for the next year.
- Annual Action Plan and research work for the next year.
- Appointments for the Executive Committee and the various Committees.
- Other business brought forward with the permission of the Chairperson.

5.3.3 Every notice calling meeting of the Governing Body shall state the date, time and place at which such meeting will be held and shall be served upon every member of the Governing Body not less than twenty one clear days before the date appointed for the meeting. Such notice shall be under the hand of the Executive Secretary and shall be accompanied by an agenda of the business to be placed before the meeting provide that accidental omission to give such notice to any member shall not invalidate any accidental omission to give such notice to any member shall not invalidate any resolution passed at such meeting. In the event of any urgent business the Chairperson may call the meeting of the Governing Body at clear ten days notice.

5.3.4 The Chairperson shall take the Chair at the meeting of the Governing Body. In his/her absence, the Co-Chair or in his/her absence, the Vice-Chairperson will chair the meeting, failing which the Governing Body shall elect one from among the members present as Chairperson of the meeting.

5.3.5 One third of the members of the Governing Body, including the substitutes nominated under Rule 5.2.7 present in person, shall form a quorum at every meeting of the Governing Body.

5.3.6 All disputed question at the meeting of the Governing Body shall be determined by votes. Each member of the Governing Body shall have one vote and in case of any equality of votes the Chairperson shall have a casting vote.

5.3.7 Should any official members be prevented for any reason whatsoever from attending a meeting of the Governing Body the Chairperson of the Society shall be at liberty to nominate a substitute to take his place at the meeting of the Governing Body. Such, substitute shall have all the rights and privileges of a member of the Governing Body for that meeting only.

- 5.3.8 Any member desirous of moving any resolution at a meeting of the Governing Body shall give notice thereof in writing to the Executive Secretary of not less than ten clear days before the day of such meetings.
- 5.3.9 Any business which it may become necessary for the Governing Body to perform a quest such as may be placed before its Annual meeting may be carried out by circulation among all its members and any resolution so circulated and approved by majority of the members signing shall be as effectual and binding as if such resolution had been passed at a meeting of the Governing Body, have recorded their consent of such resolution.
- 5.3.10 In the event of any urgent business, the Chairperson of the Society may take a decision on behalf of the Governing Body. Such a decision shall be reported to the Governing Body at its next meeting for ratification.
- 5.3.11 A copy of the minutes of the proceedings of each meeting shall be furnished to the Governing Body members as soon as possible after completion of the meeting.

5.4 POWER OF THE GOVERNING BODY :

- 5.4.1 The Governing Body will have full control of the affairs of the Society and will have authority to exercise and perform all the powers, acts and deeds of the Society consistent with the aims and objects of the Society.
- 5.4.2 In particular and without prejudice to the generality of foregoing provision, the Governing Body, may
- Make, amend, or repeal any bye-laws relating to administration and management of the affairs of the Society subject to the observance of the provisions contained in the Act.
 - Consider the annual budget and the annual action plan, its subsequent alterations placed before it by the Executive Secretary from time to time and to pass it with such modifications as the Governing Body may think fit.
 - Monitor the financial position of the Society in order to ensure smooth income flow and to review annual audited accounts.
 - Accept donations and endowments or give grants upon such terms as it thinks fit.
 - Delegate its powers, to the Chairperson, Chief Executive Officer, Executive Secretary or other authorities of the Society as it may deem fit.
 - Appoint committees, sub-committees and boards etc. for such purpose and on such terms as it may deem fit, and to dissolve/remove any of them.
 - Develop and adopt its own rules and regulations for recruitment and appointment of experts and administrative/technical staff and set its own compensation package for such experts/staff to be recruited from the open market and/or deputation basis.
 - Develop and adopt its own procurement procedures for procurement of goods and services.
 - Authorize the Executive Secretary to execute such contracts on behalf of the Society as it may deem fit in the conduct of the business of the Society.
 - Do generally all such acts and things as may be necessary or incidental to carrying out the objectives of the Society or any of them, provided that nothing herein contained shall authorize the Governing Body to do any act or to pass any bye-laws which may be repugnant to the provisions hereof, to the powers hereby conferred on the Governing Body and other authorities, or which may be inconsistent with the objectives of the Society.

5.5 POWER AND FUNCTIONS OF THE CHAIRPERSON OF THE GOVERNING BODY :

- 5.5.1 The Chairperson shall have the powers to call for and preside over all meetings of the Governing Body.
- 5.5.2 The Chairperson may himself/herself call, or by a requisition in writing signed by him/her, may require the Executive Secretary to call, a meeting of the Governing Body at any time and on the receipt of such requisition, the Executive Secretary shall forthwith call such a meeting.
- 5.5.3 The Chairperson shall enjoy such powers as may be delegated to him by the Governing Body.
- 5.5.4 The Chairperson shall have the authority to review periodically the work and progress of the Society, and to order inquiries into the affairs of the Society and to pass orders on the recommendations of the reviewing or inquiry committee.

5.5.5 Nothing in these Rules shall prevent the Chairperson from exercising any or all the powers of the Governing Body in case of emergencies in furtherance of the objects of the Society. However, the action taken by the Chairperson on such occasions shall be reported to the Governing Body subsequently for ratification.

5.6 EXECUTIVE COMMITTEE :

5.6.1. The Governing Body will constitute an Executive Committee which will be responsible for acting for and doing all deeds on behalf of the Governing Body and for taking all decisions and exercising all the powers, vested in the Governing Body except those which the Governing Body may specifically specify to be excluded from the jurisdiction of by the Executive Committee.

5.6.2. The composition of the Executive Committee shall be as follows:

S.No.	Name/Designation	Status in Executive Committee
1.	Commissioner-cum-Secretary (Health)	Chairperson, Executive Committee
2.	Director of Health Services	Vice Chair
3. – 7.	Programme Manager/Project Director of National Disease Control Programme	Joint Secretaries
8. – 10.	Secretaries/technical officers from NRHS related sectors	Members
11.	Representative of Development Partner	Members
12.	Representative of Ministry of Health & FW, Govt. of India	Member
13.	Regional Director of Health & FW, GOI	Member
14.	Mission Director/Executive Director of the Society	Convener

5.6.3. The Executive Committee may co-opt additional members and/or invite subject experts to its meetings from time to time.

5.6.4. Meetings of the Executive Committee shall be convened by the Member Secretary by giving clear seven days notice in writing along with the Agenda specifying the business to be transacted, the date, time and venue of the meeting.

5.6.5. Meetings of the Executive Committee shall be held at least once every month or more frequently as necessary.

5.6.6. The minutes of the Executive Committee meetings will be placed before the Governing Body at its next meeting.

5.6.7. The various Committee constituted by the Governing Body shall submit their reports to the Executive Committee who shall be empowered to take decisions on their recommendations.

5.7. SOCIETY SECRETARIAT AND EXECUTIVE SECRETARY :

5.7.1. ~~The society will have a Secretariat headed by the Mission Director of the UT Health-Mission who shall also function as the Executive Secretary of the Society. The Governing Body, with the assistance of the Joint Secretary and officials such as Director/DG Health Services/Executive Director, will establish a Secretariat of the Society consisting of technical, financial and management professionals to serve as the implementation arm of the Society.~~

5.7.2. The Secretariat shall consist of such technical / management units put together and as may be determined by the Governing Body with due regard to the scope of functions as set out in Article 5 of the Memorandum of Association.

5.7.3. The Executive Committee of the Society will have overall responsibility for planning and executing the work of the Secretariat, for supervising the work of the technical/management units of the Secretariat, directing and overseeing implementation through the Secretariat.

5.8. POWERS AND FUNCTIONS OF THE SECRETARIAT :

5.8.1. The Secretariat of the Society shall consist of the Mission Director and Staff of the Society, including experts and consultants

- 5.8.2. As the implementation arm of the Society, the Secretariat will be responsible for day-to-day management of the Society's activities. In particular, it will be responsible for performing all functions of the Society as set out in article 5 of the MoA.
- 5.8.3. As a support structure for assisting Department of Health & FW of the State Government, the Secretariat shall:
- Cause its experts and staff to be subjected to such operational arrangements with the Director (including seating and reporting arrangements) as to generate synergies.
 - Host external experts within its premises, and

6. FUNDS OF THE SOCIETY :

- 6.1 The funds of the Society shall consist of the following:
- Cash assistance received from the Government of India.
 - Grants-in-Aid from the State Government.
 - Grants and donations from trade, industry, institutions and individuals.
 - Receipts from disposal of assets.

The assets and liabilities of all Societies merged into the integrated Society shall be subsumed within the new Society.

7 ACCOUNTS AND AUDIT :

- 7.1 The Society shall cause regular accounts to be kept of all its monies and properties in respect of the affairs of the Society.
- 7.2 The Executive Committee may cause separate Bank Accounts in respect of each scheme or separate ledgers for each scheme under one account. In such an event, the Governing Body shall prescribe written instructions relating to submission of Statement of Expenditure (SoE) for each scheme. The separate Accounts of different Programmes could be audited by different auditors, and submitted to Programme Units separately. However, the DPMSU will ensure one integrated audit of the District Health Society.
- 7.3 The accounts of the Society shall be audited annually by a Chartered Accountant firm included in the panel of Comptroller and Auditor General of India or any qualified person appointed by the Government of India/State Government and any expenditure incurred in connection with such audit shall be payable by the Society to the Auditors. The Office of the Accountant General of State may also, at its discretion, audit the accounts of the society.
- 7.4 The Chartered Accountant or any qualified person appointed by the Govt. of India/State Government in connection with the audit of the accounts of the Society shall have the same rights, privileges and authority in connection with such audit as the Auditor General of the State has in connection with the audit of Government accounts and in particular shall have the right to demand the production of books, accounts, connected vouchers and other necessary documents and papers.
- 7.5 The report of such audit shall be communicated by the auditor to the Society, which shall submit a copy of the Audit Report along with its observation to the State Government.
- 7.6 The Auditor shall also forward a copy of the report to Chairperson of the Society and representative(s) of the Government of India on the Governing Board.

8 BANK ACCOUNT :

- 8.1 The account of the Society shall be opened in a nationalized bank approved by the Executive Committee or in a scheduled commercial bank as may be specified by the MOHFW, Government of India. All funds shall be paid into the Society's account with the appointed bank and shall not be withdrawn except through a cheque, bill note, other negotiable instruments or through electronic banking (e-banking) procedures signed/electronically authorized by such authorities of the Society Secretariat as may be determined by the Executive Committee.

8.2 The Society shall switch over to e-banking procedures as and when the MOHFW, Government of India directs the Society to do so as the principal donor to the Society.

8.3 The Executive Committee shall authorize the Executive Director (Mission Director) to operate the accounts of the Society in conjunction with another senior official as may be decided by the Committee.

9 ANNUAL REPORT :

A draft annual report and the yearly accounts of the Society shall be placed before the Governing Body at next meeting for consideration and approval. A copy of the annual report and audited statement of accounts as finally approved by the Governing Body shall be forwarded within six months of the closure of a financial year to the Chairperson of the Governing Body.

10 SUITS AND PROCEEDINGS :

10.1 The Society may sue or be sued in the name of Society through its Mission Director.

10.2 No suit or proceedings shall abate by the reason of any vacancy or change in the holder of the office of the Chairperson or Executive Secretary or any office bearer authorized in this behalf.

10.3 Every decree or order against the Society in any suit or proceedings shall be executable against the property of the Society and not against the person or the property of the Chairperson, Executive Secretary or any office bearer of the Society.

10.4 Nothing in sub-rule 10.3 above shall exempt the Chairperson, Executive Secretary or office bearer of the Society from any criminal liability or entitle him/her to claim any contribution from the property of the Society in respect of any fine to be paid by him/her on conviction by a criminal court.

11 AMENDMENTS :

11.1 The Society may alter or extend the purpose for which it is established and/or the Rules of the Society.

11.2 The proposition for any alteration or extension to the objectives of the Society and / or the Rules must be circulated to all members of the Governing Body and must be included in the written agenda of the ensuing meeting of the Governing Body or a special meeting of the Governing Body.

11.3 No amendments shall be effective unless the proposals in this regard have been endorsed by 3/5th of the members of the Governing body provided that such proposals have been endorsed in writing by the GOI representative on the Governing Body either during the meeting of the Governing Body or through a written communication.

12 DISSOLUTION :

12.1 The Governing Body may resolve to dissolve the Society by bringing a proposal to that effect in a special meeting to be convened for the purpose.

12.2 Upon the dissolution of the Society, all assets of the Society, after the settlement of all its debts and liabilities, shall stand reverted to the State Government for such purposes as it may deem fit.

13 MISCELLANEOUS :

13.1 CONTRACTS :

13.1.1 All contracts and other instruments for and on behalf of the Society shall be subject to the provisions of the Act, be expressed to be made in the name of the Society and shall be executed by the persons authorized by the Governing Body.

13.1.2 No contracts for the sale, purchase or supply of any goods and material shall be made for or on behalf of the Society with any member of the Society or his/her relative or firm in which any member or his/her relative is a partner or shareholder or any other partner or shareholder of a firm or a private company in which the said member is a partner or director.

13.2 COMMON SEAL :

13.2.1 The Society shall have a common seal of such make and design as the Governing Body may approve.

13.3 COMPLIANCE OF STATUTORY REQUIREMENTS :

13.3.1 The Society shall register itself with relevant government agencies for the purpose of complying with the statutory requirements including regulations governing deduction of tax at source relating to the staff, consultants and experts employed by it and/or consultancies/contracts awarded by it in the course of performance of its tasks.

13.4 GOVERNMENT POWER TO REVIEW :

13.4.1 Notwithstanding anything to the contrary contained in these Rules, the Ministry of Health & Family Welfare, Government of India, as the principal donor to the Society and may appoint one or more persons to review the work and progress of the Society and hold enquiries into the affairs thereof and report thereon, get the accounts of the society audited by the internal audit parties of the Chief Controller of Account, MOHFW, GOI and issue directions, as deemed appropriate, to the Society.

13.4.2 The Chairperson of the Governing Body shall have the right to nominate one or more persons to be part of the review / enquiries.

13.4.3 The progress review reports and / or enquiry reports shall be included in the written agenda of the ensuing meeting of the Governing Body.

BYE-LAWS OF THE STATE HEALTH SOCIETY

(A & N ISLANDS)

A Procurement Policy and Procedures :

Procurement of goods and services to be financed from funds received from Government of India shall be done as per the procedures recommended by the Government of India.

In all other cases, including where the GOI allows the State a choice, following order of preference shall be applied for procurement of goods and services:

Procurement of Goods:

- A. Rate contracts of the DGS&D, failing which,
- B. Rate contracts of other GOI agencies, failing which,
- C. Tender procedure as recommended by GOI.

Procurement of services: Procedure as recommended by the GOI.

B Procedure for release of funds and Financial Powers of the Office Bearers of the Governing / Executive Committee

I. Classification of Items of Expenditure and Financial powers of the bodies and office bearers of the Society

Type of expenditure	Authority	Extent of power
A. Approval of District /City plans	Governing Body / Executive Committee	Full powers
B. Release of funds for implementation of plans / allocations which have been approved by Governing Body / Executive Committee.	Mission Director	Full powers.
C. Expenditure proposals not covered under categories A and/or B		
C-1: Procurement of goods	Chairperson, Executive Committee	More than Rs. 5.00 lakh and upto Rs. 10.00 lakh per case.
C-2: Repairs and minor civil works		
C-3: Procurement of services for specific tasks including outsourcing of support services for the Directorate.	Mission Director	Upto Rs. 5.00 lakh per case.
C-4: Hiring of contractual staff, including sanction of compensation package.	Chairperson, Executive Committee	Full powers, provided that the contracts shall be for a period not exceeding 11 months at a time.
	Mission Director	Full powers in respect of Clerical / Class-IV equivalent positions, subject to compensation package approved by the Governing / Executive Committee, provided that the contracts shall be for a period not exceeding 11 months at a time.
C-5: Miscellaneous items not mentioned above such as hiring of taxis, hiring of auditors, payments relating to documentation and other day-to-day services, meetings and workshops, training, purchase of training material/ books and magazines, payment of TA/DA and honoraria to resource persons and guest speakers invited to meetings/workshops, and payment of TA/DA allowances for contractual staff and/or non-official invitees to Governing Body/Executive Committee meetings and/or Government/Society staff deputed to meetings outside the State.	Chairperson, Executive Committee	Upto Rs. 5.00 lakh at a time subject to a maximum of Rs. 50 lakh per annum.
	Mission Director	Upto Rs. 2.00 lakh at a time, subject to a maximum of Rs. 25.00 lakh per annum.

II Procedure for release of funds

The Society funds shall be drawn through cheques and/or bank drafts and/or through e-banking instruments as and when the same is introduced.

All cheques shall be signed by two authorised signatories of the Society Secretariat on the basis of a written authorisation from Executive Committee of the Society in this behalf.

Wherever releases are decided to be made through bank drafts and/or through e-banking, the authorisation letter to the bank shall be signed by the concerned authorised signatories.

Wherever, under e-banking procedures, releases are to be made through electronic authorisation to the bank to issue cheque/draft/account transfer on behalf of the Society, the electronic authorisation will be executed by the same two authorised functionaries of the Society Secretariat who have been authorised to sign cheques on the basis of a written authorisation in this behalf.

By Order

Sd/-
(Vikas Anand IAS)
Mission Director