



स्वास्थ्य (वै. शिक्षा) विभाग
29/5/18



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भारत सरकार

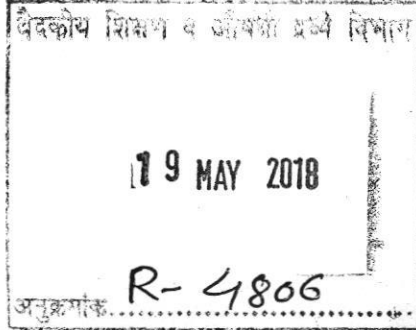
स्वास्थ्य एवं परिवार कल्याण मंत्रालय
निर्माण भवन, नई दिल्ली - 110011

Government of India

Ministry of Health & Family Welfare
Nirman Bhavan, New Delhi - 110011

LAV AGARWAL, IAS
Joint Secretary

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DO. No. Z. 14011/1/2017 - EMR
Dated the: 14th May, 2018

Dear Sir

Ministry of Health and Family Welfare (Govt. of India) is implementing a Central Sector Scheme "Human Resource Development for Emergency Medical Services" wherein, 140 Skill Centres would be established in medical colleges/ medical institutes across the country with the objective to impart hands-on skill based training in life saving measures to manage all kinds of medical emergencies to doctors, nurses and paramedics deployed in emergency departments of health facilities and ambulances. For this purpose a standardized course "National Emergency Life Support Course" has been developed by an eminent group of experts in critical care/ emergency medicine from across the country.

In this context, Medical Colleges/ Medical Institutes nominated by your State were inspected by a team from this Ministry. List of Colleges/ Institutes in your State which were approved for setting up of Skill Centre is enclosed.

As a pre-requisite to provide grant-in-aid for setting up Skill Centre in these medical colleges/ institutes, a Memorandum of Understanding (copy enclosed) needs to be signed by the Principal/ Dean/ Director of the approved Colleges and yourself on behalf of State Government. The MoU may then be forwarded to this Ministry for completing all formalities so that grant can be released to these colleges at the earliest.

An early response in this matter would be highly appreciated.

With regards

उ.स. (शिक्षण)
ड. स. (स्वास्थ्य) विभाग
29/5/18

Yours sincerely,

(Handwritten signature)

(Lav Agarwal)

Shri. Sanjay Deshmukh,
Secretary (Medical Education),
9th Floor, GT Hospital Campus,
New Mantralaya, A Wing,
LT Road,
Mumbai - 400001.

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Memorandum of Understanding (MoU) between Ministry of Health and Family Welfare (MoHFW), Government of India and the State Government /UT Administration/ Autonomous Institute in respect of

“Human Resource Development for Emergency Medical Services”

This Memorandum of Understanding is made onDay ofMonth,Year between the Ministry of Health & Family Welfare, (Emergency Medical Relief) represented by.....(Name),(Designation),(Address), which expression shall unless repugnant to the context or meaning thereof, include its successor – in – office and assigns of the FIRST PART.

AND

.....[Secretary/ Principal Secretary (Health/ Health and Family Welfare/ Medical Education)/ UT Administrator/ Director of Autonomous Institute], represented by Shri/Smt. /Ms.....(Name),(Designation),(Address), which expression shall unless repugnant to the context or meaning thereof, include it’s successor – in – office and assigns of the SECOND PART.

1. Preamble

1.1 Worldwide Emergency Medical Services (EMS) got evolved to reflect change from a simple transportation system ferrying the patient to one where patients are provided emergency medical care with basic or advanced life support system support during transportation.

1.2 In India, the Emergency Medical Services is a relatively new concept. The National Rural Health Mission [NRHM] (2005) took initiatives to replicate a model of pre-hospital basic care and transportation developed by Emergency Medicine Research Institute (EMRI), a Non-Governmental Organization.

1.3 Key constraints identified by an Expert Group constituted in Dte. General of Health Services, Ministry of Health and Family Welfare Government of India include absence of medical interventions during transportation due to ineffective legal backup, non integration with hospital systems; lack of appropriately functioning emergency departments in hospitals, lack of trained personnel to attend to patients requiring emergency care and inadequate referral. With such constraints, the ambulance services provide mere transportation of patients.

1.4 To supplement the efforts being made under NHM, for a state of art EMS that would cater to the needs of both urban and rural India. The efforts in the 12th and 13th Plan would be to provide for a strong legal, institutional and operational framework for

Emergency Medical Services in India. Whereas the setting up of legal and institutional framework, infrastructure & communication strengthening would be addressed under NHM, the human resource component would be dealt by Emergency Medical Relief Division of Directorate General of Health Services, Ministry of Health and Family Welfare, Government of India.

1.5 Objective of this Programme/ Scheme "Human Resource Development for Emergency Medical Services" would be to: (i) Standardization and establishment of Skill Centres would impart skill based training for different categories of health functionaries, (ii) Development of standardized training curriculum in emergency medicine for health functionaries (doctors, nurses and para - medics) working in emergency departments at sub - district, district and state level, (iii) Provide skill based training on emergency life support to the health functionaries in emergency departments and those providing pre - hospital care in ambulances.

1.6 This would be an effort by Ministry of Health and Family Welfare Government of India, towards 'Make in India' to replace multitude of courses like Advanced Trauma Life Support Course, Advanced Cardiac Life Support Course, Advanced Paediatric Life Support Course etc. which are copyright courses of foreign organisations.

2. Implementation Strategy

2.1 Implementation of this Scheme/ Programme would be done by the following:

- 2.1.1 Skill centres would be established, at - least one in each State / UTs (total 140) to support National Emergency Life Support Course for doctors, nurses and Pre - hospital Emergency Life Support Course and Basic Life Support Course for para - medical personnel.
- 2.1.2 Each Skill Centre will have Skill Stations to impart skills on life saving interventions. These skill centres would be equipped with mannequins/ models/ simulators and other equipments that would impart skills in airway, breathing, circulatory support including paediatric and cardio pulmonary resuscitation.
- 2.1.3 Existing infrastructure in Medical Colleges/ other tertiary/ secondary care institutions would be suitably modified for accommodating the skill centres and facility for training. Norms for establishing and verifying various infrastructure and list of equipments and consumables would be finalized after consultation with leading experts in the field of emergency care in the country which would be provided to the States/UTs/ Autonomous Institutes.
- 2.1.4 Skill Centres would be established in State Medical Colleges/ Institutions, Autonomous Medical Colleges only with prior concurrence of State/ Central/ UT Government. Views

of respective State/ UT Governments would be incorporated while setting up the Skill Centres.

2.1.5 Each centre will be provided with a course coordinator for running the courses and upkeep of the equipment.

2.1.6 The Skill Centre will run the following courses namely, (i) National Emergency Life Support Course for doctors, (ii) National Emergency Life Support Course for nurses, (iii) Pre – Hospital Emergency Life Support Course for para – medical personnel, (iv) Basic Life Support Course for para – medical and ambulance personnel for the trainees nominated by the State/ Central Government.

2.2 And whereas the following Medical College/ Institution..... State/ UT/ Autonomous Institute has agreed for setting up of Skill Centre and training of doctors, nurses and para – medical personnel of the State.
Name of the Medical College/ Institute:

2.3 Now, therefore, the parties to this Memorandum of Understanding (hereinafter referred to as MoU) have agreed as set out here in below:

3. Duration of MoU

3.1 This MoU will be operative with effect fromi.e. the date of it's signing by the parties concerned, and will remain in force till 31st March 2020 or till renewal through mutual agreement, whichever is later.

4. Financing Norms

4.1 The proposed grant – in – aid will be 100% shared by the Ministry of Health and Family Welfare, Government of India for setting up Skill Centres and training of doctors, nurses and para – medical personnel of the State/ Region. Funds would be transferred to the official account of Medical College/ Institute under the State Government/ UT Administration of official account of Autonomous Institute as the case may be.

4.2 One time grant – in – aid of would be provided for establishing the Skill Centre and for procuring equipments, other supplies and materials (consumables) as specified by DGHS that would include one time annual cost of consumables. Total cost of establishing Skill Centre, equipping them, including one time annual cost of consumables would be disbursed in two instalments.

4.3 Release of First Instalment

Ministry of Health and Family Welfare, Government of India will release first instalment for setting up of Skill Centre after inspection of the Medical College/

Institution identified by the State Government/ UT Government or Autonomous Institute which has been identified/ given concurrence for setting up Skill Centre, to confirm it's suitability and thereafter, signing of MoU between the 'Parties' concerned.

4.4 Release of Second Instalment

Second Instalment for purchase of equipments, other materials and consumables as approved by the Technical Specification Committee under Directorate General of Health Services, Ministry of Health and Family Welfare, Government of India would be released after inspection of the Skill Centre by a group of experts nominated by Ministry of Health and Family Welfare, Government of India.

4.5 Submission of Statement of Expenditure, Utilisation Certificate and Audit Report:

The Medical College/ Institute (Name.....) under State Government/ UT Administration/ Autonomous Institute would submit Statement of Expenditure/ Utilisation Certification and Audit Report duly authorised by the concerned State Government/ UT Administration on yearly basis showing utilisation of fund received for setting up of Skill Station (Non – Recurring), Purchase of Equipments and Furniture (Non – Recurring) and training given (Recurring).

4.6 Breakup of Grant – in - Aid :

4.6.1 Setting up of Skill Centre using pre – fabricated structures in readily available space in pre – existing RCC framed normal building: Rs. 1.10 Crores (One Crore Ten Lakhs only).

OR

Setting up of Skill Centre using pre – fabricated structures on terrace of existing building: Rs. 1.40 Crores (One Crores Forty Lakhs only).

4.6.2 Major equipments for Skill Stations: Rs. 1.31 Crores (One Crore Thirty One Lakhs only).

4.6.3 Minor Equipments for Skill Stations: Rs. 88,000/- (Eighty Eight Thousand only).

4.6.4 Furnitures for Skill Centre: Rs. 15,40,000/- (Fifteen Lakhs Forty Thousand only).

4.6.5 One time grant – in – aid for materials, supplies and drugs (Consumables) for Training: Rs. 3,00,000/- (Three Lakhs only).

4.6.6 Salary of One Course Co – ordinator for One Skill Centre: Rs. 40,000/- (Forty Thousand only) per month i.e. Rs. 4,80,000/- (Four Lakhs Eighty Thousand only) per annum for 5 years would be given year wise.

5. Sharing of Expenditure

Ministry of Health and Family Welfare, Government of India would provide funds to the Medical College/ Institute under the State Government/ UT Administration/ Autonomous Institute, the expenditure to be incurred as per item no.s 4.6.1, 4.6.2, 4.6.3, 4.6.4, 4.6.5, 4.6.6.

6. Commitment of Government of India

Ministry of Health and Family Welfare, Government of India would provide fund and initial training to Master Trainers of the State/ UT/ Autonomous Institute.

7. Commitment of Medical College/ Institute and the concerned State Government/ UT Administration/ Autonomous Institute

7.1 Provide free readily builtup space/ terrace of existing building with minimum built up area of 405 square metres in identified medical college/ tertiary care institution, to setup Skill Centre.

7.2 Provide free uninterrupted water and power supply to the Skill Centre.

7.3 Provide free security to the Skill Centre.

7.4 Ensure that the Skill Centre is set up within a time frame of Six months from the date of signing of MoU.

7.5 Provide nominations of doctors, nurses and para – medical personnel for training.

7.6 Ensure that grants provided are used only for the purpose of agreed activities as listed in para 2.1.6, and are not diverted for meeting any other expenditure.

7.7 No commercial training activity such as those run by professional bodies/ organisations/ associations will be allowed to be held at the Skill Centre without prior approval of Ministry of Health and Family Welfare, Government of India. Under no circumstances, the mandate of the Skill Centre to provide training for courses listed in para 2.1.6 would be altered/ modified by the State Government/ UT Government/ Autonomous Institute.

7.8 Any escalation of cost due to delay in implementation will be the liability of the State Government.

7.9 The State Government/ UT Administration/ Autonomous Institute shall ensure that the Medical College/ Institute submits utilisation certificate to the Ministry of Health and Family Welfare, Government of India as per the conditions stipulated in the General Financial Rules 2017. Ministry of Health and Family Welfare, Government of India reserves the right to request the Comptroller and Auditor General (CAG) of India to audit the accounts and countersign the certificate through the State Accountant General concerned.

7.10 Submit a quarterly progress report on the development and functioning of the Skill Centre as per the prescribed proforma.

8. Other Commitments by the State Government/ UT Administration/ Autonomous Institute:

- 8.1 Shall take over responsibility of running the Skill Centre completely after 5 (Five) years of the Skill Centre becoming fully functional.
- 8.2 Recurring cost of drugs, supplies and materials (Consumables) required for training under the courses listed at para 2.1.6 would be provided by the State Government/ UT Government/ Autonomous Institute as the case may be.
- 8.3 Doctors, Nurses and Para – medical personnel trained in the Skill Centres may be suitably deployed.
- 8.4 Technical Monitoring Committee/ Monitoring Committee or Representative of Directorate General of Health Services, Ministry of Health and Family Welfare, Government of India will be allowed to inspect the Skill Centres during any time of the year and allowed access to such information as may be necessary to make an assessment of the progress of the activities.
- 8.5 Funds disbursed by Ministry of Health and Family Welfare, Government of India will be liable to statutory audit by the Comptroller and Auditor General of India.
- 8.6 Identify a Nodal Officer (Senior faculty member/ Doctor) in the Medical College/ Institution where the Skill Centre would be setup to look after the administrative, financial and training aspects of the Scheme.
- 8.7 Appoint a Course – Coordinator with suitable qualification (preferably B. Sc/ GNM Nursing) and experience, to keep all items of the Skill Centre under safe custody, draw up training calendar and assist the Nodal Officer in conducting training of doctors, nurses and para – medical personnel.

9. Monitoring and Supervision

- 9.1 Progress of implementation of the Scheme shall be reviewed on a quarterly basis. For this purpose, Technical Monitoring Committee will be setup by Directorate General of Health Services, Ministry of Health and Family Welfare, Government of India.
- 9.2 Quarterly progress report (physical and financial) will be submitted as per guidelines.

10. Fund Flow Arrangement

- 10.1 Funds will be transferred to the official account of medical college/ institute under the relevant budget head for implementation and operationalisation of the Scheme for item no.s 4.6.1., 4.6.2., 4.6.3, 4.6.4, 4.6.5. 4.6.6 in a phased manner.

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10.2 Funds will be liable to statutory audit by the Comptroller and Auditor General of India.

10.3 Funds will be released through electronic procedure.

11. Suspension/ Termination of MoU

Non – compliance of the commitments and obligations set hereunder and/ or upon failure to make satisfactory progress may require Directorate General of Health Services, Ministry of Health and Family Welfare, Government of India to review the assistance committed through this MoU leading to suspension/ termination of the MoU thereof. In the event of cancellation of MoU, funds released and interest accrued shall be returned to Pay and Accounts Office of Ministry of Health and Family Welfare, Government of India.

Signed this day, theof Ministry of Health and Family Welfare, Government of India 2018.

<p>(.....)</p> <p>Signature with official stamp of Principal/ Director/ Dean/ Head of Medical College/ Institute under State Government/ UT Administration.</p>	
<p>For and on behalf of State Government of (.....)/ UT Administration of</p> <p>Autonomous Institute</p>	<p>For and on behalf of the President of India, Government of India (Ministry of Health and Family Welfare).</p>
<p>Secretary/ Prinicpal Secretary (Medical Education/ Health and Family Welfare)/ UT Administrator/ Director of Autonomous Institute (Signature with official stamp)</p>	<p>Joint Secretary, Ministry of Health and Family Welfare, Government of India</p>