

# INDEX

## COMMUNICATIONS FROM PMSSY SECTION, MoHFW - 2023

SL. NO.	DATE OF COMMUNICATION	PARTICULARS	PAGE NO.
1.	12.01.2023	Standing calendar for important meetings	1-7
2.	24.01.2023	Cyber-attacks in health sector-advisory	8-9
3.	02.03.2023	Instruction regarding conduction of meetings of Institute Body, Governing Body and Standing Finance Committee	10-14
4.	24.03.2023	Advisory to avoid system overload during last hours of end of FY 2022-2023 and Monitoring of status of bills by Pr. CCAs/CCAs/CAs of Ministries/Departments	15-18
5.	31.03.2023	Developing a nationwide ecosystem for the care of children with Congenital Heart Disease	19-26
6.	27.04.2023	Delegation of financial powers of Directors/Executive Director to Deputy Director (A) and Medical Superintendents of new AIIMS	27-29
7.	28.06.2023	Compliance of the directions of Hon'ble Supreme Court in Civil Appeal No. 2482 of 2014	30-102
8.	06.07.2023	Academic allowance granted to Lecture/Nursing Faculty	103-106
9.	25.07.2023	Request for No Objection Certificate for applying for part-time job	107-110
10.	07.08.2023	Guidance Note on PIP for ECRP II as on 14.07.2023	111-189
11.	07.08.2023	Grant of Learning Resource Allowance and Academic Allowance to Director/Executive Director of new AIIMS	190-192
12.	17.08.2023	Promotion of Indigenously develop medical technologies in Public Procurement Policy to give preferences to domestic manufacture	193-206
13.	17.08.2023	Enhancement of remuneration to contractual Assistant Professors in new AIIMS	207-209
14.	24.08.2023	Compliance in respect to the guidelines of CERT-IN on Information Security Practices	210-214
15.	12.09.2023	Facilities extended to the contractual employees of the Ministry/Department/Autonomous Bodies	215-219
16.	15.09.2023	Engagement of consultants in New AIIMS-INSTRUCTIONS	220-223
17.	20.09.2023	SAP Guidelines 2023-24	224-234



# **INDEX**

## **COMMUNICATIONS FROM PMSSY SECTION, MoHFW - 2023**

SL. NO.	DATE OF COMMUNICATION	PARTICULARS	PAGE NO.
18.	27.09.2023	Special Campaign 3.0 for institutionalizing Swachhata and minimizing pendency in Government offices from 2nd October, 2023 to 31th October, 2023	235-238
19.	27.09.2023	Organizing of a massive cleanliness drive led by people as part of Swachhata Pakhwada-Swachhata Hi Seva (SHS) 2023 across the country	239-249
20.	29.09.2023	Proposals regarding court cases where the opinion/approval of the Ministry is required	250-252
21.	09.10.2023	Timely submission of draft minutes of the SFC meeting	253-256
22.	10.10.2023	Use of drones in Healthcare- Draft Documents of Notice Inviting Tender for use of Drones in Public Healthcare Facilities	257-320
23.	16.10.2023	Upgradation of Posts in autonomous bodies	321-322
24.	19.10.2023	General Instruction to Ministries / Departments for acquisitions / purchase of immovable property other than land in Delhi / NCR	323 - 326
25.	25.10.2023	Payment of Gratuity Act, 1972 and the rules made thereafter	327 – 328
26.	07.11.2023	Implementation of e-offices in Attached Offices / Subordinate Offices / Autonomous Bodies / CPSEs of the MoHFW	329 - 336
27.	07.11.2023	Regularisation of services of contractual employees	337 – 345
28.	08.11.2023	Fixation of pay of retired Government Servants	346 – 349
29.	13.11.2023	Instructions relating to writing of APARs of Officers	350 – 354
30.	15.11.2023	Implementation of e-offices in Attached Offices / Subordinate Offices / Autonomous Bodies / CPSEs of the MoHFW	355 – 365
31.	20.11.2023	Guidelines for Cyber Security Audit vide DO Letter dated 14.11.2023	366 – 367
32.	21.11.2023	Viksit Bharat Sankalp Yatra	368 – 371
33.	21.11.2023	Annual Capacity Building Plan (ACBP) under Mission Karmayogi	372 – 379
34.	22.11.2023	Implementation of Technical Resignation and availing the benefits of past services	380 - 383
35.	23.11.2023	Various measures taken by Department of Legal Affairs for reforming arbitration eco-system by facilitating efficacious resolution of disputes by recourse to Alternative Dispute Resolution (ADR)	384 – 405

**INDEX**  
**COMMUNICATIONS FROM PMSSY SECTION, MOHFW - 2023**

SL. NO.	DATE OF COMMUNICATION	PARTICULARS	PAGE NO.
36.	24.11.2023	Cyber Security	406 – 422
37.	29.11.2023	Implementation of Technical Resignation and the benefits of past services	423 – 427
38.	02.12.2023	Cyber Security Reminder – II	428 – 432
39.	19.12.2023	Instructions received from Department of Legal Affairs for engagement / appointment of Government Counsel from the panel of Union of India	433 – 439
40.	20.12.2023	Pay Fixation of retired Government Servants	440 – 445
41.	27.12.2023	Implementation of CCS (INPS) Rules, 2021 vide G.S.R. 227 (E) dated 30.03.2021 issued by the Department of Pension and Pensioner's Welfare and granting permission to open portal for withdrawal from NPS in the case of death of Subscribers covered under CCS (INPS) Rules, 2021	446 - 449



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Standing Calendar for the important meetings reg.

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 1:24 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Thu, Jan 12, 2023 at 3:43 PM

Subject: Standing Calendar for the important meetings reg.

To: <director@aiims.edu>, <pgimer-chd@nic.in>, <director@jipmer.edu.in>, Director <director@aiimsbhopal.edu.in>, <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaaiimsrbl@gmail.com>, <director@aiimsmangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>

Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, <siddhartha.nandy@gov.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <prasad.rabindra@nic.in>, <vaibhav.bajaj@gov.in>, Cc: <dinesh.kumar14@nic.in>, <k.balasubramanian38@nic.in>, <in.jamir83@nic.in>, <dev.gothal@gov.in>, <tanveet.kaur@gov.in>

Sir/Madam

Please find the attachment.

Regards

PMSSY-IV Section  
Ministry of Health and Family Welfare

---

### 2 attachments

 **Letter Standing Calender.pdf**  
65K

 **Encl Standing Calender.pdf**  
2865K

I/3565038/2023

No. Z.28015/03/2023-PMSSY-IV  
Government of India  
Ministry of Health and Family Welfare  
PMSSY-IV Section

\*\*\*\*

3rd Floor, IRCS Building, New Delhi

Dated the January, 2023

To

- (i) The Director, AIIMS, New Delhi
- (ii) The Director, PGIMER, Chandigarh
- (iii) The Director, JIPMER, Puducherry
- (iv) The Directors/Executive Directors of all new

AIIMS

**Sub: Standing Calendar for the important meetings - reg.**

Madam/Sir,

I am directed to refer to the subject cited above and to forward herewith a copy of Standing Calendar for the important meetings received from AIIMS Bhopal for kind reference with a suggestion that all Institutes may kindly formulate a similar calendar to ensure timely conduct of meetings of various committees/ bodies of the Institute.

Yours faithfully,

Signed by Dinesh Kumar

Date: 06-01-2023 16:39:01

(Dinesh Kumar)

Joint Director

Tele : 011-23061730

**Encl: As above**

Copy to:

- (i) DD (Admin), All New AllMS.
- (ii) Under Secretary, INI-I/INI-II Section, MoHFW

Copy for information to: PS to Hon'ble HFM

I/3565038/2023



Email

Anil Radadiya

**(DIR-2050) Standing Calendar for the important meetings of AIIMS, Bhopal reg.**

**From :** director@aiimsbhopal.edu.in

Tue, Dec 20, 2022 06:25 PM

**Subject :** (DIR-2050) Standing Calendar for the important meetings of AIIMS, Bhopal reg.

1 attachment

**To :** Dr Mansukh Mandaviya <india-hfm@gov.in>, Mansukh Mandaviya <mansukh.mandaviya@sansad.nic.in>

**Cc :** president@aiimsbhopal.edu.in, yk ykgupta <yk.ykgupta@gmail.com>, Anil Radadiya <anil.radadiya@gov.in>, vivek tankha <vivek.tankha@gmail.com>, Vivek Krishna Tankha <vivektankha.mp@sansad.nic.in>, vivektankha mp <vivektankha.mp@gmail.com>, rkbhargava4@gmail.com, udaypratap narsinghpur <udaypratap\_narsinghpur@yahoo.com>, Mr Rajesh Bhushan <secyhfw@nic.in>, Iqbal Singh Bains <cs@mp.nic.in>, Prof (Dr) Atul Goel <dghs@nic.in>, Jaideep Kumar Mishra <asfa-mhfw@nic.in>, sunilrewa@yahoo.com, vcoffice@rgpv.ac.in, director@iiti.ac.in, ardo@iiti.ac.in, venkatraya prabhu <venkatraya.prabhu@manipal.edu>, sanjayvanita@yahoo.com, vivekmalik98@gmail.com, drshivssharma@gmail.com, srkbuz@ymail.com, kavitakhanna108@gmail.com, Office of Dr. Manohar Agnani <as-agnani@gov.in>, ANKITA MISHRA BUNDELA <ankita.edu@nic.in>, dydir@aiimsbhopal.edu.in, directoroffice@aiimsbhopal.edu.in

Hon. Minister  
has desired that  
the calendar may  
be circulated to  
all AIIMS, and  
INI Institutes for  
their reference

**Respected Sir,**

With reference to the above subject and in reference to recent Chintan Shivir, It is for your kind information that the undersigned has facilitated various backlogs meetings of AIIMS, Bhopal i.e., Academic Committee, Standing Finance Committee, Institute Body and Governing Body in last 2-3 months.

Further, after deliberations and confirmation of the Governing Body of AIIMS, Bhopal, the Institute has confirmed a Standing Calendar for the important meetings of AIIMS, Bhopal for proper functioning and carrying out the mandate of the Institute.

In continuation to the above, I hereby extend the Standing Calendar to your goodself for kind perusal and information, please.

**Enclosure:** as above.

Thanking you,

<https://webmail.nic.in/h/printmessage?id=32322&tz=Asia/Kolkata&xim=1>

1/2


प्रो. (डॉ.) अजय सिंह/ PROF. (DR.) AJAY SINGH

कार्यपालक निदेशक एवं सी.ई.ओ./ Executive Director and CEO  
अखिल भारतीय आयुर्विज्ञान संस्थान / All India Institute of Medical Sciences

स्वास्थ्य एवं परिवार कल्याण मंत्रालय/ Ministry of Health & Family Welfare  
भोपाल - 462020, मध्य-प्रदेश/ Bhopal - 462020, Madhya Pradesh

दूरभाष/ Phone: 0755-2672 317, 2672 329, 2672 111

---

 **DIR\_2050.pdf**  
310 KB

---





अखिल भारतीय आयुर्विज्ञान संस्थान

साकेत नगर, भोपाल - 462 020

All India Institute of Medical Sciences

Saket Nagar, Bhopal - 462 020

(An Autonomous Institute under MoHFW, Govt. of India)

Phone : 0755 - 2672317, 2672329

Fax : 0755 - 2672337

E-Mail : director@aiimsbhopal.edu.in

Web: www.aiimsbhopal.edu.in

प्रो. (डॉ.) अजय सिंह

कार्यपालक निदेशक एवं सी.ई.ओ.

Prof. (Dr.) AJAI SINGH

MS, MCh, FAMS, MNMS, FICS, FSS, FPO

Professor, Paediatric Orthopedics

Executive Director & CEO

4002

No. DIR/AIIMS-BPL/STDNG/CAL/2022/2050

Dated: 19.12.2022

To,

Dr. Mansukh Mandaviya  
Hon'ble Union Minister  
Ministry of Health & Family Welfare  
Government of India  
348-A, Nirman Bhawan  
Maulana Azad Road, New Delhi-110011



2954052  
29/12/22

Sub.: Standing Calendar for the important meetings of AIIMS, Bhopal reg.-

JS(AMB) Respected Sir,  
Any

With reference to the above subject and in reference to recent Chintan Shivir, It is for your kind information that the undersigned has facilitated various backlogs meetings of AIIMS, Bhopal i.e., Academic Committee, Standing Finance Committee, Institute Body and Governing Body in last 2-3 months.

Further, after deliberations and confirmation of the Governing Body of AIIMS, Bhopal, the Institute has confirmed a Standing Calendar for the important meetings of AIIMS, Bhopal for proper functioning and carrying out the mandate of the Institute.

In continuation to the above, I hereby extend the Standing Calendar to your goodself for kind perusal and information, please.

Thanking you, with warm regards.

Enclosure: as above

Dr. JS(DIC) leg 30/12

Yours sincerely  
Prof. (Dr.) AJAI SINGH

Copy to:

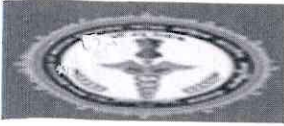
1. The Hon'ble President, AIIMS, Bhopal
2. All members of IB/GB/SFC/SEC/ AC of AIIMS, Bhopal
3. The Secretary, MoHFW, Govt. of India, New Delhi
4. The PS to Hon'ble Minister, MoHFW, Govt. of India, New Delhi
5. The Additional Secretary, MoHFW, Govt. of India, New Delhi
6. The Deputy Director (Admin.), AIIMS, Bhopal
7. File



## AIIMS BHOPAL ANNUAL MEETING CALENDAR

<b>J A N</b>	Governing Body (GB) Institute Body (IB)
<b>F E B</b>	Dean's Committees
<b>M A R</b>	Staff Council Hospital Management Board (HMB)
<b>A P R</b>	Academic Committee (AC) Standing Finance Committee (SFC)
<b>M A Y</b>	Governing Body (GB)
<b>J U N</b>	Standing Estate Committee (SEC)

<b>J U L</b>	Dean's Committees Staff Council Hospital Management Board (HMB)
<b>A U G</b>	Standing Finance Committee (SFC) Curriculum Committee
<b>S E P</b>	Governing Body (GB) Dean's Committees
<b>O C T</b>	Institute Body (IB) Staff Council Hospital Management Board (HMB)
<b>N O V</b>	Academic Committee (AC)
<b>D E C</b>	Standing Finance Committee (SFC)



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Cyber-attacks in health sector – Advisory– reg.

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 1:23 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Tue, Jan 24, 2023 at 4:53 PM

Subject: Cyber-attacks in health sector – Advisory– reg.

To: Director <director@aiimsbhopal.edu.in>, <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaaiimsrbl@gmail.com>, <director@aiismangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiismangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, <siddhartha.nandy@gov.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <sanjay.bahl@gov.in>, Cc: <dinesh.kumar14@nic.in>, <k.balasubramanian38@nic.in>, <in.jamir83@nic.in>, <dev.gothal@gov.in>

Sir/Madam

Please find the attachment.

Regards

PMSSY-IV Section  
Ministry of Health and Family Welfare

 Letter Cyber Attack.pdf  
68K



I/3563119/2023

No. A-27023/33/2022-PMSSY-IV  
Government of India  
Ministry of Health and Family Welfare  
PMSSY-IV Section  
\*\*\*\*

3<sup>th</sup> Floor, IRCS Building, New Delhi  
Dated the January, 2023

To,

Directors/Executive Directors of all new AIIMS

**Sub: Cyber-attacks in health sector – Advisory– reg.**

Sir,

I am directed to refer to this Division's letter of even number dated 22.12.2022 forwarding a copy of letter No. 10(30)/2022-CERT-In dated 08.12.2022 received from Director General (CERT-In), Ministry of Information and Technology along with advisory on the above mentioned subject.

2. In this regard, all new AIIMS are herewith directed for necessary compliance as under:-
  - a) To adhere strictly to CERT-In advisory regarding Cyber Security issues in Healthcare Sector and periodically submit compliance report related to security auditing and implementation of security recommendations on cyber security in accordance with CERT-In advisory.
  - b) To nominate a Chief Information Security Officer (CISO) or a Point of contact for IT Security and to provide the details to CERT-In under intimation to this Ministry.
3. This issues with the approval of competent authority.

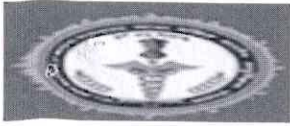
Yours faithfully,

(**Imtichuba N. Jamir**)  
Under Secretary to the Govt. of India  
Tel.011-23736977

Copy to:

1. O/o Director General, Indian Computer Emergency Response Team (CERT-In), Ministry of Electronics & Information Technology, Electronic Niketan, 6, CGO Complex, New Delhi -03
2. DD (A) of all new AIIMS

Signed by Imtichuba N  
Jamir  
Date: 23-01-2023 17:20:44  
Reason: Approved



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## **Fwd: Instruction regarding conduction of meetings of Institute Body, Governing Body and Standing Finance Committee.**

1 message

**DDA AIIMS PATNA** <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 1:20 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Thu, Mar 2, 2023 at 1:47 PM

Subject: Instruction regarding conduction of meetings of Institute Body, Governing Body and Standing Finance Committee.

To: Director <director@aiimsbhopal.edu.in>, <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <director@aiimsmangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>, dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, <siddhartha.nandy@gov.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, ddaaiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, ddaaiimsrajkot <dda.aiimsrajkot@gmail.com>, Rakesh Kumar <rakeshkumar7123@yahoo.in>

Cc: Cc: <dinesh.kumar14@nic.in>, <k.balasubramanian38@nic.in>, <in.jamir83@nic.in>, <Mary.thomas38@nic.in>

Sir/Madam


Please find the attachment

Regards

PMSSY-IV Section  
Ministry of Health and Family Welfare

**2 attachments**

 **Encl ALL AIIMS.pdf**  
3412K

 **Adobe Scan 2 Mar 2023.pdf**  
560K





**NILAMBUJ SHARAN**

Economic Adviser

Tel. : 011-23061790 / 1887

E-mail : nilambuj.sharan@nic.in



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

D.O. No. Z-28016/169/2020-PMSSY-IV

Dated : 02 May, 2022

*Dear Sir / Madam,*

Please refer to this Ministry's letter of even no. dated 27<sup>th</sup> October, 2020 (Copy enclosed) regarding frequency of conducting SFC/GB/IB meetings of the AIIMS under PMSSY. It is reiterated that the provisions under AIIMS Regulations with regard to holding meetings of IB and GB should be strictly adhered. It is further suggested that meetings of SFC should be held on quarterly basis so that important issues are brought before the Committee in timely manner for discussion and appropriate decision.

Further, it has been noticed that Agenda Notes for the meetings are circulated just 3-4 days before the scheduled date(s) of the meetings, thus denying enough time to Members and the Ministry to study / examine the issues proposed for discussion. To avoid such a situation, ideally, meeting dates should be fixed only after finalisation of Agenda Notes. In any case, final Agenda Notes for the meetings of SFC, GB and IB should be circulated to all the Members at least 10 days in advance of the scheduled date of meeting. All the Institutes are requested to please ensure this.

*With regards,*

Yours sincerely,

*N Sharan*

(Nilambuj Sharan)

Directors/EDs of AIIMS at Bhopal, Bhubaneswar, Jodhpur, Patna, Raipur, Rishikesh, Nagpur, Kalyani, Mangalagiri, Gorakhpur, Raebareli, Bathinda, Deoghar, Bilaspur, Rajkot, Guwahati, Vijaypur (Jammu), Awantipora (Kashmir), Bibinagar, Madurai



Z-28016/169/2020-PMSSY-IV  
Government of India  
Ministry of Health & Family Welfare  
PMSSY Division

\*\*\*\*

3<sup>rd</sup> Floor, IRCS Building, New Delhi

Dated : 27th October, 2020

To,

The Director, AIIMS Bhopal  
The Director, AIIMS Bhubaneswar (w.r.t. AIIMS Guwahati also)  
The Director, AIIMS Jodhpur (W.r.t. AIIMS Rajkot also)  
The Director, AIIMS Patna  
The Director, AIIMS Raipur  
The Director, AIIMS Rishikesh (w.r.t. AIIMS Vijaypur & AIIMS Awantipora, J&K also)  
The Director, AIIMS Mangalagiri  
The Director, AIIMS Nagpur  
The Director, PGIMER Chandigarh (as mentor institute of AIIMS Bilaspur)  
The Director, JIPMER Puducherry (as mentor institute of AIIMS Madurai)  
The Executive Director, AIIMS Raebareli  
The Executive Director, AIIMS Bathinda  
The Executive Director, AIIMS Bibinagar  
The Executive Director, AIIMS Gorakhpur  
The Executive Director, AIIMS Kalyani  
The Executive Director, AIIMS Deoghar

Subject : Frequency of conduction of meetings of Institute Body, Governing Body and Standing Finance Committee

Madam/Sir,

I am directed to refer to AIIMS Regulations, 2019 regarding the frequency of conduction of meetings of Institute Body, Governing Body and Standing Finance Committee which states that:-

a. Conduction of Institute Body meeting [Regulation 4 (1)]

The Institute Body shall meet as may be considered necessary by the President for the transaction of the business of the Institute but shall meet at least twice a year.

b. Conduction of Governing Body meeting [Regulation 8 (1)]

The Governing Body may meet as often as may be considered necessary by the Chairman for transaction of its business, but shall ordinarily meet at least thrice a year preferably in the month of January, May and September.

c. Conduction of Standing Finance Committee meeting

The Standing Finance Committee may meet as often as may be considered necessary ensuring that the matters mentioned in AIIMS Rules are taken up in timely manner .

2. Further, as per para (6) of AIIMS Rules, 2019 the following matters shall be referred to the Standing Finance Committee which shall consider them and make its recommendations thereon, namely: —

- (a) annual accounts showing the receipts and expenditure of the Institute together with the audit report thereon;
- (b) budget estimates showing the estimated receipts and expenditure of the Institute;
- (c) all proposals for the creation of new posts;
- (d) all financial matters pertaining to the Institute; and
- (e) all matters relating to the invitation and acceptance of tenders.

3. In view of the above, it is requested to adhere to the guidelines for holding meetings of IB, GB and SFC on regular intervals as per AIIMS Regulations, 2019.

Yours faithfully,

Digitally signed by SHAMBHU  
KUMAR  
Date: Tue Oct 27 11:05:25 IST  
2020  
Reason: Approved

(Shambhu Kumar)  
Under Secretary to the Govt. of India  
Tel : 011- 23736977



अंकिता मिश्रा बुंदेला, भा.प्र.से.  
संयुक्त सचिव

Ankita Mishra Bundela, IAS  
Joint Secretary



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली - 110011  
Government of India  
Ministry of Health & Family Welfare  
Nirman Bhawan, New Delhi - 110011

D.O. No. Z.28016/169/2020-PMSSY-IV

Dated March 2023

*Dear Colleague,*

Please refer to this Ministry's letter of even number dated 27.10.2020 and D.O. letter dated 02.05.2022 (Copy enclosed) regarding frequency of conducting SFC/GB/ IB meetings of the AIIMS under PMSSY Division as per AIIMS Regulations. It was inter-alia advised to send Agenda Notes for the meetings of SFC, GB and IB at least 10 days in advance of the scheduled date of meeting.

However, it has been noticed that in spite of specific request some AIIMS are forwarding Agenda notes for Standing Finance Committee only 3-4 days before the meeting and often the Agenda Notes lack complete information on the subject. As a result, the PMSSY Division finds it extremely difficult to comprehensively appraise the proposals to enable informed decision making on the subject.

In view of the above I will appreciate if you can ensure that the SFC Agenda Notes are submitted to the Ministry at least 10 days in advance of the scheduled date of meeting to enable effective appraisal and informed decision making on issues of vital importance to the Institute.

*With Regards*

Encl. As above.

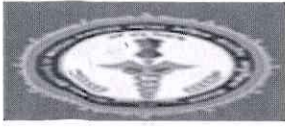
Yours sincerely,

*Ankita*  
02/03/23  
(Ankita Mishra Bundela)

To

Director/Executive Directors of all new AIIMS





Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

**Fwd: Advisory to avoid system overload during last hours of end of FY 2022-23 and Monitoring of status of bills by Pr. CCAs/CCAs/CAs of Ministries/Departments-reg**

1 message

**DDA AIIMS PATNA** <dda@aiimspatna.org>

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Sat, Dec 27, 2025 at 1:19 PM

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **PMSSY V** <pmssysection5@gmail.com>

Date: Fri, Mar 24, 2023 at 3:22 PM

Subject: Advisory to avoid system overload during last hours of end of FY 2022-23 and Monitoring of status of bills by Pr. CCAs/CCAs/CAs of Ministries/Departments-reg

To: director <director@aiimsbhopal.edu.in>, dydir <dydir@aiimsbhopal.edu.in>, director <director@aiimsbhubaneswar.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, director <director@aiimsjodhpur.edu.in>, dda <dda@aiimsjodhpur.edu.in>, director <director@aiimspatna.org>, dda <dda@aiimspatna.org>, director <director@aiimsrishikesh.edu.in>, dda <dda@aiimsrishikesh.edu.in>, director <director@aiimsraipur.edu.in>, dda <dda@aiimsraipur.edu.in>, Executive Director Raebareli <ed.aiimsrbl@gmail.com>, ddaaiimsrbl <ddaaiimsrbl@gmail.com>, director aiimsnagpur <director.aiimsnagpur@gmail.com>, dda <dda@aiimsnagpur.edu.in>, director <director@aiimsmangalagiri.edu.in>, dda <dda@aiimsmangalagiri.edu.in>, ed <ed@aiimskalyani.edu.in>, Siddhartha Nandy <siddhartha.nandy@gov.in>, director <director@aiimsguwahati.ac.in>, dda <dda@aiimsguwahati.ac.in>, Director AIIMS Bibinagar <director@aiimsbibinagar.edu.in>, Nishakar Sahoo <adminofficer@aiimsbibinagar.edu.in>, executivedirector <executivedirector@aiimsgorakhpur.edu.in>, dda <dda@aiimsgorakhpur.edu.in>, director <director@aiimsbathinda.in>, adminoffice <adminoffice@aiimsbathinda.in>, drsaurabh68 <drsaurabh68@gmail.com>, dda <dda@aiimsdeoghar.edu.in>, office ed <office.ed@aiimsbilaspur.edu.in>, dda <dda@aiimsbilaspur.edu.in>, directoraiimsjammu <directoraiimsjammu@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ed aiimsrajkot <ed.aiimsrajkot@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, drmhraosvims1957 <drmhraosvims1957@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, madhabananda <madhabananda@gmail.com>, <aiimsdbg22@gmail.com>  
Cc: <cl.mawi85@nic.in>, US T.C Naulak <chinsum.n@nic.in>, <raj.kumar28@nic.in>

Respected Sir/Madam ,

Please find attached OMs Dated: 1st March & 2nd March, 2023 on the above mentioned subject for information and further necessary action.

With regards  
PMSSY-V  
IRCS Building, New Delhi-110001

**OM (5).pdf**  
897K

Office of Secretary (H&FW)  
e-office No. 3056511  
Date 17/03/2023

L. No. TA-2-03001(03)/1/2021-TA-II(e-5450)/90  
Government of India  
Ministry of Finance  
Department of Expenditure  
Office of Controller General of Accounts

Mahalekha Nyantrak Bhawan  
E-Block, GPO Complex, INA  
New Delhi  
Date: 1<sup>st</sup> March, 2023.

**OFFICE MEMORANDUM**

**Subject: -Advisory to avoid system overload during last hours of end of FY 2022-23-reg.**

According to Rule 62(3) of General Financial Rules, 2017, rush of expenditure particularly in the closing month of financial year shall be avoided. This is also required to obviate system overload due to last minute piling up of payment files.

2. This Office OM No. TA-2-03001(03)/1/2021-TA-II(e-5450)/67 dated 3<sup>rd</sup> Feb, 2023 on the above cited subject may be referred (copy enclosed) wherein CAs/CCAs/Pr.CCAs of Ministries/Departments were also instructed to monitor pendency position of bills at the end of each day through PFMS reports and to keep them at bare minimum.

3. As the final batch of Supplementary Demands for Grants for the financial year 2022-23 is also likely to be issued in the month of march. It needs to be ensured that processes involved at every stage are planned and staggered in a way that there is no system overload and the system is able to handle increased volume of sanctions and bills in closing days of March.

4. In view of the above, following is advised:

(i) Ministries/Departments may be sensitized to submit the bills for the available budget in timely manner.

(ii) Ministries/Departments may also be sensitized to prepare re-appropriation proposals in time

(iii) The Programme Division of Ministries/Departments may be requested to complete processing of sanctions expeditiously so that process of bill preparation by DDO can start on the same day and forwarded to PAO through PFMS.

(iv) Sufficient time should be available with PAO to carry out scrutiny of bills and ensure necessary pre-check requisites being the last stage of release of payment.

5. This issues with the approval of Addl. CGA (A&FR).

*Shailendra Kumar* 24/03/23 ASD(RS)  
Sd/-  
(Shailendra Kumar)  
Jt. Controller General of Accounts

To,

All Pr.CCAs/CCAs/CAs (IC) of Ministries/Departments.

*Pl circulate amongst all*  
*18/03*  
*JS(AMB)*  
*DS(RK)*  
*Di-1 INT* / *Di-2 NK* / *Di-3 DK*

*All ASs & JSs*  
*2.3.23*  
*IS(RN)*

Copy for information to:

1. Finance Secretary & Secretary (Expenditure)
2. ✓ Secretaries of Ministries/Departments
3. Controller General of Accounts
4. Addl. CGA(PFMS) /Addl.CGA(HR)/ Addl. CGA (A&FR)
5. Financial Advisors of Ministries/Departments
6. Additional Secretary (Budget), D/o Economic Affairs, MoF



**Jt. Controller General of Accounts**



L.No. 1A-2-03001(03)/1/2021-1 A-III(-5430)/21

Government of India  
Ministry of Finance  
Department of Expenditure  
Office of Controller General of Accounts

Mahalekha Niyantrak Bhawan,  
GPO Complex, E-Block,  
INA, New Delhi-110 023,  
Date: 2<sup>nd</sup> Feb, 2023.

OFFICE MEMORANDUM

**Subject: - Monitoring of status of bills by Pr. CCAs/CCAs/CAs of Ministries/ Departments-reg.**

In order to avoid last minute rush of expenditure and system overload in PFMS during the closing months/ days of the financial year 2022-23, it is desired that bills may be cleared by PAOs on daily basis and it may be ensured that no pendency of bills of a day is carried forward to the next day.

2. With a view to keep the bills under process to a bare minimum, it is stated that the pendency position of bills may strictly be monitored by all Pr. CCAs/CCAs/CAs of Ministries/ Departments at the end of each day through Reports Module of PFMS (CAM Reports-MIS-MIS 01- Bills Status Report and MIS-02-Bill Pendency Report).

3. Pr.CCAs/CCAs/CA(IC) are also advised to issue instructions to DDOs in the Ministries/Departments through their FAs to submit bills as per their time-schedule so that there is no rush towards end of the months of February and March.

This issues with the approval of the Controller General of Accounts.



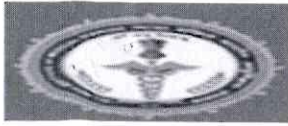
(Shailendra Kumar)  
Joint Controller General of Accounts (ARPR)

To,

All Pr. CCAs/ CCAs/ CAs with independent charge

Copy for kind information to:

1. FS and Secretary (Expenditure)
2. CGA



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Developing a nationwide ecosystem for the care of children with Congenital Heart Disease-reg

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Sat, Dec 27, 2025 at 1:18 PM

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **PMSSY V** <pmssysection5@gmail.com>

Date: Fri, Mar 31, 2023 at 5:54 PM

Subject: Developing a nationwide ecosystem for the care of children with Congenital Heart Disease-reg

To: Director AIIMS Raipur <director@aiimsraipur.edu.in>, Director AIIMS Jodhpur <director@aiimsjodhpur.edu.in>, Director AIIMS Bhopal <director@aiimsbhopal.edu.in>, director bhubaneswar <director@aiimsbhubaneswar.edu.in>, Director Patna <director@aiimspatna.org>, Director AIIMS Rishikesh <director@aiimsrishikesh.edu.in>

Cc: US T.C Naulak <chinsum.n@nic.in>, <cl.mawi85@nic.in>, <raj.kumar28@nic.in>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, DDA Jodhpur <dda@aiimsjodhpur.edu.in>, DDA BHOPAL <dyydir@aiimsbhopal.edu.in>, DDA Bhubaneswar <dda@aiimsbhubaneswar.edu.in>, DDA AIIMS Patna <dda@aiimspatna.org>, DDA AIIMS Rishikesh <dda@aiimsrishikesh.edu.in>


Respected Sir/Madam ,

Please find attached Letter No. Z-28016/38/2023-PMSSY-V [8214466] Dated: 31st March, 2023 on the above mentioned subject for information and further necessary action.

With regards  
PMSSY-V  
IRCS Building, New Delhi-110001

### 2 attachments

 **8214466.pdf**  
275K

 **Corr\_8214466.pdf**  
3489K

No. Z-28016/38/2023-PMMSY-V (E.O.No. 8214466)

Government of India  
Ministry of Health & Family Welfare  
(PMSSY – V Section)

3<sup>rd</sup> Floor, IRCS Building, New Delhi.

Dated 31<sup>st</sup> March, 2023.

To,

The Director,  
AIIMS Raipur, Jodhpur, Bhopal, Bhubaneswar, Patna, Rishikesh

Subject : Developing a nationwide ecosystem for the care of children with Congenital Heart Disease  
Regarding.

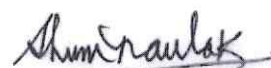
Sir,

I am directed to forward herewith a copy of representation vide e-mail dated 23.02.2023 received from Prof. Arun K Baranwal, HDF Unit, Advanced Pediatrics Center, PGIMER, Chandigarh has forwarded a letter addressed to Hon'ble HFM regarding developing a nationwide ecosystem for the care of children with Congenital Heart Disease.

2. In view of the above, it is requested to furnish your comments in this regard to this Ministry urgently.

Encl: as above

Yours Faithfully,



(T.Chinsum Naulak)

Under Secretary to the Govt. of India

Ph. No. ( 011) 23736978

Copy to:

DDA, AIIMS Raipur, Jodhpur, Bhopal, Bhubaneswar, Patna, Rishikesh for similar action please.



**Advanced Pediatrics Centre**  
Postgraduate Institute of Medical Education & Research  
Chandigarh -160012, India

**Prof. Arun K Baranwal**  
MBBS, MD, PG Diploma (Critical Care), FRCPC, FCCM, FIAP, FICCM

**HDF Unit**  
**Department of Pediatrics**

Tel: (O) +91-172-2755309  
(M) +91-7766908325  
Fax: +91-172-2744401, 2745078

E-mail: baranwal1970@gmail.com



To,  
Shri Mansukh Mandaviya,  
Hon'ble Minister of Health & Family Welfare,  
Government of India.

**Sub:** Developing a nationwide ecosystem for the care of children with Congenital Heart Disease.

Dear Sir,

We have conducted a study on the importance of Congenital Heart Disease in further reduction of childhood mortality in India during the Amrit Kaal (2022-47). It is published in the current issue of **Indian Pediatrics**, the official peer-reviewed journal of the **Indian Academy of Pediatrics (IAP)**. IAP is the professional association of pediatricians, and is active in advocacy on child health in the country for last six decades. A copy of the study is enclosed along with.

Based on the study, and recommendations therefrom, following 3-tier approach is suggested for autonomous Institutes of National Importance (INIs) under the Ministry of Health & Family Welfare in the *immediate term* —

1. **For AIIMS-Delhi & PGIMER-Chandigarh:** DM (Pediatric Cardiology) program is already started. Now, 3-year post-doctoral training programs (DM/MCh) in remaining 4 specialities, i.e., Pediatric Cardiac Intensive Care, Pediatric Cardiac Surgery, Pediatric Cardiac Anesthesia, and Pediatric Cardiac Radio-Imaging need to started.
2. **For the first lot of new generation AIIMS's (Bhuaneshwar, Patna, Rishikesh, Bhopal, Jodhpur & Raipur):** Starting 1-year post-doctoral fellowship training programs in all the 5 specialties, i.e., Pediatric Cardiology, Pediatric Cardiac Critical Care, Pediatric Cardiac Surgery, Pediatric Cardiac Anesthesia, and Pediatric Cardiac Radio-Imaging.
3. **For the rest of the new generation AIIMS's:** To commence and to scale up the pediatric cardiac services.

It would not only help improve the infant mortality and childhood mortality significantly, but also would create a large pool of beneficiaries of the flagship healthcare schemes like **Ayushman Bharat, Rashtriya Bal Suraksha Karyakram (RBSK)** and **Janani Shishu Suraksha Karyakram (JSSK)**. It is likely to help in creation of jobs in unskilled, skilled and highly skilled sectors.

I am proposing the above interventions in the larger public interest, in the capacity of an aware citizen and a professional working in the field.

Kind regards,

(Arun K Baranwal)



## PERSPECTIVE

### Congenital Heart Disease: Would It Be the Key Driver of Infant Survival During *Amrit Kaal* (2022-2047)?

ARUN K BARANWAL,<sup>1</sup> SHANKAR PRINJA,<sup>2</sup> NAVPREET KAUR<sup>1</sup>

<sup>1</sup>Department of Pediatrics, Advanced Pediatrics Center, Postgraduate Institute of Medical Education and Research, Chandigarh.

<sup>2</sup>Department of Community Medicine and School of Public Health, Postgraduate Institute of Medical Education and Research, Chandigarh.

Correspondence to: Prof Arun Kumar Baranwal, HDF Unit, Department of Pediatrics, Advanced Pediatrics Center, PGIMER, Chandigarh 160 012. baranwal1970@gmail.com

Post-independence, we made significant strides in childhood survival. However, there is an abysmal improvement in survival due to birth defects. Globally, India contributes the largest proportion of under-5 deaths, overall as well as due to birth defects. Congenital heart disease (CHD) is the single most common cause of birth-defect related deaths, and is the 7th most common cause of infant deaths. Scarcity of pediatric cardiac care professionals and pediatric cardiac centers has led to a huge demand-supply gap. Understanding the burden of CHD and taking imperative steps at primary, secondary and tertiary levels are essential during *Amrit Kaal* (2022-2047). Coverage of management of CHD under *Janani Shishu Suraksha Karyakram*, *Rashtriya Bal Suraksha Karyakram* and *Ayushman Bharat* programs offers a huge promise, as shown by the experience from *Hridayam* program in Kerala.

**Keywords:** Birth defects, Infant mortality, Neonatal mortality, Under-5 deaths.

Despite significant reduction in child mortality, India, a country with low-middle socio-demographic index (SDI), contributes the largest proportion of under-5 deaths to the world statistics [1]. During 1990-2017, contribution of birth defects to child mortality has increased, with reducing neonatal mortality rate (NMR) and under-five mortality rate (U5MR) [1,2]. We also contribute maximum to the global under-5 deaths attributable to birth defects [2]. Congenital heart diseases (CHD) contribute the most to birth defects (28%), and the single most common cause of deaths due to them [3,4]. Here, we discuss the significance of CHDs with respect to child mortality, our preparedness, and the way forward to deal with the situation during the 'Amrit Kaal' of our independence (2022-2047).

#### CONGENITAL HEART DISEASE AND CHILD MORTALITY

During the last three decades, child survival improved significantly due to improvement in antenatal and neonatal care, control of vaccine-preventable diseases, acute respiratory tract infections and diarrhea-dehydration, and nutritional programs. During 1990-2019, the NMR, infant mortality rate (IMR) and U5MR reduced significantly. The data from the Sample Registration System (SRS) revealed birth defects moving up from the eighth to the fifth most common cause of infant deaths during the 12-years period (2004-06 vs 2015-17) [5,6].

General improvement in childhood survival during 1990-2017 increased the proportional contribution of birth-defects to U5MR [2]. Concurrently, improving diagnostics and increasing awareness led to a steady rise in the reported prevalence of CHD [7,8]. The two together moved CHD up from 8th to 7th most common cause of infant mortality [9]. With birth prevalence of CHD being 0.9% (range, 0.8-1.2%), estimated annual birth prevalence (EABP) in India is likely to be upwards of 2,40,000 [8]. EABP of CHD in different regions are as follows— 84,000 in Northern region (Jammu-Kashmir, Laddakh, Punjab, Himachal Pradesh, Uttarakhand, Punjab, Haryana, Chandigarh), 52,000 in Eastern region (Bihar, Jharkhand, Odisha, West Bengal), 38,000 in Southern region (Telangana, Andhra Pradesh, Tamil Nadu, Karnataka, Kerala), 29,000 in Western region (Maharashtra, Gujarat), 23,000 in Central region (Madhya Pradesh, Uttar Pradesh, Chhattisgarh, Rajasthan) and 12,500 in North-eastern region (Assam, Sikkim, Meghalaya, Mizoram, Nagaland, Manipur, Arunachal Pradesh, Tripura) [8]. About 25% of these babies have critical CHD (i.e., requiring interventions in the first year of life). Many of these babies mimic sepsis and/or respiratory diseases during neonatal period, or get complicated with one.

For the lack of timely surgery, children with CHD consume healthcare resources unproductively for repeated hospitalizations for congestive heart failure, recurrent pneumonia, cardiovascular complications,



malnutrition and its associated problems. With passage of time, surgical outcome would be compromised in many, while many children would become inoperable. Thus, CHD is also an important cause of mortality and morbidity during later childhood as well. In fact, birth defects (of which CHD constitute the largest proportion) are estimated to contribute 8% of under-5 deaths in India [1]. Contribution is likely to be more in states with U5MR < 25, e.g., Kerala, Tamil Nadu, Maharashtra, Delhi, Manipur and Nagaland. The same is likely to happen in most of other states as they are projected to achieve U5MR < 25 by the year 2030, barring Uttar Pradesh, Madhya Pradesh, Chhattisgarh, Odisha, Rajasthan, Assam and Mizoram [1]. Another analysis revealed birth-defects to be the third leading cause of early neonatal mortality in 17 states [2]. With persistently improving SDI, awareness, institutional deliveries, neonatal, infant and under-5 survival, and lack of healthcare infrastructure to manage CHD in majority of states, a fairly constant birth prevalence of CHD would create a case of 'perceptual explosion' during the *Amrit Kaal*.

## CURRENT STATUS

### Care of Children With CHD

Level of care available for children with CHD varies significantly between high income countries (HICs) and low- and middle- income countries (LMICs). In HICs, the vast majority reach adulthood owing to breakthroughs in diagnosis and management. This; however, is not the case in LMICs. One fully equipped cardiac centre is estimated to serve a population of 1,20,000 in North America, while the same serves a population of 16 million in Asia. Similarly, one cardiac surgeon serves a population of 3.5 million in North America and Europe, while the figure in Asia is 1 per 25 million [8]. In India, a population of 141 crore is served by a handful of centers. We have very few trained professionals in various disciplines of pediatric cardiac sciences and intensive care. Scarcity of facilities in public sector hospitals is even more glaring. Even within the country, available pediatric cardiac facilities are unevenly distributed [8].

Until recently, children with CHD were being managed through out-of-pocket expenditure. Thus, the majority were unable to afford timely surgery. Implementation of flagship public healthcare schemes [e.g., Pradhan Mantri Jan Arogya Yojana (PM-JAY), Janani Shishu Suraksha Karyakaram (JSSK) and Rashtriya Bal Swasthya Karyakaram (RBSK)] is likely to become a game-changer. Despite availability of funds through such schemes, proportion of children with CHDs getting operated differs substantially across different regions of the country — Central region (7.6%), Eastern region (12%), Northern

region (17%), Western region (28%), Southern region (74%), while none get operated in the North-Eastern region [8,10]. Capacity, both infrastructure and human resource, is the prime limitation for the observed demand-supply gap, especially in northern and eastern regions.

### The Hridayam Program

IMR in Kerala was 16/1000 livebirths in 1991, and it stagnated around 10-12 for about a decade (2007-2017), despite reduction in neonatal and infant deaths with improvement in perinatal care, infectious diseases and malnutrition—the so-called 'low-lying fruits.' Birth-defects (of which CHD has the largest share) were found to be major contributor to infant death, and the second most common cause of under-5 deaths [2,11]. A plan of 'paediatric cardiac care continuum' was worked out to address the issue of CHD, especially the critical ones. It was implemented in August 2017 as 'Hridayam' program in public-private partnership. Children (aged 0-18 years) with suspected CHD were registered to develop a life-time pathway instead of just providing one-time surgery. Program created a state-wide network connecting primary health centres to tertiary hospitals for timely and optimal management [11]. It led to fall in all-cause IMR to 6/1000 livebirths by the year 2019 (Fig. 1). Jammu-Kashmir, Punjab, Himachal Pradesh, Delhi, West Bengal, Maharashtra, Goa, Tamil Nadu and all Union Territories have already achieved an IMR of 20 or lesser, and more states are expected to join the league soon [1,12]. The CHD program may perceived to be expensive, cumbersome and unyielding, experience and evidence from the 'Hridayam' program; however, suggest this to be the only way to reduce IMR further in these states.

## THE WAY FORWARD

The Government of India is committed to achieve 'single digit' NMR by 2030 and U5MR of 23 by 2025 [13,14]. Stagnating contribution of neonatal deaths to under-5 deaths (i.e., ~55%) across states irrespective of their U5MR and SDI [1] suggests the need to shift on to the next paradigm of interventions. Birth-defect surveillance and management program is likely to reduce U5MR further, especially in states with U5MR < 25 [2]. Diagnosis and management of CHD would be the most important aspect of this program.

### Continuum of Care Through Ayushman Bharat

Experience from countries with high SDI revealed that identification of newborns with CHD before discharge from hospital, excellence in emergency care, and developments in pre-operative and post-operative intensive care, cardiopulmonary bypass and surgical techniques have dramatically improved survival of children with CHD [15].



*Hridayam* program provided a made-in-India model of community-based pediatric cardiac care continuum (beginning from the antenatal period to the postnatal evaluation, cardiac surgery and long term follow up), which may be replicated in other parts of the country. The experience gained may inform a national policy for children with CHD, which may work to develop a similar approach integrating JSSK and RBSK with PM-JAY. As part of comprehensive primary health care, obstetricians and sonographers at Health and Well-being Centers (HWCs) and district hospitals may be trained to detect CHD during antenatal period. Inclusion of essential physical cardiac examination and pre-discharge screening by pulse oximetry in the existing neonatal protocols would help to detect CHD before discharge. Healthcare providers may be trained to identify survivors of neglected CHD presenting to healthcare facilities or detected through school health programs. Suspicion of CHD would prompt timely referral and transport of in utero baby, neonate or older child to a designated tertiary care centre for detail assessment. Children with CHD thus identified may receive secondary and tertiary healthcare under public-funded schemes. Integration of HWCs with secondary and tertiary care centers may be enabled through care pathway linkages and information technology by creation of Ayushman Bharat Health Account (ABHA) ID, which would create a longitudinal health record for babies with CHD. Recently, follow up packages has been added under PM-JAY to provide continuous support even after discharge from hospital. National Health Authority introduced a digital payment voucher, e-RUPI to ensure uninterrupted access to diagnostics and therapeutics from providers of

patients' choice. These person- and purpose-specific payment vouchers means public subsidy is provided only to the needy and only for the intended purpose. Early diagnosis, prompt referral, provision of affordable treatment, combined with better post-operative home-based care, would be a game-changer in bringing down the attributable infant and child mortality.

### Developing Pediatric Cardiac Care Services in the Public Sector

Establishing at least one premier Center of Excellence (CoE) in each region is an urgent need of the hour. Northern and eastern regions may be prioritised in view of wider demand-supply gap; the former has lower U5MR as well. These centers should have five essential, distinct and child-specific specialized clinical service verticals working in horizontal collaboration—Pediatric (diagnostic and interventional) Cardiology, Pediatric Cardiac Radio-imaging, Pediatric Cardiac Intensive Care (to provide specialized intensive care services before and after cardiological intervention and cardiac surgery), Pediatric Cardiac Surgery and Pediatric Cardiac Anaesthesia. Cardiopulmonary bypass, extracorporeal membrane oxygenation and pediatric cardiac critical care nursing services are essential component of the CHD program. Ancillary services should include Pediatric Cardiac Airway, Pediatric Cardiac Pulmonology and Cardiac Genetic services. Creating CoEs in the established institutes of national importance (INIs), as extension of their pediatric services, is likely to be logistically and financially prudent. These CoEs would act as apex institutions, and would provide training-learning opportunities, develop academic

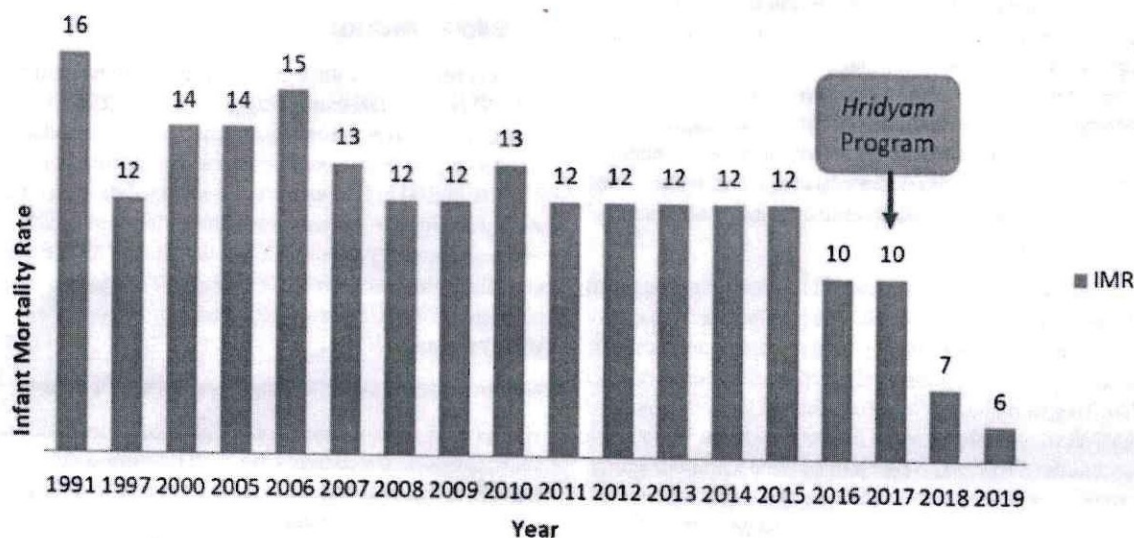


Fig. 1 Effect of Hridayam program on the stagnating infant mortality rate in Kerala (1991-2019).



programs, help capacity-building and stimulate country-specific research and innovations [8].

**Strengthening behaviour change communication:** Public awareness needs to be created about long-term survival of most of the CHD patients. It may improve health-seeking behavior within community. Emphasis on primary prevention by reducing consanguinity, immunization against rubella, reducing risk factors like smoking, alcohol intake during pregnancy, supplementing folic acid during first trimester, and optimal control of diabetes should also be on cards [16].

### Human Resource Development

Management of CHD needs development of specialized professionals in various disciplines of pediatric cardiac sciences as mentioned above. At present, we only have a post-doctoral (DM) program in Pediatric (diagnostic and interventional) Cardiology, and that too only at All India Institute of Medical Sciences-Delhi and Postgraduate Institute of Medical Education & Research-Chandigarh. There are no post-doctoral programs in the other four essential disciplines. While establishing CoEs may be a long-term goal, post-doctoral programs need to be started immediately with horizontal integration of resources from Departments of Pediatrics, Cardiology, Cardiovascular Surgery, Radiodiagnosis and Anesthesia in the established INIs (Table I). The National Medical Commission (NMC) and National Board for Examinations in Medical Sciences (NBEMS) may find inclusion of these academic programs in their bouquet of post-doctoral courses as visionary, and as need of country's near future. Training programs to create a pool of perfusionists, pediatric cardiac critical care nurses and other professionals required for in-hospital and out-of-hospital care of children with CHD may also be planned (Table I). Initiation of pediatric cardiac services and training programs in various disciplines of pediatric cardiac

sciences in the new generation of tertiary healthcare institutions of national importance (e.g., the new All India Institutes of Medical Sciences) and the autonomous tertiary healthcare institutions under various state governments would significantly improve the access across the country. They would also help create locally-relevant innovative approaches towards CHD program. These initiatives are likely to lead to development of a comprehensive and sustainable India-made ecosystem to effectively deal with the epidemiological transition during Amrit Kaal (2022-2047).

### Deliverables

Improved childhood survival is likely to improve life expectancy at birth and thus our Human Development Index [1]. Creation of a large public-funded healthcare scheme would lead to new investments in healthcare, pharmaceutical, manufacturing and biomedical engineering sectors. A relatively stable birth prevalence of CHD, large population, huge demand-supply gap and locally relevant research/innovation would make the indigenously developed CHD program self-sustainable, scalable and replicable. Shift of care of CHD from currently dominant private corporate hospitals to the public healthcare delivery system is likely to benefit domestic industry, as has been seen in the vaccine sector [17,18]. An economically competitive CHD program could also foster medical tourism. All these would end up generating employment for unskilled, skilled and highly skilled personnel. In a nutshell, such a CHD program would fulfil objectives of Atmanirbhar Bharat Abhiyaan, Heal-in-India and Health-by-India programs, and would be an important component of roadmap to India@100.

### CONCLUSIONS

With reducing child mortality, CHD is becoming a key driver of childhood survival. Multilateral collaboration between

**Table I Proposed Training Programs in Various Disciplines of Pediatric Cardiac Sciences**

Courses	Disciplines	Eligibility
DM	Pediatric Cardiology (Diagnostic and Interventional services)	MD/DNB (Pediatrics)
DM	Pediatric Cardiac Intensive Care (Intensive Care services before and after cardiological interventions and cardiac surgeries)	MD/DNB (Pediatrics/Anesthesia)
MCh	Pediatric Cardiac Surgery	MS/DNB (Surgery)
DM	Pediatric Cardiac Anesthesia	MD/DNB (Anesthesia)
DM	Pediatric Cardiac Radio-imaging	MD/DNB (Radiology/Radio-imaging)
B. Sc.	Perfusion Technology	I.Sc. (Biology)
Postgraduate fellowship	Pediatric Cardiac Nursing	M. Sc. (Pediatric Nursing)
Postgraduate fellowship	Pediatric Cardiac Critical Care Nursing	M. Sc. (Pediatric Nursing)
Postgraduate fellowship	Pediatric ECMO Nursing	M. Sc. (Pediatric Nursing)

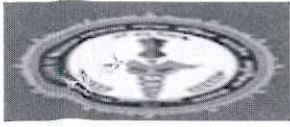


policy makers, administrators, public health delivery system, private hospitals and pediatric cardiac professionals is urgently needed. It would help in developing and implementing pediatric cardiac care continuum across the country. At least one CoE per region needs to be established, prioritizing the under-served regions. Professional training programs may be initiated to create a sustainable ecosystem. An evidence-informed national policy may go a long way in managing the imminent epidemic of CHD, improving HDI ranking, and generating jobs in the run up to the centennial celebrations of our independence in the year 2047.

*Funding:* None; *Competing interests:* None stated.

## REFERENCES

1. India State-Level Disease Burden Initiative Child Mortality Collaborators. Subnational mapping of under-5 and neonatal mortality trends in India: the Global Burden of Disease Study 2000-17. *Lancet*. 2020;395:1640-58.
2. Ujagare D, Kar A. Birth defect mortality in India 1990-2017: Estimates from the Global Burden of Disease data. *J Community Genet*. 2021;12:81-90.
3. Dolk H, Loane M, Garne E; European Surveillance of Congenital Anomalies (EUROCAT) Working Group. Congenital heart defects in Europe: Prevalence and perinatal mortality, 2000 to 2005. *Circulation*. 2011;123:841-49.
4. Lopez KN, Morris SA, Sexson Teitel SK, et al. US Mortality attributable to congenital heart disease across the lifespan from 1999 through 2017 exposes persistent racial/ethnic disparities. *Circulation*. 2020;142:1132-47.
5. Cause of Death in India: 2004-2006. Ministry of Home Affairs, Government of India. Accessed August 29, 2022. Available from: [https://censusindia.gov.in/census\\_website/data/SRSCOD](https://censusindia.gov.in/census_website/data/SRSCOD)
6. Cause of Death in India: 2015-2017. Ministry of Home Affairs, Government of India. August 29, 2022. Available from: [https://censusindia.gov.in/census\\_website/data/SRSCOD](https://censusindia.gov.in/census_website/data/SRSCOD).
7. van der Linde D, Konings EEM, Slager MA, et al. Birth prevalence of Congenital Heart Disease Worldwide: A systematic review and meta-analysis. *J Am Coll Cardiol*. 2011;58:2241-47.
8. Saxena A. Congenital Heart Disease in India: A Status Report. *Indian Pediatr*. 2018;55: 1071082.
9. GBD 2017 congenital heart disease collaborators. global, regional, and national burden of congenital heart disease, 1990-2017: A systematic analysis for the Global Burden of Disease Study 2017. *Lancet Child Adolesc Health*. 2020;4:185-200.
10. Maheshwari S, Kiran VS. Cardiac care for the economically challenged: What are the options? *Ann Pediatr Cardiol*. 2009;2:91-94.
11. Nair SM, Zheleva B, Dobrzycka A et al. A population health approach to address the burden of congenital heart disease in Kerala, India. *Glob Heart*. 2021;16:71.
12. Status of IMR and MMR in India. Ministry of Health and Family Welfare. Government of India. Accessed August 29, 2022. Available from: <https://pib.gov.in/PressReleaseIframePage.aspx?PRID=1796436>
13. India Newborn Action Plan. Ministry of Health & Family Welfare, Government of India. September, 2014. Accessed August 29, 2022. Available from: <http://nhm.gov.in/images/pdf/programmes/inap-final.pdf>
14. National Health Policy 2017. Ministry of Health & Family Welfare. Government of India. Accessed August 29, 2022. Available from: [https://www.nhp.gov.in/nhpfiles/national\\_health\\_policy\\_2017.pdf](https://www.nhp.gov.in/nhpfiles/national_health_policy_2017.pdf)
15. Ceneri N, Desai M, Yerebakan C. Developments in perioperative management: The yin to the yang of congenital heart surgery. *J Thorac Cardiovasc Surg*. 2021;162:432-4.
16. Botto LD. From cause to care: Can a triple approach to better population data improve the global outlook of congenital heart disease? *Am J Med Genet C Semin Med Genet*. 2020;184: 23-35.
17. Indian vaccine makers gaining wider market share in industry. *The Economics Times*. ET Online. August 22, 2022. Available on [industry/articleshow/93769720.cms?utm\\_source=content\\_ofinterest&utm\\_medium=text&utm\\_campaign=cppst](https://industry.articleshow/93769720.cms?utm_source=content_ofinterest&utm_medium=text&utm_campaign=cppst)
18. Local vax makers grab market share from MNCs. *Times of India*. Chandigarh Edition. 2022; August 25; pp. 17.



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## **Fwd: Delegation of financial powers of Director/Executive Director to Deputy Director (A) and Medical Superintendents of new AIIMS**

1 message

**DDA AIIMS PATNA** <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 1:15 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Thu, Apr 27, 2023 at 4:27 PM

Subject: Delegation of financial powers of Director/Executive Director to Deputy Director (A) and Medical Superintendents of new AIIMS

To: Director <director@aiimsbhopal.edu.in>, <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaaiimsrbl@gmail.com>, <director@aiimsmangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>

Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, <siddhartha.nandy@gov.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, Cc: <dinesh.kumar14@nic.in>, <k.balasubramanian38@nic.in>, <mary.thomas@nic.in>, <dev.gothal@gov.in>

Sir/Madam

Please find the attachment.

Regards

PMSSY-IV Section  
Ministry of Health and Family Welfare

**ALL AIIMS letter 07.pdf**  
65K



I/358 3950/2023

F.No. Z-28016/66/2022-PMSSY-IV  
Government of India  
Ministry of Health and Family Welfare  
(PMSSY-IV Section)

\*\*\*\*

4<sup>th</sup> Floor, IRCS Building, New Delhi  
Dated the 20th April, 2023

To

Directors/Executive Directors of new AIIMS

**Subject: Delegation of financial powers of Director/Executive Director to Deputy Director (A) and Medical Superintendents of new AIIMS**

Madam/Sir,

I am directed to state that vide this Ministry's letter No.Z-28016/276/2020-PMSSY-IV dated 15.06.2017 Directors of new AIIMS have been delegated financial powers upto Rs.5 crores.

2. As per Regulation 11 of AIIMS Regulations dated 18.10.2019,

***Powers and duties of Director - The Director shall be the Head of Institute in terms of sub-rule (10) of Rule 2 of the Supplementary Rules and shall exercise the powers of Head of Institute and discharge the following duties, namely:-***

*(a) he shall be in-charge of the administration of the Institute. He shall allocate duties to the officers and employees of the Institute and shall exercise such supervision and executive control as may be necessary subject to the rules and these regulations;*

*(b) he shall exercise the powers specified in Schedule I to these regulations;*

***(c) he shall have the powers to delegate any of his powers to the officers on the administrative side subject to such limitations as may be imposed by the Governing Body.***

3. It is learnt some Directors/Executive Directors of new AIIMS have delegated financial powers to Deputy Directors , Medical Superintendents and Superintendent Engineer etc. for carrying out administrative functions in the Institute.

4. In this connection, it is requested to furnish the following information **within 7 days positively**:

(i). Whether delegation of financial power has been made in this Institute?

(ii). Officers to whom delegated

I/3583950/2023

(iii). Amount delegated

(iv). Process followed by the officers while discharging the delegated powers and Channel of submission of files

(V) Whether prior financial concurrence taken from Finance or Audit wing of the Institute.

Yours faithfully,

Signed by K

Balasubramanian

(K. Balasubramanian) 01/01/2023 11:35:11

Under Secretary to the Govt. of India

Tele : 011-23350010

Copy to Deputy Director (Admn.) of all new AIIMS



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

**Fwd: Compliance of the directions of Hon'ble Supreme Court in Civil Appeal No. 2482 of 2014-reg.**

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 1:13 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Wed, Jun 28, 2023 at 12:29 PM

Subject: Compliance of the directions of Hon'ble Supreme Court in Civil Appeal No. 2482 of 2014-reg.

To: Director <director@aiimsbhopal.edu.in>, <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <director@aiimsmangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>, <director@aiimsbilaspur.edu.in>, <director@aiimsguwahati.ac.in>

Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Siddhartha Nandy <siddhartha.nandy@gov.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <dda@aiimsguwahati.ac.in>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, IMTIUCHUBA N JAMIR <in.jamir83@nic.in>, MARY THOMAS ASSTT <Mary.thomas38@nic.in>, Amit Batra <amit.batra@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards

PMSSY-IV Section

Ministry of Health and Family Welfare



**2 attachments**



**Letter All AIIMS 05.pdf**  
358K



**Encl All AIIMS 05.pdf**  
10246K

I/3599101/2023

**Government of India  
Ministry of Health & Family Welfare  
PMSSY-IV Section**

**3<sup>rd</sup> floor, IRCS Building, New Delhi  
Dated the 28-06-2023**

**To,  
The Directors/ Executive Director of all new AIIMS**

**Subject: Compliance of the directions of Hon'ble Supreme Court in Civil Appeal  
No. 2482 of 2014 - reg**

Sir/Madam,

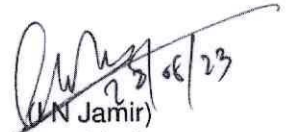
I am directed to forward herewith an OM dated 15.6.2023 from Legal Cell, MoHFW on the subject cited above wherein a copy of judgement dated 12.5.2023 passed by the Hon'ble Supreme Court of India in Civil Appeal No.2482 of 2014 titled Aureliano Fernandes Vs State of Goa & Ors has been enclosed.

2. The Hon'ble Supreme Court has directed UoI to undertake a time bound exercise to verify as to whether all the Departments/ Organizations/ PSUs/ Autonomous Bodies have constituted Internal Complaints Committees (ICCs)/ Local Committees (LCs)/ Internal Committees (ICs), as the case may be, and that the composition of the said Committees are strictly in terms of the provisions of the Prevention of Sexual Harassment (PoSH) Act etc. (para 64 to 68 of the judgement) and to file their affidavit within 8 weeks for reporting compliance of the directions.

3. Accordingly, all are requested to take necessary action in this regard and submit a compliance report with respect to the directions of the Hon'ble Supreme court by 29.06.2023 positively.

Enclo: 'as stated'

Yours faithfully



Under Secretary to the Government of India  
Tel:011-23736977

Copy to

i. DD(A), of all new AIIMS

File No. 18017/15/2023- Legal Cell  
भारत सरकार / GOVERNMENT OF INDIA  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय / MINISTRY OF HEALTH & F.W.  
स्वास्थ्य एवं परिवार कल्याण विभाग / DEPARTMENT OF HEALTH & F.W.  
(लीगल सेल) / (Legal Cell)

Nirman Bhawan, New Delhi-110011  
Dated 15.06.2023

**OFFICE MEMORANDUM**


**Subject:- Compliance of the directions of Hon'ble Supreme Court in Civil Appeal No. 2482 of 2014.**

The undersigned is directed to forward herewith a copy of the judgement dated 12.05.2023 passed by the Hon'ble Supreme Court of India in Civil Appeal No. 2482 of 2014 titled Aureliano Fernandes Vs State of Goa & Ors wherein the Hon'ble Supreme Court has directed Union of India to undertake a time bound exercise to verify as to whether all the Departments / Organizations / PSUs / Autonomous Bodies have constituted Internal Complaints Committees (ICCs) / Local Committees (LCs) / Internal Committees (ICs), as the case may be, and that the composition of the said Committees are strictly in terms of the provisions of the Prevention of Sexual Harassment (PoSH) Act etc. (para 64 to 68 of the judgement) and to file their affidavit within 8 weeks for reporting compliance of the directions.

2 Accordingly, all the Divisions are directed to bring the above judgement to the notice of all the Institutes / Hospitals / Organizations etc. under their administrative control and to obtain a compliance report with respect to the directions of the Hon'ble Supreme court from them. They are also requested to send a consolidated compliance report in respect of all the Institutes / Hospitals / Organizations etc. under them to Legal Cell by 20<sup>th</sup> June, 2023 for filing an affidavit in this regard, as directed by the Hon'ble Supreme court of India.

3 This has the approval of Secretary (HFW).

Encl: As stated.

  
(M.K. Hanikumar)  
Deputy Secretary (Legal)

Copy to:

Dir(GKB)/ Dir(RK)/ Dir(NG)/ Dir(GJ)/ Dir(MJ)/ Dir(RK)/ Dir(HM)/ Dir(DVKR)/ Dir(KR)/ Dir(PS)/ Dir(SK)/ DS(KKK)/ DS(NB)/ DS(SN) / DS(NKS)/ DS(MM)/ DS(PK)/ DS(PM)/ DS(AKS)/ JD(DK)/ DS(RK)-NACO/ DS(RK)-PMSSY/ DS(SNJ)-DHR/ DS(DK)/ DS(MKS)/ DS(MKHK)/ JD(KJ)/ DS(SK)-IFD/ DS(CKR)/ DS (KA)/ DS(GAR)/ DS(AS)/ DS(AC)

Secretary (DHR) / DG-Dte.GHS / AS(LA)/ AS(VHZ)/ AS(JKM)/ JS(AMB)/ JS(ERS)/ JS(VC)/ JS(VJ)/ JS(PAB)/ JS(RM)/ JS(GM) / JS(MK)/ JS(SM)



All Communications Should  
be Addressed to Registrar  
by Designation and not by  
Name.

Pin Code - 110001

Delivery Mode: Registered

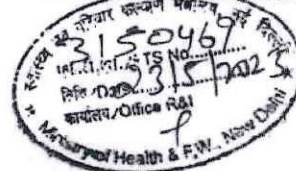
D. No. 21189/2012 /SEC-

III

SUPREME COURT OF  
INDIA

NEW DELHI

16th May, 2023



From:

The Assistant Registrar,  
Supreme Court of India, New Delhi.

To,

1 THE SECRETARY, MINISTRY OF  
AGRICULTURE AND FARMER  
WELFARE,,  
KRISHI BHAWAN,,  
DISTRICT- NEW DELHI, DELHI

PID: 98280/2023 IN C.A.  
NO.2482/2014 (SEC III)

2 THE SECRETARY, MINISTRY OF  
ANIMAL HUSBANDRY, DAIRYING  
AND FISHERIES,  
KRISHI BHAWAN,,  
DISTRICT- NEW DELHI, DELHI

PID: 98281/2023 IN C.A.  
NO.2482/2014 (SEC III)

3 THE SECRETARY, MINISTRY OF  
AYUSH,  
AYUSH BHAWAN, B BLOCK, GPO  
COMPLEX, INA,,  
DISTRICT- NEW DELHI, DELHI

PID: 98282/2023 IN C.A.  
NO.2482/2014 (SEC III)

4 THE SECRETARY, MINISTRY OF  
CHEMICALS AND FERTILIZERS,  
SHASTRI BHAWAN,  
DISTRICT- NEW DELHI, DELHI

PID: 98283/2023 IN C.A.  
NO.2482/2014 (SEC III)

5 THE SECRETARY, MINISTRY OF  
CIVIL AVIATION,  
RAJIV GANDHI BHAWAN 110003,  
BLOCK B, SAFDARJUNG AIRPORT  
AREA,  
DISTRICT- NEW DELHI, DELHI

PID: 98284/2023 IN C.A.  
NO.2482/2014 (SEC III)

6 THE SECRETARY, MINISTRY OF  
COAL,  
J687+9W8, RAJPATH AREA,  
CENTRAL SECRETARIAT,  
DISTRICT- NEW DELHI, DELHI

PID: 98285/2023 IN C.A.  
NO.2482/2014 (SEC III)

7 THE SECRETARY, MINISTRY OF  
COMMERCE AND INDUSTRIES,  
VANIJYA BHAWAN,

PID: 98286/2023 IN C.A.  
NO.2482/2014 (SEC III)

**DISTRICT- NEW DELHI, DELHI**

- |    |                                                                                                                                                                           |                                                   |
|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| 8  | THE SECRETARY, MINISTRY OF<br>COMMUNICATION,<br>20, ASHOKA RD, CONNAUGHT<br>PLACE,,<br>DISTRICT- NEW DELHI, DELHI                                                         | PID: 98287/2023 IN C.A.<br>NO.2482/2014 (SEC III) |
| 9  | THE SECRETARY, MINISTRY OF<br>CONSUMER AFFAIR, FOOD AND<br>PUBLIC DISTRIBUTION,<br>J6JC+WH8, KRISHI BHAWAN, RAFI<br>MARG, CONNAUGHT PLACE,,<br>DISTRICT- NEW DELHI, DELHI | PID: 98288/2023 IN C.A.<br>NO.2482/2014 (SEC III) |
| 10 | THE SECRETARY, MINISTRY OF<br>COOPERATION,<br>ATAL AKSHYA URJA BHAWAN,<br>CGO COMPLEX, PRAGATI VIHAR,,<br>DISTRICT- NEW DELHI, DELHI                                      | PID: 98289/2023 IN C.A.<br>NO.2482/2014 (SEC III) |
| 11 | THE SECRETARY, MINISTRY OF<br>CORPORATE AFFAIRS,<br>PARYAVARAN BHAWAN, CGO<br>COMPLEX, LODHI ROAD,,<br>DISTRICT- NEW DELHI, DELHI                                         | PID: 98290/2023 IN C.A.<br>NO.2482/2014 (SEC III) |
| 12 | THE SECRETARY, MINISTRY OF<br>CULTURE,<br>ROOM NO. 501, 'C' WING, SHASTRI<br>BHAWAN,<br>DISTRICT- NEW DELHI, DELHI                                                        | PID: 98291/2023 IN C.A.<br>NO.2482/2014 (SEC III) |
| 13 | THE SECRETARY, MINISTRY OF<br>DEFENCE,<br>SOUTH BLOCK,,<br>DISTRICT- NEW DELHI, DELHI                                                                                     | PID: 98292/2023 IN C.A.<br>NO.2482/2014 (SEC III) |
| 14 | THE SECRETARY, MINISTRY OF<br>DEVELOPMENT OF NORTH<br>EASTERN REGION,<br>VIGYAN BHAWAN ANNEXE,<br>MAULANA AZAD ROAD,,<br>DISTRICT- NEW DELHI, DELHI                       | PID: 98293/2023 IN C.A.<br>NO.2482/2014 (SEC III) |
| 15 | THE SECRETARY, MINISTRY OF<br>EARTH SCIENCES,<br>PRITHVI BHAVAN, OPP. INDIA<br>HABITAT CENTRE, LODHI ROAD,,<br>DISTRICT- NEW DELHI, DELHI                                 | PID: 98294/2023 IN C.A.<br>NO.2482/2014 (SEC III) |



- 16 THE SECRETARY, MINISTRY OF  
EDUCATION,  
SHASTRI BHAWAN,,  
DISTRICT- NEW DELHI, DELHI  
PID: 98295/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 17 THE SECRETARY, ,  
MINISTRY OF ELECTRONICS AND  
INFORMATION TECHNOLOGY  
(GOVERNMENT OF INDIA)  
ELECTRONICS NIKETAN, 6, CGO  
COMPLEX, LODHI ROAD,,  
DISTRICT- NEW DELHI, DELHI  
PID: 98296/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 18 THE SECRETARY, MINISTRY OF  
ENVIRONMENT, FOREST AND  
CLIMATE CHANGE,  
INDIRA PARYAVARAN BHAWAN  
JORBAGH ROAD,,  
DISTRICT- NEW DELHI, DELHI  
PID: 98297/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 19 THE SECRETARY, MINISTRY OF  
EXTERNAL AFFAIRS,  
SO(DB), 74B SOUTH BLOCK,,  
DISTRICT- NEW DELHI, DELHI  
PID: 98298/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 20 THE SECRETARY, MINISTRY OF  
FINANCE,  
3RD FLOOR JEEVANDEEP  
BUILDING, SANSAD MARG,  
DISTRICT- NEW DELHI, DELHI  
PID: 98299/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 21 THE SECRETARY, MINISTRY OF  
FOOD PROCESSING INDUSTRIES,  
PANCHSHEEL BHAWAN, AUGUST  
KRANTI MARG KHELGAON,,  
DISTRICT- NEW DELHI, DELHI  
PID: 98300/2023 IN C.A.  
NO.2482/2014 (SEC III)
- ✓ 22 THE SECRETARY, MINISTRY OF  
HEALTH AND FAMILY WELFARE,  
NIRMAN BHAWAN,  
DISTRICT- NEW DELHI, DELHI  
PID: 98301/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 23 THE SECRETARY, MINISTRY OF  
HEAVY INDUSTRIES,  
UDYOG BHAWAN,  
DISTRICT- NEW DELHI, DELHI  
PID: 98302/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 24 THE SECRETARY, MINISTRY OF  
HOME AFFAIRS,  
NORTH BLOCK, CENTRAL  
SECRETARIAT,,  
PID: 98303/2023 IN C.A.  
NO.2482/2014 (SEC III)

**DISTRICT- NEW DELHI, DELHI**

- 25 **THE SECRETARY, MINISTRY OF  
HOUSING AND URBAN AFFAIRS,  
MAULANA AZAD ROAD, NIRMAN  
BHAWAN,,  
DISTRICT- NEW DELHI, DELHI** **PID: 98304/2023 IN C.A.  
NO.2482/2014 (SEC III)**
- 26 **THE SECRETARY, MINISTRY OF  
INFORMATION AND  
BROADCASTING,  
SHASTRI BHAWAN, ,  
DISTRICT- NEW DELHI, DELHI** **PID: 98305/2023 IN C.A.  
NO.2482/2014 (SEC III)**
- 27 **THE SECRETARY, MINISTRY OF  
JAL SHAKTI (WATER),  
SHRAM SHAKTI BHAWAN, RAFIQ  
MARG,  
DISTRICT- NEW DELHI, DELHI** **PID: 98306/2023 IN C.A.  
NO.2482/2014 (SEC III)**
- 28 **THE SECRETARY, MINISTRY OF  
LABOUR AND EMPLOYMENT,  
SHRAM SHAKTI BHAWAN RAFI  
MARG,,  
DISTRICT- NEW DELHI, DELHI** **PID: 98307/2023 IN C.A.  
NO.2482/2014 (SEC III)**
- 29 **THE SECRETARY, MINISTRY OF  
LAW AND JUSTICE,  
4TH FLOOR, A-WING, SHASTRI  
BHAWAN,  
DISTRICT- NEW DELHI, DELHI** **PID: 98308/2023 IN C.A.  
NO.2482/2014 (SEC III)**
- 30 **THE SECRETARY, MINISTRY OF  
MICRO, SMALL AND MEDIUM  
ENTERPRISES,  
UDYOG BHAWAN, RAFI MARG ,  
DISTRICT- NEW DELHI, DELHI** **PID: 98309/2023 IN C.A.  
NO.2482/2014 (SEC III)**
- 31 **THE SECRETARY, MINISTRY OF  
MINES,  
SHASTRI BHAWAN, DR. RAJENDRA  
PRASAD ROAD,,  
DISTRICT- NEW DELHI, DELHI** **PID: 98310/2023 IN C.A.  
NO.2482/2014 (SEC III)**
- 32 **THE SECRETARY, MINISTRY OF  
MINORITY AFFAIRS,  
PARYAVARAN BHAWAN, CGO  
COMPLEX, LODHI ROAD,,  
DISTRICT- NEW DELHI, DELHI** **PID: 98311/2023 IN C.A.  
NO.2482/2014 (SEC III)**



- 33 THE SECRETARY, MINISTRY OF  
NEW AND RENEWABLE ENERGY,  
ATAL AKSHAY URJA BHAWAN,  
CGO COMPLEX,, LODHI ROAD,,  
DISTRICT- NEW DELHI, DELHI  
PID: 98312/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 34 THE SECRETARY, MINISTRY OF  
PANCHAYATI RAJ,  
JEEVAN PRAKASH BUILDING, 25  
K.G.MARG, ,  
DISTRICT- NEW DELHI, DELHI  
PID: 98313/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 35 THE SECRETARY, MINISTRY OF  
PARLIAMENTARY AFFAIRS,  
JEEVAN PRAKASH BUILDING, 25  
K.G.MARG, ,  
DISTRICT- NEW DELHI, DELHI  
PID: 98314/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 36 THE SECRETARY, MINISTRY OF  
PERSONNEL, PUBLIC GRIEVANCES  
AND PENSION,  
NORTH BLOCK,  
DISTRICT- NEW DELHI, DELHI  
PID: 98315/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 37 THE SECRETARY, MINISTRY OF  
PETROLEUM AND NATURAL GAS,  
A-WING, SHASTRI RAJENDRA  
PRASAD ROAD, 110001, AZAD  
BHAWAN RD, IP ESTATE,,  
DISTRICT- NEW DELHI, DELHI  
PID: 98316/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 38 THE SECRETARY, MINISTRY OF  
PLANNING,  
101, K.L. BHAWAN, JANPATH,  
DISTRICT- NEW DELHI, DELHI  
PID: 98317/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 39 THE SECRETARY, MINISTRY OF  
PORTS, SHIPPING AND  
WATERWAY,  
PARIVAHAN BHAVAN, 1,  
PARLIAMENT STREET,,  
DISTRICT- NEW DELHI, DELHI  
PID: 98318/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 40 THE SECRETARY, MINISTRY OF  
POWER,  
SHRAM SHAKTI BHAWAN. RAFI  
MARG,,  
DISTRICT- NEW DELHI, DELHI  
PID: 98319/2023 IN C.A.  
NO.2482/2014 (SEC III)
- 41 THE SECRETARY, MINISTRY OF  
PRIME MINISTER'S OFFICE,  
PID: 98320/2023 IN C.A.  
NO.2482/2014 (SEC III)

E BLOCK, E BLOCK, CENTRAL  
 SECRETARIAT,,  
 DISTRICT- NEW DELHI, DELHI

- 42 THE SECRETARY, MINISTRY OF  
 RURAL DEVELOPMENT, PID: 98321/2023 IN C.A.  
 KRISHI BHAVAN, DR. RAJENDRA NO.2482/2014 (SEC III)  
 PRASAD ROAD,,  
 DISTRICT- NEW DELHI, DELHI
- 43 THE SECRETARY, MINISTRY OF  
 ROAD TRANSPORT AND HIGHWAY, PID: 98322/2023 IN C.A.  
 TRANSPORT BHAWAN, 1, NO.2482/2014 (SEC III)  
 PARLIAMENT STREET,,  
 DISTRICT- NEW DELHI, DELHI
- 44 THE SECRETARY, MINISTRY OF  
 RAILWAY, PID: 98323/2023 IN C.A.  
 RAIL BHAWAN, NO.2482/2014 (SEC III)  
 DISTRICT- NEW DELHI, DELHI
- 45 THE SECRETARY, MINISTRY OF  
 SCIENCE AND TECHNOLOGY, PID: 98324/2023 IN C.A.  
 TECHNOLOGY BHAVAN, NEW NO.2482/2014 (SEC III)  
 MEHRAULI ROAD,,  
 DISTRICT- NEW DELHI, DELHI
- 46 THE SECRETARY, MINISTRY OF  
 SKILL DEVELOPMENT AND PID: 98325/2023 IN C.A.  
 ENTREPRENEURSHIP, NO.2482/2014 (SEC III)  
 SHRAM SHAKTI BHAWAN, RAFI  
 MARG,,  
 DISTRICT- NEW DELHI, DELHI
- 47 THE SECRETARY, MINISTRY OF  
 SOCIAL JUSTICE AND PID: 98326/2023 IN C.A.  
 EMPOWERMENT, NO.2482/2014 (SEC III)  
 SHASTRI BHAWAN,,  
 DISTRICT- NEW DELHI, DELHI
- 48 THE SECRETARY, MINISTRY OF  
 STATISTICS AND PROGRAMME PID: 98327/2023 IN C.A.  
 IMPLEMENTATION, NO.2482/2014 (SEC III)  
 NORTH BLOCK,,  
 DISTRICT- NEW DELHI, DELHI
- 49 THE SECRETARY, MINISTRY OF  
 STEEL, PID: 98328/2023 IN C.A.  
 UDYOG BHAWAN,, NO.2482/2014 (SEC III)  
 DISTRICT- NEW DELHI, DELHI



- 50 THE SECRETARY, MINISTRY OF  
 TEXTILES,  
 UDYOG BHAWAN, RAFI AHMED  
 KIDWAI MARG, RAJPATH AREA,  
 CENTRAL SECRETARIAT,,  
 DISTRICT- NEW DELHI, DELHI  
 PID: 98329/2023 IN C.A.  
 NO.2482/2014 (SEC III)
- 51 THE SECRETARY, MINISTRY OF  
 TOURISM,  
 TRANSPORT BHAWAN, 1, SANSAD  
 MARG, ,  
 DISTRICT- NEW DELHI, DELHI  
 PID: 98330/2023 IN C.A.  
 NO.2482/2014 (SEC III)
- 52 THE SECRETARY, MINISTRY OF  
 TRIBAL AFFAIRS,  
 SHASTRI BHAWAN, DR. R.P. ROAD,,  
 DISTRICT- NEW DELHI, DELHI  
 PID: 98331/2023 IN C.A.  
 NO.2482/2014 (SEC III)
- 53 THE SECRETARY, MINISTRY OF  
 WOMEN AND CHILD  
 DEVELOPMENT,  
 SHASTRI BHAWAN, A - WING, DR.  
 RAJENDRA PRASAD ROAD,,  
 DISTRICT- NEW DELHI, DELHI  
 PID: 98332/2023 IN C.A.  
 NO.2482/2014 (SEC III)
- 54 THE SECRETARY, MINISTRY OF  
 YOUTH AFFAIRS AND SPORTS,  
 SHASTRI BHAWAN, ,  
 DISTRICT- NEW DELHI, DELHI  
 PID: 98333/2023 IN C.A.  
 NO.2482/2014 (SEC III)

**CIVIL APPEAL No. 2482 OF 2014**

(Against the final judgment and order dated 15.03.2012 passed by the High Court of  
 Judicature at Bombay at Goa in W.P. No. 602/2011)

AURELIANO FERNANDES

... Petitioner(s)/Appellant(s)

STATE OF GOA . AND  
 OTHERS

VERSUS

... Respondent(s)

Sir,

I am directed to forward herewith a certified copy of reportable judgment of this  
 Court, as contained in the record of proceeding dated **12th May, 2023** passed by this  
 Hon'ble Court in the matter above mentioned for your information, necessary action and  
 compliance.

Please acknowledge receipt.

Yours faithfully,

*[Signature]*  
 ASSISTANT REGISTRAR

Civil Appeal No. 2482 of 2014

REPORTABLE

IN THE SUPREME COURT OF INDIA  
 CIVIL APPELLATE JURISDICTION

CIVIL APPEAL NO. 2482 of 2014

Certified to be true copy

Assistant Registrar(Judl.)

Supreme Court of India

AURELIANO FERNANDES

....

APPELLANT

Versus

154831

STATE OF GOA AND OTHERS

....

RESPONDENTS

INDEX

A.	<u>Scope of the Appeal</u>	1
B.	<u>Sequence of Events</u>	1-8
	(a) Proceedings before the First Committee	1-6
	(b) Proceedings before the Executive Council	6-8
C.	<u>Decision of the Disciplinary Authority and the Appellate Authority</u>	8-9
D.	<u>Decision of the High Court</u>	9-10
E.	<u>Arguments advanced by counsel for the parties</u>	10-16
	(a) Counsel for the appellant	10-12
	(b) Counsel for the respondents No. 2 & 3	12-16
F.	<u>The TRIAD: Articles 309, 310 and 311 of the Constitution of India</u>	16-19
	(a) Article 309: Conditions of Service	17
	(b) Article 310 : Doctrine of Pleasure	18
	(c) Article 311 : A Manifestation of the Principles of Natural Justice	19



Civil Appeal No. 2482 of 2014

G.	<u>Article 14 : Bedrock of the Principles of Natural Justice</u>	20-21
H.	<u>The Twin Anchors : Nemo Jux In Cause Sua and Audi Alterem Partem</u>	21-26
I.	<u>Fair Action and Impartiality in Service Jurisprudence</u>	26-29
J.	<u>The Statutory Regime</u>	29-31
	(a) Goa University Statute	29
	(b) CCS (CCA) Rules	29-30
	(c) Pragmatic Application of the "As far as is practicable" Rule	30-31
K.	<u>Journey from "Vishaka" Case to the Posh Act</u>	31-38
	(a) Vishaka Guidelines: Filling in the vacuum	31-33
	(b) Medha Kotwal Lele's case : Follow up through continuing mandamus	33-36
	(c) Enactment of the Posh Act and Rules	36-37
	(d) Breathing Reasonableness into the Procedural Regime	37-38
L.	<u>Analysis and Discussion</u>	38-49
	(a) Scope of interference by the High Court in Judicial Review	39-40
	(b) Extent of Adherence to the "as far as practicable" norm	40-42
	(c) The Committee's Understanding of its mandate	42-44
	(d) Whirlwind Proceedings	44-47
	(e) How did the Executive Council Falter?	47-49
M.	<u>Conclusion</u>	49-52
N.	<u>Epilogue</u>	53-55
O.	<u>Directions</u>	55-59

\*\*\*\*

## JUDGEMENT

HIMA KOHLI, J.

### A. SCOPE OF THE APPEAL

1. A challenge has been laid by the appellant to the judgment dated 15<sup>th</sup> March, 2012, passed by the High Court of Judicature at Bombay Bench, at Goa, dismissing a writ petition<sup>1</sup> preferred by him against an order<sup>2</sup> passed by the Executive Council<sup>3</sup> of Goa University (Disciplinary Authority) accepting the Report<sup>4</sup> of the Standing Committee for Prevention of Sexual Harassment at Work Place<sup>5</sup> and imposing upon him, a major penalty of dismissal from services and disqualification from the future employment under Rule 11(IX) of the Central Civil Services (Classification, Control and Appeal) Rules, 1965<sup>6</sup> which was duly upheld by the Governor and the Chancellor of Goa University, being the Appellate Authority<sup>7</sup>.

### B. SEQUENCE OF EVENTS

#### (a) PROCEEDINGS BEFORE THE FIRST COMMITTEE:

2. The factual matrix of the case needs to be placed in a chronological sequence. The appellant commenced his career in the respondent no. 2 – Goa University as a Temporary Lecturer in the Department of Political Science, in the year 1996. He was

<sup>1</sup> W.P. No. 602 of 2011

<sup>2</sup> Dated 10<sup>th</sup> May, 2010

<sup>3</sup> For short 'EC'

<sup>4</sup> Dated 05<sup>th</sup> June, 2009

<sup>5</sup> For short 'The Committee'

<sup>6</sup> For short the CCS (CCA) Rules

<sup>7</sup> Vide Order dated 19<sup>th</sup> April, 2011



CIVIL APPEAL NO. 2482 of 2014

appointed as the Head of the said Department, in the year 2003. It is the appellant's version, which is strongly refuted by the other side, that aggrieved by the passing of a resolution by the Departmental Council of the Department of Political Science against them, two girl students along with their friends submitted a complaint to the respondent no. 2 – University, alleging physical harassment at his hands. The said complaints<sup>8</sup> were the starting point of an inquiry initiated by the Committee on receiving complaints by the Registrar of the respondent no. 2 – University<sup>9</sup>. The Committee served a notice<sup>10</sup> on the appellant calling upon him to explain the charges levelled against him in nine complaints and to appear before it for a personal hearing on 24<sup>th</sup> April, 2009, a date that was subsequently changed to 27<sup>th</sup> April, 2009. Contemporaneously, the Registrar of the respondent no. 2 – University directed the appellant to hand over charge and proceed on leave till the conclusion of the inquiry.

3. The appellant furnished a detailed reply to the Committee, running into fifty-three pages wherein he raised some preliminary objections to the inquiry being conducted by the Committee, alleged a well-organized conspiracy against him by some wayward students in connivance with the members of the faculty and refuted the contents of fourteen depositions of girl students forwarded to him by the Committee. He concluded by stating that the charges of sexual harassment levelled against him were completely false and baseless. The appellant also addressed a letter to the Registrar seeking

<sup>8</sup> Complaint dated 11.03.2009 & 17.03.2009

<sup>9</sup> Under cover of letter dated 08.04.2009

<sup>10</sup> Dated 17<sup>th</sup> April, 2009

removal of two Members of the Committee on the ground of bias and on a plea that being his subordinates, they were prone to bias.

4. The Committee called the appellant for a hearing on 27<sup>th</sup> April, 2009. It was alleged by the appellant that the deposition of all the complainants including the witness named by him were recorded while he was made to wait outside the Committee room. He was called later on and the Committee recorded his statement. Even on the next hearing, on 28<sup>th</sup> April, 2009, a similar procedure was adopted by the Committee. On 30<sup>th</sup> April, 2009, the appellant received a notice from the Committee enclosing therewith another complaint of sexual harassment received against him to which he was directed to respond and present himself on 6<sup>th</sup> May, 2009. *Vide* letter 2<sup>nd</sup> May 2009, the appellant sought more time to submit a reply to the additional complaint and permission to engage an Advocate to appear for him before the Committee.

5. The appellant submitted his reply to the notice on 8<sup>th</sup> May, 2009. On 6<sup>th</sup> May, 2009, the request of the appellant to engage a lawyer was declined by the Committee. On the same day, a corrigendum was issued by the Committee to the earlier letter<sup>11</sup> informing him that the next date fixed for filing his reply should be read as "12<sup>th</sup> May, 2009" instead of "12<sup>th</sup> June, 2009" and the date for further deposition should be read as "14<sup>th</sup> May, 2009" instead of "12<sup>th</sup> June, 2009".

---

<sup>11</sup> Dated 5<sup>th</sup> May, 2009



CIVIL APPEAL NO. 2482 of 2014

6. Vide letter dated 8<sup>th</sup> May, 2009, the appellant objected to the inquiry being conducted by the Committee on a complaint<sup>12</sup> received from an ex-student of the respondent no. 2 – University on the ground that she was neither a student nor an employee of the University. Additionally, he asked for a copy of the said complaint, besides the statement of deposition that had already been furnished to him.
7. On 12<sup>th</sup> May, 2009, the appellant forwarded an affidavit of a witness to refute some of the allegations levelled against him by the complainants. Vide letter of even date, the Committee forwarded an additional deposition of a member of the Faculty, Dr. Rahul Tripathi, who had stepped down from the Committee constituted to look into the complaints against the appellant and deposed as a witness.
8. The appellant wrote a letter dated 13<sup>th</sup> May, 2009 to the Committee seeking some time to appear before it on a plea that he was admitted in the hospital with a severe back-ache. Vide notice dated 14<sup>th</sup> May, 2009, the Committee directed the appellant to appear before it on 19<sup>th</sup> May, 2009 for recording his deposition and for submitting his written reply to the fresh deposition of the other complainant. Further extension of time, as requested, was however declined by the Committee.
9. In the meantime, vide letter dated 13<sup>th</sup> May, 2009, the appellant applied to the respondent no.2 – University seeking voluntary retirement on health grounds. However, the said application was withdrawn by him on 18<sup>th</sup> May, 2009. On the same date, an advocate engaged by the appellant's brother issued a notice to the respondents no.2 and

<sup>12</sup> Signed on 27<sup>th</sup> April, 2009

3 seeking extension of time by one month for the appellant to appear before the Committee.

10. In its letter dated 20<sup>th</sup> May, 2009, the Committee noted that though the appellant had failed to appear before it on 19<sup>th</sup> May, 2009 for recording his further deposition, he was being granted one last opportunity to present himself on 23<sup>rd</sup> May, 2009, for completing his deposition and for cross-examining the witness including the complainants. Alongside, six more depositions were forwarded to the appellant, seeking his reply by 22<sup>nd</sup> May, 2009.

11. The appellant addressed yet another letter<sup>13</sup> to the Committee expressing his inability to attend the proceedings on 23<sup>rd</sup> May, 2009, on health grounds and requested for postponement of the proceeding by 3-4 weeks. However, his request was turned down by the Committee on the very same day and the appellant was directed to remain present on 23<sup>rd</sup> May, 2009, failing which, he was informed that the Committee would proceed further with the inquiry. A second request<sup>14</sup> made by the appellant for seeking postponement of the proceedings of the Committee, met the same fate.

12. After about ten days, the appellant sent a letter<sup>15</sup> to the Chairperson of the Committee stating *inter alia* that he had partially recovered from his ailment and was in a position to depose. He sought fresh dates to enable him to furnish a reply to the additional depositions received by him. However, by then the Committee had proceeded

<sup>13</sup> Dated 22<sup>nd</sup> May, 2009

<sup>14</sup> Dated 23<sup>rd</sup> May, 2009

<sup>15</sup> Dated 4<sup>th</sup> June, 2009



CIVIL APPEAL NO. 2482 of 2014

*ex parte* against the appellant and submitted its Report<sup>16</sup> to the Registrar of the respondent no. 2 – University stating that 18 meetings had taken place in connection with the inquiry that had established sexual harassment of the complaints by the appellant which act amounted to a grave misconduct and was in gross violation of Rule 3(1)(III) of the CCS Conduct Rules and consequently, recommended termination of his services.

(b) PROCEEDINGS BEFORE THE EXECUTIVE COUNCIL

13. The EC held a meeting on 13<sup>th</sup> June, 2009 wherein the Report submitted by the Committee was accepted and the appellant was placed under suspension with immediate effect. *Vide* Memorandum dated 8<sup>th</sup> September, 2009, the Chairman of the EC informed the appellant that the EC proposed to conduct an inquiry against him under Rule 14 of the CCS (CCA) Rules. Enclosed with the said Memorandum, was the statement of the Articles of Charge, statement of the imputation of the misconduct in support of each Article of Charge, list of documents and a list of witnesses for sustaining the said charges. The appellant was given ten days' time to submit a written statement of his defence and state whether he desired to be heard in person.

14. The appellant submitted a detailed reply to the aforesaid Memorandum, running into twenty pages and also demanded several documents and information relating to the complaints of sexual harassment made against him, on the plea that they were relevant

<sup>16</sup> Dated 5<sup>th</sup> June, 2009

for submitting his written statement which was turned down by the Vice Chancellor of the respondent no. 2 – University<sup>17</sup> and he was granted twenty days to respond.

15. On 15<sup>th</sup> October, 2009 the EC appointed a former Judge of the Bombay High Court to conduct an inquiry into the charges framed against the appellant and he was informed that the Inquiry Officer will hold a preliminary inquiry into the charges framed against him on 9<sup>th</sup> November, 2009. The first sitting of the Inquiry Committee conducted on 9<sup>th</sup> November, 2009, was duly attended by the appellant and his Advocate. The second meeting was scheduled on 7<sup>th</sup> December, 2009 on which date when the Presenting Officer appearing on behalf of the respondent no. 2 – University referred to the judgment dated 26<sup>th</sup> March, 2004, passed by this Court in the case of Medha Kotwal Lele and Others v. Union of India and Others<sup>18</sup> and the amendment<sup>19</sup> to the proviso to Rule 14(2) of the CCS (CCA) Rules that provides that where there is a complaint of sexual harassment within the meaning of Rule 3C of the Central Civil Services (Conduct) Rules, 1964<sup>20</sup>, the Complaints Committee shall be deemed to be the inquiring authority for the purpose of imposing major penalties, the Inquiry Officer decided to keep the inquiry in abeyance, so as to ascertain as to whether any further directions had been issued by the Supreme Court in Medha Kotwal's case (supra).

16. On 15<sup>th</sup> December, 2009, the Registrar of the respondent no. 2 - University informed the appellant that the disciplinary proceedings initiated against him on the

<sup>17</sup> vide letter 17<sup>th</sup> September, 2009

<sup>18</sup> (2013) 1 SCC 297

<sup>19</sup> Dated 1<sup>st</sup> July, 2004

<sup>20</sup> CCS (Conduct) Rules



CIVIL APPEAL NO. 2462 of 2014

recommendations made by the EC in its meeting held on 12<sup>th</sup> December, 2009, stood terminated and the order appointing the Inquiry Officer had also been withdrawn in the light of the order dated 26<sup>th</sup> April, 2004, passed by the this Court in Medha Kotwal's case holding that the report of the Complaints Committee for Prevention of Sexual Harassment of Women at Workplace shall be deemed to be an Inquiry Report under the CCS (CCA) Rules which shall be binding on the disciplinary authority for initiating disciplinary action against the government servant. Describing the decision taken by the EC on 14<sup>th</sup> June, 2009 of appointing an Inquiry Officer to inquire into the charges framed against the appellant as inadvertent, the Registrar informed the appellant that the disciplinary authority will decide the further course of action against him under the extant rules.

C. DECISION OF THE DISCIPLINARY AUTHORITY AND THE APPELLATE AUTHORITY

17. This was followed by issuance of a Memorandum<sup>21</sup> by the Vice-Chancellor of the respondent no. 2 – University on behalf of the EC informing the appellant that in its meeting conducted on 28<sup>th</sup> January, 2010, the EC had accepted the report of the Committee and decided that he was unfit to be retained in service in view of the gravity of the charges levelled against him. Proposing to impose a major penalty of dismissal

<sup>21</sup> Dated 17<sup>th</sup> February, 2010

thereby disqualifying him from future employment as contemplated under the Rules<sup>22</sup>, the appellant was granted two weeks to submit his representation.

18. The appellant submitted his reply on 13<sup>th</sup> March, 2010. After examining his reply, the disciplinary authority dismissed the appellant from service *vide* order dated 10<sup>th</sup> May, 2010. The appeal<sup>23</sup> preferred by the appellant against the said dismissal order was rejected by the order<sup>24</sup> of the Appellate Authority<sup>25</sup>.

#### D. DECISION OF THE HIGH COURT

19. The said orders were challenged before the Bombay High Court. The High Court observed that the Committee had granted ample opportunities to the appellant to cross-examine the complainants and the witnesses, but he had deliberately elected not to appear before it. In such circumstances, the Committee could not be blamed for proceeding *ex-parte* against him and submitting its Report. It was also held that the Committee was justified in discarding the medical certificates submitted by the appellant as he kept on making flimsy excuses to stay away from the enquiry proceedings. The plea of the appellant that the Committee was improperly constituted or its composition was questionable as it comprised of persons who were junior to him in the Department, was rejected as meritless. Further, the contention that the enquiry had been conducted with undue haste, without giving a

<sup>22</sup> Rule 11 (IX) CCS CCA, 1965

<sup>23</sup> Appeal dated 25<sup>th</sup> June, 2010

<sup>24</sup> Dated 19<sup>th</sup> April, 2010

<sup>25</sup> Governor of Goa and Chancellor of Goa University



CIVIL APPEAL NO. 2482 of 2014

fair and reasonable opportunity to the appellant to defend himself, was also turned down. As a result, the High Court did not see any merits in the said writ petition which was dismissed holding that there was no breach of the principles of natural justice and the Service Rules in the case.

**E. ARGUMENTS ADVANCED BY COUNSEL FOR THE PARTIES :**

**(a) COUNSEL FOR THE APPELLANT**

20. Arguing on behalf of the appellant, Mr. Bishwajeet Bhattacharya, learned Senior counsel has assailed the impugned judgment on several counts. The main thrust of his arguments is that the dismissal order<sup>26</sup> passed by the Disciplinary Authority and upheld by the Appellate Authority is based solely on the Report submitted by the Committee which was nothing more than a fact-finding proceeding that had commenced on 17<sup>th</sup> March, 2009 and concluded on 5<sup>th</sup> June, 2009; that though the inquiry had purportedly commenced on 17<sup>th</sup> March, 2009, the first hearing had actually taken place only on 27<sup>th</sup> April, 2009 and the entire proceedings were hurriedly closed within a span of thirty-nine days, by relying on forty-eight documents and forty-three depositions in the course of eighteen meetings without affording the appellant adequate opportunity to defend himself and present his case. It was argued that though the Committee had acceded to the request of the appellant for extension of time<sup>27</sup> and had granted him time till 12<sup>th</sup> June, 2009, the period was abruptly curtailed by almost one month and the date was advanced to 14<sup>th</sup> May, 2009, without any justification and unmindful of the appellant's indisposition,

<sup>26</sup> Order dated 10<sup>th</sup> May, 2010

<sup>27</sup> Vide Letter dated 5<sup>th</sup> May, 2009

as was conveyed. Only when the appellant wrote to the Committee seeking a new date for his further deposition and for conducting further proceedings, did he come to know that the Committee had concluded its proceeding and submitted its Report on 5<sup>th</sup> June, 2009 itself. It is thus contended that the principles of natural justice have been grossly violated by the respondents and the appellant has been deprived of a reasonable opportunity of a fair trial, before passing the order of dismissal from service thereby causing him serious prejudice.

21. Citing the decision of this Court in Union of India and Another v. Tulsiram Patel<sup>28</sup>, learned Senior counsel argued that none of the three clauses to the second proviso to Article 311(2) of the Constitution of India that mandates that no person employed by the Union or the State shall be dismissed or removed from the service except after an inquiry, could have been resorted to by the respondents for having elected not to conduct a proper inquiry before proceeding to dismiss the appellant. It was vehemently contended that contrary to the procedure prescribed under the CCS (CCA) Rules, no proper inquiry was conducted by the respondents and no charges were framed by the first Committee till the date it had submitted its Report<sup>29</sup> and that the Articles of Charge that were framed by the respondents vide Memorandum dated 8<sup>th</sup> September, 2009, were subsequently dropped and the inquiry ordered was abandoned in favour of the Report submitted by the first Committee which was only a fact finding report that could not have been relied on as a final inquiry, particularly when it entailed serious

<sup>28</sup> (1985) 3 SCC 398

<sup>29</sup> Vide letter dated 5<sup>th</sup> June, 2009



CIVIL APPEAL NO. 2482 of 2014

consequences. Learned Senior counsel cited a decision of a learned Single Judge of the Delhi High Court in Sandeep Khurana v. Delhi Transco Ltd. And Others<sup>30</sup> and of a Single Judge of the Karnataka High Court in Professor Giridhar Madras v. Indian Institute of Science represented by Chairman and Others<sup>31</sup> to urge that the Report of the Committee could not be equated with the report of an Inquiry officer, as contemplated in the procedure prescribed in Rule 14 of the CCS (CCA) Rules. This non-adherence to the procedure prescribed has caused grave injustice to the appellant, it being a serious infraction of the principles of natural justice. Allegations of bias were also levelled by the appellant against some members of the first Committee.

22. Learned counsel further argued that none of the three clauses appended to the second proviso of Article 311(2) of the Constitution of India have been pressed against the appellant to justify the impracticability of holding a proper inquiry and that failure on the part of the Committee to follow the procedure as prescribed in the CCS (CCA) Rules itself vitiates the entire proceedings. In fact, it is the case of the appellant that at no stage was he informed by the Committee that the proceeding being conducted by it were disciplinary proceedings and therefore, the report submitted by the said Committee could not have been treated by the respondents as an Inquiry Report under CCS (CCA) Rules.

(b) COUNSEL FOR THE RESPONDENTS NO. 2 AND 3

23. On the other hand, Ms. Ruchira Gupta, learned counsel appearing for the respondents no.2 and 3 strongly refuted the arguments advanced on behalf of the

<sup>30</sup> ILR 2006 (11) Del 1313

<sup>31</sup> (2019) SCC Online Kar 3508

appellant. She submitted that the appellant having failed to challenge the decision taken by the respondent no.2 – University of dispensing with the inquiry contemplated in the Memorandum dated 8<sup>th</sup> September, 2009 at the appropriate stage, he is precluded from doing so belatedly. To substantiate this submission, she referred to the preliminary objections taken by the appellant in his letter dated 18<sup>th</sup> April, 2009 where he had raised five preliminary objections relating to the reconstitution of the Committee and its composition, the prejudice allegedly harboured against him by two members of the Committee and the fact that he was denied access to the records sought by him. But the grievance subsequently sought to be raised about the competence or jurisdiction of the Committee to conduct the inquiry and the procedure adopted by it, was never questioned by the appellant.

24. Referring to the correspondence exchanged between the Committee and the appellant, learned counsel submitted that the appellant was granted at least three opportunities to submit his reply and eighteen hearings were conducted by the Committee but he did not participate in the proceedings on several dates. Only after the appellant failed to turn up and made flimsy excuses of indisposition and repeatedly sought adjournments, did the Committee proceed *ex parte* against him and submitted its Report to the Registrar on 5<sup>th</sup> June, 2009. It was thus sought to be argued that the situation would not have changed in any manner had another opportunity been afforded to the appellant, as requested by him *vide* letter dated 4<sup>th</sup> June, 2009. In this context, the attention of the Court was drawn to the *proviso* to Rule 14(2) of the CCS (CCA)



CIVIL APPEAL NO. 2482 of 2014

Rules, which enjoins the Complaints Committee to hold an inquiry into the complaint of sexual harassment, "as far as practicable", in accordance with the procedure laid down in the Rules. The decision of the Division Bench of the Delhi High Court in Avinash Mishra v. Union of India<sup>32</sup> has been cited to justify the stand of the respondents that the expression "as far as practicable" itself indicates that the Committee is vested with the discretion not to strictly follow the entire procedure as long as the officer charged has been afforded adequate opportunity to explain his stand in respect of the complaint and the relevant material has been disclosed to him.

25. Learned counsel for respondents no. 2 and 3 went on to state that the Committee had afforded adequate opportunities to the appellant to cross-examine the witnesses, produce his witnesses and complete his own deposition but he kept on delaying the proceedings under one pretext or the other. Referring to the Report, she stated that it shows that the Committee had taken note of the detailed reply submitted by the appellant on 25<sup>th</sup> April, 2009 and had dealt with the same at considerable length. Reliance has also been placed on the decisions of this Court in Hira Nath Mishra and Others v. Principal, Rajendra Medical College, Ranchi and Another<sup>33</sup> and P.D. Agrawal v. State Bank of India and Others<sup>34</sup> to argue that principles of natural justice is not an inflexible doctrine and the facts and circumstances of each case have to be examined to see whether the requirements of natural justice stand satisfied. In the present case,

<sup>32</sup> 2014 SCC Online Del 1856

<sup>33</sup> (1973) 1 SCC 805

<sup>34</sup> (2006) 8 SCC 776

having regard to the sensitivity of the matter where no less than seventeen students of the respondent no. 2 – University had submitted complaints of sexual harassment against the appellant, the Committee exercised its discretion by keeping a balance and conducted the proceedings without violating the principles of natural justice, which is amply borne out from a perusal of the Report itself.

26. Learned counsel also refuted the submission made by the other side that failure on the part of the Committee to frame Articles of Charge before conducting the inquiry had caused serious prejudice to the appellant. She submitted that the sum and substance of the complaints were well known to the appellant from the very beginning and all the relevant depositions of the complainants and other witnesses were duly furnished to him. He was afforded ample opportunity to respond to the said complaints, cross-examine the witnesses and produce his own witnesses in defence. Explaining the decision of the respondent no.2 – University to terminate the subsequently constituted inquiry proceedings against the appellant by virtue of the Memorandum dated 8<sup>th</sup> September, 2009, learned counsel alluded to the order dated 26<sup>th</sup> April, 2004, passed by this Court in Medha Kotwal's case (supra), which had clarified that the Complaints Committee as contemplated in Vishaka and Others v. State of Rajasthan and Others<sup>35</sup>, will be the Inquiry Authority for the purposes of the CCS (CCA) Rules and the report of the said Committee will be deemed to be an Inquiry Report on which the Disciplinary Authority shall act in accordance with the Rules. It was submitted that the EC

<sup>35</sup> (1997) 6 SCC 241



CIVIL APPEAL NO. 2482 of 2014

had made a *bona fide* error by appointing an Inquiry Authority to inquire into the charges framed against the appellant and the said decision to recall the order dated 15<sup>th</sup> October, 2009 was duly communicated to the appellant on 15<sup>th</sup> December, 2009. Only thereafter, did the EC issue a fresh Memorandum<sup>36</sup> to the appellant calling upon him to submit his representation on the decision to accept the Report submitted by the Committee and impose on him, a major penalty of dismissal from service.

27. It was thus submitted that no prejudice was caused to the appellant and the Committee had observed the principles of natural justice "*as far as was practical*", in the given facts and circumstances of the case. Adequate opportunity was afforded to the appellant not just by the Committee, but also by the Disciplinary Authority and the Appellate Authority before taking any action against him. Therefore, this was not a case of "no opportunity" or "no hearing" but a case of "adequate opportunity" and "fair hearing" afforded to the appellant before imposing a major penalty of dismissal from service on him, as specified in Section 11 (9) of the CCS (CCA) Rules.

F. THE TRIAD : ARTICLES 309, 310 AND 311 OF THE CONSTITUTION OF INDIA

26. Services under the Union and the States are governed under Part XIV of the Constitution. Article 309 of the Constitution that provides for recruitment and conditions of service of persons serving the Union or a State, Article 310 that refers to the tenure of office of persons serving the Union or a State and Article 311 that deals with dismissal,

<sup>36</sup> dated 17<sup>th</sup> February, 2010

removal or reduction in rank of persons employed in civil capacities under the Union or a State are inter-linked and "form an integrated whole, there being an organic and thematic unity running through them"<sup>37</sup>.

(a) ARTICLE 309: CONDITIONS OF SERVICE

29. Article 309 does not by itself provide for recruitment or conditions of service of Government servants, but confers this power on the appropriate legislature to make the laws and on the President and the Government of a State to make rules relating to these matters. The expression "*conditions of service*" in Article 309 takes in its sweep all those conditions that regulate holding of a post by a person which begins from the time he enters the service till his retirement and even post-retirement, in relation to matters like pension, pending disciplinary proceedings, etc. This expression also includes the right to dismiss such a person from service<sup>38</sup>. A Statute can be enacted by the appropriate Legislature or Rules can be made by the appropriate Executive under Article 309 for prescribing the procedure and the authority who can initiate disciplinary action against a Government servant<sup>39</sup>. It has further been held that any Act or Rule that violates the rights guaranteed to a government servant under Article 311, would be void<sup>40</sup>. Similarly, such an Act or Rule would be treated as void if it violates any of the fundamental rights guaranteed under Part III of the Constitution.

<sup>37</sup> Union of India and Another v. Tulsiram Patel, (1985) 3 SCC 398

<sup>38</sup> State of Madhya Pradesh and Others v. Shardul Singh, (1970) 1 SCC 108

<sup>39</sup> Bk. Sardari Lal v. Union of India and Others, (1971) 1 SCC 411

<sup>40</sup> Moti Ram Deka v. The General Manager, North East Frontier Railway, (1964) 5 SCR 683



CIVIL APPEAL NO. 2452 of 2014

(b) ARTICLE 310: DOCTRINE OF PLEASURE

30. Article 310 embodies the "Doctrine of Pleasure" and in the context of Government servants, relates to their tenure of service. Article 310(1) makes the tenure of Government servants subject to the pleasure of the President or the Governor of a State except as expressly provided for by the Constitution. This Article is analogous to the rights of the Crown in England where all public officers and servants of the Crown are appointed at the pleasure of the Crown and their services can be terminated at will, without assigning any cause<sup>41</sup>. That is the reason why the tenure of the Government servant is subject to the pleasure of the President or the Governor of a State, except as expressly provided for under the Constitution. All members of such services who receive their stipend from the public exchequer, whether at the top of the hierarchy or at the very bottom, are finally answerable to the public and expected to discharge their duties responsibly, efficiently, effectively and above all, for the higher good of the public. It can, therefore, be seen that though the origin of Government servants may be contractual, once appointed to the post or office, they acquire a status and their rights and obligations are no longer determined by the consent of both the parties, but are governed by the Statute or Statutory Rules<sup>42</sup>.

<sup>41</sup> Union of India and Another v. Tulsiram Patel, (1985) 3 SCC 398

<sup>42</sup> Roshan Lal Tandon v. Union of India, (1968) 1 SCR 185

(c) ARTICLE 311 : A MANIFESTATION OF THE PRINCIPLES OF NATURAL JUSTICE

31. This Court has held that in matters of dismissal, removal or reduction in rank of public servants, Article 311 of the Constitution is a manifestation of the essential principles of natural justice. It imposes a duty on the Government to ensure that any such decision against the public servant is preceded by an inquiry that contemplates an opportunity of hearing to be granted to the public servant, who is also entitled to make a representation against such a decision<sup>43</sup>. Article 311 reads as under :

*"311. Dismissal, removal or reduction in rank of persons employed in civil capacities under the Union or a State.—(1) No person who is a member of a civil service of the Union or an all India service or a civil service of a State or holds a civil post under the Union or a State shall be dismissed or removed by an authority subordinate to that by which he was appointed.*

*(2) No such person as aforesaid shall be dismissed or removed or reduced in rank except after an inquiry in which he has been informed of the charges against him and given a reasonable opportunity of being heard in respect of those charges:*

*Provided that where it is proposed after such inquiry, to impose upon him any such penalty, such penalty may be imposed on the basis of the evidence adduced during such inquiry and it shall not be necessary to give such person any opportunity of making representation on the penalty proposed:*

*Provided further that this clause shall not apply—*

*(a) where a person is dismissed or removed or reduced in rank on the ground of conduct which has led to his conviction on a criminal charge; or*

*(b) where the authority empowered to dismiss or remove a person or to reduce him in rank is satisfied that for some reason, to be recorded by that authority in writing, it is not reasonably practicable to hold such inquiry; or*

*(c) where the President or the Governor, as the case may be, is satisfied that in the interest of the security of the State it is not expedient to hold such inquiry.*

*(3) If, in respect of any such person as aforesaid, a question arises whether it is reasonably practicable to hold such inquiry as is referred to in clause (2), the decision thereon of the authority empowered to dismiss or remove such person or to reduce him in rank shall be final."*

<sup>43</sup> Nisha Priya Bhatia v. Union of India and Another, (2020) 13 SCC 56



CIVIL APPEAL NO. 2482 of 2014

32. To provide a sense of security of tenure to Government servants, the Framers of the Constitution have incorporated safeguards in respect of the punishment or dismissal or removal or reduction in their rank as provided for in Clauses (1) and (2) of Article 311. At the same time, being mindful of the very same public interest and public good which does not permit that Government servants found to be corrupt, dishonest or inefficient be continued in service, a remedy is provided under the second proviso to Clause (2) of Article 311 whereunder their services can be dispensed with, without conducting a disciplinary inquiry.

33. Thus, the golden thread that weaves through Articles 309, 310 and 311 is public interest, directed towards larger public good. Together, they form a triad and symbolize the overarching Doctrine of Public Policy.

#### G. ARTICLE 14 : BEDROCK OF THE PRINCIPLES OF NATURAL JUSTICE

34. Principles of natural justice that are reflected in Article 311, are not an empty incantation. They form the very bedrock of Article 14 and any violation of these principles tantamounts to a violation of Article 14 of the Constitution. Denial of the principles of natural justice to a public servant can invalidate a decision taken on the ground that it is hit by the vice of arbitrariness and would result in depriving a public servant of equal protection of law.

35. Article 14, often described as the 'Constitutional Guardian' of the principles of natural justice, expressly forbids the State, as defined in Article 12, from denying to any person, equality before the law or equal protection of the laws. Article 14 provides an

36. The twin anchors on which the principles of natural justice rest in the judicial process, whether quasi-judicial or administrative in nature, are *Nemo Judex In Causa Sua*, i.e., no person shall be a judge in his own cause as justice should not only be done, but should manifestly be seen to be done and *Audi Alteram Partem*, i.e. a person affected by a judicial, quasi-judicial or administrative action must be afforded an opportunity of hearing before any decision is taken.

37. How deeply have Courts internalised and incorporated the principles of natural justice into the Constitution can be perceived from the seven Judge Bench decision in the case of Maneka Gandhi v. Union of India and Another<sup>44</sup>. In this case, where a challenge was laid to the order of impounding the passport of the appellant, which was

Page 21 of 59



CIVIL APPEAL NO. 2482 of 2014

silent on the reasons for such an action and the respondent-State had declined to furnish the reason therefor, it was held that life and liberty of a person cannot be restricted by any procedure that is established by law, but only by procedure that is just, fair and reasonable. Quoting the *audi alteram partem* rule and equating it with "fair play in action", Justice P.N. Bhagwati (as he then was) had authored the judgment for the majority and had observed that:

"14. ....The *audi alteram partem* rule is not cast in a rigid mould and judicial decisions establish that it may suffer situational modifications. The core of it must, however, remain, namely, that the person affected must have a reasonable opportunity of being heard and the hearing must be a genuine hearing and not an empty public relations exercise. That is why Tucker, L.J., emphasised in *Russei v. Duke of Norfolk*<sup>45</sup> that "whatever standard of natural justice is adopted, one essential is that the person concerned should have a reasonable opportunity of presenting his case". What opportunity may be regarded as reasonable would necessarily depend on the practical necessities of the situation. It may be a sophisticated full-fledged hearing or it may be a hearing which is very brief and minimal : it may be a hearing prior to the decision or it may even be a post-decisional remedial hearing. The *audi alteram partem* rule is sufficiently flexible to permit modifications and variations to suit the exigencies of myriad kinds of situations which may arise....."

38. In the captioned case, citing the judgment of a Constitution Bench of this Court in *Rustom Cavasjee Cooper v. Union of India*<sup>46</sup>, wherein it was held that fundamental rights are not a water tight compartment, the Court observed as under:-

"The principle of reasonableness, which legally as well as philosophically, is an essential element of equality or non-arbitrariness pervades Article 14 like a brooding omnipresence and the procedure contemplated by Article 21 must answer the test of reasonableness in order to be in conformity with Article 14"

The emphasis was on the Court's attempt to expand the reach and ambit of the fundamental rights guaranteed in the Constitution rather than attenuate their meaning

<sup>45</sup> 1949 1 ALL ER 109

<sup>46</sup> (1970) 1 SCC 248

and content by a process of judicial construction. Relying on the minority judgment rendered by Justice Fazal Ali in the case of A.K. Gopalan v. State of Madras<sup>47</sup>, this Court went on to hold in Maneka Gandhi's case (supra) that the procedure required to be prescribed under Article 21 must include four essentials namely, notice, opportunity to be heard, impartial tribunal and ordinary course of procedure. It was observed that even on principle, having regard to the impact of Article 14 on Article 21, the concept of reasonableness must be projected in the procedure contemplated by Article 21.

39. In Delhi Transport Corporation v. D.T.C. Mazdoor Congress and Others<sup>48</sup>, a five-Judge Bench of this Court highlighted how essential it is to afford a reasonable opportunity to an employee to put forth his case in a domestic inquiry and the requirement of an employer to comply with the principles of natural justice and fair play, in the following words :

**"202. ....It is now well settled that the 'audi alteram partem' rule which in essence, enforces the equality clause in Article 14 of the Constitution is applicable not only to quasi-judicial orders but to administrative orders affecting prejudicially the party-in-question unless the application of the rule has been expressly excluded by the Act or Regulation or Rule which is not the case here. Rules of natural justice do not supplant but supplement the Rules and Regulations. Moreover, the Rule of Law which permeates our Constitution demands that it has to be observed both substantially and procedurally..... Rule of law posits that the power is to be exercised in a manner which is just, fair and reasonable and not in an unreasonable, capricious or arbitrary manner leaving room for discrimination....."**

[emphasis added]

XXX                      XXX                      XXX

<sup>47</sup> 1950 SCC 228

<sup>48</sup> (1991) Supp (1) SCC 600



CIVIL APPEAL NO. 2482 of 2014

316. Thus it could be held that Article 14 read with Article 16(1) accords right to an equality or an equal treatment consistent with the principles of natural justice. Any law made or action taken by the employer, corporate statutory or instrumentality under Article 12 must act fairly, justly and reasonably. Right to fair treatment is an essential inbuilt of natural justice. Exercise of unbridled and uncanalised discretionary power impinges upon the right of the citizen; vesting of discretion is no wrong provided it is exercised purposively judiciously and without prejudice. Wider the discretion, the greater the chances of abuse. Absolute discretion is destructive of freedom than of man's other inventions. Absolute discretion marks the beginning of the end of the liberty. The conferment of absolute power to dismiss a permanent employee is antithesis to justness or fair treatment. The exercise of discretionary power wide off the mark would breed arbitrary, unreasonable or unfair actions and would not be consistent with reason and justice. The provisions of a statute, regulations or rules that empower an employer or the management to dismiss, remove or reduce in rank of an employee, must be consistent with just, reasonable and fair procedure. It would, further, be held that right to public employment which includes right to continued public employment till the employee is superannuated as per rules or compulsorily retired or duly terminated in accordance with the procedure established by law is an integral part of right to livelihood which in turn is an integral facet of right to life assured by Article 21 of the Constitution. Any procedure prescribed to deprive such a right to livelihood or continued employment must be just, fair and reasonable procedure. In other words an employee in a public employment also must not be arbitrarily, unjustly and unreasonably be deprived of his/her livelihood which is ensured in continued employment till it is terminated in accordance with just, fair and reasonable procedure. Otherwise any law or rule in violation thereof is void."

[emphasis added]

40. The significant role played by procedural fairness in the backdrop of internalising the principles of natural justice into the Constitution cannot be overstated. This aspect has been highlighted by a Division Bench of this Court of which one of us, [Hima Kohli, J], was a member, in Madhyamam Broadcasting Limited v. Union of India & Others<sup>49</sup>.

Speaking for the Bench, Chief Justice D. Y. Chandrachud stated :

"53. The judgment of this Court in Maneka Gandhi (supra) spearheaded two doctrinal shifts on procedural fairness because of the constitutionalising of natural justice. Firstly, procedural fairness was no longer viewed merely as a means to secure a just outcome but a requirement that holds an inherent value in itself. In

<sup>49</sup> (2023) SCC Online 366

view of this shift, the Courts are now precluded from solely assessing procedural infringements based on whether the procedure would have prejudiced the outcome of the case. Instead, the courts would have to decide if the procedure that was followed infringed upon the right to a fair and reasonable procedure, independent of the outcome. In compliance with this line of thought, the courts have read the principles of natural justice into an enactment to save it from being declared unconstitutional on procedural grounds. Secondly, natural justice principles breathe reasonableness into the procedure. Responding to the argument that the principles of natural justice are not static but are capable of being moulded to the circumstances, it was held that the core of natural justice guarantees a reasonable procedure which is a constitutional requirement entrenched in Articles 14, 19 and 21. The facet of *audi alterum partem* encompasses the components of notice, contents of the notice, reports of inquiry, and materials that are available for perusal. While situational modifications are permissible, the rules of natural justice cannot be modified to suit the needs of the situation to such an extent that the core of the principle is abrogated because it is the core that infuses procedural reasonableness. The burden is on the applicant to prove that the procedure that was followed (or not followed) by the adjudicating authority, in effect, infringes upon the core of the right to a fair and reasonable hearing."

- [emphasis supplied]

41. In A.K. Kraipak and Others v. Union of India and Others<sup>50</sup> quoting with approval the judgment In re: H.K. (All Infant)<sup>51</sup>, this Court held that:

"20. The aim of the rules of natural justice is to secure justice or to put it negatively to prevent miscarriage of justice. These rules can operate only in areas not covered by any law validly made. In other words they do not supplant the law of the land but supplement it. The concept of natural justice has undergone a great deal of change in recent years. In the past it was thought that it included just two rules namely: (1) no one shall be a judge in his own case (*Nemo debet esse iudex propria causa*) and (2) no decision shall be given against a party without affording him a reasonable hearing (*audi alteram partem*). Very soon thereafter a third rule was envisaged and that is that quasi-judicial enquiries must be held in good faith, without bias and not arbitrarily or unreasonably. But in the course of years many more subsidiary rules came to be added to the rules of natural justice. Till very recently it was the opinion of the courts that unless the authority concerned was required by the law under which it functioned to act judicially there was no room for the application of the rules of natural justice. The validity of that limitation is now questioned. If the purpose of the rules of natural justice is to prevent miscarriage of justice one fails to see why those rules should be made inapplicable to administrative enquiries. Often times it is not easy to draw the line that demarcates administrative enquiries from quasi-judicial enquiries. Enquiries which were considered administrative at one time are now being considered as quasi-judicial in

<sup>50</sup> (1969) 2 SCC 262

<sup>51</sup> (1967) 1 All ER 226



CIVIL APPEAL NO. 2482 of 2014

character. Arriving at a just decision is the aim of both quasi-judicial enquiries as well as administrative enquiries. An unjust decision in an administrative inquiry may have more far reaching effect than a decision in a quasi-judicial inquiry....."

- [Emphasis supplied]

I. FAIR ACTION AND IMPARTIALITY IN SERVICE JURISPRUDENCE:

42. In the context of service law, it is, therefore mandatory to afford a Government servant or an employee, a reasonable opportunity of being heard before an order is passed. In Mangilal v. State of M.P.<sup>52</sup>, this Court declared that even if a Statute is silent and there are no positive words in the Act or the Rules made thereunder, principles of natural justice must be observed. This is what the Court has held:

"10....Where the statute is silent about the observance of the principles of natural justice, such statutory silence is taken to imply compliance with the principles of natural justice where substantial rights of parties are considerably affected. The application of natural justice becomes presumptive, unless found excluded by express words of statute or necessary intendment. (See Swadeshi Cotton Mills v. Union of India<sup>53</sup>) Its aim is to secure justice or to prevent miscarriage of justice. Principles of natural justice do not supplant the law, but supplement it. These rules operate only in areas not covered by any law validly made. They are a means to an end and not an end in themselves....."

43. In Tulsiram Patel's case (supra), observing that violation of the rules of natural justice would result in arbitrariness which would amount to discrimination, the Constitution Bench made the following observations :

"95. The principles of natural justice have thus come to be recognized as being a part of the guarantee contained in Article 14 because of the new and dynamic interpretation given by this Court to the concept of equality which is the subject-matter of that article. Shortly put, the syllogism runs thus: violation of a rule of natural justice results in arbitrariness which is the same as discrimination; where discrimination is the result of State action, it is a violation of Article 14:

<sup>52</sup> (2004) 2 SCC 447

<sup>53</sup> (1981) 1 SCC 664

therefore, a violation of a principle of natural justice by a State action is a violation of Article 14. Article 14, however, is not the sole repository of the principles of natural justice. What it does is to guarantee that any law or State action violating them will be struck down. The principles of natural justice, however, apply not only to legislation and State action but also where any tribunal, authority or body of men, not coming within the definition of State in Article 12, is charged with the duty of deciding a matter. In such a case, the principles of natural justice require that it must decide such matter fairly and impartially.

96. The rule of natural justice with which we are concerned in these appeals and writ petitions, namely, the *audi alteram partem* rule, in its fullest amplitude means that a person against whom an order to his prejudice may be passed should be informed of the allegations and charges against him, be given an opportunity of submitting his explanation thereto, have the right to know the evidence, both oral or documentary, by which the matter is proposed to be decided against him, and to inspect the documents which are relied upon for the purpose of being used against him, to have the witnesses who are to give evidence against him examined in his presence and have the right to cross-examine them, and to lead his own evidence, both oral and documentary, in his defence. The process of a fair hearing need not, however, conform to the judicial process in a Court of law, because judicial adjudication of causes involves a number of technical rules of procedure and evidence which are unnecessary and not required for the purpose of a fair hearing within the meaning of *audi alteram partem* rule in a quasi-judicial or administrative inquiry. If we look at clause (2) of Article 311 in the light of what is stated above, it will be apparent that that clause is merely an express statement of the *audi alteram partem* rule which is implicitly made part of the guarantee contained in Article 14 as a result of the interpretation placed upon that article by recent decisions of this Court. Clause (2) of Article 311 requires that before a government servant is dismissed, removed or reduced in rank, an inquiry must be held in which he is informed of the charges against him and given a reasonable opportunity of being heard in respect of those charges....."

- [emphasis supplied]

At the same time, a note of caution was added in the captioned case and the Court observed that the rules of natural justice are neither statutory rules nor are they cast in stone. They are flexible and can be adapted and modified by statutes, depending on the exigencies of different situations, the facts and circumstances of the case and the framework of the law<sup>54</sup>.

<sup>54</sup> Also refer : A.K.Kraipak and others v. Union of India and Others, (1969) 2 SCC 262 and Union of India v. Col. J.N. Sinha and Another, (1970) 2 SCC 458



(CIVIL APPEAL NO. 2482 of 2014)

44. In Swadeshi Cotton Mills v. Union of India<sup>55</sup>, in his dissenting judgment, Justice

O. Chinnappa Reddy, had made the following pertinent observations :-

"106. The principles of natural justice have taken deep root in the judicial conscience of our people, nurtured by Dr. Bina pani<sup>56</sup>, A.K. Kraipak<sup>57</sup>, Mohinder Singh Gill<sup>58</sup>, Maneka Gandhi<sup>59</sup>. They are now considered so fundamental as to be "implicit in the concept of ordered liberty and, therefore, implicit in every decision-making function, call it judicial, quasi-judicial or administrative. Where authority functions under a statute and the statute provides for the observance of the principles of natural justice in a particular manner, natural justice will have to be observed in that manner and in no other. No wider right than that provided by statute can be claimed nor can the right be narrowed. Where the statute is silent about the observance of the principles of natural justice, such statutory silence is taken to imply compliance with the principles of natural justice. The implication of natural justice being presumptive it may be excluded by express words of statute or by necessary intendment. Where the conflict is between the public interest and the private interest, the presumption must necessarily be weak and may, therefore, be readily displaced....."

- [emphasis supplied]

45. Thus, ordinarily, courts interpret statutory provisions in sync with the aforesaid principles of natural justice on a premise that no statutory authority would violate the fundamental rights enshrined in the Constitution. When it comes to authorities that are expected to discharge judicial and quasi-judicial functions, the rule of *audi alteram partem* applies with equal force. Reasonableness infuses lifeblood in procedural matters, be it elements of the notice, the contents of the notice, the scope of inquiry, the material available or an adequate opportunity to rebut such material. All of this is to avoid

<sup>55</sup> (1981) 1 SCC 664

<sup>56</sup> AIR 1967 SC 1269

<sup>57</sup> (1969) 2 SCC 262

<sup>58</sup> (1978) 1 SCC 405

<sup>59</sup> (1978) 1 SCC 248

miscarriage of justice at any stage. This is of course fluid and subject to adapting to the demands of a situation in the given facts of a case.

## J. THE STATUTORY REGIME

### (a) GOA UNIVERSITY STATUTE

46. In the above background, we may now proceed to examine the relevant Rules that govern the conditions of service of the appellant herein. The Statutory regime in respect of teachers employed in the respondent no. 2 – University is governed by the Goa University Statute SSB-1 (XXVI). SC-6(i) of the Statute contemplates as follows–

"For disciplinary and departmental action, the teachers shall be governed under the CCS (CCA) Rules, 1965, Fundamental Rules and Supplementary Rules as applicable to the employees of the Goa Government".

### (b) CCS (CCA) RULES :

47. The CCS (CCA) Rules mentioned above, have been enacted by the President of India in exercise of the powers conferred by the *proviso* to Article 309 and Clause 5 of Article 148 of the Constitution of India. Part VI of the CCS (CCA) Rules lays down the procedures for imposing penalties. Rule 3(C) has been incorporated in the CCS (CCA) Rules *vide* GSR 49 dated 7<sup>th</sup> March, 1998 and subsequently, *vide* GSR 823 (E) dated 19<sup>th</sup> November, 2014. The said provision states as follows: -

#### "3C. Prohibition of sexual harassment of working women

(1) No Government servant shall indulge in any act of sexual harassment of any women at any work place.

(2) Every Government servant who is incharge of a work place shall take appropriate steps to prevent sexual harassment to any woman at the work place.

Explanation – (1) For the purpose of this rule –

(a) "sexual harassment" includes any one or more of the following acts or behaviour (whether directly or by implication), namely –



CIVIL APPEAL NO. 2482 of 2014

- (i) physical contact and advances; or
- (ii) a demand or request for sexual favours; or
- (iii) making sexually coloured remarks; or
- (iv) showing pornography; or
- (v) any other unwelcome physical, verbal or non-verbal conduct of a sexual nature."

(c) PRAGMATIC APPLICATION OF THE "AS FAR AS IS PRACTICABLE" RULE

48. Rule 14 of the CCS (CCA) Rules stipulates the procedure for imposing major penalties and is extracted below :

"14. Procedure for imposing major penalties

- (1) No order imposing any of the penalties specified in clauses (v) to (ix) of Rule 11 shall be made except after an inquiry held, as far as may be, in the manner provided in this rule and rule 15, or in the manner provided by the Public Servants (Inquiries) Act, 1850 (37 of 1850), where such inquiry is held under that Act.
- (2) Whenever the disciplinary authority is of the opinion that there are grounds for inquiring into the truth of any imputation of misconduct or misbehaviour against a Government servant, it may itself inquire into, or appoint under this rule or under the provisions of the Public Servants (Inquiries) Act, 1850, as the case may be, an authority to inquire into the truth thereof.

Provided that where there is a complaint of sexual harassment within the meaning of rule 3 C of the Central Civil Services (Conduct) Rules, 1964, the Complaints Committee established in each Ministry or Department or Office for inquiring into such complaints, shall be deemed- to be the inquiring authority appointed by the disciplinary authority for the purpose of these rules and the Complaints Committee shall hold, if separate procedure has not been prescribed for the Complaints Committee for holding the inquiry into the complaints of sexual harassment, the inquiry as far as practicable in accordance with the procedure laid down in these rules."

- [emphasis supplied]

49. As can be seen from the above, when the misconduct relates to a complaint of sexual harassment at the work place, the Complaints Committee constituted by the respondent no.2-University to examine such a complaint, dons the mantle of the inquiring authority and is expected to conduct an inquiry in accordance with the procedure

prescribed in the rules, as far as may be practicable. The use of the expression "as far as is practicable" indicates a play in the joints available to the Complaints Committee to adopt a fair procedure that is feasible and elastic for conducting an inquiry in a sensitive matter like sexual harassment at the workplace, without compromising on the principles of natural justice. Needless to state that the fact situation in each case will vary and therefore no set standards or yardstick can be laid down for conducting the inquiry in complaints of this nature. However, having regard to the serious ramifications with which the delinquent employee may be visited at the end of the inquiry, any discordant note or unreasonable deviation from the settled procedures required to be followed, would however strike at the core of the principles of natural justice, notwithstanding the final outcome.

**K. JOURNEY FROM "VISHAKA" CASE TO THE PoSH ACT**

**(a) VISHAKA GUIDELINES : FILLING IN THE VACUUM :**

48. The occasion to amend Rule 14 (2) of the CCS (CCA) Rules and append a proviso thereto was a direct consequence of judicial intervention by this Court in the case of Vishaka (supra), where the powers vested under Article 32 of the Constitution of India were exercised by a three-Judge Bench to enforce the fundamental rights of women to "gender equality and right to life and liberty", bestowed under Articles 14, 15, 19(1)(g) and 21 of the Constitution of India. Treating a set of writ petitions filed by some social activists and NGOs, who were agitating the brutal gang rape of a social worker in a



CIVIL APPEAL NO. 2482 of 2014

village of Rajasthan as a class action, this Court worked towards filling in the vacuum in the existing legislation. Noting the absence of any Statute enacted to provide for effective enforcement of the basic human right of gender equality and guarantee against sexual abuse, particularly against sexual harassment at work places, the Court drew strength from several provisions of the Constitution of India including Article 15<sup>60</sup>, Article 42<sup>61</sup> and Article 51(A)<sup>62</sup> and with the aid of the relevant International Conventions and norms including the General Recommendations of the CEDAW<sup>63</sup> that had passed a Resolution on 25<sup>th</sup> June, 1993, resolving that an effective complaint mechanism be put in place to address sexual harassment in the work place, laid down a set of Guidelines and norms with a direction that they would be strictly adhered to at all work places and shall be binding and enforceable in law till the vacuum was filled and a legislation was enacted to occupy the field. The Guidelines directed creation of a complaints mechanism to ensure time bound treatment of complaints, constitution of a Complaints Committee and recommended, disciplinary action where such conduct amounted to misconduct in employment 'as defined by the relevant service rules'. The momentous judgment in Vishaka's case (supra) was delivered on 13<sup>th</sup> August, 1997 and the Guidelines declared by the Court continued to hold the field till the Sexual Harassment of Women at

<sup>60</sup> Article 15: The State shall not discriminate against any citizen on grounds of religion, race, caste, sex, place of birth of any of them.

<sup>61</sup> Article 42: The State shall make provisions for securing just and humane conditions of work and for maternity relief.

<sup>62</sup> Article 51(A): (e) ..... It shall be the duty of every citizen of India to, amongst others, renounce practices derogatory to the dignity of women.

<sup>63</sup> The Convention on the Elimination of All Forms of Discrimination Against Women

Workplace (Prevention, Prohibition and Redressal) Act, 2013<sup>64</sup> was enacted on 22<sup>nd</sup> April, 2013.

(b) MEDHA KOTWAL LELE'S CASE : FOLLOW UP THROUGH CONTINUING MANDAMUS :

49. After Vishaka's case (supra), came the case of Medha Kotwal Lele and Others v. Union of India and Others<sup>65</sup> (supra) where a grievance was raised by several petitioners that the Complaints Committees directed to be constituted in terms of the Guidelines laid down by this Court, had not been established to deal with cases of sexual harassment. Treating the said petition as a Public Interest Litigation, notices were issued to several parties including the Union of India and the State Governments and the following directions were issued :

"2....."Complaints Committee as envisaged by the Supreme Court in its judgment in Vishaka case SCC at para 53, will be deemed to be an inquiry authority for the purposes of the Central Civil Services (Conduct) Rules, 1964 (hereinafter called the CCS Rules) and the report of the Complaints Committee shall be deemed to be an inquiry report under the CCS Rules. Thereafter the disciplinary authority will act on the report in accordance with the Rules."

A similar amendment was also directed to be carried out in the Industrial Employment (Standing Orders) Rules.

<sup>64</sup> For short 'PoSH Act'

<sup>65</sup> (2013) 1 SCC 311



CIVIL APPEAL NO. 2482 of 2014

50. On 17<sup>th</sup> January, 2006, in the very same case of Medha Kotwal Lele<sup>66</sup>, noting that there was no information available regarding implementation of the directions issued in Vishaka's case (supra), this Court issued the following directions :

"2. It is not known whether the committees as suggested in Vishaka case have been constituted in all the departments/institutions having members of staff of 50 and above and in most of the district-level offices in all the States, members of the staff working in some offices would be more than 50. It is not known whether the committees as envisaged in Vishaka case have been constituted in all these offices. The number of complaints received and the steps taken in these complaints are also not available. We find it necessary to give some more directions in this regard.

2.1. We find that in order to coordinate the steps taken in this regard, there should be a State-level officer i.e. either the Secretary of the Women and Child Welfare Department or any other suitable officer who is in charge and concerned with the welfare of women and children in each State. The Chief Secretaries of each State shall see that an officer is appointed as a nodal agent to collect the details and to give suitable directions whenever necessary.

2.2. As regards factories, shops and commercial establishments are concerned, the directions are not fully complied with. The Labour Commissioner of each State shall take steps in that direction. They shall work as nodal agency as regards shops, factories and commercial establishments are concerned. They shall also collect the details regarding the complaints and also see that the required committee is established in such institutions."

51. Exercising its powers of a writ of continuing mandamus, the aforesaid petition was again taken up after the passage of over six years, on 19<sup>th</sup> October, 2012<sup>67</sup> when this Court examined the affidavits filed by each State Government to satisfy itself on the compliance of the Guidelines laid down in Vishaka's case (supra). On examining the position regarding amendments required to be carried out in the CCS(CCA) Rules and the Standing Orders as also the establishment and composition of the Complaints

<sup>66</sup> (2013) 1 SCC 312

<sup>67</sup> (2013) 1 SCC 297

Committees, the Court noted with great dismay that several State Governments had failed to make compliances. Extracted below are the observations made in this regard:

"43. As the largest democracy in the world, we have to combat violence against women. We are of the considered view that the existing laws, if necessary, be revised and appropriate new laws be enacted by Parliament and the State Legislatures to protect women from any form of indecency, indignity and disrespect at all places (in their homes as well as outside), prevent all forms of violence—domestic violence, sexual assault, sexual harassment at the workplace, etc.—and provide new initiatives for education and advancement of women and girls in all spheres of life. After all they have limitless potential. Lip service, hollow statements and inert and inadequate laws with sloppy enforcement are not enough for true and genuine upliftment of our half most precious population—the women.

44. In what we have discussed above, we are of the considered view that guidelines in Vishaka should not remain symbolic and the following further directions are necessary until legislative enactment on the subject is in place:

44.1. The States and Union Territories which have not yet carried out adequate and appropriate amendments in their respective Civil Services Conduct Rules (by whatever name these Rules are called) shall do so within two months from today by providing that the report of the Complaints Committee shall be deemed to be an inquiry report in a disciplinary action under such Civil Services Conduct Rules. In other words, the disciplinary authority shall treat the report/findings, etc. of the Complaints Committee as the findings in a disciplinary inquiry against the delinquent employee and shall act on such report accordingly. The findings and the report of the Complaints Committee shall not be treated as a mere preliminary investigation or inquiry leading to a disciplinary action but shall be treated as a finding/report in an inquiry into the misconduct of the delinquent.

44.2. The States and Union Territories which have not carried out amendments in the Industrial Employment (Standing Orders) Rules shall now carry out amendments on the same lines, as noted above in para 44.1 within two months.

44.3. The States and Union Territories shall form adequate number of Complaints Committees so as to ensure that they function at taluka level, district level and State level. Those States and/or Union Territories which have formed only one committee for the entire State shall now form adequate number of Complaints Committees within two months from today. Each of such Complaints Committees shall be headed by a woman and as far as possible in such committees an independent member shall be associated.

44.4. The State functionaries and private and public sector undertakings/organisations/ bodies/institutions, etc. shall put in place sufficient mechanism to ensure full implementation of Vishaka guidelines and further provide that if the alleged harasser is found guilty, the complainant victim is not forced to work with/under such harasser and where appropriate and possible the alleged harasser should be transferred. Further provision should be made that harassment and intimidation of witnesses and the complainants shall be met with severe disciplinary action.



CIVIL APPEAL NO. 2482 of 2014

44.5. The Bar Council of India shall ensure that all Bar Associations in the country and persons registered with the State Bar Councils follow Vishaka guidelines. Similarly, the Medical Council of India, Council of Architecture, Institute of Chartered Accountants, Institute of Company Secretaries and other statutory institutes shall ensure that the organisations, bodies, associations, institutions and persons registered/affiliated with them follow the guidelines laid down by Vishaka. To achieve this, necessary instructions/circulars shall be issued by all the statutory bodies such as the Bar Council of India, Medical Council of India, Council of Architecture, Institute of Company Secretaries within two months from today. On receipt of any complaint of sexual harassment at any of the places referred to above the same shall be dealt with by the statutory bodies in accordance with Vishaka and Others v. State of Rajasthan and Others (1997) 6 SCC 241, guidelines and the guidelines in the present order."

(c) ENACTMENT OF THE PoSH ACT AND RULES :

52. After the passage of fifteen years from the date of the verdict delivered in Vishaka's case (supra), the PoSH Act, was legislated on 22<sup>nd</sup> April, 2013 and finally notified on 9<sup>th</sup> December, 2013. The Act lays down a comprehensive mechanism for constitution of Internal Complaints Committee, Local Committee and Internal Committees, the manner of conducting an inquiry into a complaint received, duties of an employer, duties and powers of the District Officer and others, penalties for non-compliance of the provisions of the Act, etc. Accompanying the Act are the Rules, 2013<sup>68</sup> that have been framed in exercise of powers conferred under Section 29 of the PoSH Act and amongst others, lays down the manner in which an inquiry into a complaint of sexual harassment ought to be conducted (Rule 7), the interim reliefs that can be extended to the aggrieved women during the pendency of the inquiry (Rule 8), the manner of taking action for sexual harassment (Rule 9) etc. It is noteworthy that sub-rule (3) of Rule 7

<sup>68</sup> The Sexual Harassment of Women at Work Place (Prevention, Prohibition and Redressal) Act, 2013

provides that the respondent shall file his reply to the complaint within a stipulated time along with the relevant documents and give details of the witnesses and sub-rule (4) stipulates that the Complaints Committee shall make an inquiry into the complaints "in accordance with the principles of natural justice".

(d) BREATHING REASONABLENESS INTO THE PROCEDURAL REGIME :

53. Thus, it can be seen that the journey from Vishaka's case (supra) that acted as a springboard and sowed the seeds of future legislation by structuring Guidelines to deal with cases of sexual harassment, blossomed into a comprehensive legislation with the enactment of the PoSH Act and Rules. At the same time, however, women centric the Guidelines and the Act may have been, they both recognize the fact that any inquiry into a complaint of sexual harassment at the workplace must be in accordance with the relevant rules and in line with the principles of natural justice. The cardinal principle required to be borne in mind is that the person accused of misconduct must be informed of the case, must be supplied the evidence in support thereof and be given a reasonable opportunity to present his version before any adverse decision is taken. Similarly, the concerned employer is also expected to act fairly and adopt a procedure that is just, fair and reasonable. The whole purpose is to breathe reasonableness into the procedural regime. But, the test of reasonableness cannot be abstract. It has to be pragmatic and grounded in the realities of the facts and circumstances of a case. When conducting an inquiry, it is the duty of the Inquiring Authority to proceed in a manner that is visibly free



CIVIL APPEAL NO. 2482 of 2014

from the taint of arbitrariness, unreasonableness or unfairness. An inquiry that can culminate into imposition of a major penalty like termination of service of an employee, must doubly conform to a just, fair and reasonable procedure. Any displacement of the principles of natural justice can only be in exceptional circumstances, as contemplated in the proviso to Article 311(2) of the Constitution of India and not otherwise. Wherever the rules are silent, principles of natural justice must be read into them and a hearing be afforded to the person who is proposed to be punished with a major penalty<sup>69</sup>.

54. The four predominant purposes sought to be achieved by reading the principles of natural justice into law and into the conduct of judicial and administrative proceedings to achieve the underlying object of securing fairness have been concisely expressed by this Court as an assurance of a fair outcome by following the procedural Rules, an assurance of equality in the proceedings, legitimacy of the decision and decision-making authority thereby preserving the integrity of the system and finally, with the idea of preserving the dignity of individuals where citizens are treated with respect and the dignity they deserve in a society governed by the Rule of Law<sup>70</sup>.

#### L. ANALYSIS AND DISCUSSION :

55. In the present case, the incidents in question relate to the period when the Vishaka Guidelines were in place and it had been clarified in Medha Kotwal Lele (supra) that the Complaints Committee will be deemed to be an inquiry authority for the

<sup>69</sup> State Bank of India and Others v. Ranjit Kumar Chakraborty and Another, (2018) 12 SCC 807

<sup>70</sup> Madhyamam Broadcasting Limited v. Union of India decided on 5<sup>th</sup> April 2023

purposes of the CCS Rules. Keeping this in mind, we may now proceed to ascertain as to whether the procedure adopted by the respondents No. 2 and 3 herein violated the principles of natural justice and thereby caused prejudice to the appellant, as has been alleged, for this Court to interfere in the impugned judgment.

(a) SCOPE OF INTERFERENCE BY THE HIGH COURT IN JUDICIAL REVIEW :

56. It may be clarified at the outset that to satisfy itself that no injustice has been meted out to the appellant, the High Court was required to examine the decision-making process and not just the final outcome. In other words, in exercise of powers of judicial review, the High Court does not sit as an Appellate Authority over the factual findings recorded in the departmental proceedings as long as those findings are reasonably supported by evidence and have been arrived at through proceedings that cannot be faulted on account of procedural illegalities or irregularities that may have vitiated the process by which the decision was arrived at.

57. The purpose of judicial review is not only to ensure that the individual concerned receives fair treatment, but also to ensure that the authority, after according fair treatment, reaches, a conclusion, which is correct in the eyes of law<sup>71</sup>. Notably, in Apparel Export Promotion Council vs. A.K. Chopra, a matter related to sexual harassment at the workplace<sup>72</sup> where, aggrieved by the decision taken by the Disciplinary Authority of accepting the report of the Inquiry Officer and removing the

<sup>71</sup> (1999) 1 SCC 759

<sup>72</sup> Chief Constable of the North Wales Police v. Evans, (1982) 3 All ER 141 HL. Also refer : B.C. Chaturvedi v. Union of India, (1995) 6 SCC 749.



CIVIL APPEAL NO. 2482 of 2014

respondent therein from service on the ground that he had tried to molest a lady employee, this Court had set aside the order of the High Court that had narrowly interpreted the expression "sexual harassment" and held that in departmental proceedings, the Disciplinary Authority is the sole judge of facts and once findings of fact, based on appreciation of evidence are recorded, the High Court in its writ jurisdiction should not normally interfere with those factual findings unless it finds that the recorded findings were based either on no evidence or that the findings were wholly perverse and/or legally untenable. The Court is under a duty to satisfy itself that an inquiry into the allegations of sexual harassment by a Committee is conducted in terms of the service rules and that the concerned employee gets a reasonable opportunity to vindicate his position and establish his innocence<sup>73</sup>.

(b) EXTENT OF ADHERENCE TO THE "AS FAR AS PRACTICABLE" NORM

58. Assuming as correct, the submission made by learned counsel for the respondents no.2 and 3 that the Committee was not bound to strictly follow a step by step procedure for conducting an inquiry having due regard to the proviso to Rule 14(2) of the CCS (CCA) Rules that permits a Committee to enquire into a complaint of sexual harassment 'as far as practicable', in accordance with the procedure laid down in the Rules, the question that would still beg an answer is

<sup>73</sup> Dr. Vijaykumaran C.P.V. v. Central University of Kerala and Others, (2020) 12 SCC 426

CIVIL APPEAL NO. 2192 of 2014

whether the inquiry conducted by the Committee in the instant case, would meet the 'as far as practicable' norm?

59. Rule 14 prescribes the procedure required to be followed for conducting an inquiry by a Public Authority which entails issuance of a charge sheet, furnishing details of the Articles of Charge, enclosing statements of imputations in respect of each article of charge, forwarding of a list of witnesses and the documents sought to be relied upon by the Management/employer. The said procedure may not have been strictly followed by the Committee in the present case, but it is not in dispute that all the complaints received from time to time and the depositions of the complainants were disclosed to the appellant. He was, therefore, well aware of the nature of allegations levelled against him. Not only was the material proposed to be used against him during the inquiry furnished to him, he was also called upon to explain the said material by submitting his reply and furnishing a list of witnesses, which he did. Furthermore, on perusing the Report submitted by the Committee, it transpires that depositions of some of the complainants were recorded audio-visually by the Committee, wherever consent was given and the appellant was duly afforded an opportunity to cross-examine the said witnesses including the complainants. The charges levelled by all the complainants were of sexual harassment by the appellant with a narration of specific instances. Therefore, in



CIVIL APPEAL NO. 2482 of 2014

the given facts and circumstances, non-framing of the Articles of Charge by the Committee cannot be treated as fatal. Nor can the appellant be heard to state that he was completely in the dark as to the nature of the allegations levelled against him and was not in a position to respond appropriately. So far, so good.

(c) THE COMMITTEE'S UNDERSTANDING OF ITS MANDATE :

60. As noted above, when the Registrar of the respondent No. 2—University addressed a letter to the Chairperson of the Committee, he forwarded nine complaints of sexual harassment that had been received by the Vice Chancellor of the University. The process of the inquiry was set into motion on 17<sup>th</sup> March 2009 when the appellant was informed that on receiving complaints of sexual harassment against him, the Committee had conducted a preliminary verification of the complaints by recording the statements of the concerned students. Till then, no specific Articles of Charge were framed by the Committee and no imputation of charges were forwarded to the appellant. At the same time, copies of all the complaints received and the statements recorded were forwarded directly to the appellant calling upon him to explain the charges levelled against him.

61. The plea of the appellant that the Committee understood the remit of its inquiry as a 'fact-finding proceeding', can be discerned from the contents of the letters dated 17<sup>th</sup> March 2009 and 20<sup>th</sup> April 2009 addressed to the appellant. The

impression carried by the Committee that it was only required to submit a fact-finding report to the University was no different for the EC as is borne out from a perusal of the Memorandum dated 8<sup>th</sup> September 2009, issued by the Chairman of the EC who, after receiving the Committee's Report, informed the appellant that an inquiry was proposed to be conducted against him under Rule 14 of the CCS (CCA) Rules. This was the first time when the respondents informed the appellant that the EC had decided to follow the procedure prescribed under the rules of drawing up a Statement of Articles of Charge, imputation of misconduct in support of each Article of Charge and other documents and had granted the appellant time to submit his reply in defence. The appellant did submit a reply. But it is an admitted position that the said inquiry proceedings were aborted at the initial stage itself and it was the Report of the Committee submitted earlier, that was acted upon by the EC in terms of a decision taken on 28<sup>th</sup> January 2010. We are of the opinion that when the Committee itself was unclear as to the scope of its inquiry, the appellant cannot be blamed for harbouring an impression that the remit of the Committee was confined to fact finding alone and it was not discharging the functions of a disciplinary committee, as contemplated under the service Rules.



CIVIL APPEAL NO. 2482 of 2014

(d) WHIRLWIND PROCEEDINGS

62. On examining the records, it emerges that the point at which the Committee fell into an error was when it attempted to fast forward the entire proceedings after the first few hearings and declined to grant a reasonable time to the appellant to effectively participate in the said proceedings. It is noteworthy that the proceedings of the Committee had commenced on 16<sup>th</sup> April 2009 and stood concluded on 5<sup>th</sup> June, 2009. During this period, 18 meetings were conducted by the Committee. Following is the month-wise details of the dates on which the meetings of the Committee were conducted :

- (i) April 2009 – On 16<sup>th</sup>, 27<sup>th</sup> and 29<sup>th</sup>
- (ii) May 2009 – On 6<sup>th</sup>, 12<sup>th</sup>, 13<sup>th</sup>, 14<sup>th</sup>, 19<sup>th</sup>, 20<sup>th</sup>, 22<sup>nd</sup>, 23<sup>rd</sup>, 25<sup>th</sup>, 27<sup>th</sup>, 28<sup>th</sup> and 29<sup>th</sup>
- (iii) June, 2009 – On 3<sup>rd</sup>, 4<sup>th</sup> and 5<sup>th</sup>

63. It is also noteworthy that the time span prescribed under the CCS (CCA) Rules for concluding an inquiry is ordinarily within a period of six months from the date of receipt of the order of appointment. But, here, the entire process was wrapped up in flat 39 days. This shows the tearing hurry in which the Committee was to submit its Report. One such glaring instance of the over anxiety to conclude the proceedings is apparent from the letter dated 5<sup>th</sup> May 2009, addressed by the Committee to the appellant informing him that the next date for filing his reply and for recording further depositions was 12<sup>th</sup> June 2009. Surprisingly, on the very

next day, the Committee issued yet another letter advancing the said dates by claiming that an error had crept into the previous letter and informing the appellant that the date for filing his reply should be read as '12<sup>th</sup> May 2009' and the date for recording further depositions should be read as '14<sup>th</sup> May, 2009', thus moving the dates back by a whole month. Another egregious example of the hurry and scurry shown by the Committee can be gathered from the fact that on 20<sup>th</sup> May 2009, the Committee had written to the appellant giving him a last opportunity to present himself on 20<sup>th</sup> May 2009, not only to complete his deposition, but also to cross-examine the complainants and other witnesses. Simultaneously, the Committee forwarded six more depositions to the appellant and directed him to furnish his reply within 48 hours i.e. by 22<sup>nd</sup> May, 2009.

64. Even if this Court was to accept the submission made by learned counsel for the respondents that the appellant was offering flimsy excuses to somehow prolong the proceedings and the health ground taken by him was not genuine, it does not explain the approach of the Committee which was well aware of the fact that at least six more depositions had been handed over to the appellant as late as on 20<sup>th</sup> May 2009. Even if he had been hale and hearty, he would still have required a reasonable time to respond to the additional depositions and simultaneously, prepare himself for cross-examining the complainants and completing his



CIVIL APPEAL NO. 2432 of 2014

deposition. This can only be termed as an unreasonable and unfair direction by the Committee.

65. The undue haste demonstrated by the Committee for bringing the inquiry to a closure, cannot justify curtailment of the right of the appellant to a fair hearing. The due process, an important facet of the principles of natural justice was seriously compromised due to the manner in which the Committee went about the task of conducting the inquiry proceedings. As noted above, when the proceedings, subject matter of the present appeal had taken place, the PoSH Act was nowhere on the horizon and the field was occupied by the Vishaka Guidelines. The said Guidelines also did not exclude application of the principles of natural justice and fair play in making procedural compliances. The silence in the Guidelines on this aspect could not have given a handle to the Committee to bypass the principles of natural justice and whittle down a reasonable opportunity of affording a fair hearing to the appellant. This Court has repeatedly observed that even when the rules are silent, principles of natural justice must be read into them. In its keen anxiety of being fair to the victims/complainants and wrap up the complaints expeditiously, the Committee has ended up being grossly unfair to the appellant. It has completely overlooked the cardinal principle that justice must not

only be done, but should manifestly be seen to be done. The principles of *audi alterem partem* could not have been thrown to the winds in this cavalier manner.

(e) HOW DID THE EXECUTIVE COUNCIL FALTER?

66. The error committed on the part of the EC, is no less grave. It is apparent that the EC continued to remain under an impression that the First Committee to which the complaints were forwarded, was only a 'fact-finding Committee' and that a full-fledged inquiry was still required to be conducted subsequently, in the manner prescribed under Rule 14 of the CCS (CCA) Rules. The result was that though the Report of the First Committee was accepted and the EC proceeded to place the appellant under suspension, for the very first time, it decided to issue him Memorandum detailing the Articles of Charge and the imputation of charges and further appointed a Former Judge of the High Court as an Inquiry Officer to conduct the inquiry in terms of the Rules. Respondent Nos. 2 and 3 got wiser only when the said proceedings commenced and the Inquiry Officer was appraised of the directions issued in Medha Kotwal's case where it had been clarified by this Court that the Complaints Committee contemplated in Vishaka's case (*supra*), will be deemed to be an Inquiry Authority for the purposes of the CCS (Conduct) Rules and its report shall be deemed to be a Report under the CCS (CCA) Rules.



CIVIL APPEAL NO. 2482 of 2014

67. When the employer itself was oblivious to the remit of the Committee and the Committee remained under the very same impression having described its proceedings as fact-finding in nature, it was all the more incumbent for the respondents to have paused on receiving the Report of the First Committee and verify the legal position before taking the next step. In all this back and forth, it was the procedure prescribed under Rule 14 for conducting an inquiry of sexual harassment at the workplace that came to be sacrificed at the alter of expeditious disposal, which can neither be justified nor countenanced.

68. The intent and purpose of the proviso inserted in Rule 14(2) of CCS (CCA) Rules and Rule 3C of CCS (Conduct) Rules is that the procedure required to be adopted for conducting an inquiry into the complaint of sexual harassment that can lead to imposition of a major penalty under the Rules, must be fair, impartial and in line with the Rules. Pertinently, the emphasis on adhering to the principles of natural justice during an inquiry conducted by a Complaints Committee finds specific mention in Rule 7(4) of the subsequently enacted Rules of 2013. But the spirit behind the due process could never be suppressed or ignored even in the absence of the Statute or the Rules inasmuch as the principles of natural justice is the very essence of the decision-making process and must be read into every judicial or even a quasi-judicial proceeding.

69. This is not to say that the Committee even if described as an Inquiring authority, by virtue of the ruling in Medha Kotwal's case (*supra*) and required to follow the procedure prescribed under Rule 14, was expected to conduct the inquiry as if it was a full-fledged trial. The expression used in the proviso to Rule 14(2), 'as far as practicable' has to be read and understood in a pragmatic manner. In any such proceedings initiated by the Disciplinary Authority, a calibrated balance would have to be struck between the rights of a victim of sexual harassment and those of the delinquent employee. At the same time, fairness in the procedure would have to be necessarily adopted in the interest of both sides. After all, what is sauce for the goose, is sauce for the gander.

#### M. CONCLUSION

70. In the instant case, though the Committee appointed by the Disciplinary Authority did not hold an inquiry strictly in terms of the step-by-step procedure laid down in Rule 14 of the CCS (CCA) Rules, nonetheless, we have seen that it did furnish copies of all the complaints, the depositions of the complainants and the relevant material to the appellant, called upon him to give his reply in defence and directed him to furnish the list of witnesses that he proposed to rely on. Records also reveal that the appellant had furnished a detailed reply in defence. He had also submitted a list of witnesses and depositions. This goes to show that he was



CIVIL APPEAL NO. 2482 of 2014

well-acquainted with the nature of allegations levelled against him and knew what he had to state in his defence. Given the above position, non-framing of the articles of charge cannot be said to be detrimental to the interest of the appellant.

71. In fact, the glaring defects and the procedural lapses in the inquiry proceedings took place only thereafter, in the month of May, 2009, when 12 hearings, most of them back-to-back, were conducted by the Committee at a lightning speed. On the one hand, the Committee kept on forwarding to the appellant, depositions of some more complainants received later on and those of other witnesses and called upon him to furnish his reply and on the other hand, it directed him to come prepared to cross-examine the said complainants and witnesses as also record his further deposition, all in a span of one week. Even if the medical grounds taken by the appellant seemed suspect, the Committee ought to have given him reasonable time to prepare his defence, more so when his request for being represented through a lawyer had already been declined. It was all this undue anxiety that had led to short-circuiting the inquiry proceedings conducted by the Committee and damaging the very fairness of the process.

72. For the above reasons, the appellant cannot be faulted for questioning the process and its outcome. There is no doubt that matters of this nature are sensitive and have to be handled with care. The respondents had received as

many as seventeen complaints from students levelling serious allegations of sexual harassment against the appellant. But that would not be a ground to give a complete go by to the procedural fairness of the inquiry required to be conducted, more so when the inquiry could lead to imposition of major penalty proceedings. When the legitimacy of the decision taken is dependent on the fairness of the process and the process adopted itself became questionable, then the decision arrived at cannot withstand judicial scrutiny and is wide open to interference. It is not without reason that it is said that a fair procedure alone can guarantee a fair outcome. In this case, the anxiety of the Committee of being fair to the victims of sexual harassment, has ended up causing them greater harm.

73. This Court is, therefore, of the opinion that the proceedings conducted by the Committee with effect from the month of May, 2009, fell short of the "as far as practicable" norm prescribed in the relevant Rules. The discretion vested in the Committee for conducting the inquiry has been exercised improperly, defying the principles of natural justice. As a consequence thereof, the impugned judgment upholding the decision taken by the EC of terminating the services of the appellant, duly endorsed by the Appellate Authority cannot be sustained and is accordingly quashed and set aside with the following directions:



CIVIL APPEAL NO. 2482 of 2014

- (i) The matter is remanded back to the Complaints Committee to take up the inquiry proceeding as they stood on 5<sup>th</sup> May 2009.
- (ii) The Committee shall afford adequate opportunity to the appellant to defend himself.
- (iii) The appellant shall not seek any adjournment of the proceedings.
- (iv) A Report shall be submitted by the Committee to the Disciplinary Authority for appropriate orders.
- (v) Having regard to the long passage of time, the respondents are directed to complete the entire process within three months from the first date of hearing fixed by the Committee.
- (vi) The procedure to be followed by the Committee and the Disciplinary Authority shall be guided by the principles of natural justice.
- (vii) The Rules applied will be as were applicable at the relevant point of time.
- (viii) The decision taken by the Committee and the Disciplinary Authority shall be purely on merits and in accordance with law.
- (ix) The appellant will not be entitled to claim immediate reinstatement or back wages till the inquiry is completed and a decision is taken by the Disciplinary Authority.

## N. EPILOGUE

74. Just as we celebrate a decade of the PoSH Act being legislated, it is time to look back and take stock of the manner in which the mandate of the Act has been given effect to. The working of the Act is centred on the constitution of the Internal Complaints Committees (ICCs) by every employer at the workplace and constitution of Local Committees (LCs) and the Internal Committees (ICs) by the appropriate Government, as contemplated in Chapters II and III, respectively of the PoSH Act. An improperly constituted ICC/LC/IC, would be an impediment in conducting an inquiry into a complaint of sexual harassment at the workplace, as envisaged under the Statute and the Rules. It will be equally counterproductive to have an ill prepared Committee conduct a half-baked inquiry that can lead to serious consequences, namely, imposition of major penalties on the delinquent employee, to the point of termination of service.

75. It is disquieting to note that there are serious lapses in the enforcement of the Act even after such a long passage of time. This glaring lacuna has been recently brought to the fore by a National daily newspaper that has conducted and published a survey of 30 national sports federations in the country and reported that 16 out of them have not constituted an ICC till date. Where the ICC have been found to be in place, they do not have the stipulated number of members or lack



CIVIL APPEAL NO. 2462 of 2014

the mandatory external member. This is indeed a sorry state of affairs and reflects poorly on all the State functionaries, public authorities, private undertakings, organizations and institutions that are duty bound to implement the PoSH Act in letter and spirit. Being a victim of such a deplorable act not only dents the self-esteem of a woman, it also takes a toll on her emotional, mental and physical health. It is often seen that when women face sexual harassment at the workplace, they are reluctant to report such misconduct. Many of them even drop out from their job. One of the reasons for this reluctance to report is that there is an uncertainty about who to approach under the Act for redressal of their grievance. Another is the lack of confidence in the process and its outcome. This social malady needs urgent amelioration through robust and efficient implementation of the Act. To achieve this, it is imperative to educate the complainant victim about the import and working of the Act. They must be made aware of how a complaint can be registered, the procedure that would be adopted to process the complaint, the objective manner in which the ICC/LC/IC is expected to function under the Statute, the nature of consequences that the delinquent employee can be visited with if the complaint is found to be true, the result of lodging a false or a malicious complaint and the remedies that may be available to a complainant if dissatisfied with the Report of the ICC/LC/IC etc.

76. However salutary this enactment may be, it will never succeed in providing dignity and respect that women deserve at the workplace unless and until there is strict adherence to the enforcement regime and a proactive approach by all the State and non-State actors. If the working environment continues to remain hostile, insensitive and unresponsive to the needs of women employees, then the Act will remain an empty formality. If the authorities/managements/employers cannot assure them a safe and secure work place, they will fear stepping out of their homes to make a dignified living and exploit their talent and skills to the hilt. It is, therefore, time for the Union Government and the State Governments to take affirmative action and make sure that the altruistic object behind enacting the PoSH Act is achieved in real terms.

#### **O. DIRECTIONS**

77. To fulfil the promise that the PoSH Act holds out to working women all over the country, it is deemed appropriate to issue the following directions :

- (i) The Union of India, all State Governments and Union Territories are directed to undertake a timebound exercise to verify as to whether all the concerned Ministries, Departments, Government organizations, authorities, Public Sector Undertakings, institutions, bodies, etc. have constituted ICCs/LCs/ICs, as the case



CIVIL APPEAL NO. 2452 of 2014

may be and that the composition of the said Committees are strictly in terms of the provisions of the PoSH Act.

- (ii) It shall be ensured that necessary information regarding the constitution and composition of the ICCs/LCs/ICs, details of the e-mail IDs and contact numbers of the designated person(s), the procedure prescribed for submitting an online complaint, as also the relevant rules, regulations and internal policies are made readily available on the website of the concerned Authority/Functionary/ Organisation/Institution/Body, as the case may be. The information furnished shall also be updated from time to time.
- (iii) A similar exercise shall be undertaken by all the Statutory bodies of professionals at the Apex level and the State level (including those regulating doctors, lawyers, architects, chartered accountants, cost accountants, engineers, bankers and other professionals), by Universities, colleges, Training Centres and educational institutions and by government and private hospitals/nursing homes.
- (iv) Immediate and effective steps shall be taken by the authorities/ managements/employers to familiarize members of the ICCs/LCs/ICs with their duties and the manner in which an inquiry ought to be conducted on receiving a complaint of sexual harassment at the workplace, from the point when the complaint is received, till the inquiry is finally concluded and the Report submitted.

- (v) The authorities/management/employers shall regularly conduct orientation programmes, workshops, seminars and awareness programmes to upskill members of the ICCs/LCs/ICs and to educate women employees and women's groups about the provisions of the Act, the Rules and relevant regulations.
- (vi) The National Legal Services Authority (NALSA) and the State Legal Services Authorities (SLSAs) shall develop modules to conduct workshops and organize awareness programmes to sensitize authorities/managements/employers, employees and adolescent groups with the provisions of the Act, which shall be included in their annual calendar.
- (vii) The National Judicial Academy and the State Judicial Academies shall include in their annual calendars, orientation programmes, seminars and workshops for capacity building of members of the ICCs/LCs/ICs established in the High Courts and District Courts and for drafting Standard Operating Procedures (SOPs) to conduct an inquiry under the Act and Rules.
- (viii) A copy of this judgment shall be transmitted to the Secretaries of all the Ministries, Government of India who shall ensure implementation of the directions by all the concerned Departments, Statutory Authorities, Institutions, Organisations etc. under the control of the respective Ministries. A copy of the judgment shall also be transmitted to the Chief Secretaries of all the States and Union Territories



CIVIL APPEAL NO. 2182 of 2014

who shall ensure strict compliance of these directions by all the concerned Departments. It shall be the responsibility of the Secretaries of the Ministries, Government of India and the Chief Secretaries of every State/Union Territory to ensure implementation of the directions issued.

(ix) The Registry of the Supreme Court of India shall transmit a copy of this judgment to the Director, National Judicial Academy, Member Secretary, NALSA, Chairperson, Bar Council of India and the Registrar Generals of all the High Courts. The Registry shall also transmit a copy of this judgment to the Medical Council of India, Council of Architecture, Institute of Chartered Accountants, Institute of Company Secretaries and the Engineering Council of India for implementing the directions issued.

(x) Member-Secretary, NALSA is requested to transmit a copy of this judgment to the Member Secretaries of all the State Legal Services Authorities. Similarly, the Registrar Generals of the State High Courts shall transmit a copy of this judgment to the Directors of the State Judicial Academies and the Principal District Judges/District Judges of their respective States.

(xi) The Chairperson, Bar Council of India and the Apex Bodies mentioned in sub-para (ix) above, shall in turn, transmit a copy of this judgment to all the State Bar Councils and the State Level Councils, as the case may be.

78. The Union of India and all States/UTs are directed to file their affidavits within eight weeks for reporting compliances. List after eight weeks.

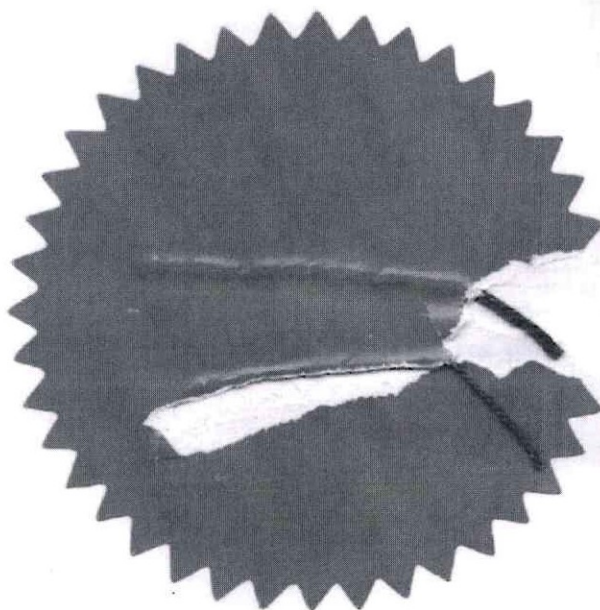
79. The appeal is allowed on the above terms while leaving the parties to bear their own costs. Pending applications, if any, shall stand disposed of.

Sd/-  
[ A.S. BOPANNA ]

Sd/-  
J.  
[ HIMA KOHLI ]

NEW DELHI  
MAY 12, 2023





48

SEALED IN MY PRESENCE



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Academic allowance granted to Lecture /Nursing Faculty-reg.

1 message

Sat, Dec 27, 2025 at 1:12 PM

DDA AIIMS PATNA <dda@aiimspatna.org>  
To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Thu, Jul 6, 2023 at 5:24 PM

Subject: Academic allowance granted to Lecture /Nursing Faculty-reg.

To: <director@aiimspatna.org>, <director@aiimsrishikesh.edu.in>, <director@aiimsjodhpur.edu.in>, surekhakishore <surekhakishore@rediffmail.com>

Cc: Director <director@aiimsbhopal.edu.in>, <director@aiimsbhubaneswar.edu.in>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <edaaiimsrbl@gmail.com>, <director@aiimsmangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>, dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Siddhartha Nandy <siddhartha.nandy@gov.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, fa@aiimsbhopal.edu.in <fa@aiimsbhopal.edu.in>, <fa@aiimsbhubaneswar.edu.in>, <fa@aiimsjodhpur.edu.in>, fa@aiimspatna.org <fa@aiimspatna.org>, <fa@aiimsraipur.edu.in>, <fa@aiimsrishikesh.edu.in>, <aiimsrbl@gmail.com>, <fa@aiimsmangalagiri.edu.in>, <fa@aiimsnagpur.edu.in>, fic-finance@aiimskalyani.edu.in <fic-finance@aiimskalyani.edu.in>, <abhayk@cag.gov.in>, <fa@aiimsguwahati.ac.in>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, IMTIUCHUBA N JAMIR <n.jamir83@nic.in>, MARY THOMAS ASSTT <Mary.thomas38@nic.in>, <dev.gothal@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards

PMSSY-IV Section

Ministry of Health and Family Welfare



**2 attachments**



**document-109.pdf**  
87K



**AIIMS New Delhi.pdf**  
110K

**F. No. A-27023/22/2023-PMSSY-IV**  
**Government of India**  
**Ministry of Health and Family Welfare**  
**(PMSSY-IV Section)**

**4th Floor, Red Cross Building, New Delhi**  
**Dated 6th July, 2023**

To

- (i) The Executive Director, AIIMS Patna
- (ii) The Executive Director, AIIMS Rishikesh
- (iii) The Executive Director, AIIMS Gorakhpur
- (iv).The Executive Director, AIIMS Jodhpur.

**Subject: Academic Allowance granted to Lecturer/Nursing Faculty-reg.**

Madam/Sir,

I am directed to enclose the rate of Academic Allowance payable to Nursing Faculty is Rs.7500/- p.m in AIIMS new Delhi (Copy enclosed).

It has come to the Notice of the Ministry that AIIMS Patna, AIIMS Rishikesh, AIIMS Gorakhpur and AIIMS Jodhpur are paying Academic Allowance to Nursing Faculty @ Rs.22,500/- p.m. which is much higher than the rate approved for AIIMS New Delhi. The Competent Authority has reviewed the matter and it is accordingly directed to limit the rate of Academic Allowance to Nursing Faculty @ Rs.7500/- p.m. at par with AIIMS New Delhi with immediate effect under intimation to the Ministry .

2. Further, it is once again clarified that allowances as available to Government officials are NOT automatically applicable to the employees of the Autonomous Institutes. Allowances, if any, that are proposed to be paid by the Institute to any category of employees should necessarily be placed before Standing Finance Committee (SFC) for approval as these are recurring in nature and have long term financial implications also.

Yours faithfully,

(K Balasubramanian)  
Under Secretary to the Government of India  
Tele : 011-23350010  
Date: 06-07-2023 16:52:23

Copy to:

- 1. Executive Directors of all new AIIMS.
- 2. Deputy Director (Admn.) of all new AIIMS.
- 3. Financial Advisors of all new AIIMS.



**ALL INDIA INSTITUTE OF MEDICAL SCIENCES**  
**ANSARI NAGAR, NEW DELHI-110029.**

Dated the:

09 MAY 2023

To,

Sh. K. Balasubramanian,  
Under Secretary to the  
GOI,  
PMSSY-IV Section,  
Ministry of Health & Family Welfare,  
Nirman Bhawan,  
New Delhi.

**Subject:** Furnishing clarification regarding amount of Academic Allowance being paid to Faculty members working in College of Nursing, AIIMS, New Delhi - reg.

\*\*\*\*\*

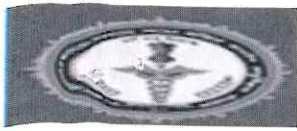
Sir,

I am directed to refer to letter No. A-27023/22/2023-PMSSY- IV dated 2nd May, 2023 on the subject cited above and the following the desired information:-

Sr. No.	Whether Academic Allowance to Nursing Faculty is paid.	Amount	With whose approval	Since when
01	Yes	Rs. 7500/-	Standing Finance Committee: Item No SFC-205/7. Ratifiedd by Governing Body in the meeting held on 13.04.2015.	13.04.2015

Yours faithfully,

  
(B.S. GILL)  
SR. ADMN. OFFICER



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Request for No Objection Certificate for applying for part-time job.

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>  
To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Sat, Dec 27, 2025 at 1:11 PM

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>  
Date: Tue, Jul 25, 2023 at 12:32 PM  
Subject: Request for No Objection Certificate for applying for part-time job.  
To: Director <director@aiimsbhopal.edu.in>, <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiim سراipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <director@aiimsmangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>, <director@aiimsguwahati.ac.in>  
Cc: <president@aiimsbhopal.edu.in>, <drakbisoi@gmail.com>, <suresh6sharma@yahoo.com>, sub\_sinha@hotmail.com <sub\_sinha@hotmail.com>, <dean.sjmc@stjohns.in>, <snundy@hotmail.com>, <pgarg10@hotmail.com>, <sravi2008@gmail.com>, <davepk39@yahoo.com>, Chitra Sarkar <sarkar.chitra@gmail.com>, <nkarora@inclentrust.org>, dr.plavania@gmail.com <dr.plavania@gmail.com>, dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiim سراipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Siddhartha Nandy <siddhartha.nandy@gov.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrjkot@gmail.com>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <dda@aiimsguwahati.ac.in>, <cao.finance@aiimsbhopal.edu.in>, <fa@aiimsbhopal.edu.in>, <fa@aiimsbhubaneswar.edu.in>, <aco@aiimsjodhpur.edu.in>, AMIT MUNDRA <amitpmundra@gmail.com>, <fa@aiimsjodhpur.edu.in>, <fa@aiimspatna.org>, <fa@aiim سراipur.edu.in>, fcao@aiim سراipur.edu.in <fcao@aiim سراipur.edu.in>, <fa@aiimsrishikesh.edu.in>, <aiimsrbl@gmail.com>, <fa@aiimsmangalagiri.edu.in>, <fa@aiimsnagpur.edu.in>, <fic-finance@aiimskalyani.edu.in>, <abhayk@cag.gov.in>, <accounts@aiimsbilaspur.edu.in>, <acctsofficeraiimsjammu@gmail.com>, <fa@aiimsguwahati.ac.in>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, IMTIUCHUBA N JAMIR <in.jamir83@nic.in>, MARY THOMAS ASSTT <Mary.thomas38@nic.in>, <dev.gothal@gov.in>

Sir/ Madam

Please find the attachment.



Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards

PMSSY-IV Section

Ministry of Health and Family Welfare



Letter All AIIMS 09 (2).pdf

96K

I/3603781/2023

**F. No. Z-28016/127/2023-PMSSY-IV**  
**Government of India**  
**Ministry of Health and Family Welfare**  
**(PMSSY-IV Section)**

4th Floor, Red Cross Building, New Delhi  
Dated 21st July, 2023

To

Directors/Executive Directors of all new AIIMS.

**Subject: Request for No Objection Certificate for applying for part-time job.**

Madam/Sir,

I am directed to state that requests have been received from some Executive Directors of new AIIMS requesting for No Objection Certificate (NOC) for applying for part-time job in other organizations.

2. In this regard it is to inform that the Director/Executive Director is the Chief Executive officer of the respective All India Institute of Medical Sciences and is appointed with the approval of the ACC on a full time basis. Director/Executive Director is the administrative Head of the Institute and shoulders all the responsibilities pertaining to establishment and running of AIIMS efficiently including academics, research, hospital services, administrative works, civil construction activities, recruitment of faculty/non-faculty, procurement of equipment and other related activities.

Since the AIIMS set up under the PMSSY are in various stages of operationalization, committed and full time leadership is required and the functioning of the Institutes needs close monitoring, supervision and guidance on day-to-day basis. Therefore the presence of Director/Executive Director of the Institute on full time basis is of utmost importance. Taking up any part-time job is likely to hamper the work of the Institute and divert the focus and efforts of the EDs.

In view of the above, it has been decided by the Competent Authority that the Directors and Executive Directors during their tenure of posting in AIIMS should fully dedicate themselves to achieving the objectives for which the AIIMS have been set up and therefore should not apply for or take up any part time positions in government or private organizations.

Yours faithfully,

Signed by

Krishnamurthy Balasubramanian

(K Balasubramanian)

Under Secretary to the Govt. of India

Tele : 011-23350010

Date: 21-07-2023 16:29:20

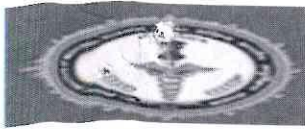
Copy to:

1. The Presidents of all new AIIMS.



I/3603781/2023

2. Deputy Director (Admn.) of all new AIIMS.
3. Financial Advisors of all new AIIMS.



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Guidance Note on PIP for ECRP II as on 14.07.2023 - Reg.

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Sat, Dec 27, 2025 at 1:10 PM

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: PMSSY V <pmssysection5@gmail.com>

Date: Mon, Aug 7, 2023 at 2:45 PM

Subject: Guidance Note on PIP for ECRP II as on 14.07.2023 - Reg.

To: director bhubaneswar <director@aiimsbhubaneswar.edu.in>, Director AIIMS Jodhpur <director@aiimsjodhpur.edu.in>, Director Patna <director@aiimspatna.org>, Director AIIMS Raipur <director@aiim سراipur.edu.in>, Director AIIMS Rishikesh <director@aiimsrishikesh.edu.in>, Executive Director Raebareli <ed.aiimsrbl@gmail.com>, Director AIIMS Nagpur <directoraiimsnagpur@gmail.com>, Director Mangalagiri <director@aiimsmangalagiri.edu.in>, ED AIIMS Kalyani <ed@aiimskalyani.edu.in>, ED AIIMS Guwahati <executive-director@aiimsguwahati.ac.in>, Director AIIMS Guwahati <director@aiimsguwahati.ac.in>, Exe. Director AIIMS Bibinagar <bhatiaaiims@gmail.com>, Director AIIMS Bibinagar <director.aiimsbbinagar@gmail.com>, Executive Director Gorakhpur <executivedirector@aiimsgorakhpur.edu.in>, Director AIIMS Bathinda <director@aiimsbathinda.edu.in>, Director AIIMS Deoghar <director@aiimsdeoghar.edu.in>, ED AIIMS Bilaspur <edaaiimsbils@gmail.com>, Director AIIMS Vijaypur <shakti810505@gmail.com>, Executive Director AIIMS Rajkot <ed.aiimsrjkot@gmail.com>, Director AIIMS Madurai <drmhraosvims1957@gmail.com>, Executive Director AIIMS Darbhanga <madhabananda@gmail.com>, Director AIIMS Bhopal <director@aiimsbhopal.edu.in>  
Cc: DDA BHOPAL <dydir@aiimsbhopal.edu.in>, DDA Jodhpur <dda@aiimsjodhpur.edu.in>, DDA AIIMS Patna <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsrampur.edu.in>, DDA AIIMS Rishikesh <dda@aiimsrishikesh.edu.in>, DDA RAEBARELI <ddaaiimsrbl@gmail.com>, DDA NAGPUR <dda@aiimsnagpur.edu.in>, DDA MANGALAGIRI <dda@aiimsmangalagiri.edu.in>, DDA Bhubaneswar <dda@aiimsbhubaneswar.edu.in>, DDA MANGALAGIRI <dda.mangalagiri@aiims.gov.in>, DDA AIIMS Guwahati <dda@aiimsguwahati.ac.in>, DDA AIIMS BIBINAGAR <dda.aiimsbibinagar@gmail.com>, DDA GORAKHPUR <ashwanimahaur@gmail.com>, DDA BATHINDA <devender.rawat1@gmail.com>, DEOGARH DDA <amrendra.kumar72@gov.in>, Dr. DDA AIIMS Kalyani <kpradip10@gmail.com>, dda bilaspur <ddaaiimsbilaspur@gmail.com>, DDA AIIMS Awantipora <rakeshkumar7123@yahoo.in>, DDA AIIMS Vijaypur, Jammu <ddaaiimsjammu@gmail.com>, DDA AIIMS Rajkot <dda.aiimsrjkot@gmail.com>, DDA AIIMS Madurai <ddamadurai1189@gmail.com>, <raj.kumar28@nic.in>, US T.C Naulak <chinsum.n@nic.in>, <cl.mawi85@nic.in>

Respected Sir/Madam,

With reference to the subject cited above, Please find the attachment herewith.

Yours faithfully,  
PMSSY-V  
IRCS Building, New Delhi-110001

Guidance Note on PIP for ECRP II as on 14.07.2021.pdf  
1897K



**Guidance Note on Preparation of Proposals for “India COVID 19 Emergency Response and Health Systems Preparedness Package: Phase II”**

**1. Introduction**

During the first phase of the *“India COVID-19 Emergency Response and Health Systems Preparedness Package”*, funds were allocated through the National Health Mission (NHM) route to support preparedness and prevention related functions in the states for the management of the COVID-19 Pandemic. There has been an upsurge in the second wave and the rural and peri-urban areas which were so far not affected by COVID-19, also had large number of cases.

*“India Covid-19 Emergency Response and Health Systems Preparedness Package - Phase-II” (ECRP-Phase-II)* has been conceptualized to strengthen the health systems further and support the states to manage the second wave and any future upsurge.

The scheme is a Centrally Sponsored Scheme with some Central Sector components. The scheme has following components.

**A. Central Sector (CS) Components:** The CS components are proposed to be implemented by Departments, Agencies and Programme Divisions of the MoHFW. Components of this support are as under:

- a. Support to Central Hospitals, AIIMS, and other institutions of national importance for COVID-19 management.
- b. Support for strengthening War Room and IT Interventions including for COVID-19 vaccination at the central level.
- c. Support for strengthening NCDC for surveillance activities including for the Genome Sequencing related work.
- d. Support surveillance at 28 Points of Entry at Airports, sea-ports and land borders.
- e. Support to Centralized Procurement of essential drugs and supplies.

**B. Centrally Sponsored Scheme (CSS) Components.** These components include support to State/UT level through NHM Framework with a State Share as is applicable in NHM. Components of this support are as under:

- a. Ramping up Health Infrastructure including establishing Paediatric Care units in all the Districts of the Country under the technical guidance and mentorship of State level Paediatric Centre of Excellence, augmenting additional beds at the facilities including those in rural, tribal and peri-urban areas closer to the community, augmenting ICU beds capacity of the country and establishing Field Hospitals and support for additional fleet for Referral Transport. Support is also proposed to enhance the availability of medical Oxygen in public healthcare system by providing 1050 Liquid Medical Oxygen Storage Tanks along with Medical Gas Pipeline System (MGPS) (at least one per district).
- b. Supporting the States to utilize the UG and PG Interns, Final Year MBBS, BSc and GNM Nursing students for effective COVID-19 management.
- c. Support for procurement of Drugs and Diagnostics to enhance service delivery at district and sub district levels for management of COVID-19 cases / Post-COVID-19 sequela like MIS-C in children and for maintaining a buffer of drugs.
- d. Support for IT Interventions such as implementation of Hospital Management Information System and expanding Access to Tele-Consultations in all districts.
- e. Support for Capacity Building and Training for all aspects of management of COVID-19.

## **2. Objectives**

The objectives of the CSS components of the Emergency COVID Response Package: Phase-II are:

- Support the States to establish dedicated Paediatric Care Unit in all 736 districts of the country for responding to the needs of Paediatric COVID-19 management, duly supporting to establish Paediatric Centre of Excellence in each State/UT (either in State Medical Colleges or State Hospitals or Central Hospitals such as AIIMS, INIs,



etc) for providing Tele-ICU services, mentoring and technical hand-holding to these District Paediatric units.

- Enable timely and quality management of COVID-19 patients at district and sub district levels by increased bed capacities at the Sub Health Centres (SHCs), Primary Health Centres (PHCs), Community Health Centres (CHCs), etc, as well as Field hospitals, wherever necessary.
- Increase the availability of Intensive Care Unit (ICU) beds, including the Pediatric ICU beds, as per the evolving needs, for better management of COVID-19.
- Support to States to have at least one Liquid Medical Oxygen Storage Tanks along with Medical Gas Pipeline System (MGPS) in all the Districts to enhance the availability of medical Oxygen in public healthcare system.
- Support the States to utilize the UG and PG Interns, Final Year MBBS, BSc and GNM Nursing students for effective COVID-19 management.
- Increase access to ambulance services to eliminate delays in transport and referral of COVID-19 patients.
- Enhance testing capacity for identification and clinical management of COVID-19 patients, at public healthcare facilities closer to the public due to the spread of cases in rural, peri-urban and tribal areas.
- Support the States in implementation of Hospital Management Information System at all the District Hospitals.
- Strengthen Tele-consultation Platform to provide upto 5 lakhs Tele-consultation services per day, duly augmenting the availability of Spokes and Hubs for enabling access to teleconsultation to manage the patients at home and community isolation.

### **3. Main Components and Activities to be supported under ECRP-II**

The activities under each of the main heads have been detailed below. The unit cost indicated/ maximum (as applicable) has been mentioned below for budgeting purpose.

#### **a. Ramping up Health Infrastructure, with focus on Paediatric Infrastructure including Referral Transport.**

Support is provided to the States/UTs under **COVID 19 emergency response and health systems preparedness package** for:

a.1. **Establishing dedicated Paediatric care units in all the 736 Districts**

- Provision of 42 bedded Paediatric Care Unit in 540 Districts (with the district hospitals with more than 100 beds): A 30 bedded oxygen supported paediatric wards (@ Rs. 3.34 lakh per bed) and a 12-bedded hybrid-ICU unit which will have 8 HDU beds and 4 ICU beds (@ Rs. 2.89 Cr per unit).
- Provision of 32 bedded Paediatric Care Unit in 196 Districts (with the district hospitals with 100 beds or less than 100 beds): A 20 bedded oxygen supported paediatric wards (@ Rs. 3.34 lakh per bed) and a 12 bedded hybrid ICU unit which will have 8 HDU beds and 4 ICU beds (@ Rs. 2.89 Cr per unit).

Each district should have at least one paediatric care unit. **These Units may be set at Medical Colleges or District Hospitals, as per the local context.** This budget approved for establishing the paediatric care unit is to be utilized for infrastructure preparedness at the facility and for preparation of stay of parent / care-giver along with the child in the hospital. The State proposal should indicate the number of functional beds. The district hospitals wherein Paediatricians are available must be prioritised. Also, the hospitals with more than 70% occupancy needs to be considered first (Identified source: HMIS). In case, paediatrician is not available in the district hospital, the Paediatric Unit may be established in the Medical College of the same district (if available) or the NHM flexibility and funds for hiring Paediatrician on flexible salary/ insourcing/ outsourcing may be leveraged to ensure availability of Paediatricians.

State wise bifurcation of District Hospitals into  $\leq 100$  and  $>100$  beds are mentioned in **Annexure C** along with requisites for establishing the Paediatric Care Unit.

a.2. **Establishing Paediatric CoEs**

- A Centre of Excellence (CoE) for Paediatric Care in to be established in each State/UT. The CoE could be established in a Medical College or a Central Hospital (such as AIIMS, INIs etc.) or a State Hospital. The unit cost for establishing the CoEs should be within Rs 5 Cr per state/ UT. The CoEs will be providing Tele-ICUs, mentoring and technical hand holding to district paediatric units. Indicative list of medical college/ central/ state hospitals



(state wise) which may be considered for establishing CoE has been annexed (Annexure D).

a.3. **Augmentation of Additional Beds by provision of Prefab Units of varying capacity closer to the people (SHC, PHC and CHC level).**

Report-V of Empowered Group-1 (EG-1), set up by Government of India, on Health System Preparedness Needs on Emergency Management Plan and Strategy recommended that in view of unique health challenges posed by peri-urban, rural, and tribal areas, it is important that sufficient preparedness is made to tackle the potential upsurge of pandemic in these vulnerable places and higher level of preparedness to deliver supervised institutionalized isolation care must be planned in rural regions .

Further, the EG-1 recommended that at the national-level, infrastructure should be readied to meet a surge of 4-5 lakh cases per day. This would require the following aggregate numbers of health facilities to be readied by September 2021:

- 10 lakh COVID isolation care beds
- 7 lakh non-ICU hospital beds, with 5 lakh beds enabled for oxygen delivery.
- 2 lakh ICU beds including 1.2 lakh ventilated ICU beds [inclusive of both Mechanical Ventilators and Non-invasive ventilator (NIV) equipment]
- 5% of the ICU beds and 4% of non-ICU oxygen beds need to be earmarked for paediatric care.

Hence, support is provided to increase the non-ICU beds at the Sub Health Centres, Primary Health Centres and Community Health Centres, through pre-fabricated structures. These beds are to be Oxygen supported either using the Oxygen Concentrators provided under PM-CARES or procured by State Governments or provided through Donations, etc or using the Oxygen Cylinders or other Oxygen sources. The Pre-fab structures should facilitate

**for this provision of Oxygen services to the beds added at the SHCs, PHCs and CHCs.**

- **Up to additional 6 bedded unit at Sub Health Centres and Primary Health Centres @ maximum of Rs 9.83 lakhs per unit can be proposed.**
- **Up to additional 20 bedded unit at CHCs @ maximum unit cost of Rs 35 lakhs per unit can be proposed.**

The states must indicate their requirement with suggestive layout plan along with plumbing and electrical requirement. Once the pandemic is over, the constructed structures may be utilized for other medical activities as envisioned under Comprehensive Primary Health Care (including for wellness activities, diagnostic services, OPD/IPD services, etc). The structure has to be equipped to provide Teleconsultation services. The points to be considered while or planning for these structures are provided in **Annexure E**.

**a.4. Augmentation of 20,000 ICU beds in public healthcare facilities in the states including 20% paediatric ICU beds.**

**In continuation to the Para 3 (a.3) above, further, EG-I also recommended that with a clear critical need to scale-up ICU care, it is suggested that simple COVID ICUs with threadbare basic requirements, leveraging available infrastructure such as health facilities and if need be, with make-shift structures be scaled-up.**

**Accordingly, Support is provided to the States to augment the ICU beds at the Medical Colleges, District Hospitals, SDHs, CHCs, etc duly reserving 20% for the Paediatric ICU beds. This will be, in addition, to the Paediatric ICU beds, being set up in District Paediatric Units as explained in Para 3 (a.1).**

The indicative cost per ICU bed is of Rs 16.85 lakhs. The states may allocate more resources from other sources as per needs after conducting proper gap assessment. The estimation is provided in **Annexure F**.

**a.5. Support for establishing and operating fifty 100-bedded Field Hospitals and fifty 50-bedded field hospitals.**



Support up to Rs.7.5 Cr per 100 bedded unit and Rs.3.5 Cr per 50 bedded unit will be provided under ECRP-II. Provision for operational expenses @ Rs 5.572 lakhs per bed may be made for 9 months which will include all associated costs including HR payment through empanelled agencies, wherever needed.

a.6. **Strengthening the referral transport system by augmentation of existing fleet of ambulances (up to 33%) and ensure timely referral of patient.**

The standard operating procedure issued by MoHFW for transporting COVID patient needs to be adhered by the states<sup>1</sup>. Support up to Rs 2 lakhs per month may be proposed. **States/UTs must prioritize to augment the fleet of ALS ambulances to ensure that there is at least one ALS ambulance in each of Block of the State/UT.** The support for these additional ambulances will be available for 9 months, after which, the State will have to take over their funding. The augmentation estimation along with costing for all states/UTs is provided in Annexure G.

a.7. **Support for Liquid Medical Oxygen (LMO) tank of 10 KL Capacity with Medical Gas Pipeline System (MGPS) in the public healthcare facilities @ at least one LMO facility per district.**

The guidance note related to installation of MGPS in public health facilities is provided in Annexure H. **The unit cost of the LMO is approximately Rs. 20 Lakhs per unit and the Unit cost of MGPS (Locally manufactured) is approximately Rs.80 lakhs per unit depending on the existing infrastructure in the Hospitals. States may prioritize to provide MGPS system to the Hospitals, where PSA plants have been sanctioned under PM-CARES or State Resources or other sources so that the Oxygen availability may be ensured to all the beds ear-marked for oxygen supply at the earliest. After appropriate gap analysis, the State may propose, under this component, both LMO Plants with MGPS system and MGPS systems to the public**

---

<sup>1</sup>

<https://www.mohfw.gov.in/pdf/StandardOperatingProcedureSOPfortransportingasuspectorconfirmedcaseofCOVID19.pdf>

healthcare facilities where Oxygen source is tied-up or available through PSA Plants.

**b. IT Interventions - Hospital Management Information System and Tele-Consultations in all Districts**

**b.1. Implementation of Hospital Management Information System (HMIS) i.e., e-Hospital or e-Sushrut in all District Hospitals.**

Presently, HMIS application is functional in 310 District Hospitals across the country. Its implementation is to be expanded to remaining 426 District Hospitals across the country for which the states may budget up to Rs 50 lakhs per DH. This budget may be utilised for the infrastructure support of PC, Laser printer, Barcode printer & scanner, LAN and for Internet connectivity (Details given at **Annexure I**). The human resources, if needed for this may be provided by the respective states/ UTs.

**b.2. Strengthening the Tele-Consultation Hubs in all the Districts including establishing Spokes for Tele Consultation at COVID Care Centres.**

The services may be utilized for:

- Bridging the geographical inaccessibility in tribal/ remote areas as per feasibility
- Utilizing e-Sanjeevani OPD services for both COVID and non-COVID essential services
- Triaging the symptomatic cases at village level
- Providing post-covid follow-up care

**c. COVID essential Diagnostics and provision of resources to Districts to ensure availability of essential drugs for COVID management including buffer stock.**

**c.1. Provision for RAT and RT-PCR tests through public healthcare facilities.**

Estimated support is @ Rs 70 per RAT and Rs 50 per RT-PCR.



c.2. **Provision of RT-PCR Lab including machines (consumables, AMC, etc). in the District Public Health Labs presently not having RTPCR facility**

327 District Public Health Labs have been identified as not having the RT-PCR Lab facility in public healthcare system and the list is attached at **Annexure J**. Support up to Rs 30 lakhs per RT-PCR district unit may be budgeted.

c.3. **Support to States up to Rs 1 Cr for ensuring availability of essential drugs including buffer stock of drugs for COVID19 management.**

The essential medicines required for effective COVID management may be procured using this component as per requirement to meet out the exigencies keeping in mind their short expiry. States/UTs can utilize the services of these medical services corporations to procure these drugs, to ensure economies of scale (Details at **Annexure K**).

The norms mentioned above are for the purpose of budgeting and may vary from State to State. But the unit cost indicated above is the maximum support under the package.

**d. Enhanced Human Resources for Health**

d.1. To tackle the potential upsurge of pandemic in the peri-urban, rural and tribal areas, the available health workforce should be leveraged. The states are expected to fill up the existing vacancies under regular cadre and NHM which already has funding from existing sources (State/ infrastructure maintenance/ NHM). In case of requirement for additional Human Resources for COVID management, the ECRP-II package provides the following support to augment the availability of additional HRH:

- Engage **UG Interns** in Covid Management duties under the supervision of their faculty, as part of the Internship rotation. The maximum budget available per month per UG intern is Rs 22,000 pm.
- Engage **PG residents** in facilities managing COVID cases @ maximum of Rs 25,000 pm.
- Utilise **final year MBBS students** for providing tele-consultation and monitoring of mild Covid cases after due orientation, under supervision of

Faculty. An amount of maximum of Rs 22,000 pm may be paid as monthly remuneration to the final year students during the period of engagement.

- Engage **final Year GNM or B.Sc. (Nursing) students** awaiting Final Exam @ maximum of Rs 18,000 pm and Rs 20,000 pm respectively. They may be given full time Covid Nursing duties under the supervision of Senior Faculty, Doctors and Nurses.

Refer to **Annexure L** for details of availability of interns, residents and final year students.

Support under ECRP II will be provided only for the above-mentioned categories. In case the monthly remuneration/ incentive is more than the amount mentioned above, the states/UTs may bear the expenditure from its own sources.

**e. Support to states Capacity Building and Training for ECRP II components**

- e.1. Provision for building capacities of the HR engaged in the COVID management including trainings on IT interventions, Tele-medicine, HMIS implementation in District Hospitals, Paediatric COVID19 management, CME of the professionals etc.

**f. Negative List Items**

States must ensure that the funds approved under ECRP -II are used **ONLY** for the activities indicated and in no situation, they should be utilized for any other activity.

**4. Preparation of Plan**

- The templates for preparation of the Emergency COVID Response Plan (ECRP) are given in the **Annexure A and B**.
- The States may take stock of the available facilities and resources and based on the assessment, may plan for the increase in the number of beds and other facilities that may be required be in the readiness to tackle any upsurge of COVID-19 in 2021-22.
- The following components are **priority non-negotiable components** and must be planned and budgeted in the state ECRP proposal:



- One Paediatric Unit in every district.
  - One Centre of Excellence for Paediatric per state.
  - Functional Hospital Management Information System across all district hospitals.
  - RT-PCR testing facility in public healthcare system in all the districts.
  - At least one LMO plant (with MGPS) in each district
- The sub-activities are provided under the main budget heads of the ECRP, and the unit rates indicated is the maximum permissible limit or indicative cost (as the case may be). In case of indicative cost, the rate may vary from State to State based on the specification proposed.
  - States must provide justification as well as all supporting documents related to the all their ECRP proposals.
  - Monthly financial reporting will be required in the pre-defined FMR codes.
  - While the focus is on combating the current emergency, the larger goal of strengthening the Public Health system for epidemic preparedness should also be kept in mind. Efforts should be made to prioritize such activities that not only facilitate effective COVID-19 response but also strengthen public health facilities to respond to any similar outbreaks in future.

## 5. Fund Flow and Release of Fund

### *a. Release of Fund*

Funds under ECRP-II would be released in instalments. The State share will be applicable as per the NHM norms. Time period of implementation is till 31.3.2022.

The funds under ECRP-II will flow from MoHFW to State Treasury and from State Treasury to State Health Society (SHS). The SHS will also receive the corresponding State Share and then would spend the necessary funds as per the approved ECRP II. Because of the urgency of the situation, it is expected that the State Government would transfer the funds under ECRP II to SHS **within 7 working days from the date of release of allocation from the Central Government.**

**The Department of Expenditure has concurred with the proposal of DoHFW by way of a special dispensation, granting exemption till 31.03.2022 for implementation of the revised CSS procedure pertaining to release of funds under CSS in this ECRP Phase-II project, on the special ground of emergency COVID-19 related expenditure (copy enclosed) and States/UTs may kindly note the same.**

For receiving the next tranche of ECRP-II funds, states must ensure physical and financial reporting as well as must ensure that the Dashboard is updated timely.

***b. No Duplication with other sources of funding***

Funding from other departments/ ministries may be utilised for strengthening the public health system for better management of COVID-19. These may include up to 50% of the annual allocation of State Disaster Response Fund (SDRF), CSR and any other source of funding. States must ensure that there is no duplication in the proposals send for approval under ECRP-II and a certificate to this effect will need to be provided by the State/UT.

***c. Procurement Norms***

The funds released under this package shall be utilized as per the prevailing procurement rules and processes in States, as is done in the case of NHM activities. Besides, the following mandatory conditions are to be followed scrupulously.

1. Efforts should be taken to see that there are no duplications in the procurement being done by various agencies at the State level.
2. The procurement will happen through GeM for all the procurements using the resources under ECRP-II and this is a mandatory condition that the States/UTs would need to adhere to.
3. Wherever exceptions are to be made on this condition, the same can be taken up in exceptional circumstances, with the concurrence of AS&FA of MoHFW after an appraisal of the State's proposal regarding the same and as assessment of the States capabilities to undertake this procurement through other robust mechanisms and institutions.



#### **d. Approval Process**

The process to be followed for approval under ECRP-II will be the same as that of NHM. The SHS will prepare the ECRP-II plan as per the State/ local requirement and context and put it up for approval to its Executive Committee (EC)/Governing Body (GB).

The ECRP proposal received from the states will be appraised in a manner similar to the NHM PIP appraisal process.

### **6. Monitoring and Reporting/ Dashboard**

Urgency of the situation makes close monitoring imperative. The State will send the progress reports on both physical and financial progress against the approved plan on monthly basis by 7<sup>th</sup> of each month to the Ministry of Health and Family Welfare, Govt. of India.

A dashboard will be prepared to monitor the activities of ECRP-II, incorporating appropriate output / outcome indicators and this has to be updated by States regularly. Timely updating of dashboard will be a mandatory criterion for release of next tranche of ECRP fund.

### **7. Timelines**

The targeted time frames for the above process are as follows:

Activity	Timeframe
<b>Issuance of guidance note with intimation of resource envelope including details of mandates and components under COVID package to states by MoHFW for ECRP-II</b>	<b>14<sup>th</sup> July 2021</b>
<b>Preparation of state ECRP-II PIP, approval by EC/GB and submission to MoHFW.</b>	<b>21<sup>th</sup> July 2021</b>
<b>Appraisal and approval of PIPs by MoHFW</b>	<b>31<sup>st</sup> July 2021</b>

## **8. Audit**

The general process of annual audit undertaken by the Chartered Accountant (CA) under NHM for its programmes will also be applicable to ECRP-II and the audit report should have a separate chapter on ECRP II.



**Annexures of the Guidance Note on India COVID 19 Emergency Response and  
Health Systems Preparedness Package: Phase II**

**Annexure-A**

**Template for Emergency COVID Response Plan (ECRP) Phase II: Summary Sheet**

FMR	Activity / Item of expenditure	Budget Proposed (in Rs lakhs)	Budget Approved (in Rs lakhs)
	Grand Total	-	-
B.31.1	COVID essential Diagnostics and Drugs	-	-
B.31.1.1	Provision for RAT and RT-PCR tests	-	-
B.31.1.2	Lab Strengthening for RT-PCR ( <b>only for 327 District Public Health Labs / districts not having the RT-PCR Lab in public health system</b> )	-	-
B.31.1.3	Essential drugs for COVID19 management	-	-
B.31.2	Ramping up Health Infrastructure with focus on Paediatric care units	-	-
B.31.2.1	Establishing dedicated Paediatric care units	-	-
B.31.2.2	Establishing Paediatric CoEs at Medical Colleges/ State Hospital/ Central Government Hospital	-	-
B.31.2.3	Establishing additional Beds by provision of Prefab Units closer to the community	-	-
B.31.2.4	ICU beds in public healthcare facilities including 20% paediatric ICU beds	-	-
B.31.2.5	Field Hospitals (50/ 100 bedded)	-	-
B.31.2.6	Referral transport	-	-
B.31.2.7	Support for Liquid Medical Oxygen (LMO) plant (with MGPS) including site preparedness and installation cost	-	-
B.31.3	Enhancement of Human Resources for Health	-	-

B.31.3.1	Medical PG Interns	-	-
B.31.3.2	Medical UG Inters	-	-
B.31.3.3	Final year MBBS students	-	-
B.31.3.4	Final Year GNM Nursing students	-	-
B.31.3.5	Final Year B.Sc. Nursing students	-	-
B.31.4	IT Interventions - Hospital Management Information System and Tele- Consultations	-	-
B.31.4.1	Hospital Management Information System (HMIS)	-	-
B.31.4.2	Strengthening the Telemedicine/ Tele-consultation Hubs	-	-
B.31.8	Capacity Building and Training for ECRP II components	-	-



**Annexure-B****Template for Emergency COVID Response Plan (ECRP): Detailed Proposal**

FMR	Sl No	Activity / Item of expenditure	Average Unit Cost		Total units required in FY 2021-22	No. of Units Prop osed	Budget Propos ed (in Rs lakhs)	State Remar ks	Budget Approv ed (in Rs lakhs)	GoI Remar ks
			Unit of measure	Unit Cost (In Rs./ unit)						
		<b>Grand Total</b>					-		-	
<b>B.31.1</b>		<b>COVID essential Diagnostics and Drugs</b>					-		-	
<b>B.31.1.1</b>		<b>Provision for RAT and RT-PCR tests</b>					-		-	
	1	No. of RTPCR test Kits					-			
	2	No. of Rapid Antigen Test Kits					-			
<b>B.31.1.2</b>		<b>Lab Strengthening for RT-PCR (only for 327 District Public Health Labs / districts not having the RT-PCR Lab in public health system)</b>					-		-	
	1	Budget proposed for establishing RT-PCR Lab (with five year warranty) including procurement of RT-PCR Machine, biosafety cabinet, essentials such as -20 degree Celsius					-			

FMR	Sl No	Activity / Item of expenditure	Average Unit Cost		Total units required in FY 2021-22	No. of Units Prop osed	Budget Propos ed (in Rs lakhs)	State Remar ks	Budget Approv ed (in Rs lakhs)	Gol Remar ks
			Unit of measure	Unit Cost (In Rs./ unit)						
		Freezer, pipettes, refrigerated centrifuge, vortex, etc								
B.31.1.3		Essential drugs for COVID19 Management, including maintaining buffer stock (List of drugs to be attached)					-			
B.31.2		Ramping up Health Infrastructure with focus on Paediatric care units					-		-	
B.31.2.1		Establishing dedicated Paediatric care units					-		-	
	1	Establishment of 32 bedded Paediatric Care Unit in DHs with ≤ 100 beds (List of hospitals to be attached)					-			
	2	Establishment of 42 bedded Paediatric Care Unit in DH with more than 100 beds (list of hospitals to be attached)					-			



FMR	S N o	Activity / Item of expenditure	Average Unit Cost		Total units required in FY 2021-22	No. of Units Prop osed	Budget Propos ed (in Rs lakhs)	State Remar ks	Budget Approv ed (in Rs lakhs)	GoI Remar ks
			Unit of measure	Unit Cost (In Rs./ unit)						
B.31.2.2		Establishing Paediatric CoEs at Medical Colleges/ State Hospital/ Central Government Hospital					-			
B.31.2.3		Establishing additional Beds by provision of Prefab Units closer to the community					-		-	
	1	No. of 6 bedded units at SHC level (List of SHCs to be attached)					-			
	2	No. of 6 bedded units at PHC level (List of PHCs to be attached)					-			
	3	No. of 20 bedded units at CHC level (List of CHCs to be attached)					-			
B.31.2.4		ICU beds in public healthcare facilities including 20% paediatric ICU beds					-			
	1	No of ICU beds (duly indicating number of Paediatric ICU beds separately) added at Medical Colleges								

FMR	S N o	Activity / Item of expenditure	Average Unit Cost		Total units required in FY 2021-22	No. of Units Prop osed	Budget Propos ed (in Rs lakhs)	State Remar ks	Budget Approv ed (in Rs lakhs)	GoI Remar ks
			Unit of measure	Unit Cost (In Rs./ unit)						
	2	No of ICU beds (duly indicating number of Paediatric ICU beds separately) <b>added at District Hospitals</b> (other than the Paediatric units mentioned at Para 31.2.1)								
	3	No of ICU beds (duly indicating number of Paediatric ICU beds separately) <b>added at Sub District Hospitals</b> (other than the Paediatric units mentioned at Para 31.2.1)								
	4	No of ICU beds (duly indicating number of Paediatric ICU beds separately) <b>added at Community Health Centres</b> (other than the Paediatric units mentioned at Para 31.2.1)								
	5	No of ICU beds (duly indicating number of Paediatric ICU beds separately) <b>added at Public healthcare facilities, other than the</b>								



FMR	Sl No	Activity / Item of expenditure	Average Unit Cost		Total units required in FY 2021-22	No. of Units Prop osed	Budget Propos ed (in Rs lakhs)	State Remar ks	Budget Approv ed (in Rs lakhs)	GoI Remar ks
			Unit of measure	Unit Cost (In Rs./ unit)						
		<b>four mentioned above</b> (other than the Paediatric units mentioned at Para 31.2.1)								
<b>B.31.2.5</b>		<b>Field Hospitals (50/ 100 bedded)</b>					-		-	
	1	Establishment of 100 bedded Field Hospitals					-			
	2	Operational expenses for above 100 bedded Field Hospitals								
	3	Establishment of 50 bedded Field Hospitals					-			
	4	Operational expenses for above 50 bedded Field Hospitals								
<b>B.31.2.6</b>		<b>Referral transport</b>					-			
		Support for additional ambulances for nine months and preference to be given for ALS Ambulances								
<b>B.31.2.7</b>		<b>Support for Liquid Medical Oxygen (LMO) plant (with MGPS) including site preparedness and installation cost</b>					-			

FMR	S N o	Activity / Item of expenditure	Average Unit Cost		Total units required in FY 2021-22	No. of Units Prop osed	Budget Propos ed (in Rs lakhs)	State Remar ks	Budget Approv ed (in Rs lakhs)	GoI Remar ks
			Unit of measure	Unit Cost (In Rs./ unit)						
B.31.3		<b>Enhancement of Human Resources for Health</b>					-		-	
B.31.3.1		Medical PG Residents					-			
B.31.3.2		Medical UG Inters					-			
B.31.3.3		Final year MBBS students					-			
B.31.3.4		Final Year GNM Nursing students					-			
B.31.3.5		Final Year B.Sc. Nursing students								
B.31.4		<b>IT Interventions - Hospital Management Information System and Tele-Consultations</b>					-		-	
B.31.4.1		<b>Hospital Management Information System (HMIS) - to be implemented in 426 District Hospitals of the Country (HR support is not covered)</b>					-			
	1	Support to DHs to implement all modules of HMIS in District Hospitals								



FMR	S N o	Activity / Item of expenditure	Average Unit Cost		Total units required in FY 2021-22	No. of Units Prop osed	Budget Propos ed (in Rs lakhs)	State Remar ks	Budget Approv ed (in Rs lakhs)	GoI Remar ks
			Unit of measure	Unit Cost (In Rs./ unit)						
B.31.4.2		<b>Strengthening the Telemedicine/ Tele-consultation Hubs</b>					-			
	1	No of District Hubs established (indicate their locations such as Medical Colleges, DHs, etc) with required hardware and other essentials.								
	2	No of District Hubs strengthened (indicate their locations such as Medical Colleges, DHs, etc) with required hardware and other essentials								
	3	No of Spokes established (indicate their locations such as category of Public healthcare facilities including CCCs, etc) with required hardware and other essentials.					-			
	4	No of Spokes strengthened (indicate their locations such as category of Public					-			

FMR	SI N o	Activity / Item of expenditure	Average Unit Cost		Total units required in FY 2021-22	No. of Units Prop osed	Budget Propos ed (in Rs lakhs)	State Remar ks	Budget Approv ed (in Rs lakhs)	GoI Remar ks
			Unit of measure	Unit Cost (In Rs./ unit)						
		healthcare facilities including CCCs, etc) with required hardware and other essentials.								
<b>B.31.8</b>		<b>Capacity Building and Training for ECRP II components</b>					-		-	
	1	Training on IT interventions including HMIS implementation					-			
	2	Training on Paediatric COVID19 management					-			
	3	CME of the professionals					-			
	4	Other trainings (Specify)					-			



**Establishing District Paediatric Units in all the Districts including Paediatric Wards and Hybrid Critical Care Area**

**General considerations for the States**

- a) These Units may be set at Medical Colleges or District Hospitals, as per the local context.
- b) A State proposal would indicate the number of DHs or MCs planned for augmentation i.e., DH with less than 100 bedded, more than equal to 100 bedded and a medical college.
- c) A 12 bedded hybrid ICU unit would have a 4 bedded ICU and 8 bedded HDU beds supported under ECRP 2. This will help in optimization of resources in terms of HR, equipment etc.
- d) State may ensure at least 20 bedded pediatric unit and a 12 bedded hybrid ICU unit (4 ICU and 8 HDU) at district hospitals.
- e) Estimating the need of pediatric ward and hybrid ICUs is subjected to the gap analysis conducted by the state.
- f) District Hospitals with bed occupancy more than 70% need to be prioritized. (Identified source: HMIS)
- g) States will have the flexibility to select District Hospitals to ensure better accessibility and time to care approach.
- h) Facility for stay of parent/ caregiver along with the child.
- i) Ambulance facilities for smooth inter-facility transfer.
- j) Standard Operating Procedures for clinical protocols, emergency management, triaging etc to be in place.
- k) Assured linkages with higher facilities.

**Requisites for establishing a Pediatric Ward and Hybrid ICU Units**

States may identify establishing Hybrid ICU units with pediatric wards at District Hospitals with:

1. Minimum area of 30 sq meter per bed for ICU and 18 square meters for pediatric oxygen supported beds in compliance with IPHS norms. Additional circulatory area (10%) may also be considered.
2. Ideally critical care areas are located in a single place with sufficient protocols in place for optimum clinical outcome.

3. Adequate Human resource for nursing officers in the ratio of 1:1 for ICU beds, 1:2 for HDU and 1:10 for medical officers. All specialists for district hospitals need to be in place as per IPHS especially pediatricians.
4. All pediatric beds **must be supported by regular oxygen supply** (PSAs, LMO etc.), MGPS and basic equipment as per the *"Guidelines on Operationalization of COVID Care Services for Children & Adolescents"* by GoI.

**Dedicated pediatric care unit in 736 districts**

State Name	DH less than 100 beds	DH more than 100 beds
A & N Islands	1	2
Andhra Pradesh	0	14
Arunachal Pradesh	9	2
Assam	3	20
Bihar	20	12
Chandigarh	1	1
Chhattisgarh	10	14
Dadra & Nagar Haveli & DD	1	2
Delhi	6	29
Goa	0	2
Gujarat	1	20
Haryana	10	10
Himachal Pradesh	2	10
Jammu & Kashmir	7	12
Jharkhand	10	6
Karnataka	4	22
Kerala	2	46
Ladakh	1	1
Lakshadweep	0	0
Madhya Pradesh	4	47
Maharashtra	14	31
Manipur	2	0
Meghalaya	7	4



State Name	DH less than 100 beds	DH more than 100 beds
Mizoram	2	4
Nagaland	3	3
Odisha	5	27
Puducherry	1	3
Punjab	10	13
Rajasthan	0	27
Sikkim	4	0
Tamil Nadu	0	32
Telangana	0	7
Tripura	3	4
Uttar Pradesh	42	77
Uttarakhand	8	4
West Bengal	3	32
<b>Grand Total</b>	<b>196</b>	<b>540</b>

*Note:* The district wise allocation is indicative. States will have the flexibility to deploy the resources to the districts as per their local context and needs.

**Establishing Pediatric Centre of Excellence in all the States/UTs**

The overall objective is to establish a teleconsultation hub at Medical colleges (or at a Specialized Paediatric Hospital or other Hospitals such DHs where multiple specialties for secondary care as per IPHS are available). This will provide hand holding and capacity building in order to operationalise the critical care units at DHs.

- a) Medical college as a hub will be linked with the spokes of District Paediatric Units at District Hospitals or medical colleges, as the case may be to support in decision making regarding the treatment plan of the patients admitted in paediatric units through teleconsultation mode.
- b) **These CoE will be providing regular Tele-Consultation services including mentoring and monitoring of provision of services at ICUs at District Paediatric Units through Tele-ICU guidance / services.**
- c) If required, the complicated cases can be referred to medical colleges by the specialists at DHs. This will ensure assured delivery of critical care services at tertiary care level.
- d) Each medical college needs to identify coordinators to ensure mentoring support with the district hospitals attached.
- e) Efficacy of monitoring can be augmented by use of any available/ customisable application. Ideally, this model would support offline, online, and interactive telemedicine creating complete technological base of all types of services / modalities. A web-based access system for specialists from their room or via laptop/home may also be provided to address emergencies.
- f) The software should have the capability to transmit test results directly to the specialist, as well as be integrated into the existing applications which can eventually be integrated into the Electronic Health Record (*e-sushrut*).
- g) Integration with the IT applications will facilitate to analysis the real time data and monitor details of teleconsultation on a regular basis.
- h) Case based interactive sessions among specialists from Medical colleges and district hospitals to be planned twice a week ensuring cross learning and selecting the appropriate treatment plan.

**The support provided under ECRP-II includes upgradation/ renovation for physical infrastructure, IT equipment's (Software and hardware) for HUB and SPOKE,**



**Telemedicine Server Platform, internet connection, monitoring, training, honorarium for teleconsultation services, follow-up consultations etc.**

### **Monitoring and data reporting**

Regular supervision, monitoring, data reporting should be the responsibility of facility in charge and need to be reviewed periodically.

### **Sustainability**

Plan and operationalization of these beds/ Critical care units in such a way that they become part of functional clinical areas as per IPHS.

### **Indicative List of Medical College/ Central Hospital to be supported for establishing CoE**

	State/UT	Name of selected Medical College	City/town	Govt/ Private/ Trust
1	<b>Andaman &amp; Nicobar Islands</b>	Andaman & Nicobar Islands Institute of Medical Sciences, Port Blair	Port Blair	Govt.
2	<b>Andhra Pradesh</b>	AIIMS, Mangalagiri	Vijaywada	Govt.
3	<b>Arunachal Pradesh</b>	Toma Riba Institute of health & Medical Sciences	Naharlagun	Govt.
4	<b>Assam</b>	Gauhati Medical College, Guwahati	Guwahati	Govt.
5	<b>Bihar</b>	AIIMS, Patna, Bihar	Patna	Govt.
6	<b>Chandigarh</b>	PGI Chandigarh	Chandigarh	Govt.
7	<b>Chhattisgarh</b>	All India Institute of Medical Sciences, Raipur	Raipur	Govt.
8	<b>Dadra and Nagar Haveli &amp; DD</b>	Shri Vinoba Bhave Institute of Medical Sciences (currently functioning as DH )	Silvassa	Govt.
9	<b>Delhi</b>	All India Institute of Medical Sciences, New Delhi	New Delhi	Govt.
10	<b>Goa</b>	Goa Medical College, Panaji	Panaji	Govt.
11	<b>Gujarat</b>	B J Medical College, Ahmedabad	Ahmedabad	Govt.
12	<b>Haryana</b>	Pt. B D Sharma Postgraduate Institute of Medical Sciences, Rohtak	Rohtak	Govt.
13	<b>Himachal Pradesh</b>	Indira Gandhi Medical College, Shimla	Shimla	Govt.

	State/UT	Name of selected Medical College	City/town	Govt/ Private/ Trust
14	<b>J&amp;K</b>	Government Medical College, Jammu	Jammu	Govt.
15	<b>Jharkhand</b>	Rajendra Institute of Medical Sciences, Ranchi	Ranchi	Govt.
16	<b>Karnataka</b>	Bangalore Medical College and Research Institute, Bangalore	Bangalore	Govt.
17	<b>Kerala</b>	Government Medical College, Ernakulam (for Lakshadweep)	Ernakulam	Govt.
18	<b>Kerala</b>	Medical College, Thiruvananthapuram	Thiruvananthapuram	Govt.
19	<b>Madhya Pradesh</b>	All India Institute of Medical Sciences, Bhopal	Bhopal	Govt.
20	<b>Maharashtra</b>	All India Institute of Medical Sciences, Nagpur	Nagpur	Govt.
21	<b>Manipur</b>	Regional Institute of Medical Sciences, Imphal	Imphal	Govt.
22	<b>Meghalaya</b>	North Eastern Indira Gandhi Regional Institute of Medical Sciences	Shillong	Govt.
23	<b>Mizoram</b>	Mizoram Institute of Medical Education and Research, Mizoram	Mizoram	Govt.
24	<b>Nagaland</b>	DH Kohima (being converted to MC)	Kohima	Govt.
25	<b>Odisha</b>	AIIMS, Bhubaneswar	Bhubaneswar	Govt.
26	<b>Puducherry</b>	Jawaharlal Institute of Postgraduate Medical Education & Research	Puducherry	Govt.
27	<b>Punjab</b>	Government Medical College, Amritsar	Amritsar	Govt.
28	<b>Rajasthan</b>	All India Institute of Medical Sciences, Jodhpur	Jodhpur	Govt.
29	<b>Sikkim</b>	STNM Hospital	Gangtok	Govt.
30	<b>Tamil Nadu</b>	Madras Medical College, Chennai	Chennai	Govt.
31	<b>Telangana</b>	Osmania Medical College, Hyderabad	Hyderabad	Govt.
32	<b>Tripura</b>	Agartala Government Medical College, Agartala	Agartala	Govt.



	State/UT	Name of selected Medical College	City/town	Govt/ Private/ Trust
33	Uttar Pradesh	Institute of Medical Sciences, BHU, Varanasi	Varanasi	Govt.
34	Uttarakhand	All India Institute of Medical Sciences, Rishikesh	Rishikesh	Govt.
35	West Bengal	Calcutta National Medical College, Kolkata	Kolkata	Govt.
36	Ladakh	District Hospital, Leh	Ladakh	Govt.

**Augmentation of Additional Bed by provision of Prefab Units of varying capacity closer to the people**

While the health system is coping with the current pandemic situation, the primary health care facilities have to prepare for any surge that may arise, especially in rural areas. States can propose for additional beds at SHC, PHC and CHC levels to ensure provision of isolation facility closer to the community.

6 bedded Units @ 9,83,400 per unit at 34,000 Sub Health Centres and Primary Health Centres and 20 bedded units @ 35,00,000 per unit at 2,000 CHCs will be supported.

**These beds are to be Oxygen supported either using the Oxygen Concentrators provided under PM-CARES or procured by State Governments or provided through Donations, etc or using the Oxygen Cylinders or other Oxygen sources. The Pre-fab structures should facilitate for this provision of Oxygen services to the beds added at the SHCs, PHCs and CHCs.**

State wise list for the number of facilities to be supported is annexed. It has been prepared based on the following criteria:

- 50% of the subcentres developed as HWC-SHCs, as per AB-HWC portal.
- All functional 24x7 PHCs as per RHS-2020.
- The remaining facilities have been identified in states based on gap against PHCs functional as HWC and 24x7 PHCs.
- All FRU CHCs.

To speed up the preparedness and cater to the immediate requirement of strengthened health facilities, prefabricated structures can be opted. Generally, the quality and specifications are being guaranteed by the manufacturers with a life span of 25-30 years or more. So, states need to indicate their requirement with suggestive layout plan along with plumbing and electrical requirement. If the specifications, parameters (thickness, type of material, etc.) and quality are specified, manufacturers themselves give such guarantee which becomes easier to implement and monitor. This also brings in uniformity and standardization in structure.

- While selecting the facility to be augmented, following considerations are to be made:
- The SHC or PHC should be functional as Health and Wellness Centre with adequate space in HWC room available.



- Availability of HR should be ensured ie, CHOs at Sub Health Centre – Health and Wellness Centres and Medical Officers at PHCs should be available.
- The selected HWC-PHC should be functional round the clock.
- Health facilities (SHC/PHC) located in far flung, hard to reach, tribal areas, more than two hours away from DCH/DCHC can be prioritized.
- CHC should be operational as FRU- CHC with availability of specialists.

While planning the augmentation through pre-fab structures, following points need to be considered:

- **At the level of SHC and PHCs / SHC and PHC Health and Wellness centres, pre-fab structure units with 6 beds can be added.**
- At the level of CHC, 20 bedded such units can be added.
- Provision of all the precautionary steps of PPE, hand sanitizing and hand wash facility to be ensured.
- Preferably the ward should have a separate entry/exit.
- Availability of Oxygen and pulse oximeter.
- Visitors to the isolation facility should be disallowed.
- All non-essential furniture should be removed and ensure that the remaining furniture is easy to clean
- Drinking water and toilets should be available and conveniently located.
- Regular supervision, monitoring and data reporting should be the responsibility of facility in-charge and need to be reviewed at block and district headquarters.

Once the surge is over, the constructed structures can be utilized for wellness activities and other diagnostic services and to cater to the increased OPD / IPD services due to the implementation of 12 expanded range of services at SHC and PHC – Health and Wellness Centres as envisioned under Comprehensive Primary Health Care. The structure can also be utilized to provide teleconsultation services.

**Indicative numbers (State wise) for augmentation of 6 beds units at HWC-SC/HWC-PHCs and 20 bedded units at CHCs**

State	HWC-SHC	HWC PHC	Total CHCs
Andaman & Nicobar Islands	29	22	3
Andhra Pradesh	1460	606	208
Arunachal Pradesh	71	40	8
Assam	771	309	42
Bihar	427	517	74
Chandigarh	0	5	5
Chhattisgarh	1215	491	41
Dadra and Nagar Haveli and Daman and Diu	39	9	5
Delhi	0	0	3
Goa	22	13	3
Gujarat	2054	316	77
Haryana	187	258	22
Himachal Pradesh	267	10	11
Jammu & Kashmir	444	115	81
Jharkhand	688	222	49
Karnataka	1649	887	32
Kerala	693	128	10
Ladakh	35	12	3
Lakshadweep	0	3	3
Madhya Pradesh	2533	761	55
Maharashtra	3189	710	129
Manipur	77	54	7
Meghalaya	79	71	7
Mizoram	61	51	12
Nagaland	82	43	12
Odisha	159	136	44
Puducherry	40	19	3
Punjab	1083	193	130
Rajasthan	161	637	118



State	HWC-SHC	HWC PHC	Total CHCs
Sikkim	36	10	7
Tamil Nadu	1157	1320	377
Telangana	841	334	105
Tripura	121	82	8
Uttar Pradesh	3292	60	20
Uttarakhand	254	86	229
West Bengal	2022	239	57
<b>Grand total</b>	<b>25231</b>	<b>8769</b>	<b>2000</b>

*Note:* The above state-wise distribution of beds is only suggestive. States have the flexibility to propose the number of beds as per the gap analysis and the local requirement.

**Augmentation of ICU bed facilities in the States**

The second wave demonstrates the acute need for augmenting the ICU beds. The Empowered Group-I set up by the Government of India has also highlighted the need to augment the ICU beds in the Country. ECRP-II provisions for augmentation of 20,000 ICU beds (including 20% paediatric beds) @Rs. 16.85 lakhs per bed where critically ill patients requiring highly skilled lifesaving medical aid and nursing care can be admitted. These beds can be augmented at either district hospitals or medical colleges. However, district hospitals with existing ICU set-ups should be prioritized. State wise break-up for augmentation of ICU beds is annexed. For calculation purpose, 25% augmentation of available ICU beds as on April 2021 has been assumed. Patients requiring mechanical/invasive ventilation or intensive monitoring may be admitted here.

**Support is provided to the States to augment the ICU beds at the Medical Colleges, District Hospitals, SDHs, CHCs, etc duly reserving 20% for the Paediatric ICU beds. This will be, in addition, to the Paediatric ICU beds, being set up in District Paediatric Units as explained in Para 3 (a.1).**

While augmenting ICU beds, following points should be considered:

- Floor space of 25-30 sq. m. per ICU bed.
- There should be single-piece curtains between the rooms for ensuring privacy of the patients. The curtain fabric should be fire and waterproof, washable, clean, light colored, inherently stain resistant and non- allergic.
- Availability of specialized services such as suction (central supply or through standalone machines), medical gas supply, oxygen (through central supply or cylinders with humidifiers and flowmeters), uninterrupted electric supply, heating, ventilation and air handling unit.
- There should be >12 air exchanges per hour and negative air pressure with 40 psi maintained.
- Adequate Human resource for nursing officers in the ratio of 1:1 for ICU beds, 1:2 for HDU and 1:10 for medical officers. The entire complement of HR should be available. Ideally, staff to operationalize and manage the facility, should be utilized from the existing pool of staff/from the nearest non-functional or partially functional health facilities.



### **Augmentation estimation for Referral Transport**

There is a necessity to transport patients requiring augmentation of the existing ambulances to meet the present Pandemic and any future surge.

In the country, presently 26,679 ambulances (10,993 Dial-108 and 10,560 (Dial-102/104) Emergency Response Service Vehicles, 5,126 empanelled vehicles for transportation of patients) are supported under NHM through a functional National Ambulance Service (NAS) to transport the medical emergency cases. The density of ambulances varies from State to State.

Under ECRP-II proposal, it is envisaged to provide additional support for 8804 new ambulances i.e. 33% of the existing ambulances (26679) being supported under NHM.

There are two types of ambulances being run by NHM – Basic Life Support (BLS) and Advanced Life Support (ALS). BLS ambulances can be used for emergency patients who require non-invasive Airway Management / basic monitoring. ALS ambulances are used for emergency patients who require invasive Airway Management / intensive monitoring. Most of the COVID patients could be transported using BLS, however, in very few cases where invasive ventilation has been put at the referring facility and being transported to higher facility/DCH for further treatment, in such cases ALS may be required to maintain the invasive ventilation and other vitals. During the COVID times, MoHFW has given the standard operating procedure for transporting COVID patient which needs to be adhered by the states. **For ECRP-II Proposal, the States must conduct a gap analysis and propose augmentation of the Ambulance fleets to ensure that there is at least one ALS ambulance per block.**

All the ambulances need to be linked with a centralised call centre for its optimal utilization, the location of the ambulances should be determined both by the density of population as well as time-to-care approach. GIS based mapping of various health facilities as well as real time GPS tracking of ambulances is required to be undertaken by the State/UT - both for plain and hilly areas. State to monitor the average calls received per day, no of trips and total kms travelled per day for each ambulance, avg. response time per day for each ambulance, average breakdown time in a month for each ambulance, percentage of EMTs trained, their type and duration of training, etc.

Now, the support is being provided for running the ambulance in Full OPEX mode (CAPEX+ OPEX) for nine months only @ Rs. 2 Lakh per ambulance per month.

Sr. No.	State/UTs	Augmentation @ 33%
1	Andhra Pradesh	207

Sr. No.	State/UTs	Augmentation @ 33%
2	Arunachal Pradesh	49
3	Assam	309
4	Bihar	411
5	Chhattisgarh	206
6	Goa	18
7	Gujarat	210
8	Haryana	141
9	Himachal Pradesh	109
10	Jammu & Kashmir	141
11	Jharkhand	706
12	Karnataka	301
13	Kerala	14
14	Madhya Pradesh	468
15	Maharashtra	1192
16	Manipur	14
17	Meghalaya	16
18	Mizoram	21
19	Nagaland	26
20	Orissa	362
21	Punjab	80
22	Rajasthan	436
23	Sikkim	3
24	Tamil Nadu	310
25	Telangana	209
26	Tripura	1
27	Uttar Pradesh	1558
28	Uttarakhand	77
29	West Bengal	1118
30	A & N Islands	1
31	Chandigarh	2
32	D & N Haveli & Daman & Diu	3
33	Delhi	76
34	Ladakh	6



Sr. No.	State/UTs	Augmentation @ 33%
35	Lakshadweep	1
36	Puducherry	3
	<b>TOTAL</b>	<b>8804</b>

*Note:* The above state-wise distribution of ambulances is only suggestive. States have the flexibility to propose the number as per the gap analysis based on the population saturation and the local requirement.

**GUIDANCE NOTE TO STATES/UTs ON INSTALLATION OF MEDICAL GAS PIPELINE SYSTEM  
IN PUBLIC HEALTHCARE FACILITIES UNDER ECRP II:**

**Introduction**

1. Medical Gas Pipeline System (MGPS) is designed to provide a safe and effective method of delivering medical & anesthetic gases, vacuum & compressed air from the source of supply to the appropriate terminal unit by means of a pipeline distribution system. These systems are typically economical in large hospitals that require a high volume of oxygen and can support the costs of the centralized pipeline infrastructure.
2. MGPS should be prioritized for those public health facilities having oxygen generation and storage facility and piped medical gas system will improve oxygen delivery at bedside, for improved patient care. The recommended areas for the piped oxygen delivery in healthcare facility are ICU/HDU, Critical Care Units, Labour Room, OT, NICU/PICU, Oxygen Supported beds, Emergency room etc.
3. The Medical gas pipeline system supplies medical gases like oxygen and nitrous oxide and mixtures of gases to different departments in a healthcare facility as per IPHS guidelines.

**ECRP II proposal**

4. The ECRP II proposal has been approved for support for 1050 Liquid Medical Oxygen tanks of 10 KL capacity with MGPS in 1050 public health facilities.

**Unit Cost**

5. The unit cost of the LMO is approximately Rs. 20 Lakhs per unit and the Unit cost of MGPS (Locally manufactured) is approximately Rs.60 lakhs per unit depending on the existing infrastructure in the Hospitals.
6. States may prioritize to provide MGPS system to the Hospitals, where PSA plants have been sanctioned under PM-CARES or State Resources or other sources so that the Oxygen availability may be ensured to all the beds ear-marked for oxygen supply at the earliest.
7. After appropriate gap analysis, the State may propose, under this component, both LMO Plants with MGPS system and MGPS systems to the public healthcare facilities where Oxygen source is tied-up or available through PSA Plants.



8. Hospital should assess the requirement critically based on the design of the healthcare facility, distance from manifold room, number of critical care beds, number of OTs, number of oxygen delivery points etc.
9. The MGPS costing proposal should always include the CAMC/AMC cost for ensuring preventive maintenance and smooth functioning.

### **Distribution Plan**

10. States to plan the requirement of MGPS at their respective healthcare facility depending on the case load, HR and available infrastructure. It is suggested to plan the new proposal giving priority to first District Hospitals, then SDH and below subject to approval by MOHFW.

### **Specific Technical Guidance to States/UTs**

11. States/UTs should ensure the following important considerations while planning their MGPS proposals.
  - a) Copper seamless pipes with flux less silver brazing are used which should be as per HTM/ASTM standard and Lloyd's/TUV/SGS certified.
  - b) The changeover should be performed by electrically/pneumatically operated valves contained in the control cabinet. In the event of an electrical power failure the valves should automatically open to provide an uninterrupted gas flow.
  - c) The medical air quality should meet the standards laid by the European Pharmacopeia or US Pharmacopeia.
  - d) The MGPS final delivery points should be colour coded and as per HTM 02-01/NFPA 99 C/EN (ISO-7396-1)/DIN standard.
  - e) Maintenance of oxygen manifold, central pipelines and pressures levels should be monitored by a dedicated team of trained manpower to maintain the oxygen gas supply systems at the facility.
  - f) Testing and certification by the manufacturer is required after completion of installation and should be certified and documented.
  - g) A logbook & inventory should be maintained by the healthcare facility. All activities of repair, maintenance and inspection should be entered in it, signed and documented.
  - h) Training of hospital staff on operations and routine maintenance of the MGPS should be undertaken at the time of installation. Refresher training after 6 months of installation and/ or during preventive/corrective maintenance visit is suggested for smooth operation of the MGPS.

**Implementation of HMIS in the District Hospitals****INTRODUCTION**

The COVID-19 pandemic has had a devastating impact on society, adversely affecting the health and well-being of individuals. The challenges presented by this pandemic have accelerated the adoption of digital technologies especially in the delivery of health care. The past year has underscored the importance of making better use of digital data such and mobile technologies for data driven policy decisions while formulating emergency health response.

In wake of the trend that is setting in, it is imperative to prioritize the utilization of digital health for data driven policy decisions for ensuring effective service delivery and citizen empowerment. Effective data integration and real time data reporting are vital tools to contain the outbreak of pandemic and to manage the health system effectively.

While in the current pandemic, Government has utilized the benefits of digital interventions to support the data driven decisions with consolidation of data related to COVID from State and District facilities. It has also led to the need to a comprehensive data sourcing mechanism to be implemented across the spectrum of healthcare.

While responding to the COVID, the major decisions regarding the clinical management are based on the hospitalization data of patients underlying the active cases cross the districts. Accordingly, the policy decisions were shaped to augment the infrastructure at the facilities like beds capacity, ICU beds, Ventilators, drugs etc. Based on the hospitalization data infrastructure predictions and allocations to States are being made.

It has been observed that Hospital Management Information System (HMIS) will play an instrumental role in with real time data from each facility to support the clinical management decisions.

**Hospital Management Information System (HMIS)**

Hospital Management Information System is a major step towards adapting technology to improve healthcare system. HMIS incorporates an integrated computerized clinical information system for improved hospital administration and patient healthcare. It also provides an accurate, electronically stored medical record of the patient. It has the potential to improve the efficiency of overall system through automation and generates necessary reports for managing operations, performance, quality, planning, decision-making and reporting.

An important aspect of implementing HMIS is generating patient care related intelligence for effectively managing the process through quality data. These systems enhance the ability of



health care professionals to coordinate care by providing a patient's health information and visit history at the place and time that it is needed which subsequently enhanced clinical decision making as well as policy decision making.

The HMIS will ensure real time data of patients in the system with their current status like bed occupancy, logistics, average length of stay, clinical status (Isolation/ICU/ventilator) etc. The standardized data from the HMIS in long term will help to establish the Clinical Decision Support System (CDSS) to create triaging and clinical protocols for next health emergencies of same type. Analysing the benefits that HMIS provides for establishing clinical management during the pandemic, Union Government has included implementation of HMIS in 426 Districts Hospitals under the ECRP-II package.

### **Implementation of HMIS in District Hospitals (426) under ECRP-II**

Under **ECRP-II package**, for implementation of Hospital Management Information System (HMIS) in **District Hospitals (426)** across the country, **Rs 50 lakhs per DH has been provisioned to all States/UTs** (for the infrastructure support of PC, Laser printer, Barcode printer & scanner, LAN, Internet connectivity) under ECRP-II for HMIS implementation. The district hospitals which already have implemented HMIS solution (as per available details) are appended as Annexure – I & II and HMIS implementation accordingly has to be taken up in the remaining districts hospitals of the country. Given below is the indicative cost for implementation, however, at the field level, the same may be utilized as per gap analysis and as per need for effective implementation of HMIS solution.

<b>Estimation of Unit Cost</b>	<b>In INR )</b>
PC	<b>50,000</b>
Tablet	<b>15,000</b>
UPS	<b>4,000</b>
Multi-Functional Printer (MFP)	<b>22,000</b>
Laser Printer	<b>18,000</b>
Bar Code Printer	<b>18,000</b>
Bar Code Scanner	<b>7,000</b>
Access Point	<b>17,000</b>
Network Switch	<b>75,000</b>
LAN Work Cost( Per LAN Point)	<b>6,000</b>
Dedicated Internet Bandwidth (10 Mbps/Per Year) (5+5 Redundant lines)	<b>1,00,000</b>

**\*Rates are indicative and may vary from State to State.**

**\*Procurement should be as per govt. norm.**

States/UTs may utilize any existing HMIS applications including such as 'eHospital @NIC'; eShurut@CDAC; etc which are compliant with the EHR standards and are hosted on Cloud. Being

Cloud hosted applications, hospitals are not required to invest in software development, servers, cloud infrastructure etc.

**Important Instructions:**

1. State to appoint a Nodal Officer for HMIS implementation in all District Hospitals in time bound manner (by 31<sup>st</sup> March, 2022).
2. States/UTs to provide the HMIS implementation status monthly
3. State/UTs to prepare the list of all District Hospital and conduct a gap analysis for IT infrastructure readiness
4. State to indicate the HMIS implementation strategy
5. States/UTs to ensure EHR compliance of HMIS (Hospital Management Information System)

**Note:**

- A. IT infrastructure (Computer, LAN, Printer etc.) cost will only be covered under ECRP-II package
- B. Manpower cost will not be covered under ECRP-II



**Appendix on the Status of Implementation of HMIS system (eHospital @NIC) in the District Hospitals**

SNO	State Name	District Name	Hospital Name
1	ASSAM	Baksa	Dr Ravi Boro Civil Hospital Baksa
2	ASSAM	Barpeta	Barpeta Civil Hospital
3	ASSAM	Cachar	S M Deb Civil Hospital SIlchar
4	ASSAM	Darrang	Mangaldai Civil Hospital
5	ASSAM	Dhemaji	Dhemaji Civil Hospital
6	ASSAM	Dhubri	Dhubri Civil Hospital
7	ASSAM	Goalpara	Civil Hospital Goalpara
8	ASSAM	Golaghat	Swahid Kushal Konwar Civil Hospital
9	ASSAM	Hailakandi	S K Roy Civil Hospital
10	ASSAM	Kamrup	Tolaram Bafna Kamrup District Civil Hospital
11	ASSAM	Kamrup Metropolitan	SONAPUR DISTRICT HOSPITAL
12	ASSAM	Karimganj	Karimganj Civil Hospital
13	ASSAM	Lakhimpur	North Lakhimpur Civil Hospital
14	ASSAM	Morigaon	Morigaon Civil Hospital
15	ASSAM	Nagaon	B P Civil Hospital
16	ASSAM	Nalbari	SMK Civil Hospital
17	ASSAM	Sivasagar	Sivasagar Civil Hospital
18	ASSAM	Tinsukia	Tinsukia Civil Hospital
19	ASSAM	Udalguri	Udalguri Civil Hospital
20	CHANDIGARH	Chandigarh	Civil Hospital Sector 22 Chandigarh
21	CHANDIGARH	Chandigarh	Government Multi Specialty Hospital

SNO	State Name	District Name	Hospital Name
22	CHHATISGARH	Balod	District Hospital Surajpur
23	CHHATISGARH	Balrampur	District Hospital Balrampur
24	CHHATISGARH	Bastar	Govt Komal Deo Dist Hospital Kanker
25	CHHATISGARH	Bemetara	District Hospital Baloda Bazar
26	CHHATISGARH	Bijapur	District Hospital Bijapur
27	CHHATISGARH	Bilaspur	District Hospital Bilaspur
28	CHHATISGARH	Dantewada	District Hospital Dantewada
29	CHHATISGARH	Dhamtari	District Hospital Dhamtari
30	CHHATISGARH	Gariaband	District Hospital Bemetara
31	CHHATISGARH	Janjgir-Champa	Barrister Thakur Chhedilal District Hospital Janjgir
32	CHHATISGARH	Jashpur	Raja Deosharan Government District Hospital Jashpur
33	CHHATISGARH	Kabirdham	District Hospital Kabirdham
34	CHHATISGARH	Korba	Indira Gandhi District Hospital Korba
35	CHHATISGARH	Mahasamund	District Hospital Mahasamund
36	CHHATISGARH	Mungeli	District Hospital Mungeli
37	CHHATISGARH	Narayanpur	District Hospital Narayanpur
38	CHHATISGARH	Raipur	District Hospital Raipur
39	CHHATISGARH	Sukma	District Hospital Balod
40	CHHATISGARH	Surajpur	District Hospital Gariaband
41	DELHI	New Delhi	NDMC Charak Palika Hospital



SNO	State Name	District Name	Hospital Name
42	DELHI	New Delhi	NDMC Palika Maternity Hospital Lodhi Colony New Delhi
43	DELHI	West Delhi	DELHI STATE CANCER INSTITUTES (WEST) JANAK PURI
44	KARNATAKA	BAGALKOT	DISTRICT HOSPITAL BAGALKOT KARNATAKA
45	KARNATAKA	BANGALORE URBAN	HSIS Gosha Hospital Shivajinagar Bangalore Urban Karnataka
46	KARNATAKA	BIDAR	BIDAR INSTITUTE OF MEDICAL SCIENCES TEACHING HOSPITAL BIDAR
47	KARNATAKA	BIJAPUR	District Hospital Vijayapura Karnataka
48	KARNATAKA	Chamarajanagar	District Hospital Chamarajnagara Karnataka
49	KARNATAKA	CHICKMAGALUR	ARALAGUPPE MALLEGOWDA DISTRICT HOSPITAL
50	KARNATAKA	CHIKKABALLAPUR	DISTRICT HOSPITAL CHIKKABALLAPURA KARNATAKA
51	KARNATAKA	CHITRADURGA	DISTRICT HOSPITAL CHITRADURGA KARNATAKA
52	KARNATAKA	DAKSHINA KANNADA	Govt Lady Goschen Hospital Mangalore Dakshina Kannada Karnataka
53	KARNATAKA	DAKSHINA KANNADA	WENLOCK DISTRICT HOSPITAL DAKSHINA KANNADA KARNATAKA
54	KARNATAKA	DAVANAGARE	Chigateri District Hospital Davangere Karnataka

SNO	State Name	District Name	Hospital Name
55	KARNATAKA	DHARWAD	District Hospital Dharwad Karnataka
56	KARNATAKA	GADAG	DISTRICT HOSPITAL GADAG KARNATAKA
57	KARNATAKA	GULBERGA	GIMS Gulbarga Institute Of Medical Sciences Hospital Kalaburagi
58	KARNATAKA	HAVERI	District Hospital Haveri Karnataka
59	KARNATAKA	KARWAR(UTTAR KANNADA)	KARWAR INSTITUTE OF MEDICAL SCIENCES TEACHING HOSPITAL KARWAR (Karnataka)-581301
60	KARNATAKA	KOLAR	Sri Narasimha Raja
61	KARNATAKA	KOPPAL	District Teaching Hospital KIMS Koppal Karnataka
62	KARNATAKA	Ramanagara	DISTRITCT HOSPITAL RAMANAGARA KARNATAKA
63	KARNATAKA	SHIMOGA	McGann District Teaching Hospital Shivamogga
64	KARNATAKA	TUMKUR	District Hospital Tumkur Karnataka
65	KARNATAKA	UDUPI	District Hospital Udupi
66	KARNATAKA	UDUPI	Government of Karnataka Koosamma Shambhu Shetty Memorial Haji Abdullah Mother and Child Hospital
67	KARNATAKA	YADGIR	District Hospital Yadgir Karnataka
68	KERALA	Thiruvananthapuram	Govt District Ayurveda Hospital Varkala
69	LADAKH	KARGIL	District Hospital Kargil



SNO	State Name	District Name	Hospital Name
70	LADAKH	LEH LADAKH	Sonam Nurboo Memorial Hospital
71	MADHYA PRADESH	Agar Malwa	District Hospital Agar Malwa
72	MADHYA PRADESH	Alirajpur	District Hospital Alirajpur
73	MADHYA PRADESH	Anooppur	District Hospital Anuppur
74	MADHYA PRADESH	Ashoknagar	District Hospital AshokNagar
75	MADHYA PRADESH	Balaghat	District Hospital Balaghat
76	MADHYA PRADESH	Barwani	District Hospital Barwani
77	MADHYA PRADESH	Betul	DISTRICT HOSPITAL BETUL
78	MADHYA PRADESH	Bhind	District Hospital bhind
79	MADHYA PRADESH	Bhopal	District Hospital Bhopal
80	MADHYA PRADESH	Burhanpur	District Hospital Burhanpur
81	MADHYA PRADESH	Chhattarpur	District Hospital chhatarpur
82	MADHYA PRADESH	Chhindwara	District Hospital Chhindwara
83	MADHYA PRADESH	Damoh	District Hospital Damoh
84	MADHYA PRADESH	Datia	District Hospital Datia
85	MADHYA PRADESH	Dewas	Mahatma Gandhi District Hospital
86	MADHYA PRADESH	Dhar	District Hospital Dhar
87	MADHYA PRADESH	Dindori	District Hospital Dindori
88	MADHYA PRADESH	East Nimar	District Hospital Khandwa
89	MADHYA PRADESH	Guna	District Hospital Guna
90	MADHYA PRADESH	Gwalior	Madhavrao District Hospital Gwalior
91	MADHYA PRADESH	Harda	District Hospital Harda

SNO	State Name	District Name	Hospital Name
92	MADHYA PRADESH	Hoshangabad	District Hospital Hoshangabad
93	MADHYA PRADESH	Indore	District Hospital Indore
94	MADHYA PRADESH	Jabalpur	District Hospital Jabalpur
95	MADHYA PRADESH	Jhabua	District Hospital Jhabua
96	MADHYA PRADESH	Katni	District Hospital Katni
97	MADHYA PRADESH	Mandla	DISTRICT HOSPITAL MANDLA
98	MADHYA PRADESH	Mandsaur	District Hospital Mandsaur
99	MADHYA PRADESH	Morena	District Hospital Morena
100	MADHYA PRADESH	Narsinghpur	District Hospital Narsinghpur
101	MADHYA PRADESH	Neemuch	District Hospital Neemuch
102	MADHYA PRADESH	Panna	District Hospital Panna
103	MADHYA PRADESH	Raisen	District Hospital Raisen
104	MADHYA PRADESH	Rajgarh	District Hospital Rajgarh
105	MADHYA PRADESH	Ratlam	District Hospital Ratlam
106	MADHYA PRADESH	Rewa	District Hospital Rewa
107	MADHYA PRADESH	Sagar	District Hospital Sagar
108	MADHYA PRADESH	Satna	Sardar Ballabh Bhai Patel District Hospital Satna
109	MADHYA PRADESH	Sehore	Community Health Center Nasrullaganj District Sehore
110	MADHYA PRADESH	Sehore	Community Health Center Shyampur District Sehore
111	MADHYA PRADESH	Sehore	District Hospital Sehore
112	MADHYA PRADESH	Seoni	Indira Gandhi District Hospital Seoni



SNO	State Name	District Name	Hospital Name
113	MADHYA PRADESH	Shahdol	District Hospital Shahdol
114	MADHYA PRADESH	Shajapur	District Hospital Shajapur
115	MADHYA PRADESH	Sheopur	District Hospital Sheopur
116	MADHYA PRADESH	Shivpuri	DH Shivpuri
117	MADHYA PRADESH	Sindi	District Hospital Sidhi
118	MADHYA PRADESH	Singrauli	District Hospital Singrauli
119	MADHYA PRADESH	Tikamgarh	District Hospital Tikamgarh
120	MADHYA PRADESH	Ujjain	District Hospital Ujjain
121	MADHYA PRADESH	Ujjain	MCH Ujjain(Charak)
122	MADHYA PRADESH	Umaria	District Hospital Umaria
123	MADHYA PRADESH	Vidisha	District Hospital Vidisha
124	MADHYA PRADESH	West Nimar	District Hospital Khargon
125	MAHARASHTRA	Mumbai-City	MAASAHEB MEENATAI THAKARE HOSPITAL NERUL
126	MAHARASHTRA	Mumbai-City	Rajmata Jijau Hospital Airoli
127	MAHARASHTRA	Nashik	Cantonment General Hospital
128	MAHARASHTRA	Wardha	GENERAL HOSPITAL WRADHA
129	MEGHALAYA	East Khasi Hill	Civil Hospital Shillong
130	MEGHALAYA	East Khasi Hill	Ganesh Das Government Maternal and child Health Hospital
131	MEGHALAYA	Ri-Bhoi District	Nongpoh Civil Hospital
132	MEGHALAYA	West Garo Hill	District Maternity And Child Hospital
133	MEGHALAYA	West Garo Hill	Tura Civil Hospital
134	MEGHALAYA	West Khasi Hill	Civil Hospital Nongstoin

SNO	State Name	District Name	Hospital Name
135	MEGHALAYA	West Khasi Hill	Tirot Sing Memorial Hospital
136	ORISSA	Angul	DISTRICT HEADQUARTER HOSPITAL ANGUL
137	ORISSA	Sambalpur	DISTRICT HEADQUARTER HOSPITAL SAMBALPUR
138	PUNJAB	Sahibzada Ajit Singh Nagar	Civil Hospital Mohali
139	TELANGANA	Nizamabad	Government General Hospital Nizamabad Telangana
140	TELANGANA	Rajanna	Area Hospital SIRISILLA
141	TRIPURA	Dhalai	Dhalai District Hospital
142	TRIPURA	Gomati	AMARPUR SUB DIVISIONAL HOSPITAL
143	TRIPURA	Gomati	Gomati District Hospital
144	TRIPURA	Gomati	Tripura Sundari Sub Divisional Hospital
145	TRIPURA	Khowai	Khowai District Hospital
146	TRIPURA	North Tripura	District Hospital North Tripura Dharmanagar
147	TRIPURA	Sipahijala	Melaghar S D Hospital
148	TRIPURA	South Tripura	District Hospital South Tripura Santirbazar
149	TRIPURA	Unakoti	UNAKOTI DISTRICT HOSPITAL
150	TRIPURA	West Tripura	Indira Gandhi Memorial Hospital
151	TRIPURA	West Tripura	Regional Cancer Centre
152	UTTAR PRADESH	Agra	District hospital agra
153	UTTAR PRADESH	Agra	DISTRICT WOMEN HOSPITAL AGRA



SNO	State Name	District Name	Hospital Name
154	UTTAR PRADESH	Aligarh	Malkhan Singh District Hospital
155	UTTAR PRADESH	Aligarh	Pt Deen Dayal Upadhyay Joint Hospital Aligarh
156	UTTAR PRADESH	Ayodhya	District Hospital Ayodhya
157	UTTAR PRADESH	Azamgarh	Divisional District Hospital Azamgarh
158	UTTAR PRADESH	Banda	District Male Hospital Banda
159	UTTAR PRADESH	Bareilly	MAHARANA PRATAP DISTRICT COMBINED HOSPITAL
160	UTTAR PRADESH	Basti	DISTRICT HOSPITAL BASTI
161	UTTAR PRADESH	Etawah	Dr Bhimrao Ambedkar Combined Male Hospital Etawah
162	UTTAR PRADESH	Farrukhabad	DR RAM MANOHAR LOHIA DISTT MALE HOSPITAL
163	UTTAR PRADESH	Farrukhabad	DR RAM MANOHAR LOHIA FEMALE HOSPITAL
164	UTTAR PRADESH	Gonda	Babu Ishwar Sharan District Hospital
165	UTTAR PRADESH	Gorakhpur	Netaji Subhash Chandra Bose District Hospital Gorakhpur
166	UTTAR PRADESH	Jhansi	District hospital male jhansi
167	UTTAR PRADESH	Kanpur(Nagar)	AHM and DUFFERIN HOSPITAL KANPUR NAGAR
168	UTTAR PRADESH	Kanpur(Nagar)	Manyawar kanshiram combined hospital and trauma center
169	UTTAR PRADESH	Kanpur(Nagar)	UHM District Male Hospital Kanpur Nagar

SNO	State Name	District Name	Hospital Name
170	UTTAR PRADESH	Lucknow	Balrampur Hospital Lucknow
171	UTTAR PRADESH	Lucknow	Cantonment General Hospital Lucknow Cantt
172	UTTAR PRADESH	Lucknow	Dr Ram Manohar Lohia Institute of Medical Sciences, Lucknow
173	UTTAR PRADESH	Lucknow	Dr Shyama prasad Mukherjee Civil Hospital
174	UTTAR PRADESH	Lucknow	LOK BANDHU RAJNARAYAN COMBINED HOSPITAL
175	UTTAR PRADESH	Lucknow	Veerangana Avanti Bai Women Hospital Lucknow
176	UTTAR PRADESH	Meerut	PL SHARMA DISTRICT HOSPITAL MEERUT
177	UTTAR PRADESH	Mirzapur	DIVISIONAL MALE HOSPITAL MIRZAPUR
178	UTTAR PRADESH	Moradabad	PANDIT DEEN DAYAL UPADHYAY DISTRICT HOSPITAL MORADABAD
179	UTTAR PRADESH	PRAYAGRAJ	MOTI LAL NEHRU DIVISIONAL HOSPITAL PRAYAGRAJ
180	UTTAR PRADESH	PRAYAGRAJ	Tej Bahadur Sapru Hospital
181	UTTAR PRADESH	Saharanpur	SBD district hospital saharanpur
182	UTTAR PRADESH	Varanasi	Lal Bahadur Shastri Hospital Ramnagar Varanasi
183	UTTAR PRADESH	Varanasi	Pandit Deen Dayal Upadhyay Government Hospital



SNO	State Name	District Name	Hospital Name
184	UTTAR PRADESH	Varanasi	S.S.P.G. Divisional District Hospital Varanasi
185	UTTARAKHAND	Almora	District Hospital Almora
186	UTTARAKHAND	Dehradun	PANDIT DEEN DAYAL GOVT CORONATION HOSPITAL
187	UTTARAKHAND	Dehradun	SPS GOVT HOSPITAL RISHIKESH
188	UTTARAKHAND	Haridwar	CHAINRAI DISTRICT FEMALE HOSPITAL HARIDWAR
189	UTTARAKHAND	Haridwar	HAR MILAP MISSION DISTRICT HOSPITAL HARIDWAR
190	UTTARAKHAND	Nainital	SOBAN SINGH JEENA BASE HOSPITAL HALDWANI
191	UTTARAKHAND	Udham Singh Nagar	JAWAHAR LAL NEHRU DISTRICT HOSPITAL RUDRAPUR UDHAM SINGH NAGAR

**Appendix on the Status of Implementation of HMIS system (eShurut@CDAC) in the District Hospitals**

S.No.	State	Hospital Name
1	Andaman & Nicobar Islands	GB Pant Hospital, Port Blair
2	Andhra Pradesh	District Hospital Anakapalle
3	Andhra Pradesh	King George Hospital Visakhapatnam
4	Chandigarh	General Hospital Sector 16 Chandigarh
5	Delhi	GGS Hospital, New Delhi
6	Maharashtra	District Hospital Amravati
7	Maharashtra	Civil Hospital Alibag
8	Maharashtra	District Hospital Satara
9	Maharashtra	District Hospital Hingoli
10	Maharashtra	District Hospital Ratnagiri
11	Maharashtra	District Hospital Aurangabad
12	Maharashtra	District Hospital Osmanabad
13	Maharashtra	District Hospital Nashik
14	Maharashtra	District Hospital Pune
15	Maharashtra	District Hospital Wardha
16	Maharashtra	District Hospital Bhandara
17	Maharashtra	District Hospital Buldhana
18	Maharashtra	District Hospital Jalana
19	Maharashtra	District Hospital Ahmednagar
20	Maharashtra	District Hospital Nanded
21	Maharashtra	District Hospital Sindhudurg
22	Maharashtra	District Hospital Parbhani
23	Maharashtra	District Hospital Nandurbar
24	Maharashtra	District Hospital Beed
25	Maharashtra	District Hospital Washim
26	Maharashtra	District Hospital Gadchiroli
27	Odisha	DHH Nuapada



S.No.	State	Hospital Name
28	Odisha	Capital Hospital, Bhubaneswar
29	Odisha	DHH Nawarangpur
30	Odisha	DHH Keonjhar
31	Odisha	DHH Khurda
32	Odisha	DHH Kendrapara
33	Odisha	DHH Jharsuguda
34	Odisha	AHPGIC Hospital Cuttack
35	Odisha	DHH Bargarh
36	Odisha	DHH Kalahandi
37	Odisha	DHH Nayagarh
38	Odisha	DHH Raygada
39	Odisha	DHH Sambalpur
40	Odisha	DHH Boudh
41	Odisha	DHH Kandhamal
42	Odisha	DHH Ganjam
43	Odisha	DHH Jagatsinghpur
44	Odisha	DHH Deogarh
45	Odisha	DHH Cuttack
46	Odisha	DHH Koraput
47	Odisha	DHH Dhenkanal
48	Odisha	Fakir Mohan Medical College Hospital, Balasore
49	Odisha	DHH Mayurbhanj
50	Odisha	DHH Sundergarh
51	Odisha	DHH RGH Rourkela
52	Odisha	DHH Bhadrak
53	Odisha	DHH Puri
54	Odisha	DHH Malkangiri
55	Odisha	DHH Sonapur
56	Odisha	DHH Gajapati
57	Odisha	DHH Anugul
58	Odisha	DHH Jajpur
59	Odisha	Sishubhawan Hospital Cuttack
60	Punjab	CJCFF DH Sangrur
61	Punjab	JBMM Civil Hospital ASR
62	Punjab	DH Barnala
63	Punjab	DH Kapurthala
64	Punjab	DH Mukatsar Sahib
65	Punjab	District Hospital Mohali
66	Punjab	DH Tarn Taran
67	Punjab	DH Mansa
68	Punjab	DH Ferozpur

S.No.	State	Hospital Name
69	Punjab	DH Faridkot
70	Punjab	Sh Parbodh Chander Civil Hospital Pathankot
71	Punjab	District Hospital Jalandhar
72	Punjab	DH Fatehgarh Sahib
73	Punjab	DH Fazilka
74	Punjab	Mata Kaushalya Govt Hospital Patiala
75	Punjab	DH Ropar
76	Punjab	DH Hoshiarpur
77	Punjab	DH Bathinda
78	Punjab	DH Ludhiana
79	Punjab	DH Nawanshahr
80	Punjab	DH Gurdaspur
81	Punjab	DH Moga
82	Rajasthan	Govt. Hospital Sriganganagar
83	Rajasthan	Govt. Hospital Mahilabag, Jodhpur
84	Rajasthan	Sadar Hospital Dholpur
85	Rajasthan	Jawahar Hospital Jaisalmer
86	Rajasthan	A. K. Hospital Beawar Ajmer
87	Rajasthan	Govt. Bangur Hopital Pali
88	Rajasthan	Pt. Briz Sundar Sharma General Hospital Bundi
89	Rajasthan	Bhandari Hospital, Jamkhandi, Jalore
90	Rajasthan	Maharao Bhim Singh Hospital Kota
91	Rajasthan	M. G. Hospital Bhilwara
92	Rajasthan	District Sahadat Hospital Tonk
93	Rajasthan	District Hospital Hanumangarh
94	Rajasthan	J. K. Lon Hospital kota
95	Rajasthan	District Hospital Barmer
96	Rajasthan	District Hospital Dausa
97	Rajasthan	District Hospital Nagaur
98	Rajasthan	J. K. Loan Hospital Jaipur
99	Rajasthan	Mahatma Gandhi Hospital Jodhpur
100	Rajasthan	Shri Hari Dev Joshi Genaral Hospital Dungarpur
101	Rajasthan	D. B. Government Hospital Churu
102	Rajasthan	Rajeev Gandhi Govt. Genaral Hospital Alwar
103	Rajasthan	Mathura Das Mathur Hospital Jodhpur
104	Rajasthan	Umaid Hospital Jodhpur
105	Rajasthan	RBM Hospital Bharatpur
106	Rajasthan	S. K. Hospital Sikar
107	Rajasthan	District Hospital Baran
108	Rajasthan	District Hospital Banswara



S.No.	State	Hospital Name
109	Rajasthan	B D K Hospital Jhunjhunu
110	Rajasthan	Sh. Haribaksh Kanwatiya Hospital Jaipur
111	Rajasthan	District Hospital Chittorgarh
112	Rajasthan	Gangori Hospital Jaipur
113	Rajasthan	District Hospital, Pratapgarh
114	Rajasthan	Jhalawar Medical College Hospital Jhalawar
115	Telangana	District Hospital King Koti
116	Telangana	GANDHI HOSPITAL

#### **Annexure-I**

#### **Districts with No RT-PCR Testing Facility**

S. No.	*State	*District
1	Andaman And Nicobar Islands	Nicobars
2	Andaman And Nicobar Islands	North And Middle Andaman
3	Arunachal Pradesh	Anjaw
4	Arunachal Pradesh	Changlang
5	Arunachal Pradesh	Dibang Valley
6	Arunachal Pradesh	East Kameng
7	Arunachal Pradesh	Kamle
8	Arunachal Pradesh	Kra Daadi
9	Arunachal Pradesh	Kurung Kumey
10	Arunachal Pradesh	Leparada
11	Arunachal Pradesh	Lohit
12	Arunachal Pradesh	Longding
13	Arunachal Pradesh	Lower Dibang Valley
14	Arunachal Pradesh	Lower Siang
15	Arunachal Pradesh	Lower Subansiri
16	Arunachal Pradesh	Namsai
17	Arunachal Pradesh	Pakke Kessang
18	Arunachal Pradesh	Shi Yomi
19	Arunachal Pradesh	Siang
20	Arunachal Pradesh	Tawang
21	Arunachal Pradesh	Tirap
22	Arunachal Pradesh	Upper Siang
23	Arunachal Pradesh	Upper Subansiri
24	Arunachal Pradesh	West Kameng
25	Arunachal Pradesh	West Siang
26	Assam	Baksa
27	Assam	Biswanath

S. No.	*State	*District
28	Assam	Bongaigaon
29	Assam	Charaideo
30	Assam	Chirang
31	Assam	Darrang
32	Assam	Dhemaji
33	Assam	Dhubri
34	Assam	Dima Hasao
35	Assam	Goalpara
36	Assam	Golaghat
37	Assam	Hailakandi
38	Assam	Hojai
39	Assam	Karimganj
40	Assam	Kokrajhar
41	Assam	Lakhimpur
42	Assam	Majuli
43	Assam	Marigaon
44	Assam	Nagaon
45	Assam	Nalbari
46	Assam	Sivasagar
47	Assam	South Salmara Mancachar
48	Assam	Tinsukia
49	Assam	Udalguri
50	Assam	West Karbi Anglong
51	Bihar	Araria
52	Bihar	Arwal
53	Bihar	Aurangabad
54	Bihar	Banka
55	Bihar	Begusarai
56	Bihar	Bhojpur
57	Bihar	Buxar
58	Bihar	Gopalganj
59	Bihar	Jamui
60	Bihar	Jehanabad
61	Bihar	Kaimur (bhabua)
62	Bihar	Khagaria
63	Bihar	Lakhisarai
64	Bihar	Madhepura
65	Bihar	Munger
66	Bihar	Nalanda
67	Bihar	Nawada

S. No.	*State	*District
68	Bihar	Pashchim Champaran
69	Bihar	Purnia
70	Bihar	Samastipur
71	Bihar	Saran
72	Bihar	Sheikhpura
73	Bihar	Sheohar
74	Bihar	Sitamarhi
75	Bihar	Siwan
76	Bihar	Supaul
77	Bihar	Vaishali
78	Chhattisgarh	Balod
79	Chhattisgarh	Baloda Bazar
80	Chhattisgarh	Balrampur
81	Chhattisgarh	Bemetara
82	Chhattisgarh	Bijapur
83	Chhattisgarh	Dantewada
84	Chhattisgarh	Dhamtari
85	Chhattisgarh	Gariyaband
86	Chhattisgarh	Gaurella Pendra Marwahi
87	Chhattisgarh	Janjgir Champa
88	Chhattisgarh	Jashpur
89	Chhattisgarh	Kabirdham
90	Chhattisgarh	Kondagaon
91	Chhattisgarh	Mungeli
92	Chhattisgarh	Narayanpur
93	Chhattisgarh	Sukma
94	Chhattisgarh	Surajpur
95	Daman And Diu	Daman
96	Daman And Diu	Diu
97	Haryana	Charki Dadri
98	Haryana	Fatehabad
99	Haryana	Kaithal
100	Haryana	Mahendragarh
101	Haryana	Nuh
102	Haryana	Palwal
103	Himachal Pradesh	Bilaspur
104	Himachal Pradesh	Kinnaur
105	Himachal Pradesh	Kullu
106	Himachal Pradesh	Lahul And Spiti
107	Himachal Pradesh	Una



S. No.	*State	*District
108	Jammu And Kashmir	Anantnag
109	Jammu And Kashmir	Bandipora
110	Jammu And Kashmir	Budgam
111	Jammu And Kashmir	Ganderbal
112	Jammu And Kashmir	Kathua
113	Jammu And Kashmir	Kishtwar
114	Jammu And Kashmir	Kulgam
115	Jammu And Kashmir	Kupwara
116	Jammu And Kashmir	Poonch
117	Jammu And Kashmir	Pulwama
118	Jammu And Kashmir	Rajouri
119	Jammu And Kashmir	Ramban
120	Jammu And Kashmir	Reasi
121	Jammu And Kashmir	Samba
122	Jammu And Kashmir	Shopian
123	Jharkhand	Bokaro
124	Jharkhand	Chatra
125	Jharkhand	Garhwa
126	Jharkhand	Giridih
127	Jharkhand	Godda
128	Jharkhand	Gumla
129	Jharkhand	Jamtara
130	Jharkhand	Khunti
131	Jharkhand	Koderma
132	Jharkhand	Latehar
133	Jharkhand	Lohardaga
134	Jharkhand	Pakur
135	Jharkhand	Ramgarh
136	Jharkhand	Saraikela Kharsawan
137	Jharkhand	Simdega
138	Jharkhand	West Singhbhum
139	Madhya Pradesh	Agar Malwa
140	Madhya Pradesh	Alirajpur
141	Madhya Pradesh	Anuppur
142	Madhya Pradesh	Ashoknagar
143	Madhya Pradesh	Balaghat
144	Madhya Pradesh	Barwani
145	Madhya Pradesh	Betul
146	Madhya Pradesh	Bhind
147	Madhya Pradesh	Chhatarpur

S. No.	*State	*District
148	Madhya Pradesh	Damoh
149	Madhya Pradesh	Dewas
150	Madhya Pradesh	Dhar
151	Madhya Pradesh	Dindori
152	Madhya Pradesh	Guna
153	Madhya Pradesh	Harda
154	Madhya Pradesh	Hoshangabad
155	Madhya Pradesh	Jhabua
156	Madhya Pradesh	Katni
157	Madhya Pradesh	Khargone
158	Madhya Pradesh	Mandla
159	Madhya Pradesh	Mandsaur
160	Madhya Pradesh	Morena
161	Madhya Pradesh	Narsinghpur
162	Madhya Pradesh	Neemuch
163	Madhya Pradesh	Niwari
164	Madhya Pradesh	Panna
165	Madhya Pradesh	Raisen
166	Madhya Pradesh	Rajgarh
167	Madhya Pradesh	Satna
168	Madhya Pradesh	Sehore
169	Madhya Pradesh	Seoni
170	Madhya Pradesh	Shajapur
171	Madhya Pradesh	Sheopur
172	Madhya Pradesh	Sidhi
173	Madhya Pradesh	Singrauli
174	Madhya Pradesh	Tikamgarh
175	Madhya Pradesh	Umaria
176	Manipur	Bishnupur
177	Manipur	Chandel
178	Manipur	Churachandpur
179	Manipur	Jiribam
180	Manipur	Kakching
181	Manipur	Kamjong
182	Manipur	Kangpokpi
183	Manipur	Noney
184	Manipur	Pherzawl
185	Manipur	Senapati
186	Manipur	Tamenglong
187	Manipur	Tengnoupal

<b>S. No.</b>	<b>*State</b>	<b>*District</b>
188	Manipur	Thoubal
189	Manipur	Ukhrul
190	Meghalaya	East Garo Hills
191	Meghalaya	East Jaintia Hills
192	Meghalaya	North Garo Hills
193	Meghalaya	Ri Bhoi
194	Meghalaya	South Garo Hills
195	Meghalaya	South West Garo Hills
196	Meghalaya	South West Khasi Hills
197	Meghalaya	West Jaintia Hills
198	Meghalaya	West Khasi Hills
199	Mizoram	Champhai
200	Mizoram	Hnahthial
201	Mizoram	Khawzawl
202	Mizoram	Kolasib
203	Mizoram	Lawngtlai
204	Mizoram	Lunglei
205	Mizoram	Mamit
206	Mizoram	Saiha
207	Mizoram	Saitual
208	Mizoram	Serchhip
209	Nagaland	Kiphire
210	Nagaland	Longleng
211	Nagaland	Mokokchung
212	Nagaland	Mon
213	Nagaland	Peren
214	Nagaland	Phek
215	Nagaland	Tuensang
216	Nagaland	Wokha
217	Nagaland	Zunheboto
218	Odisha	Anugul
219	Odisha	Bhadrak
220	Odisha	Boudh
221	Odisha	Dhenkanal
222	Odisha	Gajapati
223	Odisha	Jagatsinghapur
224	Odisha	Jharsuguda
225	Odisha	Kalahandi
226	Odisha	Kandhamal
227	Odisha	Kendrapara



S. No.	*State	*District
228	Odisha	Malkangiri
229	Odisha	Mayurbhanj
230	Odisha	Nabarangpur
231	Odisha	Nuapada
232	Odisha	Puri
233	Odisha	Rayagada
234	Odisha	Sonepur
235	Puducherry	Mahe
236	Puducherry	Yanam
237	Punjab	Barnala
238	Punjab	Fatehgarh Sahib
239	Punjab	Fazilka
240	Punjab	Firozepur
241	Punjab	Gurdaspur
242	Punjab	Hoshiarpur
243	Punjab	Kapurthala
244	Punjab	Mansa
245	Punjab	Moga
246	Punjab	Pathankot
247	Punjab	Rupnagar
248	Punjab	Sangrur
249	Punjab	Shahid Bhagat Singh Nagar
250	Punjab	Sri Muktsar Sahib
251	Punjab	Tarn Taran
252	Sikkim	North District
253	Sikkim	South District
254	Sikkim	West District
255	Telangana	Bhadradri Kothagudem
256	Telangana	Jagitial
257	Telangana	Jangoan
258	Telangana	Jayashankar Bhupalapally
259	Telangana	Jogulamba Gadwal
260	Telangana	Kamareddy
261	Telangana	Kumuram Bheem Asifabad
262	Telangana	Mahabubabad
263	Telangana	Mancherial
264	Telangana	Mulugu
265	Telangana	Nagarkurnool
266	Telangana	Narayanpet
267	Telangana	Nirmal

<b>S. No.</b>	<b>*State</b>	<b>*District</b>
268	Telangana	Peddapalli
269	Telangana	Rajanna Sircilla
270	Telangana	Wanaparthy
271	Telangana	Warangal Rural
272	Tripura	Dhalai
273	Tripura	Gomati
274	Tripura	Khowai
275	Tripura	Sepahijala
276	Tripura	South Tripura
277	Tripura	Unakoti
278	Uttar Pradesh	Amethi
279	Uttar Pradesh	Auraiya
280	Uttar Pradesh	Baghpat
281	Uttar Pradesh	Balrampur
282	Uttar Pradesh	Bhadohi
283	Uttar Pradesh	Bijnor
284	Uttar Pradesh	Bulandshahr
285	Uttar Pradesh	Chandauli
286	Uttar Pradesh	Chitrakoot
287	Uttar Pradesh	Deoria
288	Uttar Pradesh	Etah
289	Uttar Pradesh	Farrukhabad
290	Uttar Pradesh	Fatehpur
291	Uttar Pradesh	Ghazipur
292	Uttar Pradesh	Hamirpur
293	Uttar Pradesh	Hardoi
294	Uttar Pradesh	Hathras
295	Uttar Pradesh	Kanpur Dehat
296	Uttar Pradesh	Kasganj
297	Uttar Pradesh	Kaushambi
298	Uttar Pradesh	Kheri
299	Uttar Pradesh	Kushi Nagar
300	Uttar Pradesh	Lalitpur
301	Uttar Pradesh	Maharajganj
302	Uttar Pradesh	Mahoba
303	Uttar Pradesh	Mainpuri
304	Uttar Pradesh	Mau
305	Uttar Pradesh	Pilibhit
306	Uttar Pradesh	Rampur
307	Uttar Pradesh	Sambhal

S. No.	*State	*District
308	Uttar Pradesh	Sant Kabeer Nagar
309	Uttar Pradesh	Shamli
310	Uttar Pradesh	Shravasti
311	Uttar Pradesh	Siddharth Nagar
312	Uttar Pradesh	Sitapur
313	Uttar Pradesh	Sonbhadra
314	Uttar Pradesh	Sultanpur
315	Uttarakhand	Bageshwar
316	Uttarakhand	Chamoli
317	Uttarakhand	Champawat
318	Uttarakhand	Rudra Prayag
319	Uttarakhand	Tehri Garhwal
320	Uttarakhand	Uttar Kashi
321	West Bengal	Alipurduar
322	West Bengal	Coochbehar
323	West Bengal	Dinajpur Dakshin
324	West Bengal	Dinajpur Uttar
325	West Bengal	Jalpaiguri
326	West Bengal	Jhargram
327	West Bengal	Kalimpong



**Annexure-K****Ministry of Health and Family Welfare  
Government of India****29.06.2021****Guidelines for Buffer Stock Management of COVID-19 Drugs****1. INTRODUCTION:**

- 1.1. Drugs play a very crucial role in COVID-19 management. Access to drugs for COVID-19 patients proved to be a challenge during the 2<sup>nd</sup> surge of COVID-19 in India. Certain categories of drugs were found to be in acute shortage in the for 3-4 weeks due to sudden surge in COVID-19 cases. There was huge gap between requirement and supply of a couple of drugs for COVID-19 and COVID-19 Associated Mucormycosis (Mucormycosis), and there were critical issues of non-availability of the drugs and accessibility to the patients.
- 1.2. Government undertook various measures for augmenting the supplies of these drugs during the 2<sup>nd</sup> surge of COVID-19 cases by encouraging domestic manufacturers to augment production of the drugs, putting in place coordination mechanism with manufacturers/ States and allocating quantities of drugs to States/ UTs depending upon their respective case load, procuring through import of drugs from other countries and advising States/UTs on the rational use of these drugs.
- 1.3. Indian Pharmaceutical Industry is capable of manufacturing large quantities of quality Active Pharmaceutical Ingredients (API) and Formulations used in the treatment of COVID-19. However, required quantities of certain drugs could not be made available timely during the 2<sup>nd</sup> surge of COVID-19 cases, mainly on account of sudden increase in demand, long lead time to manufacture API and formulations (Injections), non-availability of APIs and shortage of certain excipients, mainly imported items and packing materials.

1.4. Industry may not be able to manufacture and keep sufficient stocks of these medicines since maintaining such a large inventory in anticipation of demand may not be economically viable. Even during the 2<sup>nd</sup> surge of COVID-19 cases, Industry needed the support of the Government in the form of advance payments for making necessary investments and augmenting the production of drugs specifically used for COVID-19.

1.5. In order to ensure continuous supply of drugs for treatment of COVID-19 cases and drugs required for management of sequel of COVID-19 such as Mucormycosis and Multisystem Inflammatory Syndrome in Children (MIS-C) during any future surge, definitive need has been felt to keep buffer stock of these drugs by both Central and State Governments. The main objectives of keeping buffer stock are:

- (i) To expand and enhance capabilities to respond any unforeseen emerging situation.
- (ii) To ensure continuous supply in case of any sudden surge.
- (iii) To guard against high cost procurements during emergency situation.
- (iv) To prevent manufacturing of spurious drugs.
- (v) To minimize the risk of hoarding.
- (vi) To prevent black-marketing and panic buying by the public.
- (vii) To build trust and confidence among the public.
- (viii) To undertake equitable distribution across the country and in states.

In view of the above it is extremely essential to keep buffer stock of certain drugs for use in any possible future surge of COVID-19 cases.

## **2. Identification of drugs for buffer stock:**

2.1. Various therapeutic categories of drugs are used in the treatment of COVID-19 and COVID-19 associated diseases. While certain drugs are used only for the treatment of COVID-19, others are repurposed for treatment of COVID-19. There are some other drugs which are used for treating COVID-19 associated symptoms/complications, like Paracetamol Tablets, anticoagulants, etc. In



addition, there are drugs which are used specifically for the treatment of COVID-19 associated diseases e.g. Mucormycosis.

2.2. Clinical Management Protocol or Clinical Guidance for Management of Covid-19 Patients by the Joint National Task Force for COVID-19 prescribes drugs for treatment and management of COVID-19/ COVID Associated Mucormycosis. There are certain other drugs which have been approved by Central Drugs Standard Control Organisation, the Central Drug Regulator for restricted use under emergency situation for the treatment of COVID-19 based on recommendations of Subject Expert Committee but not included in the clinical management protocol.

2.3. Drugs specified in the Management Guidelines, as well as certain non-protocol drugs have been seen to be extensively used for the treatment of COVID-19 cases. Therefore, looking at the experience gained during the 2<sup>nd</sup> surge of COVID-19, there is a need to maintain buffer stock of certain drugs, apart from closely monitoring on the availability of other drugs for COVID-19.

2.4. The drugs for which buffer stock is required to be maintained may be considered based on following aspects:

- Drugs which need long lead time to manufacture formulation.
- Drugs prescribed for moderate and severe cases.
- Drugs which were widely prescribed during second COVID-19 surge
- Drugs included in Clinical Management Guidance.
- Drugs for which no indigenous manufacturing, and are only imported.
- Drugs which are single sourced.
- Drugs which are limited supply per month.
- Drugs having minimum 24 months shelf life.

However, the above assumptions may change depending upon the situation. COVID-19 scenario is continuously evolving, and accordingly new scenarios/ guidelines/ protocols may emerge, which can necessitate changes in both the assumptions and the drugs decided to be buffer stocked.



### 3. Drugs for buffer stock management:

3.1. Based on criteria/ assumptions mentioned above, current set of guidelines, and experience of shortfall/ likely shortfall on account of their extensive use during the 2<sup>nd</sup> Wave, a suggestive list of drugs to be a part of the buffer stock has been identified. This list includes the following drugs –

#### a. For COVID-19 treatment

1. Enoxaparin Injection 40 mg
2. Methyl Prednisolone Injection 40 mg/ml
3. Dexamethasone Injection 4 mg/ml
4. Remdesivir Injection 100 mg per vial
5. Tocilizumab Injection 400 mg

#### b. For treatment of Mucormycosis

6. Amphoterecin B Deoxycholate Injection 50 mg per vial
7. Posaconazole Injection 300 mg per vial

#### c. For treatment of MIS-C

8. Intravenous Immunoglobulin (IVIG) 2G/Kg
9. Methyl Prednisolone Injection 40 mg/ml (Also used for COVID)
10. Dexamethasone Injection 4 mg/ml (Also used for COVID)

This list is a dynamic and is only indicative. The States/UTs may suitably customise the list in accordance with their local needs and requirements for treatment/ management of COVID-19 and its sequelae such as CAM and MIS-C.

3.2 There are a few drugs in the above list which can be interchangeably used as they have similar therapeutic action. For estimating quantities of such drugs for buffer stock, ratio of consumption of drugs during 2<sup>nd</sup> wave of COVID-19 surge has been taken into consideration. Accordingly, quantities of Methyl Prednisolone and Dexamethasone for buffer stock has been considered to be in the ratio of 10:90, whereas Amphotericin-B Deoxycholate and Posaconazole in the ratio of 75:25.

#### 4. Estimation of quantities to be maintained for Buffer Stock for drugs:

It is very difficult to predict likely number of COVID-19 cases in the coming days/ months, considering the evolving nature of pandemic, and, therefore, the quantities of drugs required to be stocked are also difficult to be forecasted. However, the data available for the trajectory and extent of COVID cases during the second surge, and the valuable experience gained in successfully combating the recent surge in COVID cases, does provide valuable insights for identification of drugs for which the buffer stock needs to be maintained. The experience gained so far, also provides the relevant insights on estimation of buffer stock requirements and indicates that such estimation will have to factor-in the following parameters –

1. The trend of daily new COVID cases during the surge period.
2. The peak number of cases observed during the surge and the peak number of cases for which the government may like to prepare.
3. The distribution of COVID cases in terms of severity of infection, i.e, the proportion of mild, moderate and severe cases.
4. The prevailing technical treatment and management protocols for mild, moderate and severe cases of COVID-19, specifying the drugs and treatment regimen in terms of period of treatment and dosages.

It may be noted that except for Remdesivir, which is exclusively used for management of COVID-19 cases, all other identified drugs are usually used for other medical conditions. Hence, the usual production and sales of drugs should not be assumed to be available for management of COVID-19, as these would also be required for management of medical conditions for which these medicines are usually used.

All of the drugs except IVIG (for MIS-C) for which the lead time for production is 2 months, have a lead time of 15 to 30 days. Therefore, while estimating the requirements for various drugs, the best possible estimates for likely number of new COVID-19 cases in a 30 day period from the start of surge, must be drawn.

The total quantity worked out on the basis of afore-mentioned criteria and assumptions would include the drugs required both for public and private sector hospitals/ medical care institutions. The public sector is expected to cater to around 60% of the total patient load. However, a flexible approach has to be adopted and the estimates may need to be revised based on the trend, trajectory and extent of new cases, wherever necessary.

A suggestive process and an example for estimation is given in Annexure – I.

#### **5. Roles and Responsibilities:**

**5.1.** In order to ensure continuous availability of drugs during any possible next surge, there is a need to procure and maintain buffer stock of COVID-19 drugs (Drugs as stated under Clause 3.1).

**5.2.** State/ UT Governments shall be responsible to ensure continuous supply of drugs in any future surge of COVID cases. All measures should be taken by them to make available drugs to all patients in such a situation.

**5.3.** The States must initiate procurements on priority for building up buffer stocks. The buffer stocks should substantially be in place by 31<sup>st</sup> of July, 2021.

**5.4.** States shall, in addition, work closely with the private hospitals/ institutions within their respective jurisdiction, in order to ensure that they also create adequate stock of buffers for addressing their likely patient load.

**5.5.** The central government shall also make an assessment of buffer stocks required. The Central Government too shall procure and maintain a reasonable percentage of the total requirement to address any possible variations in geographical spread and the extent of COVID-19 across States, to supplement supplies to states/UTs wherever so necessary in view of such variations. The Central Government shall also mobilize resources for the stock that it shall maintain.



**2229749/2021/ DRUG REGULATION**

5.6. The Central Government may, on the request of the respective State/ UT, facilitate procurement of buffer stocks for North Eastern states and UTs. However, the states/ UTs shall be responsible for maintenance of such buffer stocks.

5.7. As a part of emergency preparedness, Governments shall engage with the manufacturers, distributors, suppliers and sellers of COVID-19 drugs. State Governments may also work with the manufacturers for maintaining inventories of sufficient quantities of these drugs.

## Annexure – I

**Process of estimation of requirement of buffer stock quantities****Example – Estimation of requirements of Remdesivir**

1. A suggestive process for estimation of requirements of buffer stock of Remdesivir is presented herein. The second surge in COVID cases lasted for 75 days from 1<sup>st</sup> April to 15<sup>th</sup> June 2021. It is assumed for purposes of this estimation that the next surge will be of the same duration and shall have the same distribution. The stocks for the above case load for at least 30 days has been recommended. Reason for keeping stock for 30 days is based on lead time required to manufacture these drugs.
2. Following parameters are used/worked out for estimation –
  - a. The peak number of new cases is estimated at 1.5 times the peak of the second surge (4.14 lakh new cases on 7<sup>th</sup> May 2021) at 6.21 lakh cases.
  - b. Daily average number of cases reported on ICMR's portal from 1<sup>st</sup> April to 15<sup>th</sup> June, 2021 (the duration of 2<sup>nd</sup> wave), of the 2<sup>nd</sup> wave of COVID-19 is calculated. This works out to 2.29 lakh new cases per day which is 55 % of the peak number of cases i.e. 4.14 lakh on 7<sup>th</sup> May, 2021.
  - c. The average number of cases, using 6.21 lakh peak cases as a benchmark, works out to 3.43 lakh cases per day (55% of the peak number of cases) assuming the surge lasts for 75 days and with similar spread of cases as during the 2<sup>nd</sup> wave.
  - d. Total number of cases for 30 days (with average of 3.43 lakh cases per day) will be 1.029 crore. For the purpose of buffer stock, the figure may be rounded to 1.0 crore new cases.
  - e. As per the prevailing technical guidelines it is estimated that 23% of total cases would require hospital admissions or in-patient care, with 3% on ICU beds, 15% on non-ICU but oxygen (O<sub>2</sub>) supported beds and rest 5% on non-ICU and non-O<sub>2</sub> supported beds.
  - f. Remdesivir is recommended under the technical guidelines for management of such cases that may require in-patient care on ICU beds

## 2229749/2021/ DRUG REGULATION

- or on non-ICU but oxygen (O<sub>2</sub>) supported beds. This amounts to 18% of total cases, i.e. 18 lakh cases.
- g. 60% of the patients would seek care in government hospitals. Therefore, the buffer stock quantity for Remdesivir works out to  $(18 \times 0.6) = 10.80$  lakh patient courses.
- h. This includes the requirements for both the central and state government institutions. The requirement as worked out in patient courses can be converted to vials/tablets as per the technical guidelines for management of COVID cases and for COVID Associated Mucormycosis (CAM) and Multi-Infection Syndrome in Children (MIS-C).
3. Quantities may vary from drug to drug based on its dosage & frequency of administration, and percentage of patients requiring the drug. Based on the inputs on Clinical Management Guidelines by National task Force and JMG of DGHS (dated 19.05.21), percentage of patients requiring these medicines is as follows:

S.NO	Name of the drug	% of Total COVID-19 cases
1	Enoxaparin Injection	23 %
2	Methyl Prednisolone Injection	23 %
3	Dexamethasone Injection	23 %
4	Remdesivir Injection	18 %
5	Tocilizumab Injection	40% of 3%
6	Amphotericin B Deoxycholate	1% of 23%
7	Posaconazole Injection	1% of 23%
8	IVIIG Injection	5% of 5% of 12% *

\*(12% is the observed number of paediatric cases out of Total COVID-19 cases, 5% is the percentage of severe/Moderate cases within the paediatric category, and 5% is the percentage of such severe/ moderate cases requiring IVIG injection).

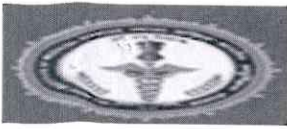
\*\*\*\*\*



**Annexure-L****Enhancement of Human resources**

	<b>MBBS Intern (UG)</b>	<b>Residents (PG)</b>	<b>Final Year MBBS students</b>	<b>Final year B.Sc Nursing Students</b>	<b>Final year GNM Nursing Students</b>
<b>Total (All India)</b>	<b>25353</b>	<b>13861</b>	<b>25353</b>	<b>18691</b>	<b>29779</b>
Andaman and Nicobar Islands	33	0	33	0	5
Andhra Pradesh	1719	772	1719	1462	1579
Arunachal Pradesh	17	18	17	8	48
Assam	297	211	297	125	477
Bihar	574	295	574	89	237
Chandigarh	50	186	50	18	0
Chhattisgarh	353	66	353	832	653
Dadra and Nagar Haveli and Daman & Diu	50	0	50	21	0
Goa	59	39	59	34	12
Gujarat	1815	700	1815	818	1405
Haryana	515	183	515	332	766
Himachal Pradesh	287	104	287	199	349
Jammu & Kashmir	325	187	325	148	145
Jharkhand	3001	75	3001	80	241
Karnataka	1322	1795	1322	3317	5143
Kerala	0	523	0	1371	1308
Ladakh	191	0	191	0	0
Lakshadweep	0	0	0	0	0
Madhya Pradesh	1030	466	1030	1546	3539
Maharashtra	2789	1605	2789	867	1760
Manipur	74	69	74	51	116
Meghalaya	17	10	17	17	58

	<b>MBBS Intern (UG)</b>	<b>Residents (PG)</b>	<b>Final Year MBBS students</b>	<b>Final year B.Sc Nursing Students</b>	<b>Final year GNM Nursing Students</b>
Mizoram	33	0	33	18	36
Nagaland	0	0	0	8	36
Odisha	578	281	578	265	678
Puducherry	472	297	472	196	75
Punjab	404	242	404	1004	2364
Rajasthan	1320	608	1320	1538	1918
Sikkim	17	7	17	32	9
Tamil Nadu	2360	1403	2360	1995	1668
Telangana	1597	733	1597	875	923
The Government of NCT of Delhi	417	887	417	118	170
Tripura	74	28	74	34	50
Uttar Pradesh	2072	922	2072	828	2883
Uttarakhand	272	570	272	202	275
West Bengal	1221	578	1221	246	855



**Fwd: Grant of Learning Resource Allowance and Academic Allowance to Director/ Executive Director of new AIIMS.**

1 message

**DDA AIIMS PATNA** <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 1:10 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Mon, Aug 7, 2023 at 3:13 PM

Subject: Grant of Learning Resource Allowance and Academic Allowance to Director/ Executive Director of new AIIMS.

To: Director <director@aiimsbhopal.edu.in>, <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <director@aiimsmangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>, <director@aiimsguwahati.ac.in>, dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Siddhartha Nandy <siddhartha.nandy@gov.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <dda@aiimsguwahati.ac.in>  
Cc: Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, <ak.biswas57@nic.in>, MARY THOMAS ASSTT <Mary.thomas38@nic.in>, <dev.gothal@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards

PMSSY-IV Section

Ministry of Health and Family Welfare





1/3 606625/2023

Government of India  
Ministry of Health & Family Welfare  
(PMSSY-IV Section)

3<sup>rd</sup> floor, IRCS Building, New Delhi  
Dated the 07-08-2023

To  
The Directors/ Executive Directors of new AIIMS.

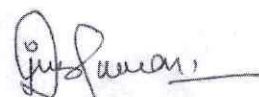
**Subject: Grant of Learning Resource Allowance and Academic Allowance to Director/ Executive Director of new AIIMS.**

Madam/Sir,

The matter relating to Grant of Learning Resource Allowance and Academic Allowance to Director/ Executive Director comes up for consideration in various meetings of the Standing Finance Committee of new AIIMS set up under PMSSY .

2. In view of the fact that the Directors/Executive Directors as Head of the Institute are in different ways involved in teaching learning process of the students ( both academic and clinical ) particularly in the departments of their respective specialties, therefore, in accordance with the MoHFW Letter No.V-16020/28/2017- INI-1 (Pt.) dated 23.08.2018 Learning Resource Allowance @ Rs.1,50,000/- per annum and Academic Allowance @ Rs. 22,500/- p.m. shall be payable to all the Directors/ Executive Directors of new AIIMS.

Yours faithfully,



(Dinesh Kumar)  
Joint Director, PMSSY  
Tel.011-23061730

Copy to : (i) DD (A) of all new AIIMS.  
(ii) Financial Advisors of all new AIIMS



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Promotion of Indigenously developed medical technologies in Public Procurement Policy to give preferences to domestic manufacturers-reg

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 1:09 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Mayukh Ranjan Paul SO** <mayukh.paul88@gov.in>

Date: Thu, Aug 17, 2023 at 11:16 AM

Subject: Promotion of Indigenously developed medical technologies in Public Procurement Policy to give preferences to domestic manufacturers-reg

To: <director@aiimsbhopal.edu.in>, <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiismangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Director AIIMS Bibinagar <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>, <dydir@aiimsbhopal.edu.in>, <dda@aiimsbhubaneswar.edu.in>, <guptairss@gmail.com>, <dda@aiimsjodhpur.edu.in>, <dda@aiimspatna.org>, <dda@aiimsraipur.edu.in>, <da@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, <dda@aiismangalagiri.edu.in>, <ddaiimsnagpur1@gmail.com>, <kpradip10@gmail.com>, <kochas27@gmail.com>, <rajeevsenroy30@gmail.com>, Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, <dda.aiimsbibinagar@gmail.com>, <ddaaiimsbilaspur@gmail.com>, <ddaaiimsjammu@gmail.com>, <ddamadurai1189@gmail.com>, <dda.aiimsrajkot@gmail.com>, T Mag <thaiu.mag@gov.in>, <rakeshkumar7123@yahoo.in>

Cc: Shri Raj Kumar Deputy Secretary <raj.kumar28@nic.in>, M. Pratap <manav.pratap@nic.in>, Himanshu Singh Sachan <hs.sachan90@gov.in>, Anshuli Tandon <anshuli.tandon@gov.in>

Madam/ Sir,

With reference to the subject above, kindly find the enclosed OM No.Z.28016/29/2023-PMSSY-I/(EO-8229995) dated 16th August, 2023 for further necessary action.

With regards

Mayukh Ranjan Paul  
Section Officer(PMSSY-I)  
Ministry of Health & Family Welfare  
3rd Floor, IRCS Building  
New Delhi - 110001





**Letter to AIIMS-1.pdf**  
9980K

I/3608830/2023

No.Z.28016/29/2023-PMSSY-I/(EO-8229995)

Government of India  
Ministry of Health & Family Welfare  
Department of Health & Family Welfare  
PMSSY-I Section

\*\*\*\*

3rd Floor, IRCS Building, New Delhi - 110001

Dated: 16th August, 2023

To

Director/Executive Director of all AIIMS under PMSSY

Subject: Promotion of Indigenously developed medical technologies in Public Procurement Policy to give preferences to domestic manufacturers- reg.

Madam/Sir,

I am directed to refer to DO No10(3)/2023-ME&HI dated 21.04.2023 issued by MeitY on the above subject (copy enclosed) with the request to arrange for sending team(s) of respective specialty to the facilities where the indigenously produced LINAC, listed in the above mentioned DO, has been installed and is functional, so as to ascertain its usability in various AIIMS under PMSSY.

2. This issues with the approval of the Competent Authority.

Encl: As above.

Yours faithfully,

Signed by Manavendra

Pratap

Date: 16-08-2023 16:54:13

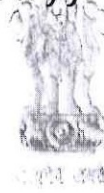
Reason: Approved

(Manavendra Pratap)

Under Secretary to the Government of India

Tel: 011-23736974

अलकेश कुमार शर्मा, आई.ए.एस.  
सचिव  
Alkesh Kumar Sharma, I.A.S.  
Secretary



इलेक्ट्रॉनिकी और सूचना प्रौद्योगिकी मंत्रालय  
भारत सरकार  
Ministry of Electronics &  
Information Technology (MeitY)  
Government of India

DO. No. 10(3)/2023-ME&HI  
Dated: 21<sup>st</sup> April 2023

**Subject: Promotion of Indigenously developed medical technologies in public procurement policy to give preference to domestic manufacturer**

SAMEER, a Scientific Society of Ministry of Electronics & IT (MeitY) has developed, fabricated and deployed number of 6 MV LINAC machines, for the treatment of Cancer patients after obtaining approval of AERB (details at Annexure-1). SAMEER has transferred the technology of 6MV LINAC to M/s. Panacea Medical Technologies (PMT), Bangalore for further commercialization. M/s. PMT has already obtained US FDA and is in the process of commissioning these machines at various hospitals (details at Annexure-1). The product brochure is enclosed for ready reference. Some more industries are also expected in creating a complete eco-system in India so that this advanced cancer therapy machine may be manufactured in large scale to meet the needs of our country.

2. It may kindly be noted that very few companies in the world produce 6MV medical LINACs and INDIA has joined the league by developing 6 MeV medical LINAC machines. This indigenously developed technology appropriately fits in the Government's initiatives of "Make in India" and "Atmanirbhar Bharat" with more than 60% of the Local content. This indigenous machine may be exported to many neighboring countries by the Indian Industries as Government of India Mantra "Local for Global". The indigenous machine is expected at half the cost compared to the machine manufactured by MNCs with similar specifications.

3. I would request for your support in promoting this indigenously developed 6MV Medical Linear Accelerator by ensuring deployment in Government Healthcare Units.

4. It is further requested that the clause like "supply of the equipment by manufacturer having 3 years experience" is restricting our ToT partner (The only domestic manufacturer and supplier of indigenous LINAC) in most of the Government procurement which may be relaxed. Also, the clauses to give preference to local manufacturers in Government procurement on the basis of higher local content may suitably be incorporated.

Warm Regards,

Yours sincerely,

(Alkesh Kumar Sharma)

Shri Rajesh Bhushan  
Secretary  
Ministry of Health & Family Welfare  
Room no.: 156-A  
Nirman Bhawan, C-Wing, New Delhi-110001





### Annexure-I

SAMEER developed Indigenous 6MV LINAC have been deployed at

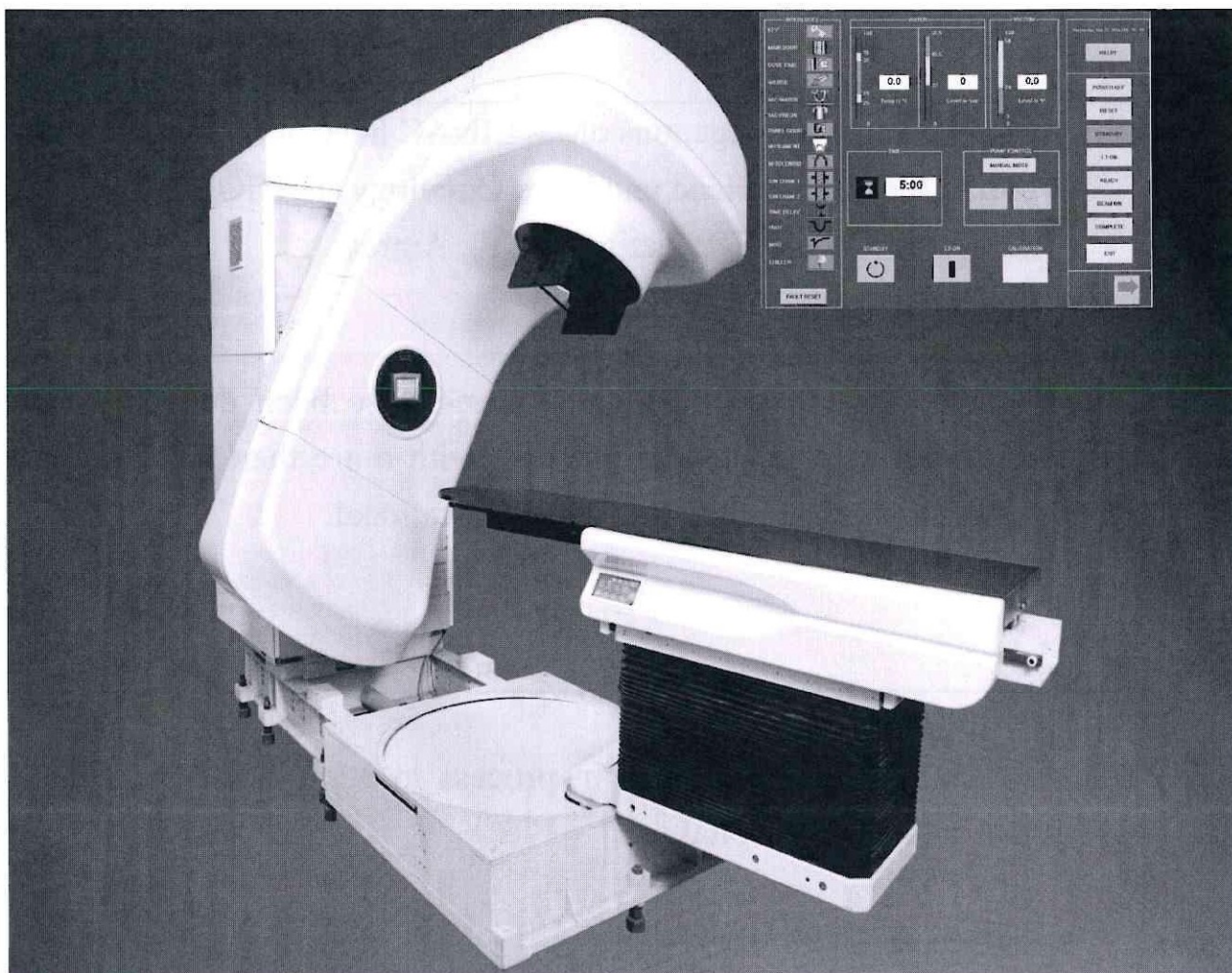
- Indian Institute of Head and Neck Oncology (IIHNO), Indore
- Amrawati Cancer Foundation (ACF), Amravati
- Cancer Institute, Adyar, Chennai

As on date More than 100000 exposures have been delivered to the cancer patients using the same machine with more than 90% uptime of the machine has been maintained while operational.

Panacea Medical Technology is in process to deploy improvised 6MV LINAC at following hospital.

- AMOR hospital, Hyderabad,
- Karnataka Cancer Hospital, Bengaluru,
- Jawahar institute of medical sciences, Imphal,
- Bengal Cancer foundation, Kolkata

## SIDDHARTH 6MV MEDICAL LINAC

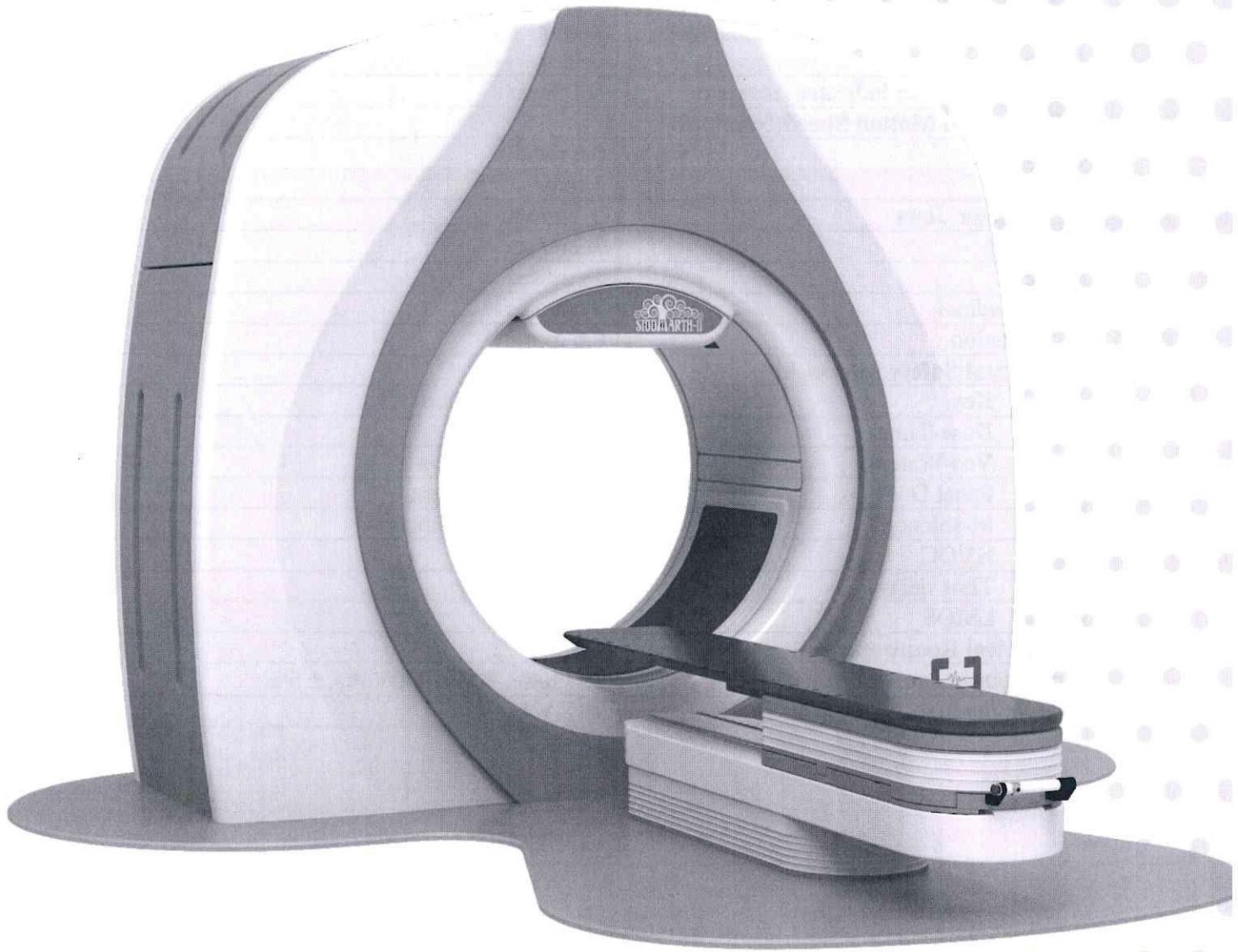


Salient Specifications	
Particle type	X-Rays (photons)
Energy	6MV Bremsstrahlung (nominal)
Dose Rate (at one meter from the target)	Variable from 50 to 240 Rads/min. flattened
Field Size	0 x 0 cm to 35 x 35 cm with sharp corners. 0 x 0 cm to 40 x 40 cm (with clipped corners)
Field Flatness	< 3% (up to 35 x 35cm)
Field Symmetry	< 2%
Collimator Rotation	$\pm 95^\circ$
Leakage Radiation	Less than 0.1% of forward dose in all Directions Except rear. On rear side 0.5%
Source to iso centre distance	100 $\pm$ 0.5 cm
Iso centre to Floor distance	139 $\pm$ 0.5 cm
Gantry Rotation	0° to $\pm 185^\circ$
Control console	Computerised control console
RF Source	Magnetron with locally developed pulse modulator



<b>Patient Treatment Couch Movements</b>	
Longitudinal	120 cm ( fully retracted )
Lateral	± 20 cm
Vertical	Range 68 to 168 cm from floor
Angular	± 95° around the vertical axis passing through the iso-centre.
<b>Mechanical Accuracy</b>	
Gantry Rotational Accuracy	0.3°
Gantry and collimator isocenter accuracy	< 2mm
Gantry, collimator and couch isocenter accuracy	< 2mm
Optical Distance Indicator Accuracy	< 1.5mm
<b>Mechanical Motion Speed(Nominal)</b>	
Gantry	0.6 rpm
Theta	1 rpm
Collimator Jaws	2 cm/ sec
Vertical	3 cm/ sec
Lateral	2 cm/ sec
Longitudinal	3 cm/ sec
Iso-rotation	0.6 rpm
<b>Electrical Safety Interlocks</b>	
➤ Key	➤ Main Door
➤ Dose-Time	➤ Wedge
➤ Vac-Water	➤ Vac-Freon
➤ Panel Door	➤ M-filament
➤ M-solenoid	➤ ION-chamber
➤ HVOC	➤ MOD
➤ Time delay	➤ Chiller
➤ LMOS	
<b>Electrical Requirement</b>	
Input power supply	3 - Phase, 50Hz, 440Volts, ± 5%
Maximum load	30 KVA





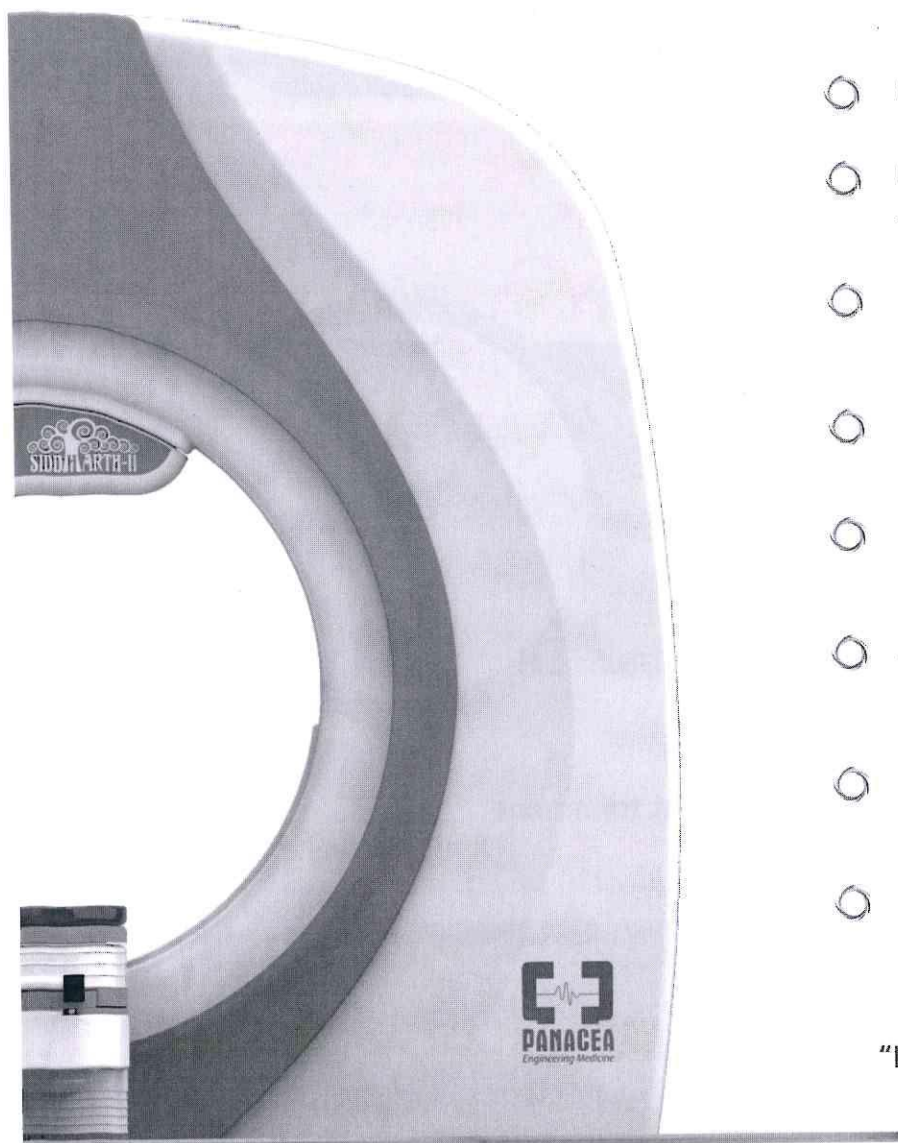
  
**SIDDHARTH-II**

SBRT Powered with Stereotactic Imaging

## **"Radiotherapy Solution for Today and Tomorrow"**

Radiation therapy has evolved with time to deliver treatment with utmost precision and personalized patient care. Panacea's aim to constantly innovate new technologies has led to a rapid evolution of an ideal solution which will transform cancer care; Siddharth II.

Siddharth II presents the most advanced technologies that will provide a cutting-edge solution for every modern radiotherapy centre. By addressing every need of a clinician, Siddharth II forms a perfect amalgamation of advanced treatment technique and more standardized and personalized care.



- ☐ 6 MV photons on a ring gantry platform
- ☐ High dose rate up to 900 MU/min (flattening filter free beams)
- ☐ Precise treatment delivery with 46 pair dynamic MLC
- ☐ Delivers 3D CRT, IGRT based IMRT, VMAT and SBRT
- ☐ In-Gantry Stereotactic imaging and wide field CBCT
- ☐ Accurate patient positioning with 6D robotic couch using In- Gantry stereotactic imaging
- ☐ Inbuilt beam stopper to reduce primary shielding requirements
- ☐ Intuitive treatment workflow for ease of operation

## **"Rotational Revolution"**

Has just begun...



### **"Aesthetically Modeled"**

With You in Mind...



Siddharth II's highly stable and robust ring gantry platform ensures precision and accuracy during the entire treatment. The new revolutionary ring gantry system is a combination of ergonomic design, state-of-art technology and patient-centric workflow.

### **"Stereotactic Imaging"**

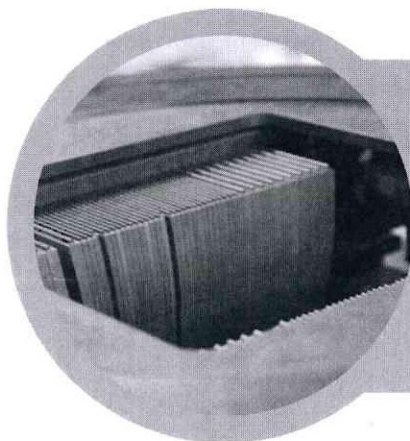
Made Faster...

With Siddharth-II's In-gantry stereotactic imaging, full volume imaging is performed within 15 seconds, ensuring overall faster treatment. Parallely, quick shift corrections with 6D patient positioning can be made with stereotactic imaging in Siddharth-II.



### **"Deliver the right treatment"**

With confidence...



To bring in accuracy, versatility and precision, the multileaf collimator is armed with 46 pairs of leaves as fine as 5mm. The dynamic MLC on Siddharth II speeds up to 3cm/sec to enable wide range of modalities with accurate conformal treatment.



**"Capturing From Within"**

Clarity At Its Best...

Wide array of imaging modalities like In-Gantry stereotactic kV imaging and wide angle CBCT can be performed on Siddharth II. The Amorphous Silicon based flat panel detector helps to achieve the highest image quality. With In-Gantry stereotactic kV imaging quick shift corrections can be made, also CBCT can be performed in both full fan and half fan mode.

**"Fine-Tuning Positional Accuracy"**

Through 6 DOF...

Accurate patient positioning combined with precise dose yields in better treatment delivery. Couch shift corrections are made hassle free without compromising patient's comfort with the movements like roll and pitch. Simultaneously, the lowest retracted height of 65cm facilitates patient positioning in a cumbersome free atmosphere.

**"Wide Bore Ring Gantry"**

Experience True Freedom...

The Wide bore ring gantry combined with 6D robotic couch allows Siddharth II to deliver non-coplanar beam treatments with patients at ease in a closed atmosphere. Furthermore, the wide bore gives ample space for dosimetric calculations and setting up the immobilization devices with ease.

**"Inbuilt Beam Stopper"**

Reduced Vault Requirements...

With an inbuilt beam stopper, the primary shielding requirements are reduced, thereby reducing the overall cost of the construction of bunker.



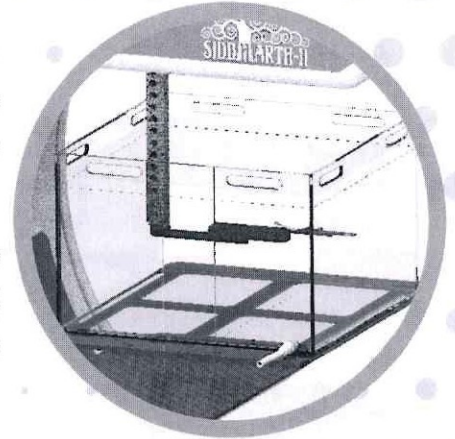
**SIDDHARTH-II**  
SBRT Powered Linear Accelerator

## **"Autonomous Beam Data Acquisition"**

With Scanomatika

The robotic RFA System of Siddharth II's Scanomatika consists of an in-built robotic arm, RFA phantom and a feature-rich software. Scanomatika autonomously captures the beam data with minimal user intervention.

Set up the system and leave for the day. Scanomatika's robotic arm is ready to perform the desired QA and multiple measurements in just one go. Come next day, you will have your data acquired and documented. Beam data acquisition has never been so simple and intuitive.



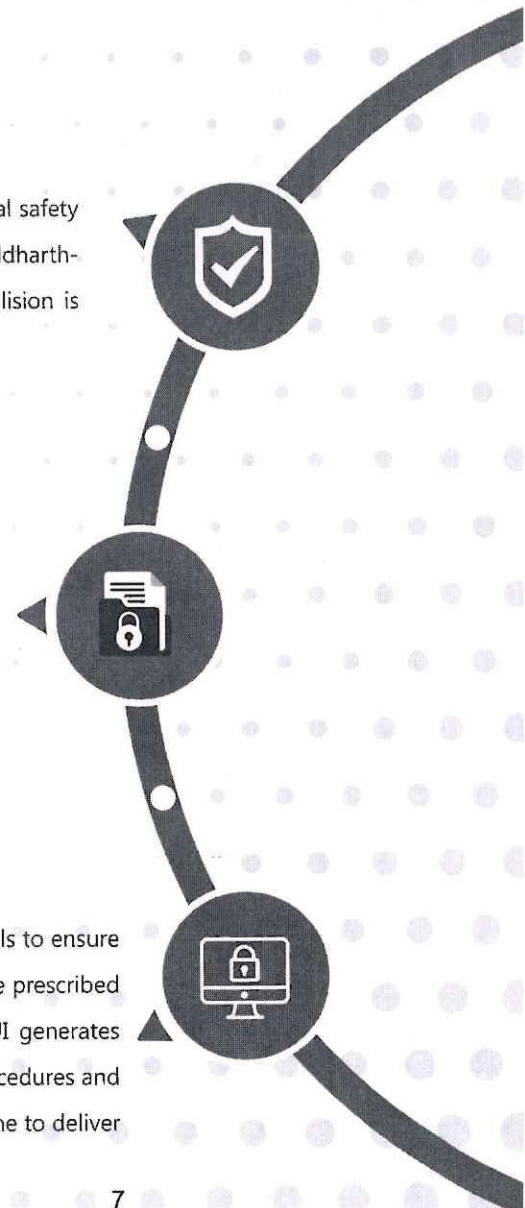
## **"Exceptional Safety"**

Guaranteed

Patient safety is given utmost priority during the entire workflow. All the essential safety interlocks assist in reduced human error and allows precise treatment delivery. Siddharth-II's unique safety feature, Collision detection system, alerts the user if any collision is

Patient and Patient Data Safety is secure with Siddharth II. The DICOM compatible system facilitates easy import of patient data, thereby saving time and eliminating errors that may arise due to manual entry. This additionally ensures that the patient data is always kept safe and secure in a tamper-proof paper free environment.

A process driven work flow allows the radiotherapy departments in the hospitals to ensure the treatments are delivered to all the patients without deviating the procedure prescribed by the oncologists. This process can be self-defined by the hospitals. The UI generates process interlocks which doesn't allow the machine operator to surpass the procedures and enter treatment mode. This ensures optimum usage of the usage of the machine to deliver precise treatment thus ensuring the safety of the patient.





## "Improve your Workflow "

With **Krysta** 

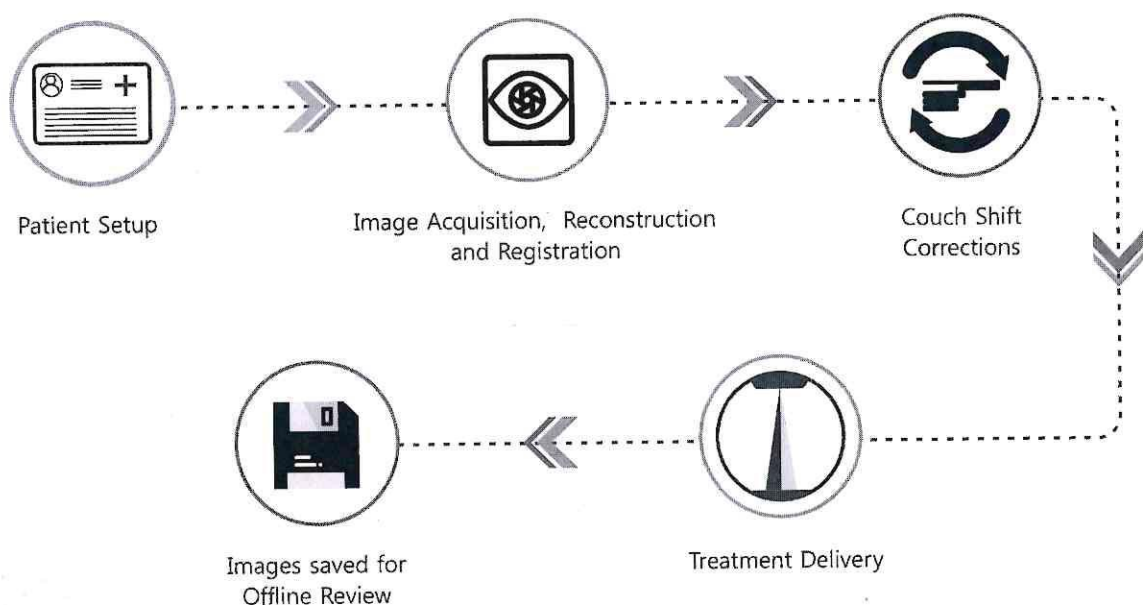
Designed for precision throughout the workflow, our record and verification system, **Krysta** reduces redundant steps and ensures precision in treatment delivery. The system acts as a repository for patient details starting from registration to complete treatment course. With the system's compatibility with DICOM RT and DICOM 3.0, the record and verification can be performed for all the treatment machines present in the Radiotherapy facility. To deliver an efficient and error free operation, our system defines customized protocol for each treatment modality, which cannot be surpassed.



## "Interacting with Siddharth II"

Finger taps away...

Siddharth II's User Interface is one-of-its-kind making it easy for the user to enter, plan, edit and execute patient treatment swiftly. The UI has a simplified workflow management enabling simpler communication with the user and the system; its intuitive workflow accomplishes the user to execute every procedure achieved within a click away.







Panacea Medical Technologies Pvt. Ltd.

✉ [contact@panaceamedical.com](mailto:contact@panaceamedical.com)  
🌐 [www.panaceamedical.com](http://www.panaceamedical.com)



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## **Fwd: Enhancement of remuneration to contractual Assistant Professors in new AIIMS.**

1 message

**DDA AIIMS PATNA** <dda@aiimspatna.org>  
To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Sat, Dec 27, 2025 at 1:09 PM

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Thu, Aug 17, 2023 at 5:34 PM

Subject: Enhancement of remuneration to contractual Assistant Professors in new AIIMS.

To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiimsmangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>, <director@aiimsguwahati.ac.in>  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, <ddaaiimsjammu@gmail.com>, <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <cao.finance@aiimsbhopal.edu.in>, <fa@aiimsbhopal.edu.in>, <fa@aiimsbhubaneswar.edu.in>, <aco@aiimsjodhpur.edu.in>, AMIT MUNDRA <amitpmundra@gmail.com>, <fa@aiimsjodhpur.edu.in>, <fa@aiimspatna.org>, <fa@aiimsraipur.edu.in>, fcao@aiimsraipur.edu.in <fcao@aiimsraipur.edu.in>, <fa@aiimsrishikesh.edu.in>, <aiimsrbl@gmail.com>, <fa@aiimsmangalagiri.edu.in>, <fa@aiimsnagpur.edu.in>, <fic-finance@aiimskalyani.edu.in>, <abhayk@cag.gov.in>, <accounts@aiimsbilaspur.edu.in>, <acctsofficeraiimsjammu@gmail.com>, <fa@aiimsguwahati.ac.in>, <ifdhealth@gmail.com>, <shanti.negi@nic.in>, <Rajesh.kumar78@nic.in>, <Sawru.singh@nic.in>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, <ak.biswas57@nic.in>, MARY THOMAS ASSTT <Mary.thomas38@nic.in>, <dev.gothal@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards  
PMSSY-IV Section  
Ministry of Health and Family Welfare

---

 **Letter All AIMS 10 (2).pdf**  
92K



I/ 3606274/2023

**F. No. Z-28016/25/2020-PMSSY-IV**  
**Government of India**  
**Ministry of Health and Family Welfare**  
**(PMSSY-IV Section)**

**4th Floor, Red Cross Building, New Delhi**  
**Dated 03rd August, 2023**

To

The Director/Executive Directors of all new AIIMS.

**Subject: Enhancement of remuneration to contractual Assistant Professors in new AIIMS.**

Madam/Sir,

I am directed to state that few new AIIMS have requested for approval for enhancement of contractual remuneration of Assistant Professors appointed on contractual basis in new AIIMS to Rs.1,42,506/- at par with AIIMS New Delhi.

2. The matter has been considered in the Ministry in consultation with IFD. it is advised that the contractual engagement of Assistant professors in case absolutely necessary may be done with the approval of the Competent Authority as per existing Rules Guidelines etc.in place and the consolidated lumpsum payment **should not exceed** Minimum of the pay level of the post of Assistant Professor against which the contractual engagement is being made + + NPA + applicable DA on the total of the two Components .

3. It is also advised that such contractual appointments of Assistant Professors should be resorted to only in exceptional circumstances and even in such instances it should not exceed a period of One year. The Institute should make all out efforts to fill the sanctioned posts on a regular basis .

Yours faithfully,

Signed by

(K Balasubramanian) <sup>Krishnamurthy Balasubramanian</sup>

Under Secretary to the Govt of India

Tele : 011-23350010

Copy to:

- i. Deputy Director (Admn.) of all new AIIMS.
- ii. Financial Advisors of all new AIIMS

Copy for information to : Under Secretary, IFD, MoHFW, Nirman Bhavan, New Delhi.



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## **Fwd: Compliance in respect to the guidelines of CERT-IN on Information Security Practices -reg.**

1 message

**DDAAIIMS PATNA** <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 1:08 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **mn mishra** <mnmishra.mohfw@gmail.com>

Date: Thu, Aug 24, 2023 at 6:08 PM

Subject: Fwd: Compliance in respect to the guidelines of CERT-IN on Information Security Practices -reg.

To: Deputy Director Administration <dda@aiimsbhubaneswar.edu.in>, <dda.aiimsrajkot@gmail.com>, <ddaaiimsjammu@gmail.com>, <ddamadurai1189@gmail.com>, <dda@aiimsdeoghar.edu.in>, <dda@aiimsmangalagiri.edu.in>, <ddaaiimsbilaspur@gmail.com>, <dda.aiimsbibinagar@gmail.com>, DDA AIIMS Jodhpur <dda@aiimsjodhpur.edu.in>, <dda@aiimsnagpur.edu.in>, <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, DDA AIIMS Rishikesh <dda@aiimsrishikesh.edu.in>, DDA AIIMS Bhopal <dydir@aiimsbhopal.edu.in>, Dy Director Administration AIIMS, Raebareli <ddaaiimsrbl@gmail.com>, Rakesh Kumar <ddaaiimsawantipora@gmail.com>

Cc: cc: Narendra K Oza <nk.oza@gov.in>, ShriRajKumar Under Secretary <raj.kumar28@nic.in>

Dear Sir,  
As per trailing mail, kindly take necessary action.

Regards,  
Er.M.N.Mishra  
IT Consultant, PMSSY,  
Ministry of Health & Family welfare

----- Forwarded message -----

From: **Shri Raj Kumar Deputy Secretary** <raj.kumar28@nic.in>

Date: Fri, Jul 14, 2023 at 9:50 AM

Subject: Fwd: Compliance in respect to the guidelines of CERT-IN on Information Security Practices -reg.

To: mn mishra mohfw <mnmishra.mohfw@gmail.com>, T Chinsum Naulak <chinsum.n@nic.in>, Subodh Kumar <sk.sudhakar@gov.in>

Raj Kumar  
राज कुमार  
Deputy Secretary  
PMSSY  
Ministry of Health and Family Welfare



**From:** "EHealth Section" <telmed-mohfw@gov.in>

**To:** "Vishal Chauhan Joint Secretary Policy MoHFW" <js.policy-mohfw@gov.in>, "Dr. (Mr.) P. Ashok Babu" <jsrch-mohfw@gov.in>, "Ms Gayatri Mishra" <g.mishra@nic.in>, "Rajiv Manjhi" <rajiv.manjhi@nic.in>, "Vandana Jain" <vandana.jain@nic.in>, "Dr Sachin Mittal" <mittal.sachin@gov.in>, "Dr. Manashvi" <JSG20-MOHFW@gov.in>, "ANKITA MISHRA BUNDELA" <ankita.edu@nic.in>, "Sumita Singh" <sumita.1970@gov.in>, "Dr(Mr) Surendra Ahirwar" <surendra.ahirwar@gov.in>, "S. Bhardwaj" <s.bhardwaj30@gov.in>, "ReemaDhamija" <reema.dhamija@govcontractor.in>, "amshika.george" <amshika.george@govcontractor.in>  
**Cc:** "Govind Jaiswal" <govind.jaiswal@ias.nic.in>, "Elangbam Robert Singh" <robert.elangbam@gov.in>, "Govind Kumar" <govind.bansal78@gov.in>, "RAJ KUMAR" <rkumar.edu@nic.in>, "Bimal Kumar" <bimal.kumar@nic.in>, "Sachin Kumar" <sachin.k@nic.in>, "KIRAN KARLAPU" <kiran.karlapu@gov.in>, "dr pulkesh" <dr.pulkesh@gov.in>, "Manoj Kumar Sinha" <mk.sinha26@nic.in>, "ADWAIT KUMAR" <adwaitk.singh@ias.nic.in>, "Manmohan Badola" <manmohan.badola@nic.in>, "Sarvajit Kumar" <kumar.sarvajit@nic.in>, "Gopal Aaditya Raghuvanshi" <gopal.aaditya@nic.in>, "Sarita Nair" <sarita.nair@gov.in>, "Sitanshu Mohan" <sm.routray67@gov.in>, "Shri Raj Kumar Deputy Secretary" <raj.kumar28@nic.in>, "Dinesh Kumar" <dinesh.kumar64@nic.in>, "Z. A. Khan" <us-doj@mha.gov.in>, "mk harikuar" <mk.harikuar@nic.in>, "Noorin Bux Khan" <noorinbux@ord.gov.in>, "M L Sharma" <ml.sharma66@nic.in>, "Poonam Meena" <poonam.22@gov.in>, "SANJAY ROY" <sanjay.roy14@nic.in>, "Harsh Mangla" <harsh.mangla@ias.nic.in>, "Narendra K Oza" <nk.oza@gov.in>, "ROLI KHARE" <roli.khare@gov.in>, "Neha Garg" <nehagarg.irs@gov.in>, "ASHISH V GAWAI" <av.gawai@nic.in>, "Nirmal Kumar Bhagat" <nirmalk.bhagat@nic.in>, "dvk Rao" <dvk Rao@nic.in>, "Alka Ahuja" <alkaahuja@naco.gov.in>, "Dharminder" <s.dharminder@nic.in>, "Megha Bansal" <megha.bansal89@gov.in>, "indu ehealth" <indu.ehealth@gmail.com>, "babloo ehealth" <babloo.ehealth@gmail.com>, "pankaj ehealth" <pankaj.ehealth@gmail.com>

**Sent:** Thursday, July 13, 2023 6:01:38 PM

**Subject:** Compliance in respect to the guidelines of CERT-IN on Information Security Practices -reg.

Sir/Madam,

Kindly find attached "OM dated 13th July, 2023" along with "Annexure" regarding subject cited above, for your information and necessary action at the earliest.

**eHealth Section**  
**Ministry of Health & Family welfare**  
**Room No.-213, D-wing, Nirman Bhawan**  
**New Delhi-110011**  
**Tel No.-23062263**

--

regards,  
Er.M.N.Mishra,  
Mob: 7982125857

---

**2 attachments**



**OM regarding Websites.pdf**  
917K



**Annexure.pdf**  
347K



T-21016/73/2023-eHealth  
Government of India  
Ministry of Health and Family Welfare  
eHealth section

Nirman Bhawan, New Delhi  
Dated: 13<sup>th</sup> July, 2023

OFFICE MEMORANDUM

Subject: Compliance in respect to the guidelines of CERT-IN on Information Security Practices -reg.

CERT-IN has released guidelines on Information security practices (available at <https://www.cert-in.org.in/guidelinesgovtentities.jsp>) on 30<sup>th</sup> June, 2023 to ensure that all Websites hosted by the Ministries/Departments adhere to the Guidelines of Indian Government Websites (GIGW), a component of which is to ensure that website is active, trustworthy, reliable and engaging for user.

2. In this regard, some sections/divisions have been identified whose Websites has already been expired (enclosed at Annexure).
3. Accordingly, it is requested that concerned sections/divisions may take necessary action at the earliest regarding renewal of their websites.

Yours faithfully

  
(Govind Jaiswal)  
Director (eHealth)  
01123061281

To,  
All JS/EA/DDG

Copy To:

1. All Directors/DS
2. Sr. Tech. Dir., NIC Health

**Annexure**

<b><u>S.N</u></b> <b><u>o.</u></b>	<b><u>Proje</u></b> <b><u>ct</u></b> <b><u>Nam</u></b> <b><u>e</u></b>	<b><u>Proje</u></b> <b><u>ct</u></b> <b><u>Admi</u></b> <b><u>n</u></b>	<b><u>Project</u></b> <b><u>Admin Email</u></b>	<b><u>PublicIP</u></b>	<b><u>WIM</u></b> <b><u>Deta</u></b> <b><u>ils</u></b> <b><u>and</u></b> <b><u>Addr</u></b> <b><u>ess</u></b>	<b><u>URL</u></b>	<b><u>Work</u></b> <b><u>ing</u></b>
1	AHP	B S Murthy	budaraju.sm69@nic.in, hrhcell-mohfw@gov.in	164.100.17.62	NA	a2hp.mohfw.gov.in	NO
2	DBT	Ms Bindu Sharma	bindu.sharma67@nic.in, suparna@nic.in	164.100.54.211		dbt.mohfw.gov.in	NO
3	MPCP	Sanjay Kumar	ddmmpc-mohfw@nic.in	164.100.65.23		--	NO
4	NACO IMS MSDS	Praveen Prakash Gupta	ddgrsg@naco.gov.in, nareshgoel@naco.gov.in, bhawani@naco.gov.in, pomne.naco@gmail.com	164.100.17.28	NA	msds.naco.gov.in	NO
5	NIKSHAY	Dr Devesh Gupta, Dr. Raghuram Rao	guptad@rntcp.org, raghuram.rao@gov.in	164.100.186.50		nikshay.gov.in	NO
6	eSamikSha	Swarup Dutta	swarup.dutta@nic.in	164.100.192.7	NA	eSamikSha.mohfw.gov.in	NO
7	MED. COLLEGE APP	DVK Rao	dvkrao@gov.in	164.100.158.114	NA	medicalcollegeapplication.gov.in	NO
8	MSO	R. K. Yadav	mso-mohfw@nic.in	164.100.68.82	NA	mso.gov.in	NO
9	NIKUSHTH	Nikushth	ddgl@nic.in	164.100.230.121		nikushth.nhm.gov.in	NO

10	NISC	Dr Tanu Jain	coord.nisc@rml h.nic.in	164.100.1 58.41		nisc.gov.in	NO
11	NLEP	Dr. ANIL KUMA R	ddgl@nic.in		NA	nlep.nic.in	NO
12	NPCB	Dr. V. Rajshe khar	vrajshekhar@g mail.com, v.rajshekhar@ni c.in	164.100.6 8.39	NA	npcb.nic.in	NO
13	SICSJH	Dr. Himan shu Kataria	himanshu.katari a@gov.in	164.100.6 8.44		sportsinjurycentersjh .nic.in	NO





Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## **Fwd: Facilities extended to the contractual employees of the Ministry /Department / Autonomous Bodies- reg.**

1 message

**DDA AIIMS PATNA** <dda@aiimspatna.org>  
To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Sat, Dec 27, 2025 at 1:06 PM

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Tue, Sep 12, 2023 at 5:45 PM

Subject: Facilities extended to the contractual employees of the Ministry /Department / Autonomous Bodies- reg.

To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, dydir <dydir@aiimsbhopal.edu.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, DDA AIIMS PATNA <dda@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, dda <dda@aiimsrishikesh.edu.in>, <edaaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, Saroj Singh <sarojkr.singh@gov.in>, <director@aiimsmangalagiri.edu.in>, dda <dda@aiimsmangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, sramji57 <sramji57@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, <adminofficer@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, <shakti810505@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, <drmhraosvims1957@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, <cdskatoch@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, <puranik\_6@hotmail.com>, <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <madhabananda@gmail.com>, <adminofficer@aiimsguwahati.ac.in>, <ed@aiimskalyani.edu.in>, <dda@aiimskalyani.edu.in>, PA to Director AIIMS Mangalagiri <pa.director@aiimsmangalagiri.edu.in>, <director@aiimsbilaspur.edu.in>, <dda@aiimsbilaspur.edu.in>, <dda@aiimsnagpur.edu.in>, Office Admin <aofficeaiimgkp@gmail.com>, <ddaaiimsrbl@gmail.com>  
Cc: K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, <dev.gothal@gov.in>, Amit Batra <amit.batra@gov.in>

Sir/ Madam

Please find the attachment and provide the information at the earliest.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards

PMSSY-IV Section



**OM- Contractual Employees.pdf**  
2168K



**F.No. 28-25/2022-IFD**  
**Government of India**  
**Ministry of Health & Family Welfare**  
**(Integrated Finance Division)**

**Nirman Bhawan, New Delhi**  
**Dated 12<sup>th</sup> September, 2023**

**Office Memorandum**


**Subject: Facilities extended to the contractual employees of the Ministry /Department /**  
**Autonomous Bodies- reg.**

\*\*\*\*

The undersigned is directed to forward herewith a copy of DoE's OM No. 1(17)EV/2021-Pt. dated 01.09.2023 which is self explanatory. The requisite information on the gamut of facilities given to the contractual employees picked up from open market of the Ministry/Department/Autonomous Bodies under the administrative control of respective Programme Divisions/Establishment/Organisation may please be furnished to IFD so as to be reached by 15.09.2023 positively.

The matter may be treated on priority basis.

This issues with the approval of competent authority.

  
(Sng. Mohelas Anal)  
Under Secretary(F.III)  
Room No. 314-D

To,

All Dirs/DSs in MoHFW/DHR/NACO/DGHS/NCDC/NCVBDC

Copy to:

1. PPS to AS &FA/JS(IFD)
2. PPS to All the JSs/EAs in MoHFW/DHR/NACO



REMINDER

F.No.1(17)/EV/2021-Pt.  
Government of India  
Ministry of Finance  
Department of Expenditure  
EV Branch

North Block, New Delhi  
Dated 01<sup>st</sup> September, 2023

Office Memorandum

Subject: Facilities extended to the contractual employees of the  
Ministry/Department/Autonomous Bodies- reg.

The undersigned is directed to refer to this Department's OM of even number dated 03.05.2023 (Copy Enclosed) vide which this Department has sought the information in respect of gamut of facilities given to the contractual employees picked up from open market of the Ministry /Department/ Autonomous Bodies, under your administrative control may be provided to this Department by 26.05.2023.

2. The information in this regard has not been received from all the FAs. Further some of the FAs have provided the information in respect of retired Government employees hired as Consultants.

3. In view of the above, it is once again requested that the information in respect of gamut of facilities given to the contractual employees (eg. Data Entry Operator, Office Assistant, Multi Tasking Staff etc.) hired from the open market in the Ministry /Department/ Autonomous Bodies under your administrative control may be provided to this Department by 15.09.2023.

Yours faithfully,

*Ranjeet*  
17/9/2023  
(Ranjeet Kumar)

Under Secretary to the Govt. of India  
Tele: 2309 5633

To,  
Financial Advisors of all Ministries/ Departments (as per standard list)



F.No.1(17)/EV/2021-Pt.  
Government of India  
Ministry of Finance  
Department of Expenditure  
EV Branch

North Block, New Delhi  
Dated 3<sup>rd</sup> May, 2023

Office Memorandum

Subject: Facilities extended to the contractual employees of the  
Ministry/Department/Autonomous Bodies- reg.

The undersigned is directed to say the retired staff appointed on contractual basis are given a lumpsum consolidated salary (Ref. DoE OM No. 3-25/2020-E.IIIA dated 09.12.2020). However, at present there are no uniform guidelines for regulation of facilities where contractual staff is picked up from open market. It has been seen that there is no standard practice being followed and various benefits are being extended by the Ministries/ Departments to such staff.

2. In view of the above, it is requested that the information in respect of gamut of facilities given to the contractual employees of the Ministry /Department/ Autonomous Bodies under your administrative control may be provided to this Department by 26.05.2023.

Yours faithfully,

*Ranjeet*  
31/5/2023  
(Ranjeet Kumar)

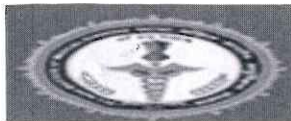
Under Secretary to the Govt. of India  
Tele: 2309 5633

To,  
Financial Advisors of all Ministries/ Departments (as per standard list)

issued  
31/5

9c





Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Engagement of Consultants in New AIIMS - instructions reg

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 1:06 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Fri, Sep 15, 2023 at 3:41 PM

Subject: Engagement of Consultants in New AIIMS - instructions reg

To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiismangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>

Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiismangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Lt Col Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <cao.finance@aiimsbhopal.edu.in>, <fa@aiimsbhopal.edu.in>, <fa@aiimsbhubaneswar.edu.in>, <aco@aiimsjodhpur.edu.in>, AMIT MUNDRA <amitpmundra@gmail.com>, <fa@aiimsjodhpur.edu.in>, <fa@aiimspatna.org>, <fa@aiimsraipur.edu.in>, fcao@aiimsraipur.edu.in <fcao@aiimsraipur.edu.in>, <fa@aiimsrishikesh.edu.in>, <aiimsrbl@gmail.com>, <fa@aiismangalagiri.edu.in>, <fa@aiimsnagpur.edu.in>, <fic-finance@aiimskalyani.edu.in>, <abhayk@cag.gov.in>, <accounts@aiimsbilaspur.edu.in>, <acctsofficeraimsjammu@gmail.com>, <fa@aiimsguwahati.ac.in>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, Amit Batra <amit.batra@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards



PMSSY-IV Section  
Ministry of Health and Family Welfare

---

**2 attachments**



**Engagement of Consultants in New AIIMS - instructions reg..pdf**  
74K



**Encl Note of Secretary.pdf**  
805K

I/3615421/2023

Government of India  
Ministry of Health & Family Welfare  
PMSSY-IV Section

3<sup>rd</sup> floor, IRCS Building, New Delhi  
Dated the 15-09-2023

To,

The Directors/ Executive Director of all new AIIMS

**Subject: Engagement of Consultants in New AIIMS - instructions reg**

Madam/ Sir,

I am directed to forward herewith a note dated 07.09.2023 of Secretary (HFW) on the subject cited above. All AIIMS are advised to scrupulously follow the directions mentioned in the note and to furnish a compliance report to this Ministry within 15 days positively.

Yours faithfully

Encl. As above.

Signed by  
K. Balasubramanian  
(K Balasubramanian)  
Date: 15-09-2023 12:44:11  
Under Secretary to the Government of India  
Tel:011-23350010  
k.balasubramanian38@nic.in

Copy to: (i). DD(A) of all new AIIMS  
(ii). Financial Advisors of all new AIIMS

Office of Secretary (Health & FW)  
FTS No. 3310169/2023  
Date 07/09/2023

It has been observed that several private Consultants engaged in the Ministry in different Divisions/Sections are also dealing with files related to matters of policy, procurement and other financial issues. It may kindly be ensured that such and other works of sensitive nature may not be dealt with on files by the Consultants engaged in the Ministry. For Divisions where such practices are prevalent, the concerned AS/JS may kindly do the reallocation of such work to other officials and inform JS(Admin.) latest by 14<sup>th</sup> September 2023.

*Please ensure above*  
*h*  
*11/09.*

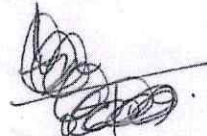
*Sudhansh Pant*  
(Sudhansh Pant) 7/9  
Secretary (HFW)  
7<sup>th</sup> September 2023

AS(RS) / AS&MD / AS(VHZ)

All Joint Secretaries/EA

JS(PMSSY)

Copy to : DGHS

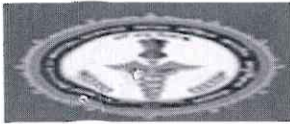


*Dw (INI)*  
*ID (LDK)*

*12.5.23*

*VS/1002*





Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: SAP Guidelines 2023-24 -Reg.

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 1:05 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **PMSSY V** <pmssysection5@gmail.com>

Date: Wed, Sep 20, 2023 at 5:56 PM

Subject: SAP Guidelines 2023-24 -Reg.

To: Director AIIMS Bhopal <director@aiimsbhopal.edu.in>, director bhubaneswar <director@aiimsbhubaneswar.edu.in>, Director AIIMS Jodhpur <director@aiimsjodhpur.edu.in>, Director Patna <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, Director AIIMS Rishikesh <director@aiimsrishikesh.edu.in>, Executive Director Raebareli <ed.aiimsrbl@gmail.com>, Director AIIMS Nagpur <directoraiimsnagpur@gmail.com>, Director Mangalagiri <director@aiimsmangalagiri.edu.in>, ED AIIMS Kalyani <ed@aiimskalyani.edu.in>, ED AIIMS Guwahati <executive-director@aiimsguwahati.ac.in>, Director AIIMS Bibinagar <director.aiimsbbinagar@gmail.com>, Executive Director Gorakhpur <executivedirector@aiimsgorakhpur.edu.in>, Director AIIMS Bathinda <director@aiimsbathinda.edu.in>, Director AIIMS Deoghar <director@aiimsdeoghar.edu.in>, ED AIIMS Bilaspur <edaaiimsbils@gmail.com>, Director AIIMS Vijaypur <shakti810505@gmail.com>, DDA AIIMS Awantipora <rakeshkumar7123@yahoo.in>, Executive Director AIIMS Rajkot <ed.aiimsrajkot@gmail.com>, Director AIIMS Madurai <drmhraosvims1957@gmail.com>, DDA BHOPAL <dydir@aiimsbhopal.edu.in>, DDA Bhubaneswar <dda@aiimsbhubaneswar.edu.in>, DDA Jodhpur <dda@aiimsjodhpur.edu.in>, DDA AIIMS Patna <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, DDA AIIMS Rishikesh <dda@aiimsrishikesh.edu.in>, DDA MANGALAGIRI <dda@aiimsmangalagiri.edu.in>, DDA NAGPUR <dda@aiimsnagpur.edu.in>, DDA RAEBARELI <ddaaaiimsrbl@gmail.com>, DDA BATHINDA <devender.rawat1@gmail.com>, DDA AIIMS BIBINAGAR <dda.aiimsbbinagar@gmail.com>, DDA GORAKHPUR <ashwanimahaur@gmail.com>, Dr. DDA AIIMS Kalyani <kpradip10@gmail.com>, DDA AIIMS Vijaypur, Jammu <ddaaiimsjammu@gmail.com>, dda bilaspur <ddaaiimsbilaspur@gmail.com>, DDA DEOGARH <amrendra.kumar72@gov.in>, DDA AIIMS Guwahati <dda@aiimsguwahati.ac.in>, DDA AIIMS Madurai <ddamadurai1189@gmail.com>, Financial Advisor AIIMS Bhopal <fa@aiimsbhopal.edu.in>, Finance & Chief Account Officer AIIMS Bhopal <cao.finance@aiimsbhopal.edu.in>, Financial Advisor AIIMS Bhubaneswar <fa@aiimsbhubaneswar.edu.in>, Sr. Account Officer AIIMS Bhubaneswar <sao@aiimsbhubaneswar.edu.in>, Financial Advisor AIIMS Jodhpur <fa@aiimsjodhpur.edu.in>, Finance & Chief Account Officer AIIMS Jodhpur <aco@aiimsjodhpur.edu.in>, F.A AIIMS Patna <fa@aiimspatna.org>, FA AIIMS Patna <aprakash\_13@yahoo.co.in>, FA AIIMS Raipur <fa@aiimsraipur.edu.in>, FA AIIMS Rishikesh <fa@aiimsrishikesh.edu.in>, Finance Advisor AIIMS Raebareli <aiimsrbl@gmail.com>, Financial Advisor AIIMS Nagpur <fa@aiimsnagpur.edu.in>, Financial Advisor AIIMS Mangalagiri <fa@aiimsmangalagiri.edu.in>, Finance AIIMS Kalyani <fic-finance@aiimskalyani.edu.in>, ACCOUNT OFFICE KALYANI <accounts.section@aiimskalyani.edu.in>, Financial Advisor AIIMS Guwahati <fa@aiimsguwahati.ac.in>, Accounts Officer AIIMS Guwahati <accounts-officer@aiimsguwahati.ac.in>, FA AIIMS Bibinagar <fa@aiimsbbinagar.edu.in>, AO AIIMS Gorakhpur <aoofficeaiimsgkp@gmail.com>, accountsoffice bathinda <accountsoffice@aiimsbathinda.in>, Financial Adviser <accounts@aiimspatna.org>, <office.aiimsdeoghar@gmail.com>, <aiimsgbg22@gmail.com>, <ao.aiimsmadurai@gmail.com>, Executive Director AIIMS Darbhanga <madhabananda@gmail.com>, <accounts@aiimsbilaspur.edu.in>, AIIMS Bilaspur Account Officer <ao.accounts@aiimsbilaspur.edu.in>, <acctsofficeraiimsjammu@gmail.com>, <rajivao.finance@aiimsrishikesh.edu.in>, DDA AIIMS Rajkot <dda.aiimsrajkot@gmail.com>

Cc: <raj.kumar28@nic.in>, US T.C Naulak <chinsum.n@nic.in>, <cl.mawi85@nic.in>

Respected Sir/Madam,

With reference to the subject cited above, Please find the attachment herewith.

Yours faithfully,  
PMSSY-V  
IRCS Building, New Delhi-110001



**SAP Guidelines 2023-24.pdf**  
2750K



3201780/2023/HOSPITAL-II

1/3538493/2023



As per attached list.

No. Z.28015/55/2021-H-II  
Government of India  
Ministry of Health and Family Welfare  
(Hospital-II Section)

Nirman Bhawan, New Delhi  
Dated the 26<sup>th</sup> June, 2023

**Sub: Provision of funds for implementation Swachhta Action Plan (SAP) - 2023-24 in Central Government Hospitals/Institutes under Ministry of Health and Family Welfare –reg.**

Sir,

I am directed to refer to the subject cited above and to say that a provision of funds of Rs. 113.6095 crore has been made for implementation of Swachhta Action Plan for the year 2023-24 in Central Govt. Hospitals/Institutes. A copy of fund allocation to the respective hospitals/institutes under this Ministry is enclosed **(Annexure-I)**. It is informed that funds allotted under Swachhta Action Plan (SAP) for the year 2023-24, is to be utilized on the swachhta activities which is tabulated as under:

Sl No.	Categories	Programme/Activities (2023-24)
1.	Basic Maintenance	<ul style="list-style-type: none"> <li>• Disposal of obsolete/ unserviceable items and equipment like electrical, electronic items, furniture, vehicles, waste papers etc.</li> <li>• Water sanitation and conservation practices, drainage and sewage, availability of adequate dustbins, maintenance of furniture and fixture.</li> <li>• Installation of Hepa filter, battery operated vehicles for transportation of patient within the hospital's campus</li> <li>• Availability of adequate dustbins</li> <li>• Swachhta Logo, Digital Signage, Water ATM, etc.</li> <li>• Maintenance and Inspection of Occupational, Functional Components and Structural Systems</li> <li>• Pest control services</li> </ul>
2.	Sanitation and Hygiene	<ul style="list-style-type: none"> <li>• Regular cleaning in wards, OT/OPD, Emergency, Lab/ICU/CCU, toilet, workstations, disposable bins, door, walls, window.</li> <li>• Renovation of toilets for men and women and differently abled.</li> <li>• Regular review of such activities to be done on definite intervals.</li> <li>• Distribution of paper soap among the patient and attenders.</li> <li>• Installation of sanitary napkin vending machine and napkin incinerator</li> </ul>
3.	Infection Control	<ul style="list-style-type: none"> <li>• Hand washing, Personal protective equipment.</li> </ul>



		<ul style="list-style-type: none"> <li>• Use of gloves, facemasks and head cap, apron/ Lab coat during procedures and examination.</li> <li>• Decontamination and cleaning of instruments, environment control disinfection and sterilization of instruments.</li> <li>• Installation of automated hand sanitizers dispenser for all the wards/units, Use of hand sanitizers and soaps</li> <li>• Procurement of fumigation machine and chemicals.</li> <li>• Infection control posters, IEC material etc.</li> </ul>
4.	<b>Cleaning and Beautification of surrounding areas</b>	<ul style="list-style-type: none"> <li>• Installation of herbal garden, beautification and landscaping, tree plantation, gardening.</li> <li>• Installation of potted plants in corridors to create an eco-friendly environment, etc.</li> <li>• Cleaning Office/hospital premises/shramdan.</li> <li>• Plantation flower plants within the premises of hospital, cleaning of rainwater drainages.</li> </ul>
5.	<b>Digitization of Office records/e-office</b>	<ul style="list-style-type: none"> <li>• Digitization, storage and retrieval of Medical record, communications, files records, disposal of old file, implementation of e-office,</li> <li>• Online registration of patients, spare parts / software for digitization.</li> <li>• Queue Management System including token vending machine.</li> </ul>
6.	<b>Bio Medical Waste Management</b>	<ul style="list-style-type: none"> <li>• Disposal of bio-medical waste, collection Storage and transportation of biomedical waste.</li> <li>• Segregation practice of Bio-medical Waste as enumerated in Environment Act and Biomedical Waste Management Rules -2016, 2018 and 2019.</li> <li>• Solid and Liquid Waste Management</li> <li>• E-waste management</li> <li>• Management of hazardous waste, recycling of waste and statutory compliance.</li> <li>• Installation of waste-bins to segregate.</li> <li>• Chemical Waste Management</li> </ul>
7.	<b>Plastic Waste Management</b>	<ul style="list-style-type: none"> <li>• Prohibition of single-use plastic items such as PET bottles, plastic cups &amp; plates, plastic jugs, plastic folders, plastic banner in the hospital and its surrounding areas, etc.</li> <li>• Collection and disposal of plastics waste, poster for "Not to use plastic".</li> <li>• Installation of shredder, plastic waste incinerator</li> </ul>
8.	<b>Hospital Safety</b>	<ul style="list-style-type: none"> <li>• Implementation of National Disaster Management guidelines for hospital safety</li> <li>• Awareness Generation for Hospital Safety</li> <li>• Safety of Hospital building.</li> <li>• Fire safety in hospital</li> <li>• Hospital disaster preparedness and response such as planning, training and drills, information, communication</li> </ul>

		and documentation, Safety and Security etc.
9	Hygiene promotion and Swachhta Awareness at Local level	<ul style="list-style-type: none"> <li>• Procurement of Mannequins for fire safety drills</li> <li>• Training, IEC Material, code red posters workshop etc.</li> <li>• Competition like essay writing, slogan writing, painting etc.</li> <li>• Swachhta Awareness /Workshop</li> <li>• Display of banner/posters on Swachhta</li> <li>• Putting up of signages and captions like "No Smoking Area" "Do not Litter" etc.</li> <li>• Availability of information, education and communication (IEC) materials</li> <li>• Organise Swachhta pledge and various camps for promoting Swachhta in the community.</li> </ul>

2. All the hospitals/institutes are intimated/informed to make request to the concerned administrative Section /Division of this Ministry for releasing the fund under the head '96' for Swachhta Action Plan 2023-24. It is also requested to take appropriate action and also submit its quarterly progress report (physical & financial) on timely basis to Hospital-II Section, MoHFW.

Encl. as above.

Yours faithfully,

Signed by

Jitendra Kumar Jangid

Date: 26-06-2023 11:46:23

(Jitendra Kumar Jangid)

Under Secretary to the Government of India

Tele:-23061640

Copy to:

JS(AMB) / JS(PAB) / JS(VC) / JS(RM)

i. JS/EA concerned – for information & necessary action at their end.

ii. Under Secretary, Hospital-I Section, MoHFW – 26/6/23

iii. Section Officer, NE Section, MoHFW – 26/6/23

iv. Under Secretary, PMSSY -V Section, MoHFW (with the request to intimate to all AIIMSs under administrative control of PMSSY Division)





## List of Hospitals/Institutes

- 20
1. Director, AIIMS, Ansari Nagar, New Delhi
  2. Medical Superintendent, Dr. RML Hospital, New Delhi.
  3. Medical Superintendent, Safdarjung Hospital, New Delhi.
  4. Director LHMC and Associate Hospitals, New Delhi.
  5. Director, Kalawati Saran Children's Hospital, New Delhi
  6. Director, JIPMER, Dhanvantri Nagar, Gorimedu, Puducherry.
  7. Director, PGIMER, Karion Block, Sector-12, Chandigarh.
  8. Director, RIMS, Lamthelpat, Imphal, Manipur.
  9. Dean, Mahatma Gandhi Institute of Medical Sciences (MGIMS), Wardha
  10. Director, NEIGRIHMS, Shillong.
  11. Director, National Institute of Tuberculosis and Respiratory Diseases, New Delhi.
  12. Director, NIMHANS, Bengaluru
  13. Director, Central Institute of Psychiatry (CIP), Ranchi
  14. Director, Vallabhbhai Patal Chest Institute (VPCI), New Delhi
  15. Director, CNCI, Kolkata
  16. Director, RHTC, Najafgarh, New Delhi
  17. Director, Lokopriya Gopinath Bordoli Regional Institute of Mental Health (LGBRIMH), Tejpur, Assam
  18. Director, All India Institute of Speech and Hearing (AIISH), Mysore
  19. Director, All India Institute of Hygiene and Public Health, Kolkata
  20. US, PMSSY-V Section, Red Cross Building.



## Annexure

**Fund allocated as per Detailed Demand For Grants under Budget Head '96'  
for Swachhta Action Plan 2023-24 for Central Govt. Hospital and Institutes**

Sl. No.	Name of Hospitals/Institutes	Fund allocated (Rs. In Crore)
1.	AIIMS, New Delhi	Rs.10.00
2.	AIIMSS under PMSSY Division	Rs.35.00
3.	Dr. RML Hospital, New Delhi	Rs.6.00
4.	Safdarjung Hospital, New Delhi	Rs.3.00
5.	Lady Harding Medical College & Hospital, New Delhi	Rs.3.60
6.	Kalawati Saran Children's Hospital, New Delhi	Rs.1.50
7.	JIPMER, Puducherry	Rs.5.00
8.	PGIMER, Chandigarh	Rs.10.00
9.	Regional Institute of Medical Sciences, Imphal	Rs.7.00
10.	Mahatma Gandhi Institute of Medical Sciences, Wardha	Rs. 2.00
11.	NEIGRIHMS, Shillong	Rs. 2.00
12.	NITRD, New Delhi	Rs. 5.00
13.	NIMHANS, Bangalore	Rs. 8.00
14.	Central Institute of Psychiatry (CIP), Ranchi	Rs. 4.00
15.	VPCI, New Delhi	Rs. 3.00
16.	CNCI, Kolkata	Rs. 5.00
17.	Rural Health Training Centre (RHTC), Najafgarh, New Delhi	Rs.0.14
18.	LGBRIMH, Tezpur, Assam	Rs. 1.0695

I/3598493/2023

19.	All India Institute of Speech and Hearing (AIISH), Mysore	Rs. 2.30
20.	All India Institute of Hygiene and Public Health, Kolkata	Rs.0
TOTAL		Rs. 113.6095

File No. Z.28015/5380/2023-24/Computer No. 8141640)  
3201760/2023/HOSPITAL-15

**Swachhata Action Plan (SAP) FY 2023-24 for Central Government  
Hospitals/Institutes**

**Name of Ministry:** Ministry of Health and Family Welfare  
**Name of Department:** Department of Health and Family Welfare

2023-24

List of Programmes/Schemes/Activities

Ministry/Attached Offices/Subordinate Offices/PSUs/autonomous institutes

Sl No.	Categories/Activities	Programme/Activities (2023-24)	Funds Allocated
1.	Basic Maintenance	<ul style="list-style-type: none"> <li>➤ Disposal of obsolete/ unserviceable items and equipment like electrical, electronic items, furniture, vehicles, waste papers etc.</li> <li>➤ Water sanitation and conservation practices, drainage and sewage, availability of adequate dustbins, maintenance of furniture and fixture.</li> <li>➤ Installation of Hepa filter, battery operated vehicles for transportation of patient within the hospital's campus.</li> <li>➤ Availability of adequate dustbins.</li> <li>➤ Swachhta Logo, Digital Signage, Water ATM, etc.</li> <li>➤ Maintenance and Inspection of Occupational, Functional Components and Structural Systems.</li> <li>➤ Pest control services.</li> </ul>	Rs. 113.6095 Crores
2.	Sanitation and Hygiene	<ul style="list-style-type: none"> <li>➤ Regular cleaning in wards, OT/OPD, Emergency, Lab/ICU/CCU, toilet, workstations, disposable bins, door, walls, window.</li> <li>➤ Renovation of toilets for men and women and differently abled.</li> <li>➤ Regular review of such activities to be done on definite intervals.</li> <li>➤ Distribution of paper soap among the patient and attenders.</li> <li>➤ Installation of sanitary napkin vending machine and napkin incinerator.</li> </ul>	
3.	Infection Control	<ul style="list-style-type: none"> <li>➤ Hand washing, Personal protective equipment.</li> <li>➤ Use of gloves, facemasks and head cap, apron/Lab coat during procedures and examination.</li> <li>➤ Decontamination and cleaning of instruments, environment control disinfection and sterilization of instruments.</li> <li>➤ Installation of automated hand sanitizers dispenser for all the wards/units, Use of hand sanitizers and soaps.</li> <li>➤ Procurement of fumigation machine and chemicals.</li> <li>➤ Infection control posters, IEC material etc.</li> </ul>	
4.	Cleaning and Beautification of surrounding areas	<ul style="list-style-type: none"> <li>➤ Installation of herbal garden, beautification and landscaping, tree plantation, gardening.</li> <li>➤ Installation of potted plants in corridors to create an eco-friendly environment, etc.</li> <li>➤ Cleaning Office/hospital premises/Shramdan.</li> <li>➤ Plantation follower pants within the premises of hospital, cleaning of rainwater drainages.</li> </ul>	



3201760/2023/HOSPITAL

	Digitization of Office records/e- office	<ul style="list-style-type: none"> <li>➤ Digitization, storage and retrieval of Medical record, communications, files records, disposal of old file, implementation of e-office,</li> <li>➤ Online registration of patients, spare parts / software for digitization.</li> <li>➤ Queue Management System including token vending machine.</li> </ul>	
6.	Bio Medical Waste Management	<ul style="list-style-type: none"> <li>➤ Disposal of bio-medical waste, collection Storage and transportation of biomedical waste.</li> <li>➤ Segregation practice of Bio-medical Waste as enumerated in Environment Act and Biomedical Waste Management Rules -2016, 2018 and 2019.</li> <li>➤ Solid and Liquid Waste Management</li> <li>➤ E-waste management</li> <li>➤ Management of hazardous waste, recycling of waste and statutory compliances.</li> <li>➤ Installation of waste-bins for segregate.</li> <li>➤ Chemical Waste Management</li> </ul>	
7.	Plastic Waste Management	<ul style="list-style-type: none"> <li>➤ Prohibition of single-use plastic items such as PET bottles, plastic cups &amp; plates, plastic jugs, plastic folders, plastic banner in the hospital and its surrounding areas, etc.</li> <li>➤ Collection and disposal of plastics waste, poster for "Not to use plastic".</li> <li>➤ Installation of shredder, plastic waste incinerator</li> </ul>	
8.	Hospital Safety	<ul style="list-style-type: none"> <li>➤ Implementation of National Disaster Management guidelines for hospital safety</li> <li>➤ Awareness Generation for Hospital Safety</li> <li>➤ Safety of Hospital building.</li> <li>➤ Fire safety in hospital</li> <li>➤ Hospital disaster preparedness and response such as planning, training and drills, information, communication and documentation, Safety and Security etc.</li> <li>➤ Procurement of Mannequins for fire safety drills</li> <li>➤ Training, IEC Material, code red posters, workshop etc.</li> </ul>	
9	Hygiene promotion and Swachhata Awareness at Local level	<ul style="list-style-type: none"> <li>➤ Competition like essay writing, slogan writing, painting etc.</li> <li>➤ Swachhata Awareness /Workshop</li> <li>➤ Display of banner/posters on Swachhata</li> <li>➤ Putting up of signage and captions like "No Smoking Area" "Do not Litter" etc.</li> <li>➤ Availability of information, education and communication (IEC) materials</li> <li>➤ Organize Swachhata pledge and various camps for</li> <li>➤ Promoting Swachhata in the community.</li> </ul>	



Hospital Section <hospital2section@gmail.com>

## Provision of funds for Implementation Swachhta Action Plan (SAP) - 2023-24 in Central Government Hospitals/Institutes under Ministry of Health & Family Welfare - reg

1 message

Hospital Section <hospital2section@gmail.com>

26 June 2023 at 14:42

To: director@aiims.gov.in, director@aiims.edu, MEDICAL SUPERINTENDENT <msofficesjh@gmail.com>, Medical Superintendent <med.sup.rmlh@gmail.com>, vmmc\_sjh@nic.in, vmmc-sjh@nic.in, msoffice@vmmc-sjh.nic.in, director-lhmc@gov.in, director.lhmc@gmail.com, Shammi Jain <shammi.jain61@gmail.com>, dr.minatiacharjya@gmail.com, Director JIPMER <director@jipmer.edu.in>, pgimer-chd@nic.in, rims.imphal@gov.in, Dr KR Patond <dean@mgims.ac.in>, BS Garg <secretary@mgims.ac.in>, Director Neigrihms <director-neigrihms@gov.in>, msoffice neigrihms <neigrihmsmsoffice@gmail.com>, rk.dewan@nitrd.nic.in, Director Office NIMHANS <dirstaff@nimhans.ac.in>, Medical Superintendent NIMHANS <ms@nimhans.ac.in>, director@cipranchi.nic.in, directorofficevpci@gmail.com, P R Santhanam <jrvpci@gmail.com>, director.cnci@gov.in, CNCI KOLKATA <cncinstkol@gmail.com>, g.kausalya66@gov.in, Rhtc Najafgarh <rhtcnajafgarh@gmail.com>, mail LGBRIMH <mail@lgbrimh.gov.in>, director@lgbrimh.gov.in, director@aiishmysore.in, director.aiihph@gov.in

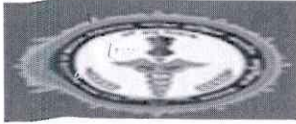
Sir/Madam,

Please find attached copy i.e. this Ministry's letter dated 26.06.2023 on the above subject with the request to take further action in this matter.

--  
 With regards  
 Hospital-II Section  
 MoHFW

Z-28015-55-2021-H-II 26-6-23.pdf  
 2408K





Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

**Fwd: Special Campaign 3.0 for institutionalizing Swachhata and minimizing pendency in Government offices from 2nd October, 2023 to 31st October, 2023 regarding**

1 message

**DDA AIIMS PATNA** <dda@aiimspatna.org>  
To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Sat, Dec 27, 2025 at 1:04 PM

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Wed, Sep 27, 2023 at 7:54 PM

Subject: Special Campaign 3.0 for institutionalizing Swachhata and minimizing pendency in Government offices from 2nd October, 2023 to 31st October, 2023 regarding

To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiimsmangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Lt Col Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <Praveen.batra@gov.in>, <Priyadarshika.s@gov.in>, Cc: <dinesh.kumar14@nic.in>, <ak.biswas57@nic.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards

PMSSY-IV Section

Ministry of Health and Family Welfare





Government of India  
Ministry of Health & Family Welfare  
PMSSY-IV Section

Room No 201-D, Nirman Bhawan, New Delhi  
Dated the 27-9-2023

**CIRCULAR**

**Subject: Special Campaign 3.0 for institutionalizing Swachhata and minimizing pendency in Government offices from 2nd October, 2023 to 31st October, 2023 regarding**

Special Campaign 3.0 is being organized from 2nd October, 2023 to 31st October, 2023 for institutionalizing Swachhata and minimizing pendency in Government offices. Special Campaign 3.0 - Work Plan is as follows:

(i) **Identify Pendency and dispose off on priority as per details at Annexure.**

(ii) **Records Management Practices:**

- Files to be reviewed regularly for transferring the files to Archives/Record Rooms/weeding out as per Record Retention Schedule
- Record Rooms to be visited; capacity building of record officers
- E-files closure

(iii) **Launch of Swachhata Campaign in Offices / Institutes / Hospitals, etc'.**

- Focused Campaign in Visibility Campus sites;
- Regular review within Institute
- Daily Submission of details to MoHFW

(iv) **Focus Areas:**

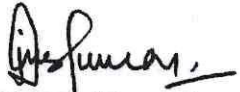
- Digitisation
- Efficient Management of Office Space
- Enhancement of office Spaces
- Environment friendly practices

(v) **Outreach Program:**

- DARPG has created Hashtag #Special Campaign 3.0 for social media posts.
- Instagram/Facebook/You Tube/X to be used as medium of communication

2. Accordingly, All AIIMS/INIs are requested to **identify the pendencies/ targets by 30.9.2023 and do the needful to dispose them during the campaign phase.**

3. The parameters on which action is to be taken is at Annexure. An action taken report be submitted to this Ministry by 3.10.2023.

  
(Dinesh Kumar)  
Joint Director

To,

- All Directors/ Executive Director of AIIMS/INIs
- DD(A) of all new AIIMS

**Copy to**

- PPS to JS(AMB)
- Director (INI)

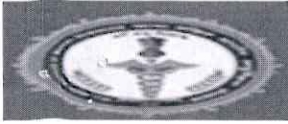
Pendency/Targets identified as on.....

Name of the AIIMS:

Items concerned: All parameters

Parameters	<=6 months	>6 & <=12 months	>1 & <=2 years	>2 years	Total
No. of Pending References from MPs					
No. of Pending Parliamentary Assurances					
No. of Pending Public Grievances					
No. of Pending Public Grievances Appeals					
No. of Pending References from the State Government					
No. of Pending Inter-Ministerial References (Cabinet Note)					
No. of Pending PMO References					
No. of Physical files to be reviewed during 2-31 Oct., 2023	Total No.=				
No. of e- files to be reviewed/closed during 2-31 Oct., 2023	Total No.=				
No. of Cleanliness Campaign sites identified for Campaign during 2-31 Oct., 2023	Total No.=				
Before photographs of identified Cleanliness Site (in JPEG format)	02 Before photographs of each site identified for Cleanliness Campaign				
No. of rules/processes identified for simplification	Total No.=				
Note: Scrap and redundant items may be identified with focus on space management planning and beautification of Officers.					





Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

**Fwd: Organizing of a massive cleanliness drive led by people as part of Swachhata Pakhwada - Swachhata Hi Seva (SHS) 2023 across the country - reg.**

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 1:04 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Wed, Sep 27, 2023 at 8:02 PM

Subject: Organizing of a massive cleanliness drive led by people as part of Swachhata Pakhwada - Swachhata Hi Seva (SHS) 2023 across the country - reg.

To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiismangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>, <director@jipmer.edu.in>, <pgimer-chd@nic.in>  
Cc: <Praveen.batra@gov.in>, <priyadarshika.s@gov.in>, dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiismangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Lt Col Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, Cc: <dinesh.kumar14@nic.in>, <ak.biswas57@nic.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards

PMSSY-IV Section

Ministry of Health and Family Welfare

---

**2 attachments**



**Swachhta Hi Seva on 1-10-23.pdf**

864K



**Banner & Outdoor Creative - 1st October 2023\_compressed.pdf**

4460K

**Government of India  
Ministry of Health & Family Welfare  
PMSSY-IV Section**

Room No. 745-A, Nirman Bhawan, New Delhi  
Dated the 27<sup>th</sup> September 2023

To,

The Directors/ Executive Director of all new AIIMS & INIs

**Subject: Organizing of a massive cleanliness drive led by people as part of Swachhata Pakhwada - Swachhata Hi Seva (SHS) 2023 across the country – reg.**

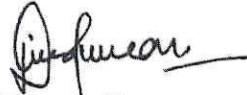
Madam/Sir,

This is in continuation to this Division's letter of even number dated 23.9.2023 wherein all the AIIMS were requested to prepare the action plan for the mega cleanliness drive on 1st October, 2023. It has been noted that AIIMS & INIs are organizing various events and the same have also been created on the portal (<https://swachhatahiseva.com/>).

2. Since the matter is monitored at the height level, all AIIMS and INIs are further requested to ensure the following initiatives:

- (i) To use Information Education and Communication (IEC) tools for awareness and mobilisation of General Public, Students, Faculties and Non-Faculties of the Institutes and their families for participation in the Swachhata Hi Seva mega cleanliness drive.
- (ii) Identify the appropriate site and take picture of the site before the event and after the mega cleanliness drive. The pictures need to be uploaded on the portal resulting in visible cleanliness.
- (iii) The organizing field units must ensure that actual cleaning activity must takes place at 10 AM with volunteers contributing at least 1 hour of shramdaan resulting in visible cleanliness.
- (iv) The Institutes must also do the material planning like brooms, cutters, thailas, containers etc & tie-up with local body for transportation of the collected garbage to the designated points for solid waste management (No site should create a garbage dump after the activity).
- (v) Banners and outdoor creatives as attached to be used at the cleanliness sight.
- (vi) Ensure key event highlights on social media handles of Hon'ble Ministers, MPs, MLAs, Mayors, Sr. Govt. Officials etc. Official Hashtag: #SwachhBharat; Official Handles to be tagged: @SwachhBhartGov, @swachhbharat, @PMO India.

Yours faithfully

  
(Dinesh Kumar)  
Joint Director

Copy to:

- (i) PPS to JS(AMB)
- (ii) Director INI, MoHFW/ DD(A) of all AIIMS/INIs





आइए, एक साथ मिलकर करें  
1 अक्टूबर, सुबह 10 बजे, 1 घंटे  
स्वच्छता के लिए श्रमदान



अपने आस-पास के स्वच्छता कार्यक्रम से जुड़ने के लिए स्कैन करें या विज़िट करें  
[swachhatahiseva.com](http://swachhatahiseva.com)





आइए, एक साथ मिलकर करें  
1 अक्टूबर, सुबह 10 बजे, 1 घंटे  
स्वच्छता के लिए श्रमदान



अपने आस-पास के स्वच्छता कार्यक्रम  
से जुड़ने के लिए स्कैन करें या विज़िट करें  
[swachhatahiseva.com](http://swachhatahiseva.com)



**Swachhata  
Hi Seva**  
15 September - 2 October 2023  
Garbage Free India







**LET US JOIN TOGETHER ON  
1<sup>ST</sup> OCTOBER, 10 AM  
FOR 1 HOUR OF SHRAMDAAN  
FOR SWACHHATA**



To know more, scan the QR code or visit:  
[swachhatahiseva.com](http://swachhatahiseva.com)







**LET US JOIN TOGETHER ON  
1<sup>ST</sup> OCTOBER, 10 AM  
FOR 1 HOUR OF SHRAMDAAN  
FOR SWACHHATA**



To know more, scan the QR code or visit:  
[swachhatahiseva.com](http://swachhatahiseva.com)



LET US JOIN TOGETHER ON  
**1<sup>ST</sup> OCTOBER, 10 AM**  
**FOR 1 HOUR OF SHRAMDAAN**  
**FOR SWACHHATA**



To know more, scan the QR code or visit:  
[swachhatahiseva.com](http://swachhatahiseva.com)



**Swachhata  
Hi Seva**  
15 September - 2 October 2023  
Garbage Free India





LET US JOIN TOGETHER ON  
**1<sup>ST</sup> OCTOBER, 10 AM**  
**FOR 1 HOUR OF SHRAMDAAN**  
**FOR SWACHHATA**



To know more, scan the QR code or visit:  
[swachhatahiseva.com](http://swachhatahiseva.com)



**Swachhata  
Hi Seva**  
15 September - 2 October 2023  
Garbage Free India





आइए, एक साथ मिलकर करें  
1 अक्टूबर, सुबह 10 बजे, 1 घंटे  
स्वच्छता के लिए श्रमदान



अपने आस-पास के स्वच्छता कार्यक्रम  
से जुड़ने के लिए स्कैन करें या विज़िट करें  
[swachhatahiseva.com](http://swachhatahiseva.com)



**Swachhata  
Hi Seva**  
19 September - 2 October 2023  
Garbage Free India



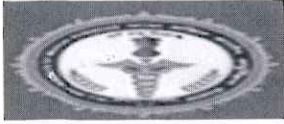
आइए, एक साथ मिलकर करें  
1 अक्टूबर, सुबह 10 बजे, 1 घंटे  
स्वच्छता के लिए श्रमदान



अपने आस-पास के स्वच्छता कार्यक्रम  
से जुड़ने के लिए स्कैन करें या विज़िट करें  
[swachhatahiseva.com](http://swachhatahiseva.com)







**Fwd: Proposals regarding court cases where the opinion/approval of the Ministry is required-reg.**

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 1:03 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Fri, Sep 29, 2023 at 4:56 PM

Subject: Proposals regarding court cases where the opinion/approval of the Ministry is required-reg.

To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiismangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiismangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Lt Col Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, Cc: <dinesh.kumar14@nic.in>, <ak.biswas57@nic.in>, <tanveet.kaur@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards  
PMSSY-IV Section  
Ministry of Health and Family Welfare





C-18011/19/2023-PMSSY-IV  
Government of India  
Ministry of Health and Family Welfare  
PMSSY – IV Section

3rd Floor, IRCS Building, New Delhi  
Dated the 26 September, 2023

To,

The Executive Director of all new AIIMS.

**Subject: Proposals regarding court cases where the opinion/ approval of the Ministry is required-reg.**

Sir,

I am directed to state that it has been noted by the Ministry that invariably court cases related proposals are being submitted to the Ministry at the last moment with incomplete details which is unwarranted. The Competent Authority has directed that the Executive Directors of new AIIMS should personally monitor and ensure that cases where the opinion /approval of the Ministry is required, such proposals are sent well in advance with full details.

Yours faithfully,



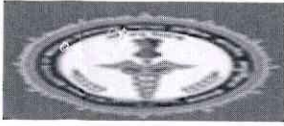
(Arun Kumar Biswas)

Under Secretary to the Govt. of India

Tele: 011-23736977

Copy to:

The DDAs of all new AIIMS



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

---

**Fwd: Timely submission of draft minutes of the SFC meeting.**

1 message

**DDA AIIMS PATNA** <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 12:52 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Mon, Oct 9, 2023 at 3:43 PM

Subject: Timely submission of draft minutes of the SFC meeting.

To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiismangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiismangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Lt Col Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, <ak.biswas57@nic.in>, <dev.gothal@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards

PMSSY-IV Section

Ministry of Health and Family Welfare

---

2 attachments



 Letter All AIIMS 09 (3).pdf  
77K

 Encl All AIIMS 09.pdf  
118K

I/3620511/2023

A-27023/70/2023-PMSSY-IV  
Government of India  
Ministry of Health & Family Welfare  
PMSSY-IV Section

Room No. 745-A, Nirman Bhawan, New Delhi  
Dated the 09-10-2023

To,  
Directors/Executive Directors of all new AIIMS.

Subject: **Timely submission of draft minutes of the SFC meeting.**

Madam/Sir,

I am directed to refer to this Ministry's letter of even no dated 25.9.2023 (copy enclosed) on the subject cited above and to reiterate that the draft minutes of the SFC meetings should invariably be submitted to the Ministry within 24 hours of the conduct of the meeting.

Yours faithfully

Encl. As above

Signed by  
K.balasubramanian  
(K Balasubramanian)  
Under Secretary to the Government of India  
Date: 09-10-2023 11:26:20  
Tel: 011-23063190  
[k.balasubramanian38@nic.in](mailto:k.balasubramanian38@nic.in)

Copy to:

- (I). DDAs of all new AIIMS
- (ii). FAs of all new AIIMS



Pmssy Section <pmssysection@gmail.com>

## Timely submission of draft minutes of Standing Finance Committee (SFC) meeting

1 message

Pmssy Section <pmssysection@gmail.com>

Mon, Sep 25, 2023 at 5:05 PM

To: "AIIMS Bhopal, Director" <director@aiimsbhopal.edu.in>, dydir <dydir@aiimsbhopal.edu.in>, "Director, AIIMS Bhubaneswar" <director@aiimsbhubaneswar.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, director@aiimsjodhpur.edu.in, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, director@aiimspatna.org, DDA AIIMS PATNA <dda@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, director@aiimsrishikesh.edu.in, dda <dda@aiimsrishikesh.edu.in>, edaiimsrbl@gmail.com, rajwanshiarvind@hotmail.com, Saroj Singh <sarojkr.singh@gov.in>, director@aiismangalagiri.edu.in, dda <dda@aiismangalagiri.edu.in>, directoraiimsnagpur@gmail.com, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, sramji57 <sramji57@gmail.com>, "Dr. PRADIP KUMAR" <kpradip10@gmail.com>, executivedirector@aiimsgorakhpur.edu.in, "Prof. Dr. D.K. Singh, Director" <director@aiimsbathinda.in>, director@aiimsdeoghar.edu.in, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, office.aiimsdeoghar@gmail.com, dda@aiimsdeoghar.edu.in, "Dr. Vikas Bhatia" <director@aiimsbibinagar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, adminofficer@aiimsbibinagar.edu.in, vsnegi22@yahoo.co.in, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, shakti810505@gmail.com, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, drmhraosvims1957@gmail.com, ddamadurai1189 <ddamadurai1189@gmail.com>, cdskatoch@gmail.com, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, puranik\_6@hotmail.com, thaiu.mag@gov.in, Rakesh Kumar <rakeshkumar7123@yahoo.in>, madhabananda@gmail.com, adminofficer@aiimsguwahati.ac.in, ed@aiimskalyani.edu.in, dda@aiimskalyani.edu.in, PA to Director AIIMS Mangalagiri <pa.director@aiismangalagiri.edu.in>, director@aiimsbilaspur.edu.in, dda@aiimsbilaspur.edu.in, dda@aiimsnagpur.edu.in, Office Admin <aofficeaiimgkp@gmail.com>, ddaaiimsrbl@gmail.com  
Cc: "Cc:" <dinesh.kumar14@nic.in>, "K.Balasubramanian Under Secretary" <k.balasubramanian38@nic.in>, ak.biswas57@nic.in, Amit Batra <amit.batra@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards

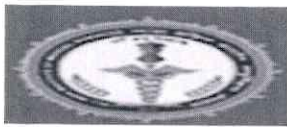
PMSSY-IV Section

Ministry of Health and Family Welfare



WhatsApp Image 2023-09-25 at 5.02.42 PM.pdf  
56K





## Fwd: Use of drones in Healthcare - Draft Documents of Notice Inviting Tender for use of Drones in Public Healthcare Facilities -Reg.

Director . <director@aiimspatna.org>

Wed, Oct 11, 2023 at 9:52 AM

To: DDA AIIMS PATNA <dda@aiimspatna.org>, Dr Anil kumar <dranil.k@aiimspatna.org>, Dr Anil kumar <dranilk@aiimspatna.org>

Sd/-

Prof. (Dr.) Gopal Krushna Pal  
Executive Director & CEO,  
All India Institute of Medical Sciences Patna  
Bihar - 801 507  
Email: director@aiimspatna.org  
Tel: 06122451109

----- Forwarded message -----

From: **PMSSY V** <pmssysection5@gmail.com>

Date: Tue, Oct 10, 2023 at 11:18 AM

Subject: Use of drones in Healthcare - Draft Documents of Notice Inviting Tender for use of Drones in Public Healthcare Facilities -Reg.

To: DELHI AIIMS DIRECTOR <director@aiims.edu>, director jipmer <director@jipmer.edu.in>, <pgimer-chd@nic.in>, director pgimer <dpgichd@hotmail.com>, Director AIIMS Bhopal <director@aiimsbhopal.edu.in>, director bhubaneswar <director@aiimsbhubaneswar.edu.in>, Director AIIMS Jodhpur <director@aiimsjodhpur.edu.in>, Director Patna <director@aiimspatna.org>, Director AIIMS Raipur <director@aiim سراipur.edu.in>, Director AIIMS Rishikesh <director@aiimsrishikesh.edu.in>, Exe.Dir. AIIMS RAEBARELI <rajwanshiarvind@hotmail.com>, Director AIIMS Nagpur <directoraiimsnagpur@gmail.com>, Director Mangalagiri <director@aiimsmangalagiri.edu.in>, ED AIIMS Kalyani <ed@aiimskalyani.edu.in>, ED AIIMS Guwahati <executive-director@aiimsguwahati.ac.in>, Director AIIMS Bibinagar <director.aiimsbbinagar@gmail.com>, Executive Director Gorakhpur <executivedirector@aiimsgorakhpur.edu.in>, Director AIIMS Bathinda <director@aiimsbathinda.edu.in>, Director AIIMS Deoghar <director@aiimsideoghar.edu.in>, ED AIIMS Bilaspur <edaiimsbils@gmail.com>, Director AIIMS Vijaypur <shakti810505@gmail.com>, DDA AIIMS Awantipora <rakeshkumar7123@yahoo.in>, Executive Director AIIMS Rajkot <ed.aiimsrjkot@gmail.com>, Director AIIMS Madurai <drmhraosvims1957@gmail.com>, Executive Director AIIMS Darbhanga <madhabananda@gmail.com>

Cc: <dsnhmfin-mohfw@gov.in>, <raj.kumar28@nic.in>, US T.C Naulak <chinsum.n@nic.in>, <cl.mawi85@nic.in>

Respected Sir/Madam,

With reference to the subject cited above, Please find the attachment herewith.

**Note:** In case this email requires you to reply, you are requested to CC your reply to all the officers in CC to this email.

Yours faithfully,  
PMSSY-V  
Nirman Bhawan,  
746-A, A Wing,  
New Delhi-110001

### 4 attachments

Letter\_10-10-2023.pdf  
21K

DO letter dated 16.05.2023 from Secy (HFW) regarding drones.pdf  
454K

Draft Document of Notice Inviting Tender for Use of Drones In Public HealthCare Facilities Under National Health Mission (2).pdf  
691K



I/3620858/2023

No. Z-28016/54/2023-PMSSY-V [8218654]  
Government of India  
Ministry of Health & Family Welfare  
(Department of Health & Family Welfare)  
(PMSSY Division)

Nirman Bhawan, New Delhi  
Date: 10-10-2023

To,

Director/Executive Director

[AIIMS New Delhi, JIPMER Puducherry, PGIMER Chandigarh, AIIMS Bhopal, AIIMS Bhubaneswar, AIIMS Jodhpur, AIIMS Patna, AIIMS Raipur, AIIMS Rishikesh, AIIMS Raebareli, AIIMS Nagpur, AIIMS Mangalagiri, AIIMS Kalyani, AIIMS Guwahati, AIIMS Bibinagar, AIIMS Gorakhpur, AIIMS Bathinda, AIIMS Deoghar, AIIMS Bilaspur, AIIMS Vijaypur Jammu, AIIMS Awantipora, AIIMS Rajkot, AIIMS Madurai, AIIMS Darbhanga]

**Subject:** Use of drones in Healthcare - Draft Document of Notice Inviting Tender for Use of Drones In Public HealthCare Facilities- Reg.

Sir/Madam,

I am directed to refer to D.O. letter No. Z-28016/54//2023-PMSSY-V dated 16.05.2023 (copy enclosed) from Secretary (Health and Family Welfare) requesting the Institutes to prepare Institute-wise individual plans for drone technology in healthcare and to forward a Draft Document of Notice Inviting Tender for Use of Drones In Public HealthCare Facilities (copy attached) received from the National Health Mission (NHM) Division of this Ministry for guidance .

2. All the Institutes are requested to take action based on the enclosed document received in consultation with NHM Division of the Ministry . In case of any queries or further guidance in the matter the following officer may kindly be contacted

Shri Kaustubh Sandip Giri, Deputy Secretary (NHM-F),  
Room No. 433, C- Wing, Nirman Bhawan, New Delhi - 110011  
Tel No. 011-23062883, E-mail: dsnhmfin-mohfw@gov.in

Encl.: As above

Yours faithfully,

(T. Chinsum Naulak)  
Under Secretary to the Govt. of India  
Tel: (011) 23736978

Copy to:

Shri Kaustubh Sandip Giri, Deputy Secretary (NHM-F),  
Nirman Bhawan, New Delhi - 110011





राजेश भूषण, आईएएस  
सचिव  
**RAJESH BHUSHAN, IAS**  
**SECRETARY**



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण विभाग  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय

**Government of India**  
**Department of Health and Family Welfare**  
**Ministry of Health and Family Welfare**  
**D.O. No.Z-28016/54/2023-PMSSY-V**  
**16-5-2023**

*Dear Colleague,*

As you are aware, the use of Drones for enhancing outreach and accessibility of health services for the people, has immense potential, particularly in States with difficult geographical terrain. In May 2022, the Indian Council of Medical Research (ICMR) has released a Guidance Document for use of drones in healthcare system which has been followed by the development of a template by National Health Systems Resource Centre (NHSRC), Ministry of Health & Family Welfare, detailing the process to be adopted for use of drones.

2. AIIMS Rishikesh has also successfully conducted pilot trials using drones for delivering medicines to health facilities in remote locations. The experience and outcome of the drone trials was shared by Executive Director AIIMS Rishikesh with EDs of all other AIIMS.

3. Being Institutes of National Importance (INIs) all AIIMS, PGIMER-Chandigarh, JIPMER-Puducherry should explore pro active measures for the use of drone for enhancing the outreach of health care services in remote and difficult areas and also in times of health emergency and natural disasters.

4. I would, therefore, request you to prepare Institute-wise individual plans for using drone technology in healthcare system. While preparing and implementing the plans consultation as necessary should be held with the State Health Department and assistance of NHSRC & ICMR may be availed for technical guidance in the matter. The Plans for the use of drones should be mapped to the geographical and socioeconomic conditions specific to the area of your operation.

5. An Action Taken Report in the above matter may be shared with the Ministry at the earliest.

*Warm Regards.*

Yours sincerely,

**(Rajesh Bhushan)**

Director/Executive Director  
(AIIMS New Delhi, JIPMER Puducherry, PGIMER Chandigarh and all new AIIMS)

## **NOTICE INVITING E-TENDER**

### **<STATE > HEALTH AUTHORITY ADDRESS**

Phone No \_\_\_\_\_

E mail: \_\_\_\_\_

### **SERVICES RELATED TO SUPPLY OF EMERGENCY MEDICAL SUPPLIES USING DRONE TECHNOLOGY**

(Submission of Bid through *online*)

Bid Reference No.: _____	Dated – _____
--------------------------	---------------

1. **<Insert Name of State Procurement/Tender Inviting Agency with Full Address>** has been requested by Government of <Insert name of the State> to supply emergency medical supplies such as vaccines, medicines, diagnostic samples and other supplies to and from remote areas that are not well connected through regular transportation networks at selected places using drone technology.
2. <State Name> hereby invites bids from eligible and qualified drone services provider registered by Government of India for providing services for transporting emergency medical supplies using drone technology as per the 'Schedule of Requirement'.
3. Intending Tenderer may download the tender document from the e-tender portal of Govt. of <State> at \_\_\_\_\_(website address). The submission of bids should only be through online.
4. Non statutory documents are to be submitted concurrently.

## **SCHEDULE FOR RFP**

<b>Sl. No.</b>	<b>Event Description</b>	<b>Suggested Timeline</b>
1.	Date of uploading of N.I.T. Documents (online) / Date of	D (Time)
2.	Date of Pre-Bid Meeting with the intending Tenderers in the <Place of Meeting with full address & Pin Code> OR Through Online Meeting.	D + 7 days
3.	Bid submission start date (Online)	D + 10 days
4.	<p>Last Date for submission of proposals [Bid submission closing (Online)]</p> <p><b>Detailed list of documents annexed at Annexure I to V.</b></p> <p><i>Any wrong or misleading information provided by the Tenderer during submission of bids shall lead to summary cancellation of bid and may lead to blacklisting for at least 2 years.</i></p> <p>Each scanned document should have an index page indicating the name of the documents enclosed with page number.</p>	D + 21 days
5.	Last date of submission of all hard copies of the documents uploaded in e-tender during bid submission except <u>PRICE BID</u> at the registered office of <Place>.	D + 21 Days
6.	Bid opening date for Technical Proposals (Online)	D + 22 Days
7.	Bidders to remain present at <Place with address > for identification of the documents for the technical bid evaluation OR Through Online using weblink < mention web link address >	D + 22 Days
8.	Functional demonstration of the services [ If required by TIA]	D + 23 Days
9.	Opening of Financial Bid (Online)	D + 30 Days
10.	Proposal Validity	180 Days from proposal submission date
11.	Method of Selection	Least Cost (L1) basis financial bid would be opened only of bidders qualifying technical bid



## **SECTION I: INSTRUCTIONS TO TENDERERS**

### **A. Important information at a glance**

(The item suffixed by "E" in bracket indicates Eligibility Criteria for a bidder)

#### **A. Tender Schedule Details**

<b>SCHEDULE</b>	<b>Scope of Work</b>
<b>SCHEDULE – I</b>	Services related to supply of emergency medical deliveries such as vaccines, medicines, diagnostic samples and other supplies to and from remote areas that are not well connected through regular transportation networks at selected places using drone technology (UAV)

**B. Tender Fees: Exempted.**

**C. Technical Bid (E) - As per Annexure I.**

**D. Financial Bid (E) - As per Annexure II.**

**E. Detailed Proposal/Project Report (E).**

**F. Monitoring & Evaluation Checklist as per Annexure III.**

**G. Flight Checklist as per Annexure IV.**

**H. Drone service Pre-requisite (E) - As per Annexure V.**

**I. Bid Security Declaration (E):** Submission of Bid Security declaration (**As per Annexure VI**) and signing of Agreement is mandatory as per extant procurement rules.

**J. Annual Turnover requirements: (E) - The** agency should have annual turnover of minimum Rs. 20 Lakh on an average of two financial years preceding the current financial year.

**K. (a) Timeline for start of Provision of services from the date of issuance of Award of Contract/ Work Order**

<b>SCHEDULE</b>	<b>ITEM</b>	<b>Time</b>
<b>SCHEDULE-I</b>	Services related to supply of emergency medical deliveries such as vaccines, medicines, diagnostic samples and other supplies to and from remote areas that are not well connected through regular transportation networks at selected places using drone technology (UAV)	30 Days

## Payment Terms

### General Terms

- (i) <Procurement Agency/TIA> may like to get the Services related supply of emergency medical deliveries such as vaccines, medicines, diagnostic samples and other supplies on per Km (aerial Distance) to and from remote areas that are not well connected through regular transportation networks at selected places using drone technology (UAV) for a period of \_\_\_\_\_ (Time Period) from the date of award of contract / or against separate Work Order.
- (ii) The rates in the contract will be valid for \_\_\_\_\_ from the date of award of contract.
- (iii) The Tenderers should only quote in INR.

### II. Payment terms: \_\_\_\_\_ (To be specified)

Payment will be made upon satisfactory completion of services rendered and submission of invoices based on the flights and product deliveries completed on a monthly basis, according to the agreed deliverables and activities, and made against the purchase order/contract. Payment will be made within 30 days after receiving the original invoice and after the Project has reviewed and certified outputs and deliverables.

### III. Basic Price of Services(s)

Services related to supply of emergency medical deliveries such as vaccines, medicines, diagnostic samples and other supplies would include transport cost of goods (Per Km of Aerial Distance), operations services, accessories & ancillaries, freight charges, manpower charges and any other applicable charges excluding GST during the contract (Specify duration). Applicable GST will be paid extra.

#### **6. Service Up time in Warranty**

Working condition of drone for a minimum period of 354 days out of a period of 365 days. (i.e., 97% uptime)

The response time to any drone related service call should be not more than 6 hrs after call is logged. Call Log by E-mail/Fax. Time for rectification should not be more than 48 hours.

Maximum Downtime allowed without penalty: 72 hours. In case equipment is not useable beyond the stipulated maximum down time the supplier will be required to install alternative equipment for providing uninterrupted service.

Penalty beyond 72 hours downtime & if standby unit is not provided: Schedule I – Rs. 1000 per day per unserviceable drone

#### **7. Liquidated damages for Delayed setting up of Services:**

The percentage of 0.5% of the Invoice price for each week or part thereof, of delay until actual delivery or performance, up to a maximum deduction of 5% of the Invoice price.

#### **8. Experience and Technical Capacity (E)**

Bidder must have carried out drone related operations for transportation of logistics / related services in the country and has a license to operate and maintain drones as per the Ministry of Civil Aviation guidelines/rules.

#### **9. General Instructions**

- a. Bidders are requested to study the tender document, terms & conditions carefully before submitting their bids. Submission of tender shall be deemed to have been done after careful study and examination of the tender document with full understanding of its implications.
- b. Tender documents should be downloaded from the E-tender portal of Govt. of <State> at (website address). The submission of bids should only be through online.
- c. All pages of the bid submitted must be signed and sequentially numbered by the Bidder. All information in the offer must be in English. Information in any other language must be translated to English. Failure to comply with this may render the offer liable to be rejected. In the event of any discrepancy between the offer in a language other than English and its English translation, the English translation will prevail.



## **SCOPE OF WORK AND DELIVERABLES**

### **1. Summary of Scope of Work:**

- 1.1 The service provider will be expected to run routine and emergency deliveries of medical commodities such as vaccines, medicines, diagnostic samples and other supplies to and from remote areas that are not well connected through regular transportation networks.
- 1.2 The parts of the supply chain that will be serviced include but are not limited to immunization, blood, emergency supplies, diagnostics, medicines, and routine supplies.
- 1.3 The list of possible commodities to be carried include but are not limited to vaccines, medicines, blood units, and diagnostic samples.
- 1.4 The services to be provided are purely non-commercial in nature and will only apply for purposes in the public health ecosystem.
- 1.5 **Service provider shall establish** a command center consisting of the following:
  - 1.5.1 Two number of Drones with Vertical Take-off & Landing (VTOL) capability.
  - 1.5.2 Category of drone commensurate with the payload capacity (\_\_\_\_\_ Kg) as required by the Tender inviting Agency (TIA) with suitable medical carrier box/cold chain vaccine carrier.
  - 1.5.3 Two qualified (Remote Pilot Training Organisation Certified) drone pilots with minimum six months of flying drone experience.
  - 1.5.4. One Project manager/Facility Coordinator at each Hub of drone operations.
  - 1.5.5 Repair & maintenance related equipment & consumables/accessories.
  - 1.5.6. IT support – Desktop -01, Laptop -01 with latest configuration and minimum 512 MB storage with all computer peripherals including printer facility.
  - 1.5.7 Internet Connectivity- Broadband either wireless or FTTH for uninterrupted service (preferably two separate telecom service providers as standby to each other).
  - 1.5.8. Furniture & Fitments, electrical points for the space provided, for setting up of Command center and preparation of a flat top secured area (5 Mtr X 5 Mtr) for drone operations.
- 1.6 **Department of Health & Family Welfare shall provide the following:**
  - 1.6.1 Space within the premises of the District Hospital/Sub-District Hospital/Drug warehouse/Blood Bank.
  - 1.6.2 One Pharmacist for checking & weighing the medicines/ medical supplies before dispatch and collection of the return diagnostic/ Lab samples.
  - 1.6.3 Point for electricity with separate meter (The electricity bill is to be paid by the service provider)
  - 1.6.4. Point for water supply.

### **2. Specifications of the Assignment:**

**2.1 Commodity packaging and storage specifications** and requirements and their cold-chain requirements are as follows: *Cold Chain Items*: Should be stored in a cold chain enabled box with temperature ranging from 2 deg C to 8 deg C. *Non-Cold Chain Items*: Should be stored in an air-tight sealed box, fitting properly in the drone carrier box.

**2.2** The detailed list of health facilities (PHCs/SC-HWCs), with their GPS coordinates, that fall under a 50 km aerial distance and within the flight range radius from the identified hubs (DHs/SDHs/CHCs/Warehouse/Blood Bank).

**2.3** The Hubs identified by the <State> or under the pilot project for the said assignment (may change due to unavoidable circumstances)

Hubs Location	Drug Warehouse	Spokes Location	Diagnostic Lab	Blood Bank

**2.4** The Service Provider is expected to consider all health facilities and health entities around <Name of the Hub>. However, only facilities falling under the green zone and yellow zone with requisite clearances and all regulatory approvals are allowed to be providing service. The type of facilities to be considered are PHCs, CHCs, SDHs, DHs, Blood bank, Drug warehouse, and any other relevant entities as decided by TIA. The Service Provider must classify all facilities mentioned in Para 2.3, within the scope of 'Hub & Spoke' Model as per zones defined by the relevant Authorities.

**2.5** The hubs identified based on multiple factors including availability of supporting public health entities, availability of manpower, availability of space, etc by the TIA will be notified to the drone service provider. The Service provider must segregate the said locations into green, yellow and red zones as per the prevailing rules and regulations as notified by the Union Government of India from time to time and verified in the DigitalSky platform. Only those locations that fall in the green zone and yellow zone with requisite clearances and all regulatory approvals will be operationalized. The rest will depend on obtaining mandatory clearances from the relevant Govt. and regulatory entities.

**2.6** The payload per flight will be within the weight consideration as per the service provider technical expertise, depending on weather limitations and other factors influencing the sortie during the period of operations. Service provider shall route flight plans with a schedule for the week in advance in a cost effective manner ensuring onward & reverse logistics. Emergencies supplies as life saving mission on recommendation of the officer-in-Charge (OIC) HUB (Medical Officer) will be undertaken by the service provider on need basis.

**2.7** The mode of drone transportation required – bidirectional (Onward & Return). The propulsion and power system should be battery operated appropriate to the category of the drone.

**2.8** Expected flight routes and frequency of flights between different points: The service provider should use the most cost-effective flight routes in alignment with Drone Rules – 2021 & its amendment thereafter. The frequency of flights will be as and when required basis or decided as per the load/task assigned by the OIC Hub.

**2.9** The service provider will make every effort to improve TAT of routine delivery of drugs and supplies, operationalize an end-to-end diagnostic testing of samples from



collection to receiving of test results, complete routine and emergency delivery of vaccines, and emergency delivery of blood units to difficult to reach facilities/entities from identified hubs.

### **3. Responsibilities of the Service Provider:**

3.1 The drone transportation service provider will be required to fulfil the following mandatory responsibilities:

- (i) Ensure compliance with local drone regulation by obtaining necessary permits, completing all necessary procedures and providing timely information to the civil aviation authority (or equivalent); certification of No Permission -No Take-Off (NPNT) compliance issued by DGCA.
- (ii) Segregation of facility locations falling into Green, Yellow and Red Zones as per the interactive map (<https://digitalsky.dgca.gov.in/airspace-map/#/app>) provided by the Central Government. The drone operation will only be undertaken for the facilities/locations falling in the green zone and yellow zone with requisite clearances and all regulatory approvals. However, the provision to operate in red zone is created which will be done only after following the rules and meeting all the compliance mandated by all relevant governmental and regulatory entities such as MoCA/IAF/MHA/MoD.
- (iii) The Service Provider is required to follow the following basic operating principles to reduce (but not eliminate) risks to other airspace users and people and property on the ground:
  - a. Operations beyond visual line of sight (BVLOS)
  - b. Flight not above 400ft (120 Mtr) Above Ground Level (AGL).
  - c. Maintain flight path as per the planned sortie registered on the Digital Sky platform.
  - d. Limits on flights over large groups of people or urban areas
  - e. Limits on proximity to people during flight and critical stages of flight (takeoff/landing)
  - f. The drone must be equipped with a return-to-home function in case of loss of radio link.
  - g. In any case, the flight path will be planned in the Green Zone and yellow zone with requisite clearances and all regulatory approvals only and 5km away from the State border to avoid any regulatory violation.
- (iv) Manage the entire equipment and materials importation process by liaising with appropriate authorities and possession of requisite license and registration for operation in the state.
- (v) Provide equipment (drones, ground station, communication, power/energy, and any other related) and staff for safe and successful drone delivery operations and ensure regular maintenance and repairs of the drone fleet.
- (vi) Provide necessary set-up for operations (at hub and at facility level).



- (vii) Provide and manage flight planning process, complete approval requests and conduct communications with appropriate Air Traffic Control (ATC) or other relevant authority (Entities should have a dedicated flight live-tracking online system).
- (viii) Possess valid third-party insurance for the duration of the services.
- (ix) Ensure appropriate safety and emergency procedures are in place to minimize any operational, environmental and other risks and provide the proof of comprehensive Beyond Visual Line of Sight (BVLOS) concept of operations (ConOps); take full responsibility for and manage emergency procedures, including incident reporting as per local regulatory requirements.
- (x) Assess the relevant National, State and Local environmental regulations are complied. The service provider is required to be sensitive to the impact of the operations on local environment and always ensure compliance, at all times.
- (xi) The Service Provider, with support from the State, is required to engage with stakeholders and communities and implement an IEC campaign in the area of operation (District/ blocks falling within 50km radius of the Hub) to ensure that (a) Community members are not surprised - they are consulted and information on how UAVs will be used; and (b) Community members are aware of its benefits and the activity has larger community support. The District and State officials will provide support and facilitate this activity.
- (xii) Ensure that the operations have negligible impact on surrounding environment, population and the ecosystem. Environmental risks and impacts assessment and mitigation measures shall be undertaken pertaining to (i) proximity to any cultural heritage; (ii) operations affecting wildlife; (iii) educating the relevant authorities on the impact on wildlife and how the task will be adapted to reduce this.
- (xiii) The service provider should have a process related to reporting and management of any accidents and incidents and the same shall be documented as part of contract. All incidents and accidents shall be documented and reported to the project and appropriate authorities subject to Government of India (GoI) requirement.
- (xiv) Ensure appropriate operational backup (to ensure that there is backup drone[s] in all hubs.
- (xv) Ensure a documented battery management policy exists including the following elements: (i) Battery storage procedures; (ii) battery charging procedures that are considerate of the task site requirements; (iii) battery charging record; (iv) battery transportation procedures; (v) action in the event of battery emergency; and (vi) support equipment (firefighting, first aid it, signage, etc.)
- (xvi) Train relevant local staff (including health facility staff) to ensure consistent implementation of operations and safety procedures and ensure local capacity-building and sustainability
- (xvii) Offer continuous reporting of progress and activities to regulatory, health and contracting stakeholders.
- (xviii) **Reporting Requirements:**
  - a. Collect product and delivery data like number of deliveries, locations, size of

package, content of package, number of samples collected, number of vaccines/ medicines delivered, etc. on a weekly basis.

b. Collect flight data, document it and report on it monthly.

(xix) The Service Provider shall submit a Monthly Operation Report based on the Monitoring and Evaluation checklist as per Annexure 'III'. He shall also comply with the Flight Checklist placed as Annexure 'IV' (Pre-Flight, During Flight & Post Flight Checks). The Service Provider must also prepare and get approvals of the pre-flight checklist (including weather, flight details, batteries, structural checks, calibration etc.) and Safety checklist (site survey, flight plan, public awareness, safety procedure etc.) based on industry practices and the regulatory requirements, and same should be agreed with the government in advance.

#### **4. Key activities/ deliverables**

##### **a. Set-up phase**

- i. Segregation of location of all agreed facilities into yellow, green and red zones as directed by the Union Government of India. Process of regulatory approval of all 3 types of zones should start simultaneously as soon as location of facilities is agreed.
- ii. Successful completion of the regulatory processes and approvals, obtaining the BVLOS permit to conduct daily delivery flights, and obtaining approvals to carry dangerous goods (medical samples, etc.) if necessary.
- iii. Integration with relevant entities, staff and partners to establish all-in-one services: order management, inventory storage and management (if applicable), transportation of supplies from central warehouses to the distribution/ fulfilment center, (re)packing, contract management, IT solutions, and, ultimately, shipping operations and distribution implemented by drones.
- iv. Provide specifications based on the scope of work for building/ repurposing a distribution/fulfilment center where all relevant commodities are kept, managed and distributed directly to target health facilities.
- v. Equipping the center with all necessary equipment and staff; setting up daily operations.
- vi. Development of flight plans as per the agreed use cases and average number of flights per week along with necessary approval.
- vii. Visit and scope out each facility to collect necessary data/GPS coordinates and information for operations, as well as assist with community sensitization activities.
- viii. Setting up take-off cum landing platforms in all identified facilities.
- ix. Equipping the distribution center as well as health facilities with all necessary communication and information systems to fulfil the order and dispatch function.
- x. Testing of use-cases identified by the Project to improve healthcare delivery and service.

##### **b. Operations phase**



- i. According to an agreed frequency (hourly, daily, weekly, etc.), provision of drone delivery operations to health facilities as a part of routine and emergency delivery operations
  - ii. Weekly reporting of flight (number of flights, incidents, flight hours, total/max/average speed and distance flown), product (weight, volume, type, quantity/number of commodities flown, total/max/average payload weight and volume carried), demand (% of deliveries made in full and on time, based on the distribution plan and based on emergency data.
  - iii. In case of emergencies, like natural calamities, provision for shifting of drones between the hubs/ or any other suitable place will be the responsibility of the service provider. Service provider shall also be willing to accommodate increased need in the affected areas for more number of sorties during any natural disaster.
- 3. HR and Staffing:** The Service Provider will need to provide a list of all positions required to operationalize the assignment. The positions need to be segregated as mandatory and non-mandatory, meaning that positions that are required to operate the drones and maintain all environment and safety safeguards. For staff already hired, CVs or profiles may be provided and for staff to be hired in the future, the CVs or profiles may be submitted as and when hired.
- 4. Financial Terms:** Payment will be made upon satisfactory completion of services rendered and submission of invoices based on the flights undertaken and deliverables (as defined by TIA) completed on a monthly basis, according to the agreed deliverables and activities, and made against the purchase order/contract. Payment will be made within 30 days after receiving the original invoice and after the Project has reviewed and certified outputs and deliverables.
- 5. Performance Bank Guarantee:** Regarding the advance payment, the service provider would need to submit a performance bank guarantee of 3% (Three percent) of the contract price or as decided by the State/UT as per the provision given in GFR. The Performance Bank Guarantee shall be from a scheduled commercial bank drawn in favor of \_\_\_\_\_ (Full Address) payable at \_\_\_\_\_. This Guarantee shall be irrevocable and remain in full force for a period of 180 days beyond the date of validity (Period of Contract) signing of the contract agreement and shall continue to be enforceable till all obligations under the agreement have been full filled. The advance payment given if any, (Limited to 10% of the contract value) will be adjusted with the quarterly bills on a pro-rata basis.
- 8. Technical Bid (Annexure I):** The technical bid would comprise of the following information:
- 8.1. Detailed proposal describing the mode of implementation of the project (DPR) as per the advertised scope of work.
  - 8.2 Power of Attorney for signing the proposal
  - 8.3 Anti Collusion Certificate
  - 8.4 Project undertaking Certificate
  - 8.5 RPTO certificate & a copy of the drone operation license (UIN/DAN).
  - 8.6 Details of the past experience in handling drone operations in the country.



8.7 Information regarding the bidder (Address, GST, EPF, PAN Card, Audited statement of annual turnover for past two years, Notary attested IT returns filed for the last two financial years completed.

8.2 The bidder whose technical bids are found to be acceptable shall be eligible for participating in the financial bid.

8.3 Affidavit for Non-Conviction Certificate

8.4 Any other relevant document pertaining to project implementation.

**9. Financial Bid: on-line as per Annexure II.**

**Technical Specifications:**

Parameters	Description	Remarks
Range	<ul style="list-style-type: none"><li>• The UAV should be able to cover a minimum aerial distance of <u>less than 50 km</u>(one side)</li><li>• Flight path height clearance - Vertical altitude of 120 meters AGL</li></ul>	Should be capable of BVLOS flight.  The UAV should be capable of returning to home/ command station after delivery of the payload.
Payload (Maximum Take Off weight) MTOW	UAV Shall Take off vertically and land vertically bi-directional with the payload suitable to the category of the drone put in service.	Mounted carrier box with the drone structure for carrying the payload. Multiple drop off facility. Winch drop/Parachute drop will not be permitted.
Telemetry	Constant tracking/navigation/ communicating with the base station	GPS/ RF Module enabled tracking
UIN No.	-Valid UIN No. As per Drone Rules 2021  - Registered on Digitalsky platform	Type currency to be ensured with applicable rules & regulations.
Insurance	Third party insurance	As per section X, Rule 44 of the Indian Drone Rules 2021, third party insurance is mandatory.

## **SECTION II. GENERAL CONDITIONS OF CONTRACT**

FIRST PARTY refers to Procurement Agency and SECOND PARTY refers to contractor whose bid is accepted

1. In the event of an order and any dispute arising out of the same, the FIRST PARTY General Conditions of Contract will apply as under and all references to the General Conditions of Contract include (subject to all relevant approvals) a reference to these terms and conditions as amended, supplemented, substituted, novated or assigned from time to time. Each schedule and annexure referred to in these terms and conditions shall form part of these terms and conditions. The documents forming the supply contract shall be construed and interpreted so that, in the event there is any conflict or ambiguity between them, these terms and conditions shall prevail.

### **APPLICATION AND LEGAL STATUS OF THE PARTIES:**

2. The General Conditions Of Contract incorporated in section-II shall be applicable for Services related to supply of emergency medical deliveries such as vaccines, medicines, diagnostic samples and other supplies to and from remote areas that are not well connected through regular transportation networks at selected places using drone technology (UAV).

3. **Tender Inviting Agency or Hiring Agency** and **VENDOR** shall respectively be referred to as "FIRST PARTY" & "SECOND PARTY" hereunder and each party acknowledges and agrees that:

"Nothing contained in or relating to the contract shall be construed as establishing or creating between the Parties the relationship of employer and employee or of principal and agent. The officials, representatives, employees, or subcontractors of each of the Parties shall not be considered in any respect as being the employees or agents of the other Party and each Party shall be solely responsible for all claims arising out of or relating to its engagement of such persons or entities".

### **DEFINITIONS:**

5. **GOODS:** Goods are hereinafter deemed to include, without limitation, such medicines, blood products, diagnostic samples, injections & vaccines, etc and products which the Tenderer is required to supply pursuant to the Purchase Order as specified by the State Health Authority. Services are hereinafter deemed to include services ancillary to the supply of the Goods including, without limitation transportation and supply at the point of consignee and such other obligations as required under this Contract.

### **PACKAGING OF THE GOODS:**

6. The SECOND PARTY shall package the Goods for delivery with the best materials that are adequate to safeguard the Goods while in transit and with all due care and according to the highest standards of export packaging for the type and quantities of the Goods. The Goods shall be packed and marked in a proper manner in accordance with the instructions stipulated in the Contract or, otherwise, as customarily done in the trade and in accordance with any requirements imposed by applicable law or by the transporters and manufacturers of the Goods. The packing, in particular, shall mark the Contract or Purchase Order number and any other identification information provided by FIRST PARTY as well as such other information as is customary for the Goods in question. During transit, the packing shall be sufficient to withstand, without limitation, rough handling and exposure to extreme temperatures, salt, precipitation and open storage. The SECOND PARTY shall have no right to any return of the



packing materials.

**TRANSPORTATION AND FREIGHT:**

7. Unless otherwise specified in the Contract the SECOND PARTY shall be solely liable for making all transport arrangements and for payment of freight and insurance costs for the shipment and delivery of the Goods.

**DELIVERY OF GOODS:**

8. The SECOND PARTY shall hand over or make available the goods and the Consignees shall receive the goods at the place for the delivery of the Goods and within the time for delivery of the Goods as specified. All manuals, instructions, displays and any other information relevant to the Goods shall be in the English language unless otherwise specified in the Contract. Unless specifically stated in the Contract the entire risk of loss, theft, damage to, or destruction of the Goods shall be borne by the tenderer.

**INDEMNIFICATION:**

9. The SECOND PARTY shall indemnify, defend and hold the FIRST PARTY, the DoHFW and the Government agencies harmless against any or all proceedings, actions and third-party claims arising out of a breach by the SECOND PARTY of any of its obligations under this agreement. This indemnity shall be limited in respect of making harmless to the FIRST PARTY, the DoHFW and the Government agencies.

10. The bidder shall indemnify the FIRST PARTY against all actions, suits, claims and demands brought or made against it, in respect of anything done or committed to be done by the SECOND PARTY in execution of or in connection with the work of this contract and against any loss or damage to the FIRST PARTY in consequence to any action or suit, or a legal proceeding, being brought against the bidder for anything done or committed to be done in the execution of this contract. The bidder will abide by the job safety measures prevalent in India and will free the FIRST PARTY from all demands or responsibilities arising from accidents or loss of life, on account of the bidder's negligence and responsibility. The bidder will pay all indemnities arising from such incidents without any extra cost to FIRST PARTY and will not hold the FIRST PARTY responsible or obligated. The FIRST PARTY may at its discretion and entirely at the cost of the bidder defend such suit, either jointly with the bidder or severely in case the latter chooses not to defend the case and /or proceeding.

**LIQUIDATED DAMAGES:**

11. Except under the circumstances of force majeure as described, if the SECOND PARTY fails to deliver any or all of the Goods by date(s) of delivery as per conditions of the contract, FIRST PARTY may, without prejudice to any or all its other remedies under the contract, deduct from the contract price, Liquidated damages for delayed delivery of goods.

**BLACKLISTING:**

12. Any service provider who is currently blacklisted by any Government Department/ Government Agency in India, would not be eligible to participate in the tender.

**PENALTY FOR DEFAULT:**

13. The following penalties shall be imposed against offences mentioned against each:

Nature of offence	Penalty to be imposed
Any wrong or misleading information provided by the Tenderer during submission of bids	May lead to blacklisting for at least 2 years.
Non execution of agreement within 30 days of award of contract	Blacklisting for 2 years Blacklisting to be circulated as per the extant norms Penalty of 1% of the contract value per day (To be Decided by State) for non-compliance.
Breach of Agreement	Termination of Contract. Blacklisting for participating in future bids. Forfeiture of the Performance Bank Guarantee

**TERMINATION OF CONTRACT:**

14. FIRST PARTY may, upon notice to the Tenderer, terminate this Contract, in whole or in part, at any time without any reason or due to poor performance. for its convenience. The notice of termination shall state that termination is for FIRST PARTY's convenience, the extent to which performance of the SECOND PARTY under the Contract is terminated and the date upon which such termination becomes effective. In the event of Termination for Convenience, no payment shall be due from FIRST PARTY to the Tenderer except for flights satisfactorily undertaken and for the cost of such necessary work as FIRST PARTY may request the Tenderer to complete.

**CONFIDENTIALITY:**

15. FIRST PARTY and the SECOND PARTY, its agents, employees, sub-contractors and servants shall keep confidential and shall not, without the written consent of the other party hereto, divulge to any third party any documents, data, or other information furnished directly or indirectly by the other party hereto, in connection with the Contract, whether such information has been furnished prior to, during or following competition or termination of the contract. Notwithstanding the above, the SECOND PARTY may furnish to its sub-contractor such documents, data and other information it received from FIRST PARTY to the extent required for the sub-contractor to perform its work under the contract, in which event the SECOND PARTY shall obtain from such sub-contractor an undertaking of confidentiality similar to that imposed on the SECOND PARTY.

16. FIRST PARTY shall not use such documents, data and other information received from the SECOND PARTY for any purpose unrelated to the contract. Similarly, the SECOND PARTY shall not use such documents, data and other information received from FIRST PARTY for any purpose other than the performance of the contract.



**FORCE MAJEURE:**

17. Force majeure as used herein means any unforeseeable and irresistible act of nature, any act of war (whether declared or not), invasion, revolution insurrection, flood earthquake or any other acts of a similar nature or force, provided that such acts arise from causes beyond the control and without the fault or negligence of the SECOND PARTY. The SECOND PARTY acknowledges and agrees that, with respect to any obligation under the contract that the SECOND PARTY must perform any delays or failure to perform such obligation arising from or relating to harsh conditions within such areas shall not, in and of itself, constitute Force majeure under the contract.

**ASSIGNMENT:**

18. The SECOND PARTY shall not, except after obtaining the prior written approval of FIRST PARTY, assign, transfer, pledge, or make any other disposition of this contract or any part hereof or of any of the SECOND PARTY's right or obligations hereunder, except with the prior written authorization of FIRST PARTY. The SECOND PARTY may assign or otherwise transfer the contract to the surviving entity resulting from a reorganization of the Party's operations.

19. Prior to the written approval of FIRST PARTY, the SECOND PARTY shall promptly notify FIRST PARTY of such assignment at the earliest opportunity subject to the assignee or transferee agrees in writing to be bound by all of the terms and conditions of the contract and such writing is promptly provided to FIRST PARTY following the assignment or transfer and FIRST PARTY finds that the SECOND PARTYs has the financial and technical capacity as laid down in the tender document to carry out the assignment.

**AMICABLE SETTLEMENT:**

20. When a dispute arises under this agreement, the parties shall make all reasonable efforts to resolve through good faith negotiation, failing which they will attempt at dispute resolution with the intervention of the Principal Secretary, the DoHFW.

**ARBITRATION:**

21. Except for a dispute in connection with termination in which respect the decision of FIRST PARTY shall be final, any dispute between the parties arising out of or relating to this agreement which cannot be resolved through good faith negotiation shall be settled in arbitration, in terms of the provisions of the Arbitration and conciliation Act1996 (No.26 of 1996). The arbitration hearing shall be held in <State> only. The award of the arbitrator (s) shall be binding on both the parties. The cost of arbitration shall be borne by the respective parties.

22. Pending the submission of and / or decision on a dispute, difference or claim, or until the arbitral award is published, the party shall continue to perform all of their obligations under this agreement without prejudice to a final adjustment in accordance with such award.

**COURT OF LAW:**

23. In case of any dispute in between the parties, the matter will be settled in appropriate Court of Law within <insert Name of State>Jurisdiction.

**TECHNICAL BID (relaxations applicable to MSME/start-ups and others as per Gol Guidelines)**

Name and Complete address of the bidder with telephone, mobile, email address etc.			
Name and designation of the authorized signatory to whom reference shall be made.		Name: Designation: E-mail: Mobile:	
Sl. No.	Documents required	Type of document attached	Page/ Flag No.
1	Company Incorporation Certificate from ROC/Partnership deed etc.		
2	GST Registration or GST exemption certificate/ PAN Card.		
3	Letter for past experience And Detailed Project proposal		
4	Certificate from the Chartered Accountant of the Organization/Audited Balance sheets for last three financial years, Income Tax return.		
5	Proof of a registered office and a manufacturing Unit in India.		
6	Digital Sky Platform Registration or MoCA Approval (if applicable)		
7	Authorization Letter		
8	UAV Specification	As per format	

UAV DETAILS	
<b>UAV make and hardware specifications</b>	
DAN No.	
DGCA compliant (NPNT) certificate (Yes/ No/ In process) (attach copy)	
Type of UAV (fixed-wing/ multi-rotor/ hybrid)	
Category of UAV (Nano /Micro / Small/ Large)	
Maximum aerial distance and coverage area (in single sortie)	
Ability to drop and return back to command center (Yes/ No)	
Operating altitude and maximum altitude	
Maximum wind speed handling limit	
Capability to operate in all weather conditions (Yes/ No)	
Maximum and average speed of UAV's	
Battery charging duration (Minutes / fuel capacity (in litre)	
No. of batteries required per UAV	
Battery Specifications	
Battery voltage (V) at each launch and landing	
Take-off and landing requirements	
Payload delivery mechanism: Top load/Side load/ Bottom load	



Payload capacity (KG)	
Temperature maintenance and sensors that communicate with the base station	
Time to setup base stations / landing points + capability of dynamic starting / ending points	
<b>SAFETY FEATURES</b>	
Third Party Insurance (Yes/No/In Process)	
Geo-fencing return home and flight termination capability (Yes/No)	
Live trajectory information and monitoring features (Yes/No)	
Explain mechanism of safe UAV landing in case of geo-fencing breach	
Flight Logging (Yes/No)	
Safety requirement as per DGCA (Yes/No)	
<b>COMPANY CAPACITY TO PROVIDE THE SERVICES</b>	
Capacity to provide Number of Drone(s)/ UAVs	
Capacity to cover number of Sites in India	
Minimum time required to establish Command center at the selected site	
Minimum time required for delivery of drones	

**FINANCIAL BID****Tender Inviting Authority:**

File No:

Bidder Company:

Description of the item	Duration	Total cost per Km of Aerial Distance (All inclusive , excluding applicable GST)
Beyond Visual Line of Site (BVLOS) flights in fixed predefined/pre-approved flight paths and deliver the vaccine and lifesaving drugs payload at selected locations in the pre-identified Hubs in .....(No. of Hubs) and predefined Spokes (PHCs/SC-HWCs) with reverse logistics.  As per Scope of Work listed by Tender Inviting Authority/ DHFW.	<b>No. of Months:</b> ( )	Rs. ....  (In words:.....)
	GST	Rs.....
Total		

**MONITORING AND EVALUATION CHECKLIST****1) Data recording sheet - Take-off Point****1. Site Particulars (Take-Off) : To be filled by the site nodal officer at the cold chain room**

1.1 State/ District:

1.2 Site code number:

1.3 Coordinates: Latitude: Longitude: Mean Sea Level (MSL):

1.4 Date (Date: Month: Year):

1.5 Time (Hrs: Min):

1.6 Authorization form/ Indent form signed (Hard Copy):

**2. Payload Particulars: (To be filled by the healthcare worker)**

2.1 Name of the HCW examiner:

2.2 Type of Payload: Vaccine/ Tablets/ Syrups/ Surgical

2.3 Weight of payload (Kg):

2.4 Labels on the payload are intact: Yes/No

2.5 Expire date mentioned on the medical supply (Date: Month: Year):

2.6 Carrier Box Components:

Total number of vials/ Tablets/ Syrups:

Physical damage/leakage of the vial content: Yes/No,

If Yes, Number of Vials:

Carrier Box is in good condition: Yes/No

Gel/Ice packs are properly placed: Yes/No/ Not Required

Digital Temperature logger is On: Yes/No

Vaccines are placed inside of the box: Yes/No

Temperature inside box (°C):

Temperature Logger Placed: Yes/No

Carrier box sealed properly: Yes/No

Total Weight of the box (kg):

Properly entered in the register: Yes/No

2.7 Authorisation form signed (hard copy): Yes/No

**3. Drone particulars take off site To be filled by the Drone Operator at the Take-Off Site**

3.1 Drone firm name:

3.2 Name of drone pilot (Take-Off):

3.3 RPTO certified drone pilot: Yes/No

3.4 Carrier Box loaded time into the drone chamber (Hr: Min):

3.5 All necessary forms placed inside the carrier box as per DGCA norms:

3.6 Authorisation form signed (Take-Off): Yes/No

3.7 ATC Clearance for before take-off: Yes/No

3.8 Weather monitoring:

Cloud cover (%):

Visibility range (in meters):

Smog/fog: Yes/No

Sunlight: Yes/No

Lightning: Yes/No

Precipitation (%):

Environmental temperature (°C):

UV index:

Wind speed and direction (mph):

Humidity (%):



#### 4. Flight particulars:

*To be filled by the Drone Operator at the Take-Off Site*

- 4.1 Time of Take-off (Hrs:Min):
- 4.2 Aerial Distance to be covered (km):
- 4.3 Expected time of delivery:
- 4.4 Expected external temperature (°C) during the flight: From \_\_\_\_\_ to \_\_\_\_\_.
- 4.5 Digitalsky flight plan approval: Yes/ No
- 4.6 Maximum flight altitude (in meters):
- 4.7 Take-off at the scheduled time: Yes/No
- 4.8 Telemetry : Continuous / intermittent / No Telemetry

#### 5. Unexpected events

*To be filled by the Drone Operator at the Take-Off Site (If applicable)*

- 5.1 Distance travelled (km):
- 5.2 Time travelled (Hrs: Min):
- 5.3 Speed of travel (m/s): Minimum: Maximum: Average:
- 5.4 Time of crash/loss (Hrs: Min): (Hrs: Min)
- 5.5 Location of crash/loss: Place: Coordination:
- 5.6 Type of location: Urban/Forestry/Water bodies/Restricted Sensitive areas/Others:
- 5.7 Damage to: Humans: Properties: Forest: Others:
- 5.8 Type of interruption: Technical failure: External interruption:
- 5.8.1 Technical: Battery: Communication: Others:
- 5.8.2 External factors: Humans/ Birds/ Buildings/towers/Trees/ Extreme weather/others:
- 5.9 Tried to returned to the take-off point: Yes/No
- If yes, details:
- 5.10 Total number of sortie in this route:
- 5.11 Prior failure at this route: Yes/No
- 5.12 No of successful sortie by this vehicle: At this route: Overall:
- 5.13 No of failure by this vehicle: At this route: Overall:
- 5.14 If place of crash/collision crash undetected:

#### 6. Comments from takeoff hub (To be filled after take-off)

6.2 Drone Pilot comments:

Signature of the coordinator

#### Data recording sheet- Landing point

1. **Site Particulars (Landing):** *To be filled by the State site nodal officer*

- 1.1 State/ District:
- 1.2 Site name:
- 1.3 Coordinates: Latitude: Longitude: Mean Sea Level (MSL):
- 1.4 Site in-charge (Landing):
- 1.5 Date (Date: Month: Year):
- 1.6 Time (Hrs:Min):
- 1.7 Authorisation form signed:

#### 2. Landing Details *To be filled by the Drone Operator at the Landing Site*

- 2.1 Unexpected event happened: If yes go to 5. If no continue filling
- 2.2 Landing Time (Hrs:Min):
- 2.3 Vehicle travelled in the scheduled path: Yes/No
- 2.4 If no, state the details:
- 2.5 Drone landed at scheduled site: Yes/No
- 2.6 If no, state the reason:
- 2.7 Aerial Distance covered (km):
- 2.8 Time travelled (Hrs:Min):
- 2.9 Maximum speed (m/s):

2.10 Altitude of flight (m): Flight altitude (MSL): Ground level:

**3. Drone Particulars:** *To be filled by the Drone Operator at the Landing Site*

- 3.1 Name of drone operator (Landing):  
3.2 Battery capacity: Utilised (%): Remaining (%):  
3.3 Digital data collected during the flight:  
a. GNSS: Yes/No  
b. Flight Dynamics: Yes/No  
c. Vibration: Yes/No  
3.4 Status of drone: Undamaged: Damaged:  
3.5 Authorization form signed (Landing): Yes/No  
3.6 Weather monitoring at landing site:  
ii. Cloud cover (%):  
iii. Visibility range (in meters):  
iv. Smog/fog: Yes/No  
v. Sunlight: Yes/No  
vi. Lightning: Yes/No  
vii. Thunder: Yes/No  
viii. Precipitation (%):  
ix. Environmental temperature (°C):  
x. UV index:  
xi. Wind speed and direction (mph):  
xii. Humidity (%):

**4. Carrier Details** *To be filled by the healthcare worker at the cold chain room*

- 4.1 Name of the HCW examiner (Landing):  
4.2 Time taken in transportation of carrier box to healthcare facility (Hr: Min):  
4.3 Name of the vaccine/tablet/syrup/medical supply:  
4.4 No of doses:  
4.5 Labels on the vaccine vials are intact: Yes/No  
4.6 Expire date mentioned on the vials (Date: Month: Year):  
4.7 Carrier Box:  
Total number of vials/ tablets/syrup/etc:  
Physical damage/leakage payload content: Yes/No,  
If Yes, Number of damaged products:  
Carrier Box is in good condition: Yes/No  
Gel/Ice packs are properly placed: Yes/No  
Digital Temperature logger is working: Yes/No  
Temperature inside box (°C):  
Carrier box sealed properly: Yes/No  
Weight of box (kg):  
Properly entered in the register: Yes/No  
4.8 Authorization form signed (hard copy): Yes/No

**5. Unexpected events** *To be filled by the Drone Operator at the Take-Off Site*

- 5.1 Distance travelled (km):  
5.2 Time travelled (Hrs: Min):  
5.3 Speed of travel (m/s): Minimum: Maximum: Average:  
5.4 Time of crash/loss (Hrs: Min):  
5.5 Location of crash/loss: Place: Coordination:  
5.6 Type of location: Urban/Forestry/Water bodies/Restricted or Sensitive areas/ Others  
5.7 Damage to: Humans/Properties/Forest/Others:  
5.8 Type of interruption: Technical failure: External interruption:  
5.8.1 Technical: Battery/ Communication/ Others:  
5.8.2 External factors: Humans/ Birds/ Buildings/towers/Trees/Extreme weather/others

5.9 Tried to returned to the take-off point: Yes/No

5.10 If yes, details:

5.11 Total number of sortie in this route:

5.12 Prior failure at this route:

5.13 No of successful sortie by this vehicle:

At this route:

Overall:

5.14 No of failure by this vehicle:

At this route:

Overall:

5.15: If place of crash/collision crash undetected:

## 6. Delivery particulars

6.1 Medical supplies delivered to the landing point safely: Yes/No

6.2 If no, please state the reason:

**Signature of the coordinator**



**FLIGHT CHECKLIST**

<b>PRE FLIGHT</b>		<b>DURING FLIGHT</b>	<b>POST FLIGHT</b>
<b>At Office</b>		<b>After Launch</b>	<b>After Landing</b>
Aircraft Documentation NOTAM Local Regulation and permission Proximity to the airport Weather condition permits flying All batteries charged Flight gear check		Aircraft reached safe altitude Confirm observer has the aircraft in sight All systems green Satellite and GPS check Check telemetry Check battery remaining	Power down UAV Remove and safely store batteries Airframe inspection Check sensors/ aircraft to ensure any fault/ breakdown Transfer data and flight logs Make logbook entry
<b>In the field</b>		<b>Before Landing</b>	<b>Back at office</b>
Scan area for obstacles e. off & landing site Wind check Daily flight report filled Assemble UAV, ensure sc tight and propeller check Battery securely mounted connected Ensure GPS fix Confirm mission flight plan Operators checklist (integr RC remote check Final airframe inspection Flight crew briefing e.g. flig mission and safety Final weather check before		Ensure UAV flight done according to mission plan Scan landing area for any obstacles Wind check Observer briefing for landing All systems green	Flight and Maintenance Report Charge batteries SD Card cleaned and ready for use Airframe checked Data processed

**THE FOLLOWING REQUIREMENTS WITH REGARD TO INSPECTION, QUALITY, WARRANTY, MAINTENANCE AND RELATED SERVICES SHALL COMMONLY APPLY TO ALL THE SERVICES IN ALL THE SCHEDULES:**

**A. Drone Service Pre-Requisites**

The vendor/ agency shall ensure that the necessary permissions and clearances for drone (Unmanned Aircraft System – UAS) operations (DAN/ DIN etc.) are obtained from respective authorities wherever applicable such as, including, but not restricted to the following:

- i. Directorate General of Civil Aviation (DGCA) – bidders are requested to comply with the latest version DGCA Civil Aviation Requirements (CAR), Section 3-Air Transport, Series X, Part-I & Public Notices issued in this regard from time to time. The latest public notice of MoCA on Drone is provided herewith for kind perusal and actions.

AV-13024/12/2019-SDIT-M

oCA

Government of India  
Ministry of Civil Aviation

Rajiv Gandhi Bhavan, New  
Delhi

**08 June 2020**

**PUBLIC NOTICE**

**Subject: Voluntary disclosure of non-compliant drones flying in India**

1. Whereas, the Directorate General of Civil Aviation (DGCA) has issued the Civil Aviation Requirements (CAR), Section 3 – Air Transport Series X, Part I, Issue I, dated 27 August 2018 which regulates the use of drones in the Indian Airspace and these regulations provide process for obtaining Unique Identification Number (UIN), Unmanned Aircraft Operator Permit (UAOP) and other operational requirements.
2. In order to facilitate the identification of civil drones and drone operators, a one-time opportunity for voluntary disclosure of such drones and drone operators was provided during 14-31 January 2020 vide public notice dated 13 January 2020 of this Ministry.
3. Based on public request, another opportunity is being provided to persons in possession of drones to submit the required information to the government. The submission of requisite information will be through the online portal (<https://digitalsky.dgca.gov.in>), as earlier.
4. On successful submission of the required information and documents, an Ownership Acknowledgement Number (OAN) and a Drone Acknowledgement Number (DAN) will be issued online. The OAN or DAN does not confer any right to operate the drone in India, if it does not fulfil the provisions given in the CAR.
5. Ownership of a drone in India without a valid DAN or OAN shall invite penal action as per applicable laws.
  - Any additional information or clarification may be sought from the Digital Sky helpdesk at [support-digisky@gov.in](mailto:support-digisky@gov.in). Sd/- 08.06.2020

(Amber Dubey) Joint Secretary to the Govt. of India



- ii. Ministry of Defence (MoD)
- iii. Ministry of Home Affairs (MHA)
- iv. Air Traffic Control (ATC)
- v. Local Police and District Administration etc.

- The above clearances, and permissions shall have to be mandatorily obtained prior to commencement of the flight operation and the agency shall have to also mandatorily submit a copy of the permissions and clearances received, to the designated officer of <TIA>.
- It shall be the responsibility of the agency to ensure that the drone operations do not take place without obtaining the relevant permissions from respective authorities.
- The agency shall be responsible for engaging required manpower to complete the work within the specified period.
- Prior to commencement of flight operation, the agency shall conduct necessary field visits for the study of the area for flight planning and establish Ground Control Points (GCPs), if required.
- Agency shall establish GCPs depending on the requirement to meet the desired specifications of the services
- Vendor/ Agency shall ensure that base station is established for each Drone flight.
- Vendor/ Agency shall ensure that endurance of each Drone for data acquisition shall not be less than 30 minutes
- The Vendor/ Agency shall deploy required number of resources on project to process the data and generate required outputs within the shortest possible time
- The Agency shall ensure that all flight data be brought into a single block and it shall be in the desired correction range
- Insurance – the Vendor/Agency should have adequate insurance to cover for the costs required in case of any damage to life & property caused by accident



**Bid Security Declaration Form**  
(On the letter head of the firm)

Date.....

(Tender no.....)

To

The Tender Inviting Authority,

Name of the State.....

I/We, the undersigned, declare that:

I/We understand that, according to your conditions, bids must be supported by a Bid Security Declaration.

I/We accept that I/We may be disqualified from bidding for any contract with you for a period of two year from the date of notification if I am / We are in a breach of any obligation under the bid conditions, because I/We

a) have withdrawn/modified/amended, impairs or derogates from the tender, my/our Bid during the period of bid validity specified in the form of Bid, or

b) having been notified of the acceptance of our Bid by the Tender Inviting Authority during the period of bid validity (i) fails or reuse to execute the contract, if required, or (ii) fail or refuse to furnish the Performance Security, in accordance with the Instructions to Bidders.

c) if I/we withdraw or modify our bids during the period of validity, or if we are awarded the contract and failed to sign the contract, or to submit a performance security before the deadline defined in the request for bids/ request for proposals documents, we will be suspended for a period of 02 years from being eligible to submit bids/proposals for contracts with the Tender inviting authority.

I/We understand this Bid Security Declaration shall cease to be valid if I am/we are not the successful Bidder, upon the earlier of (i) the receipt of your notification of the name of the successful Bidder, or (ii) thirty days after the expiration of the validity of my/our Bid.

Signed: (insert signature of person whose name and capacity are shown)

In the capacity of (insert legal capacity of person signing the Bid Securing Declaration)

Name: (insert complete name of person signing the Bid Security Declaration)

Duly authorized to sign the bid for an on behalf of (insert complete name of Bidder)

Date on ..... day of ..... (Insert date of signing)

Seal (where appropriate)

**Please Note: - The above Undertaking duly signed and Stamped by the Authorized Signatory of the Company, must be attached with the technical bids.**

## **NOTICE INVITING E-TENDER**

**<STATE > HEALTH AUTHORITY**

### **ADDRESS**

Phone No \_\_\_\_\_

E mail: \_\_\_\_\_

### **SERVICES RELATED TO SUPPLY OF EMERGENCY MEDICAL SUPPLIES USING DRONE TECHNOLOGY**

(Submission of Bid through *online*)

<b>Bid Reference No.:</b> _____	<b>Dated –</b> _____
---------------------------------	----------------------

1. **<Insert Name of State Procurement/Tender Inviting Agency with Full Address>** has been requested by Government of **<Insert name of the State>** to supply emergency medical supplies such as vaccines, medicines, diagnostic samples and other supplies to and from remote areas that are not well connected through regular transportation networks at selected places using drone technology.
2. **<State Name>** hereby invites bids from eligible and qualified drone services provider registered by Government of India for providing services for transporting emergency medical supplies using drone technology as per the 'Schedule of Requirement'.
3. Intending Tenderer may download the tender document from the e-tender portal of Govt. of **<State>** at \_\_\_\_\_(website address). The submission of bids should only be through online.
4. Non statutory documents are to be submitted concurrently.

**Sd./- Managing Director**



## **SCHEDULE FOR RFP**

Sl. No.	Event Description	Suggested Timeline
1.	Date of uploading of N.I.T. Documents (online) / Date of	D (Time)
2.	Issue of RFP Published on Date of Pre-Bid Meeting with the intending Tenderers in the <Place of Meeting with full address & Pin Code> OR Through Online Meeting.	D + 7 days
3.	Bid submission start date (Online)	D + 10 days
4.	<p>Last Date for submission of proposals [Bid submission closing (Online)]</p> <p><b>Detailed list of documents annexed at Annexure I to V.</b></p> <p><i>Any wrong or misleading information provided by the Tenderer during submission of bids shall lead to summary cancellation of bid and may lead to blacklisting for at least 2 years.</i></p> <p>Each scanned document should have an index page indicating the name of the documents enclosed with page number.</p>	D + 21 days
5.	Last date of submission of all hard copies of the documents uploaded in e-tender during bid submission except <u>PRICE BID</u> at the registered office of <Place>.	D + 21 Days
6.	Bid opening date for Technical Proposals (Online)	D + 22 Days
7.	Bidders to remain present at <Place with address > for identification of the documents for the technical bid evaluation OR Through Online using weblink < mention web link address >	D + 22 Days
8.	Functional demonstration of the services [ If required by TIA]	D + 23 Days
9.	Opening of Financial Bid (Online)	D + 30 Days
10.	Proposal Validity	180 Days from proposal submission date
11.	Method of Selection	Least Cost (L1) basis financial bid would be opened only of bidders qualifying technical bid

## **SECTION I: INSTRUCTIONS TO TENDERERS**

### **A. Important information at a glance**

(The item suffixed by "E" in bracket indicates Eligibility Criteria for a bidder)

#### **A. Tender Schedule Details**

<b>SCHEDULE</b>	<b>Scope of Work</b>
<b>SCHEDULE – I</b>	Services related to supply of emergency medical deliveries such as vaccines, medicines, diagnostic samples and other supplies to and from remote areas that are not well connected through regular transportation networks at selected places using drone technology (UAV)

**B. Tender Fees: Exempted.**

**C. Technical Bid (E) - As per Annexure I.**

**D. Financial Bid (E) - As per Annexure II.**

**E. Detailed Proposal/Project Report (E).**

**F. Monitoring & Evaluation Checklist as per Annexure III.**

**G. Flight Checklist as per Annexure IV.**

**H. Drone service Pre-requisite (E) - As per Annexure V.**

**I. Bid Security Declaration (E):** Submission of Bid Security declaration (**As per Annexure VI**) and signing of Agreement is mandatory as per extant procurement rules.

**J. Annual Turnover requirements: (E) - The** agency should have annual turnover of minimum Rs. 20 Lakh on an average of two financial years preceding the current financial year.

**K. (a) Timeline for start of Provision of services from the date of issuance of Award of Contract/ Work Order**

<b>SCHEDULE</b>	<b>ITEM</b>	<b>Time</b>
<b>SCHEDULE-I</b>	Services related to supply of emergency medical deliveries such as vaccines, medicines, diagnostic samples and other supplies to and from remote areas that are not well connected through regular transportation networks at selected places using drone technology (UAV)	30 Days

## Payment Terms

### General Terms

- (i) <Procurement Agency/TIA> may like to get the Services related supply of emergency medical deliveries such as vaccines, medicines, diagnostic samples and other supplies on per Km (aerial Distance) to and from remote areas that are not well connected through regular transportation networks at selected places using drone technology (UAV) for a period of \_\_\_\_\_ (Time Period) from the date of award of contract / or against separate Work Order.
- (ii) The rates in the contract will be valid for \_\_\_\_\_ from the date of award of contract.
- (iii) The Tenderers should only quote in INR.

### II. Payment terms: \_\_\_\_\_ (To be specified)

Payment will be made upon satisfactory completion of services rendered and submission of invoices based on the flights and product deliveries completed on a monthly basis, according to the agreed deliverables and activities, and made against the purchase order/contract. Payment will be made within 30 days after receiving the original invoice and after the Project has reviewed and certified outputs and deliverables.

### III. Basic Price of Services(s)

Services related to supply of emergency medical deliveries such as vaccines, medicines, diagnostic samples and other supplies would include transport cost of goods (Per Km of Aerial Distance), operations services, accessories & ancillaries, freight charges, manpower charges and any other applicable charges excluding GST during the contract (Specify duration). Applicable GST will be paid extra.



#### 6. Service Up time in Warranty

Working condition of drone for a minimum period of 354 days out of a period of 365 days. (i.e., 97% uptime)

The response time to any drone related service call should be not more than 6 hrs after call is logged. Call Log by E-mail/Fax. Time for rectification should not be more than 48 hours.

Maximum Downtime allowed without penalty: 72 hours. In case equipment is not useable beyond the stipulated maximum down time the supplier will be required to install alternative equipment for providing uninterrupted service.

Penalty beyond 72 hours downtime & if standby unit is not provided: Schedule I – Rs. 1000 per day per unserviceable drone

#### 7. Liquidated damages for Delayed setting up of Services:

The percentage of 0.5% of the Invoice price for each week or part thereof, of delay until actual delivery or performance, up to a maximum deduction of 5% of the Invoice price.

#### 8. Experience and Technical Capacity (E)

Bidder must have carried out drone related operations for transportation of logistics / related services in the country and has a license to operate and maintain drones as per the Ministry of Civil Aviation guidelines/rules.

#### 9. General Instructions

- a. Bidders are requested to study the tender document, terms & conditions carefully before submitting their bids. Submission of tender shall be deemed to have been done after careful study and examination of the tender document with full understanding of its implications.
- b. Tender documents should be downloaded from the E-tender portal of Govt. of <State> at (website address). The submission of bids should only be through online.
- c. All pages of the bid submitted must be signed and sequentially numbered by the Bidder. All information in the offer must be in English. Information in any other language must be translated to English. Failure to comply with this may render the offer liable to be rejected. In the event of any discrepancy between the offer in a language other than English and its English translation, the English translation will prevail.

## **SCOPE OF WORK AND DELIVERABLES**

### **1. Summary of Scope of Work:**

- 1.1 The service provider will be expected to run routine and emergency deliveries of medical commodities such as vaccines, medicines, diagnostic samples and other supplies to and from remote areas that are not well connected through regular transportation networks.
- 1.2 The parts of the supply chain that will be serviced include but are not limited to immunization, blood, emergency supplies, diagnostics, medicines, and routine supplies.
- 1.3 The list of possible commodities to be carried include but are not limited to vaccines, medicines, blood units, and diagnostic samples.
- 1.4 The services to be provided are purely non-commercial in nature and will only apply for purposes in the public health ecosystem.

#### **1.5 Service provider shall establish a command center consisting of the following:**

- 1.5.1 Two number of Drones with Vertical Take-off & Landing (VTOL) capability.
- 1.5.2 Category of drone commensurate with the payload capacity (\_\_\_\_\_ Kg) as required by the Tender inviting Agency (TIA) with suitable medical carrier box/cold chain vaccine carrier.
- 1.5.3 Two qualified (Remote Pilot Training Organisation Certified) drone pilots with minimum six months of flying drone experience.
- 1.5.4. One Project manager/Facility Coordinator at each Hub of drone operations.
- 1.5.5 Repair & maintenance related equipment & consumables/accessories.
- 1.5.6. IT support – Desktop -01, Laptop -01 with latest configuration and minimum 512 MB storage with all computer peripherals including printer facility.
- 1.5.7 Internet Connectivity- Broadband either wireless or FTTH for uninterrupted service (preferably two separate telecom service providers as standby to each other).
- 1.5.8. Furniture & Fitments, electrical points for the space provided, for setting up of Command center and preparation of a flat top secured area (5 Mtr X 5 Mtr) for drone operations.

#### **1.6 Department of Health & Family Welfare shall provide the following:**

- 1.6.1 Space within the premises of the District Hospital/Sub-District Hospital/Drug warehouse/Blood Bank.
- 1.6.2 One Pharmacist for checking & weighing the medicines/ medical supplies before dispatch and collection of the return diagnostic/ Lab samples.
- 1.6.3 Point for electricity with separate meter (The electricity bill is to be paid by the service provider)
- 1.6.4. Point for water supply.

### **2. Specifications of the Assignment:**



**2.1 Commodity packaging and storage specifications** and requirements and their cold-chain requirements are as follows: *Cold Chain Items*: Should be stored in a cold chain enabled box with temperature ranging from 2 deg C to 8 deg C. *Non-Cold Chain Items*: Should be stored in an air-tight sealed box, fitting properly in the drone carrier box.

**2.2** The detailed list of health facilities (PHCs/SC-HWCs), with their GPS coordinates, that fall under a 50 km aerial distance and within the flight range radius from the identified hubs (DHs/SDHs/CHCs/Warehouse/Blood Bank).

**2.3** The Hubs identified by the <State> or under the pilot project for the said assignment (may change due to unavoidable circumstances)

Hubs Location	Drug Warehouse	Spokes Location	Diagnostic Lab	Blood Bank

**2.4** The Service Provider is expected to consider all health facilities and health entities around <Name of the Hub>. However, only facilities falling under the green zone and yellow zone with requisite clearances and all regulatory approvals are allowed to be providing service. The type of facilities to be considered are PHCs, CHCs, SDHs, DHs, Blood bank, Drug warehouse, and any other relevant entities as decided by TIA. The Service Provider must classify all facilities mentioned in Para 2.3, within the scope of 'Hub & Spoke' Model as per zones defined by the relevant Authorities.

**2.5** The hubs identified based on multiple factors including availability of supporting public health entities, availability of manpower, availability of space, etc by the TIA will be notified to the drone service provider. The Service provider must segregate the said locations into green, yellow and red zones as per the prevailing rules and regulations as notified by the Union Government of India from time to time and verified in the DigitalSky platform. Only those locations that fall in the green zone and yellow zone with requisite clearances and all regulatory approvals will be operationalized. The rest will depend on obtaining mandatory clearances from the relevant Govt. and regulatory entities.

**2.6** The payload per flight will be within the weight consideration as per the service provider technical expertise, depending on weather limitations and other factors influencing the sortie during the period of operations. Service provider shall route flight plans with a schedule for the week in advance in a cost effective manner ensuring onward & reverse logistics. Emergencies supplies as life saving mission on recommendation of the officer-in-Charge (OIC) HUB (Medical Officer) will be undertaken by the service provider on need basis.

**2.7** The mode of drone transportation required – bidirectional (Onward & Return). The propulsion and power system should be battery operated appropriate to the category of the drone.

**2.8** Expected flight routes and frequency of flights between different points: The service provider should use the most cost-effective flight routes in alignment with Drone Rules – 2021 & its amendment thereafter. The frequency of flights will be as and when required basis or decided as per the load/task assigned by the OIC Hub.

**2.9** The service provider will make every effort to improve TAT of routine delivery of drugs and supplies, operationalize an end-to-end diagnostic testing of samples from



collection to receiving of test results, complete routine and emergency delivery of vaccines, and emergency delivery of blood units to difficult to reach facilities/entities from identified hubs.

### **3. Responsibilities of the Service Provider:**

3.1 The drone transportation service provider will be required to fulfil the following mandatory responsibilities:

- (i) Ensure compliance with local drone regulation by obtaining necessary permits, completing all necessary procedures and providing timely information to the civil aviation authority (or equivalent); certification of No Permission -No Take-Off (NPNT) compliance issued by DGCA.
- (ii) Segregation of facility locations falling into Green, Yellow and Red Zones as per the interactive map (<https://digitalsky.dgca.gov.in/airspace-map/#/app>) provided by the Central Government. The drone operation will only be undertaken for the facilities/locations falling in the green zone and yellow zone with requisite clearances and all regulatory approvals. However, the provision to operate in red zone is created which will be done only after following the rules and meeting all the compliance mandated by all relevant governmental and regulatory entities such as MoCA/IAF/MHA/MoD.
- (iii) The Service Provider is required to follow the following basic operating principles to reduce (but not eliminate) risks to other airspace users and people and property on the ground:
  - a. Operations beyond visual line of sight (BVLOS)
  - b. Flight not above 400ft (120 Mtr) Above Ground Level (AGL).
  - c. Maintain flight path as per the planned sortie registered on the Digital Sky platform.
  - d. Limits on flights over large groups of people or urban areas
  - e. Limits on proximity to people during flight and critical stages of flight (takeoff/landing)
  - f. The drone must be equipped with a return-to-home function in case of loss of radio link.
  - g. In any case, the flight path will be planned in the Green Zone and yellow zone with requisite clearances and all regulatory approvals only and 5km away from the State border to avoid any regulatory violation.
- (iv) Manage the entire equipment and materials importation process by liaising with appropriate authorities and possession of requisite license and registration for operation in the state.
- (v) Provide equipment (drones, ground station, communication, power/energy, and any other related) and staff for safe and successful drone delivery operations and ensure regular maintenance and repairs of the drone fleet.
- (vi) Provide necessary set-up for operations (at hub and at facility level).
- (vii) Provide and manage flight planning process, complete approval requests and conduct communications with appropriate Air Traffic Control (ATC) or other relevant authority (Entities should have a dedicated flight live-tracking online system).

- (viii) Possess valid third-party insurance for the duration of the services.
- (ix) Ensure appropriate safety and emergency procedures are in place to minimize any operational, environmental and other risks and provide the proof of comprehensive Beyond Visual Line of Sight (BVLOS) concept of operations (ConOps); take full responsibility for and manage emergency procedures, including incident reporting as per local regulatory requirements.
- (x) Assess the relevant National, State and Local environmental regulations are complied. The service provider is required to be sensitive to the impact of the operations on local environment and always ensure compliance, at all times.
- (xi) The Service Provider, with support from the State, is required to engage with stakeholders and communities and implement an IEC campaign in the area of operation (District/ blocks falling within 50km radius of the Hub) to ensure that (a) Community members are not surprised - they are consulted and information on how UAVs will be used; and (b) Community members are aware of its benefits and the activity has larger community support. The District and State officials will provide support and facilitate this activity.
- (xii) Ensure that the operations have negligible impact on surrounding environment, population and the ecosystem. Environmental risks and impacts assessment and mitigation measures shall be undertaken pertaining to (i) proximity to any cultural heritage; (ii) operations affecting wildlife; (iii) educating the relevant authorities on the impact on wildlife and how the task will be adapted to reduce this.
- (xiii) The service provider should have a process related to reporting and management of any accidents and incidents and the same shall be documented as part of contract. All incidents and accidents shall be documented and reported to the project and appropriate authorities subject to Government of India (GoI) requirement.
- (xiv) Ensure appropriate operational backup (to ensure that there is backup drone[s] in all hubs.
- (xv) Ensure a documented battery management policy exists including the following elements: (i) Battery storage procedures; (ii) battery charging procedures that are considerate of the task site requirements; (iii) battery charging record; (iv) battery transportation procedures; (v) action in the event of battery emergency; and (vi) support equipment (firefighting, first aid it, signage, etc.)
- (xvi) Train relevant local staff (including health facility staff) to ensure consistent implementation of operations and safety procedures and ensure local capacity-building and sustainability
- (xvii) Offer continuous reporting of progress and activities to regulatory, health and contracting stakeholders.
- (xviii) **Reporting Requirements:**
  - a. Collect product and delivery data like number of deliveries, locations, size of package, content of package, number of samples collected, number of vaccines/ medicines delivered, etc. on a weekly basis.
  - b. Collect flight data, document it and report on it monthly.



- (xix) The Service Provider shall submit a Monthly Operation Report based on the Monitoring and Evaluation checklist as per Annexure 'III'. He shall also comply with the Flight Checklist placed as Annexure 'IV' (Pre-Flight, During Flight & Post Flight Checks). The Service Provider must also prepare and get approvals of the pre-flight checklist (including weather, flight details, batteries, structural checks, calibration etc.) and Safety checklist (site survey, flight plan, public awareness, safety procedure etc.) based on industry practices and the regulatory requirements, and same should be agreed with the government in advance.

#### **4. Key activities/ deliverables**

##### **a. Set-up phase**

- i. Segregation of location of all agreed facilities into yellow, green and red zones as directed by the Union Government of India. Process of regulatory approval of all 3 types of zones should start simultaneously as soon as location of facilities is agreed.
- ii. Successful completion of the regulatory processes and approvals, obtaining the BVLOS permit to conduct daily delivery flights, and obtaining approvals to carry dangerous goods (medical samples, etc.) if necessary.
- iii. Integration with relevant entities, staff and partners to establish all-in-one services: order management, inventory storage and management (if applicable), transportation of supplies from central warehouses to the distribution/ fulfilment center, (re)packing, contract management, IT solutions, and, ultimately, shipping operations and distribution implemented by drones.
- iv. Provide specifications based on the scope of work for building/ repurposing a distribution/fulfilment center where all relevant commodities are kept, managed and distributed directly to target health facilities.
- v. Equipping the center with all necessary equipment and staff; setting up daily operations.
- vi. Development of flight plans as per the agreed use cases and average number of flights per week along with necessary approval.
- vii. Visit and scope out each facility to collect necessary data/GPS coordinates and information for operations, as well as assist with community sensitization activities.
- viii. Setting up take-off cum landing platforms in all identified facilities.
- ix. Equipping the distribution center as well as health facilities with all necessary communication and information systems to fulfil the order and dispatch function.
- x. Testing of use-cases identified by the Project to improve healthcare delivery and service.

##### **b. Operations phase**

- i. According to an agreed frequency (hourly, daily, weekly, etc.), provision of drone delivery operations to health facilities as a part of routine and emergency delivery operations
- ii. Weekly reporting of flight (number of flights, incidents, flight hours, total/max/average speed and distance flown), product (weight, volume, type, quantity/number of commodities flown, total/max/average payload weight and volume carried), demand (% of deliveries made in full and on time, based on the distribution plan and based on emergency data.
- iii. In case of emergencies, like natural calamities, provision for shifting of drones between the hubs/ or any other suitable place will be the responsibility of the service provider. Service provider shall also be willing to accommodate increased need in the affected areas for



more number of sorties during any natural disaster.

**3. HR and Staffing:** The Service Provider will need to provide a list of all positions required to operationalize the assignment. The positions need to be segregated as mandatory and non-mandatory, meaning that positions that are required to operate the drones and maintain all environment and safety safeguards. For staff already hired, CVs or profiles may be provided and for staff to be hired in the future, the CVs or profiles may be submitted as and when hired.

**4. Financial Terms:** Payment will be made upon satisfactory completion of services rendered and submission of invoices based on the flights undertaken and deliverables (as defined by TIA) completed on a monthly basis, according to the agreed deliverables and activities, and made against the purchase order/contract. Payment will be made within 30 days after receiving the original invoice and after the Project has reviewed and certified outputs and deliverables.

**5. Performance Bank Guarantee:** Regarding the advance payment., the service provider would need to submit a performance bank guarantee of 3% (Three percent) of the contract price or as decided by the State/UT as per the provision given in GFR. The Performance Bank Guarantee shall be from a scheduled commercial bank drawn in favor of \_\_\_\_\_ (Full Address) payable at \_\_\_\_\_. This Guarantee shall be irrevocable and remain in full force for a period of 180 days beyond the date of validity (Period of Contract) signing of the contract agreement and shall continue to be enforceable till all obligations under the agreement have been full filled. The advance payment given if any, (Limited to 10% of the contract value) will be adjusted with the quarterly bills on a pro-rata basis.

**8. Technical Bid (Annexure I):** The technical bid would comprise of the following information:

8.1. Detailed proposal describing the mode of implementation of the project (DPR) as per the advertised scope of work.

8.2 Power of Attorney for signing the proposal

8.3 Anti Collusion Certificate

8.4 Project undertaking Certificate

8.5 RPTO certificate & a copy of the drone operation license (UIN/DAN).

8.6 Details of the past experience in handling drone operations in the country.

8.7 Information regarding the bidder (Address, GST, EPF, PAN Card, Audited statement of annual turnover for past two years, Notary attested IT returns filed for the last two financial years completed.

8.2 The bidder whose technical bids are found to be acceptable shall be eligible for participating in the financial bid.

8.3 Affidavit for Non-Conviction Certificate

8.4 Any other relevant document pertaining to project implementation.

**9. Financial Bid: on-line as per Annexure II.**

**Technical Specifications:**

Parameters	Description	Remarks
Range	<ul style="list-style-type: none"><li>• The UAV should be able to cover a minimum aerial distance of <u>less than 50 km</u>(one side)</li><li>• Flight path height clearance - Vertical altitude of 120 meters AGL</li></ul>	Should be capable of BVLOS flight.  The UAV should be capable of returning to home/ command station after delivery of the payload.
Payload (Maximum Take Off weight) MTOW	UAV Shall Take off vertically and land vertically bi-directional with the payload suitable to the category of the drone put in service.	Mounted carrier box with the drone structure for carrying the payload. Multiple drop off facility. Winch drop/Parachute drop will not be permitted.
Telemetry	Constant tracking/navigation/ communicating with the base station	GPS/ RF Module enabled tracking
UIN No.	-Valid UIN No. As per Drone Rules 2021  - Registered on Digitalsky platform	Type currency to be ensured with applicable rules & regulations.
Insurance	Third party insurance	As per section X, Rule 44 of the Indian Drone Rules 2021, third party insurance is mandatory.



## **SECTION II. GENERAL CONDITIONS OF CONTRACT**

FIRST PARTY refers to Procurement Agency and SECOND PARTY refers to contractor whose bid is accepted

1. In the event of an order and any dispute arising out of the same, the FIRST PARTY General Conditions of Contract will apply as under and all references to the General Conditions of Contract include (subject to all relevant approvals) a reference to these terms and conditions as amended, supplemented, substituted, novated or assigned from time to time. Each schedule and annexure referred to in these terms and conditions shall form part of these terms and conditions. The documents forming the supply contract shall be construed and interpreted so that, in the event there is any conflict or ambiguity between them, these terms and conditions shall prevail.

### **APPLICATION AND LEGAL STATUS OF THE PARTIES:**

2. The General Conditions Of Contract incorporated in section-II shall be applicable for Services related to supply of emergency medical deliveries such as vaccines, medicines, diagnostic samples and other supplies to and from remote areas that are not well connected through regular transportation networks at selected places using drone technology (UAV).

3. **Tender Inviting Agency or Hiring Agency** and **VENDOR** shall respectively be referred to as "FIRST PARTY" & "SECOND PARTY" hereunder and each party acknowledges and agrees that:

"Nothing contained in or relating to the contract shall be construed as establishing or creating between the Parties the relationship of employer and employee or of principal and agent. The officials, representatives, employees, or subcontractors of each of the Parties shall not be considered in any respect as being the employees or agents of the other Party and each Party shall be solely responsible for all claims arising out of or relating to its engagement of such persons or entities".

### **DEFINITIONS:**

5. **GOODS:** Goods are hereinafter deemed to include, without limitation, such medicines, blood products, diagnostic samples, injections & vaccines, etc and products which the Tenderer is required to supply pursuant to the Purchase Order as specified by the State Health Authority. Services are hereinafter deemed to include services ancillary to the supply of the Goods including, without limitation transportation and supply at the point of consignee and such other obligations as required under this Contract.

### **PACKAGING OF THE GOODS:**

6. The SECOND PARTY shall package the Goods for delivery with the best materials that are adequate to safeguard the Goods while in transit and with all due care and according to the highest standards of export packaging for the type and quantities of the Goods. The Goods shall be packed and marked in a proper manner in accordance with the instructions stipulated in the Contract or, otherwise, as customarily done in the trade and in accordance with any requirements imposed by applicable law or by the transporters and manufacturers of the Goods. The packing, in particular, shall mark the Contract or Purchase Order number and any other identification information provided by FIRST PARTY as well as such other information as is customary for the Goods in question. During transit, the packing shall be sufficient to withstand, without limitation, rough handling and exposure to extreme temperatures, salt, precipitation and open storage. The SECOND PARTY shall have no right to any return of the



packing materials.

**TRANSPORTATION AND FREIGHT:**

7. Unless otherwise specified in the Contract the SECOND PARTY shall be solely liable for making all transport arrangements and for payment of freight and insurance costs for the shipment and delivery of the Goods.

**DELIVERY OF GOODS:**

8. The SECOND PARTY shall hand over or make available the goods and the Consignees shall receive the goods at the place for the delivery of the Goods and within the time for delivery of the Goods as specified. All manuals, instructions, displays and any other information relevant to the Goods shall be in the English language unless otherwise specified in the Contract. Unless specifically stated in the Contract the entire risk of loss, theft, damage to, or destruction of the Goods shall be borne by the tenderer.

**INDEMNIFICATION:**

9. The SECOND PARTY shall indemnify, defend and hold the FIRST PARTY, the DoHFW and the Government agencies harmless against any or all proceedings, actions and third-party claims arising out of a breach by the SECOND PARTY of any of its obligations under this agreement. This indemnity shall be limited in respect of making harmless to the FIRST PARTY, the DoHFW and the Government agencies.

10. The bidder shall indemnify the FIRST PARTY against all actions, suits, claims and demands brought or made against it, in respect of anything done or committed to be done by the SECOND PARTY in execution of or in connection with the work of this contract and against any loss or damage to the FIRST PARTY in consequence to any action or suit, or a legal proceeding, being brought against the bidder for anything done or committed to be done in the execution of this contract. The bidder will abide by the job safety measures prevalent in India and will free the FIRST PARTY from all demands or responsibilities arising from accidents or loss of life, on account of the bidder's negligence and responsibility. The bidder will pay all indemnities arising from such incidents without any extra cost to FIRST PARTY and will not hold the FIRST PARTY responsible or obligated. The FIRST PARTY may at its discretion and entirely at the cost of the bidder defend such suit, either jointly with the bidder or severely in case the latter chooses not to defend the case and /or proceeding.

**LIQUIDATED DAMAGES:**

11. Except under the circumstances of force majeure as described, if the SECOND PARTY fails to deliver any or all of the Goods by date(s) of delivery as per conditions of the contract, FIRST PARTY may, without prejudice to any or all its other remedies under the contract, deduct from the contract price, Liquidated damages for delayed delivery of goods.

**BLACKLISTING:**

12. Any service provider who is currently blacklisted by any Government Department/ Government Agency in India, would not be eligible to participate in the tender.

**PENALTY FOR DEFAULT:**

13. The following penalties shall be imposed against offences mentioned against each:

Nature of offence	Penalty to be imposed
Any wrong or misleading information provided by the Tenderer during submission of bids	May lead to blacklisting for at least 2 years.
Non execution of agreement within 30 days of award of contract	Blacklisting for 2 years Blacklisting to be circulated as per the extant norms Penalty of 1% of the contract value per day (To be Decided by State) for non-compliance.
Breach of Agreement	Termination of Contract. Blacklisting for participating in future bids. Forfeiture of the Performance Bank Guarantee

**TERMINATION OF CONTRACT:**

14. FIRST PARTY may, upon notice to the Tenderer, terminate this Contract, in whole or in part, at any time without any reason or due to poor performance. for its convenience. The notice of termination shall state that termination is for FIRST PARTY's convenience, the extent to which performance of the SECOND PARTY under the Contract is terminated and the date upon which such termination becomes effective. In the event of Termination for Convenience, no payment shall be due from FIRST PARTY to the Tenderer except for flights satisfactorily undertaken and for the cost of such necessary work as FIRST PARTY may request the Tenderer to complete.

**CONFIDENTIALITY:**

15. FIRST PARTY and the SECOND PARTY, its agents, employees, sub-contractors and servants shall keep confidential and shall not, without the written consent of the other party hereto, divulge to any third party any documents, data, or other information furnished directly or indirectly by the other party hereto, in connection with the Contract, whether such information has been furnished prior to, during or following competition or termination of the contract. Notwithstanding the above, the SECOND PARTY may furnish to its sub-contractor such documents, data and other information it received from FIRST PARTY to the extent required for the sub-contractor to perform its work under the contract, in which event the SECOND PARTY shall obtain from such sub-contractor an undertaking of confidentiality similar to that imposed on the SECOND PARTY.

16. FIRST PARTY shall not use such documents, data and other information received from the SECOND PARTY for any purpose unrelated to the contract. Similarly, the SECOND PARTY shall not use such documents, data and other information received from FIRST PARTY for any purpose other than the performance of the contract.



**FORCE MAJEURE:**

17. Force majeure as used herein means any unforeseeable and irresistible act of nature, any act of war (whether declared or not), invasion, revolution insurrection, flood earthquake or any other acts of a similar nature or force, provided that such acts arise from causes beyond the control and without the fault or negligence of the SECOND PARTY. The SECOND PARTY acknowledges and agrees that, with respect to any obligation under the contract that the SECOND PARTY must perform any delays or failure to perform such obligation arising from or relating to harsh conditions within such areas shall not, in and of itself, constitute Force majeure under the contract.

**ASSIGNMENT:**

18. The SECOND PARTY shall not, except after obtaining the prior written approval of FIRST PARTY, assign, transfer, pledge, or make any other disposition of this contract or any part hereof or of any of the SECOND PARTY's right or obligations hereunder, except with the prior written authorization of FIRST PARTY. The SECOND PARTY may assign or otherwise transfer the contract to the surviving entity resulting from a reorganization of the Party's operations.

19. Prior to the written approval of FIRST PARTY, the SECOND PARTY shall promptly notify FIRST PARTY of such assignment at the earliest opportunity subject to the assignee or transferee agrees in writing to be bound by all of the terms and conditions of the contract and such writing is promptly provided to FIRST PARTY following the assignment or transfer and FIRST PARTY finds that the SECOND PARTYs has the financial and technical capacity as laid down in the tender document to carry out the assignment.

**AMICABLE SETTLEMENT:**

20. When a dispute arises under this agreement, the parties shall make all reasonable efforts to resolve through good faith negotiation, failing which they will attempt at dispute resolution with the intervention of the Principal Secretary, the DoHFW.

**ARBITRATION:**

21. Except for a dispute in connection with termination in which respect the decision of FIRST PARTY shall be final, any dispute between the parties arising out of or relating to this agreement which cannot be resolved through good faith negotiation shall be settled in arbitration, in terms of the provisions of the Arbitration and conciliation Act1996 (No.26 of 1996). The arbitration hearing shall be held in <State> only. The award of the arbitrator (s) shall be binding on both the parties. The cost of arbitration shall be borne by the respective parties.

22. Pending the submission of and / or decision on a dispute, difference or claim, or until the arbitral award is published, the party shall continue to perform all of their obligations under this agreement without prejudice to a final adjustment in accordance with such award.

**COURT OF LAW:**

23. In case of any dispute in between the parties, the matter will be settled in appropriate Court of Law within <insert Name of State>Jurisdiction.

**TECHNICAL BID (relaxations applicable to MSME/start-ups and others as per GoI Guidelines)**

Name and Complete address of the bidder with telephone, mobile, email address etc.			
Name and designation of the authorized signatory to whom reference shall be made.		Name: Designation: E-mail: Mobile:	
Sl. No.	Documents required	Type of document attached	Page/ Flag No.
1	Company Incorporation Certificate from ROC/Partnership deed etc.		
2	GST Registration or GST exemption certificate/ PAN Card.		
3	Letter for past experience And Detailed Project proposal		
4	Certificate from the Chartered Accountant of the Organization/Audited Balance sheets for last three financial years, Income Tax return.		
5	Proof of a registered office and a manufacturing Unit in India.		
6	Digital Sky Platform Registration or MoCA Approval (if applicable)		
7	Authorization Letter		
8	UAV Specification	As per format	

UAV DETAILS	
<b>UAV make and hardware specifications</b>	
DAN No.	
DGCA compliant (NPNT) certificate (Yes/ No/ In process) (attach copy)	
Type of UAV (fixed-wing/ multi-rotor/ hybrid)	
Category of UAV (Nano /Micro / Small/ Large)	
Maximum aerial distance and coverage area (in single sortie)	
Ability to drop and return back to command center (Yes/ No)	
Operating altitude and maximum altitude	
Maximum wind speed handling limit	
Capability to operate in all weather conditions (Yes/ No)	
Maximum and average speed of UAV's	
Battery charging duration (Minutes / fuel capacity (in litre)	
No. of batteries required per UAV	
Battery Specifications	
Battery voltage (V) at each launch and landing	
Take-off and landing requirements	
Payload delivery mechanism: Top load/Side load/ Bottom load	
Payload capacity (KG)	



Temperature maintenance and sensors that communicate with the base station	
Time to setup base stations / landing points + capability of dynamic starting / ending points	
<b>SAFETY FEATURES</b>	
Third Party Insurance (Yes/No/In Process)	
Geo-fencing return home and flight termination capability (Yes/No)	
Live trajectory information and monitoring features (Yes/No)	
Explain mechanism of safe UAV landing in case of geo-fencing breach	
Flight Logging (Yes/No)	
Safety requirement as per DGCA (Yes/No)	
<b>COMPANY CAPACITY TO PROVIDE THE SERVICES</b>	
Capacity to provide Number of Drone(s)/ UAVs	
Capacity to cover number of Sites in India	
Minimum time required to establish Command center at the selected site	
Minimum time required for delivery of drones	

**Annexure II**

**FINANCIAL BID**

**Tender Inviting Authority:**

File No:

Bidder Company:

Description of the item	Duration	Total cost per Km of Aerial Distance (All inclusive , excluding applicable GST)
Beyond Visual Line of Site (BVLOS) flights in fixed predefined/pre-approved flight paths and deliver the vaccine and lifesaving drugs payload at selected locations in the pre-identified Hubs in .....(No. of Hubs) and predefined Spokes (PHCs/SC-HWCs) with reverse logistics.  As per Scope of Work listed by Tender Inviting Authority/ DHFW.	No. of Months: ( )	Rs. ....  (In words:.....)
	GST	Rs.....
Total		

**MONITORING AND EVALUATION CHECKLIST****1) Data recording sheet - Take-off Point****1. Site Particulars (Take-Off) :** *To be filled by the site nodal officer at the cold chain room*

1.1 State/ District:

1.2 Site code number:

1.3 Coordinates:      Latitude:      Longitude:      Mean Sea Level (MSL):

1.4 Date (Date: Month: Year):

1.5 Time (Hrs: Min):

1.6 Authorization form/ Indent form signed (Hard Copy):

**2. Payload Particulars:** *(To be filled by the healthcare worker)*

2.1 Name of the HCW examiner:

2.2 Type of Payload: Vaccine/ Tablets/ Syrups/ Surgical

2.3 Weight of payload (Kg):

2.4 Labels on the payload are intact: Yes/No

2.5 Expire date mentioned on the medical supply (Date: Month: Year):

2.6 Carrier Box Components:

Total number of vials/ Tablets/ Syrups:

Physical damage/leakage of the vial content: Yes/No,

If Yes, Number of Vials:

Carrier Box is in good condition: Yes/No

Gel/Ice packs are properly placed: Yes/No/ Not Required

Digital Temperature logger is On: Yes/No

Vaccines are placed inside of the box: Yes/No

Temperature inside box (°C):

Temperature Logger Placed. Yes/No

Carrier box sealed properly: Yes/No

Total Weight of the box (kg):

Properly entered in the register: Yes/No

2.7 Authorisation form signed (hard copy): Yes/No

**3. Drone particulars take off site** *To be filled by the Drone Operator at the Take-Off Site*

3.1 Drone firm name:

3.2 Name of drone pilot (Take-Off):

3.3 RPTO certified drone pilot: Yes/No

3.4 Carrier Box loaded time into the drone chamber (Hr: Min):

3.5 All necessary forms placed inside the carrier box as per DGCA norms:

3.6 Authorisation form signed (Take-Off): Yes/No

3.7 ATC Clearance for before take-off: Yes/No

3.8 Weather monitoring:

Cloud cover (%):

Visibility range (in meters):

Smog/fog: Yes/No

Sunlight: Yes/No

Lightning: Yes/No

Precipitation (%):

Environmental temperature (°C):

UV index:

Wind speed and direction (mph):



Humidity (%):

#### 4. Flight particulars:

*To be filled by the Drone Operator at the Take-Off Site*

4.1 Time of Take-off (Hrs:Min):

4.2 Aerial Distance to be covered (km):

4.3 Expected time of delivery:

4.4 Expected external temperature (°C) during the flight: From \_\_\_\_\_ to \_\_\_\_\_.

4.5 Digitalsky flight plan approval: Yes/ No

4.6 Maximum flight altitude (in meters):

4.7 Take-off at the scheduled time: Yes/No

4.8 Telemetry : Continuous / intermittent / No Telemetry

#### 5. Unexpected events

*To be filled by the Drone Operator at the Take-Off Site (If applicable)*

5.1 Distance travelled (km):

5.2 Time travelled (Hrs: Min):

5.3 Speed of travel (m/s): Minimum: Maximum: Average:

5.4 Time of crash/loss (Hrs: Min): (Hrs: Min)

5.5 Location of crash/loss: Place: Coordination:

5.6 Type of location: Urban/Forestry/Water bodies/Restricted Sensitive areas/Others:

5.7 Damage to: Humans: Properties: Forest: Others:

5.8 Type of interruption: Technical failure: External interruption:

5.8.1 Technical: Battery: Communication: Others:

5.8.2 External factors: Humans/ Birds/ Buildings/towers/Trees/ Extreme weather/others:

5.9 Tried to returned to the take-off point: Yes/No

If yes, details:

5.10 Total number of sortie in this route:

5.11 Prior failure at this route: Yes/No

5.12 No of successful sortie by this vehicle: At this route: Overall:

5.13 No of failure by this vehicle: At this route: Overall:

5.14 If place of crash/collision crash undetected:

#### 6. Comments from takeoff hub (To be filled after take-off)

6.2 Drone Pilot comments:

**Signature of the coordinator**

#### Data recording sheet- Landing point

1. **Site Particulars (Landing):** *To be filled by the State site nodal officer*

1.1 State/ District:

1.2 Site name:

1.3 Coordinates: Latitude: Longitude: Mean Sea Level (MSL):

1.4 Site in-charge (Landing):

1.5 Date (Date: Month: Year):

1.6 Time (Hrs:Min):

1.7 Authorisation form signed:

2. **Landing Details** *To be filled by the Drone Operator at the Landing Site*

2.1 Unexpected event happened: If yes go to 5. If no continue filling

2.2 Landing Time (Hrs:Min):

2.3 Vehicle travelled in the scheduled path: Yes/No

2.4 If no, state the details:

2.5 Drone landed at scheduled site: Yes/No

2.6 If no, state the reason:

2.7 Aerial Distance covered (km):

2.8 Time travelled (Hrs:Min):

2.9 Maximum speed (m/s):

2.10 Altitude of flight (m): Flight altitude (MSL): Ground level:

**3. Drone Particulars:** *To be filled by the Drone Operator at the Landing Site*

3.1 Name of drone operator (Landing):

3.2 Battery capacity: Utilised (%): Remaining (%):

3.3 Digital data collected during the flight:

a. GNSS: Yes/No

b. Flight Dynamics: Yes/No

c. Vibration: Yes/No

3.4 Status of drone: Undamaged: Damaged:

3.5 Authorization form signed (Landing): Yes/No

3.6 Weather monitoring at landing site:

i. Cloud cover (%):

ii. Visibility range (in meters):

iii. Smog/fog: Yes/No

iv. Sunlight: Yes/No

v. Lightning: Yes/No

vi. Thunder: Yes/No

vii. Precipitation (%):

viii. Environmental temperature (°C):

ix. UV index:

x. Wind speed and direction (mph):

xi. Humidity (%):

**4. Carrier Details** *To be filled by the healthcare worker at the cold chain room*

4.1 Name of the HCW examiner (Landing):

4.2 Time taken in transportation of carrier box to healthcare facility (Hr: Min):

4.3 Name of the vaccine/tablet/syrup/medical supply:

4.4 No of doses:

4.5 Labels on the vaccine vials are intact: Yes/No

4.6 Expire date mentioned on the vials (Date: Month: Year):

4.7 Carrier Box:

Total number of vials/ tablets/syrup/etc:

Physical damage/leakage payload content: Yes/No,

If Yes, Number of damaged products:

Carrier Box is in good condition: Yes/No

Gel/Ice packs are properly placed: Yes/No

Digital Temperature logger is working: Yes/No

Temperature inside box (°C):

Carrier box sealed properly: Yes/No

Weight of box (kg):

Properly entered in the register: Yes/No

4.8 Authorization form signed (hard copy): Yes/No

**5. Unexpected events** *To be filled by the Drone Operator at the Take-Off Site*

5.1 Distance travelled (km):

5.2 Time travelled (Hrs: Min):

5.3 Speed of travel (m/s): Minimum: Maximum: Average:

5.4 Time of crash/loss (Hrs: Min):

5.5 Location of crash/loss: Place: Coordination:

5.6 Type of location: Urban/Forestry/Water bodies/Restricted or Sensitive areas/ Others

5.7 Damage to: Humans/Properties/Forest/Others:

5.8 Type of interruption: Technical failure: External interruption:

5.8.1 Technical: Battery/ Communication/ Others:

5.8.2 External factors: Humans/ Birds/ Buildings/towers/Trees/Extreme weather/others

5.9 Tried to returned to the take-off point: Yes/No

5.10 If yes, details:

5.11 Total number of sortie in this route:

5.12 Prior failure at this route:

5.13 No of successful sortie by this vehicle:

At this route:

Overall:

5.14 No of failure by this vehicle:

At this route:

Overall:

5.15: If place of crash/collision crash undetected:

## **6. Delivery particulars**

6.1 Medical supplies delivered to the landing point safely: Yes/No

6.2 If no, please state the reason:

**Signature of the coordinator**



**FLIGHT CHECKLIST**

<b>PRE FLIGHT</b>		<b>DURING FLIGHT</b>	<b>POST FLIGHT</b>
<b>At Office</b>		<b>After Launch</b>	<b>After Landing</b>
Aircraft Documentation NOTAM Local Regulation and permission Proximity to the airport Weather condition permits flying All batteries charged Flight gear check		Aircraft reached safe altitude Confirm observer has the aircraft in sight All systems green Satellite and GPS check Check telemetry Check battery remaining	Power down UAV Remove and safely store batteries Airframe inspection Check sensors/ aircraft to ensure any fault/ breakdown Transfer data and flight logs Make logbook entry
<b>In the field</b>		<b>Before Landing</b>	<b>Back at office</b>
Scan area for obstacles e.g. take off & landing site Wind check Daily flight report filled Assemble UAV, ensure screws tight and propeller check Battery securely mounted and connected Ensure GPS fix Confirm mission flight plan Operators checklist (integrated) RC remote check Final airframe inspection Flight crew briefing e.g. flight mission and safety Final weather check before launch		Ensure UAV flight done according to mission plan Scan landing area for any obstacles Wind check Observer briefing for landing All systems green	Flight and Maintenance Report Charge batteries SD Card cleaned and ready for use Airframe checked Data processed

**THE FOLLOWING REQUIREMENTS WITH REGARD TO INSPECTION, QUALITY, WARRANTY, MAINTENANCE AND RELATED SERVICES SHALL COMMONLY APPLY TO ALL THE SERVICES IN ALL THE SCHEDULES:**

**A. Drone Service Pre-Requisites**

The vendor/ agency shall ensure that the necessary permissions and clearances for drone (Unmanned Aircraft System – UAS) operations (DAN/ DIN etc.) are obtained from respective authorities wherever applicable such as, including, but not restricted to the following:

- i. Directorate General of Civil Aviation (DGCA) – bidders are requested to comply with the latest version DGCA Civil Aviation Requirements (CAR), Section 3-Air Transport, Series X, Part-I & Public Notices issued in this regard from time to time. The latest public notice of MoCA on Drone is provided herewith for kind perusal and actions.

AV-13024/12/2019-SDIT-

MoCA  
Government of India  
Ministry of Civil Aviation

Rajiv Gandhi Bhavan, New  
Delhi  
**08 June 2020**

**PUBLIC NOTICE**

**Subject: Voluntary disclosure of non-compliant drones flying in India**

1. Whereas, the Directorate General of Civil Aviation (DGCA) has issued the Civil Aviation Requirements (CAR), Section 3 – Air Transport Series X, Part I, Issue I, dated 27 August 2018 which regulates the use of drones in the Indian Airspace and these regulations provide process for obtaining Unique Identification Number (UIN), Unmanned Aircraft Operator Permit (UAOP) and other operational requirements.
  2. In order to facilitate the identification of civil drones and drone operators, a one-time opportunity for voluntary disclosure of such drones and drone operators was provided during 14-31 January 2020 vide public notice dated 13 January 2020 of this Ministry.
  3. Based on public request, another opportunity is being provided to persons in possession of drones to submit the required information to the government. The submission of requisite information will be through the online portal (<https://digitalsky.dgca.gov.in>), as earlier.
  4. On successful submission of the required information and documents, an Ownership Acknowledgement Number (OAN) and a Drone Acknowledgement Number (DAN) will be issued online. The OAN or DAN does not confer any right to operate the drone in India, if it does not fulfil the provisions given in the CAR.
  5. Ownership of a drone in India without a valid DAN or OAN shall invite penal action as per applicable laws.
- Any additional information or clarification may be sought from the Digital Sky helpdesk at [support-digisky@gov.in](mailto:support-digisky@gov.in). Sd/- 08.06.2020

(Amber Dubey) Joint Secretary to the Govt. of India



- ii. Ministry of Defence (MoD)
- iii. Ministry of Home Affairs (MHA)
- iv. Air Traffic Control (ATC)
- v. Local Police and District Administration etc.

- The above clearances, and permissions shall have to be mandatorily obtained prior to commencement of the flight operation and the agency shall have to also mandatorily submit a copy of the permissions and clearances received, to the designated officer of <TIA>.
- It shall be the responsibility of the agency to ensure that the drone operations do not take place without obtaining the relevant permissions from respective authorities.
- The agency shall be responsible for engaging required manpower to complete the work within the specified period.
- Prior to commencement of flight operation, the agency shall conduct necessary field visits for the study of the area for flight planning and establish Ground Control Points (GCPs), if required.
- Agency shall establish GCPs depending on the requirement to meet the desired specifications of the services
- Vendor/ Agency shall ensure that base station is established for each Drone flight.
- Vendor/ Agency shall ensure that endurance of each Drone for data acquisition shall not be less than 30 minutes
- The Vendor/ Agency shall deploy required number of resources on project to process the data and generate required outputs within the shortest possible time
- The Agency shall ensure that all flight data be brought into a single block and it shall be in the desired correction range
- Insurance – the Vendor/Agency should have adequate insurance to cover for the costs required in case of any damage to life & property caused by accident



**Bid Security Declaration Form**  
(On the letter head of the firm)

Date.....

(Tender no.....)

To

The Tender Inviting Authority,

Name of the State.....

I/We, the undersigned, declare that:

I/We understand that, according to your conditions, bids must be supported by a Bid Security Declaration.

I/We accept that I/We may be disqualified from bidding for any contract with you for a period of two year from the date of notification if I am / We are in a breach of any obligation under the bid conditions, because I/We

a) have withdrawn/modified/amended, impairs or derogates from the tender, my/our Bid during the period of bid validity specified in the form of Bid, or

b) having been notified of the acceptance of our Bid by the Tender Inviting Authority during the period of bid validity (i) fails or reuse to execute the contract, if required, or (ii) fail or refuse to furnish the Performance Security, in accordance with the Instructions to Bidders.

c) if I/we withdraw or modify our bids during the period of validity, or if we are awarded the contract and failed to sign the contract, or to submit a performance security before the deadline defined in the request for bids/ request for proposals documents, we will be suspended for a period of 02 years from being eligible to submit bids/proposals for contracts with the Tender inviting authority.

I/We understand this Bid Security Declaration shall cease to be valid if I am/we are not the successful Bidder, upon the earlier of (i) the receipt of your notification of the name of the successful Bidder, or (ii) thirty days after the expiration of the validity of my/our Bid.

Signed: (insert signature of person whose name and capacity are shown)

In the capacity of (insert legal capacity of person signing the Bid Securing Declaration)

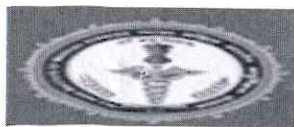
Name: (insert complete name of person signing the Bid Security Declaration)

Duly authorized to sign the bid for an on behalf of (insert complete name of Bidder)

Date on ..... day of ..... (Insert date of signing)

Seal (where appropriate)

**Please Note: - The above Undertaking duly signed and Stamped by the Authorized Signatory of the Company, must be attached with the technical bids.**



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Upgradation of posts in Autonomous Bodies - regarding

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Sat, Dec 27, 2025 at 12:51 PM

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **PMSSY V** <pmssysection5@gmail.com>

Date: Mon, Oct 16, 2023 at 1:46 PM

Subject: Upgradation of posts in Autonomous Bodies - regarding

To: Director AIIMS Bhopal <director@aiimsbhopal.edu.in>, director bhubaneswar <director@aiimsbhubaneswar.edu.in>, Director AIIMS Jodhpur <director@aiimsjodhpur.edu.in>, Director Patna <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, Director AIIMS Rishikesh <director@aiimsrishikesh.edu.in>, Exe.Dir. AIIMS RAEBARELI <rajwanshiarvind@hotmail.com>, Director AIIMS Nagpur <directoraiimsnagpur@gmail.com>, Director Mangalagiri <director@aiimsmangalagiri.edu.in>, ED AIIMS Kalyani <ed@aiimskalyani.edu.in>, ED AIIMS Guwahati <executive-director@aiimsguwahati.ac.in>, Director AIIMS Bibinagar <director.aiimsbbinagar@gmail.com>, Executive Director Gorakhpur <executivedirector@aiimsgorakhpur.edu.in>, Director AIIMS Bathinda <director@aiimsbathinda.edu.in>, Director AIIMS Deoghar <director@aiimsdeoghar.edu.in>, ED AIIMS Bilaspur <edaaiimsbils@gmail.com>, Director AIIMS Vijaypur <shakti810505@gmail.com>, DDA AIIMS Awantipora <rakeshkumar7123@yahoo.in>, Executive Director AIIMS Rajkot <ed.aiimsrakot@gmail.com>, Director AIIMS Madurai <drmhraosvims1957@gmail.com>, Executive Director AIIMS Darbhanga <madhabananda@gmail.com>  
Cc: DDA BHOPAL <dydir@aiimsbhopal.edu.in>, DDA Bhubaneswar <dda@aiimsbhubaneswar.edu.in>, DDA Jodhpur <dda@aiimsjodhpur.edu.in>, DDA AIIMS Patna <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, DDA AIIMS Rishikesh <dda@aiimsrishikesh.edu.in>, DDA RAEBARELI <ddaaiimsrbl@gmail.com>, DDA NAGPUR <dda@aiimsnagpur.edu.in>, DDA MANGALAGIRI <dda@aiimsmangalagiri.edu.in>, Dr. DDA AIIMS Kalyani <kpradip10@gmail.com>, DDA AIIMS Guwahati <dda@aiimsguwahati.ac.in>, DDA AIIMS BIBINAGAR <dda.aiimsbbinagar@gmail.com>, DDA GORAKHPUR <ashwanimahaur@gmail.com>, DDA BATHINDA <devender.rawat1@gmail.com>, DDA DEOGARH <amrendra.kumar72@gov.in>, dda bilaspur <ddaaiimsbilaspur@gmail.com>, DDA AIIMS Vijaypur, Jammu <ddaaiimsjammu@gmail.com>, DDA AIIMS Rajkot <dda.aiimsrakot@gmail.com>, DDA AIIMS Madurai <ddamadurai1189@gmail.com>, <raj.kumar28@nic.in>, US T.C Naulak <chinsum.n@nic.in>, <cl.mawi85@nic.in>

Respected Sir/Madam,

With reference to the subject cited above, Please find the attachment herewith.

**Note:** In case this email requires you to reply, you are requested to CC your reply to all the officers in CC to this email.

Yours faithfully,  
PMSSY-V  
Nirman Bhawan,  
746-A, A Wing,  
New Delhi-110001

DoE.pdf  
918K





File No. 15(1)/E.III (B)/2021  
Government of India  
Ministry of Finance  
Department of Expenditure

North Block, New Delhi.  
Dated the 10th October, 2023.

**OFFICE MEMORANDUM**

Subject: - Upgradation of posts in Autonomous Bodies – regarding.

All the Financial Advisors of various Ministries/Departments are aware of the provisions contained in this Ministry's OM No. 7(2) /E.Coord/2020 dated 4<sup>th</sup> September, 2020, providing, inter-alia, that no posts could be created in an Autonomous Body, except with the prior approval of the Department of Expenditure. So far as upgradation of posts is concerned, the same involves creation of post at a level higher than the level in which the post stands sanctioned. Therefore, by corollary, no post could be upgraded in an autonomous body, except with the prior approval of the Department of Expenditure.

2. In view thereof, if any view is taken by the Governing Body of an Autonomous Body regarding upgradation of a post, the same cannot be treated as the final decision *per se* as such a view is merely a recommendation and cannot supersede the provisions contained in the aforesaid OM dated 4.9.2020. All such recommendations are required to be processed by the concerned administrative Ministry with the concurrence of the concerned FA for seeking approval of the Department of Expenditure.

3. Accordingly, all the Financial Advisors are advised to keep the above provisions strictly in mind and follow them whenever any case for upgradation of posts is considered by the Administrative Ministry under their purview.

4. This issues with the approval of competent authority.

*B/a*  
(Bimal Kumar)  
Director  
Tel.23094106

To

Financial Advisers of Ministries/Departments of Government of India.

Copy to:

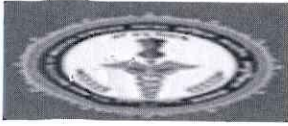
All the Secretaries to the Government of India

*Please circulate*

*12/10/23*

*US (F.III)*





Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

**Fwd: General instruction to Ministries / Departments for acquisitions / purchase of immoveable property other than land in Delhi / NCR -reg**

1 message

**DDA AIIMS PATNA** <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 12:51 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Ms. Chawnglienmaw** <cl.mawi85@nic.in>

Date: Thu, Oct 19, 2023 at 1:50 PM

Subject: Fwd: General instruction to Ministries / Departments for acquisitions / purchase of immoveable property other than land in Delhi / NCR -reg

To: director <director@aiimsbhopal.edu.in>, director <director@aiimsbhubaneswar.edu.in>, director <director@aiimsjodhpur.edu.in>, director <director@aiimspatna.org>, director <director@aiimsrshikesh.edu.in>, director <director@aiimsraipur.edu.in>, Executive Director Raebareli <ed.aiimsrbl@gmail.com>, director aiimsnagpur <director.aiimsnagpur@gmail.com>, director <director@aiismangalagiri.edu.in>, ed <ed@aiimskalyani.edu.in>, director <director@aiimsguwahati.ac.in>, Director AIIMS Bibinagar <director@aiimsbibinagar.edu.in>, executivedirector <executivedirector@aiimsgorakhpur.edu.in>, director <director@aiimsbathinda.in>, drsaurabh68 <drsaurabh68@gmail.com>, office ed <office.ed@aiimsbilaspur.edu.in>, directoraiimsjammu <directoraiimsjammu@gmail.com>, ed aiimsrajkot <ed.aiimsrajkot@gmail.com>, madhabananda <madhabananda@gmail.com>, <aiimsdbg22@gmail.com>  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, dda <dda@aiimsjodhpur.edu.in>, dda <dda@aiimspatna.org>, dda <dda@aiimsraipur.edu.in>, dda <dda@aiimsrshikesh.edu.in>, ddaaiimsrbl <ddaaiimsrbl@gmail.com>, ddaaiimsnagpur1 <ddaaiimsnagpur1@gmail.com>, <dda@aiimsnagpur.edu.in>, dda <dda@aiismangalagiri.edu.in>, Siddhartha Nandy <siddhartha.nandy@gov.in>, <dda@aiimsguwahati.ac.in>, dda <dda@aiimsgorakhpur.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, <adminoffice@aiimsbathinda.in>, <dda@aiimsdeoghar.edu.in>, <dda@aiimsbilaspur.edu.in>, <ddaaiimsjammu@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, <ddamadurai1189@gmail.com>, Shri Raj Kumar Deputy Secretary <raj.kumar28@nic.in>, T Chinsum Naulak <chinsum.n@nic.in>

Sir/Madam,

I am directed to forward Department of Expenditure's OM No. 15(16)/2023-E.II(A) dated 26.09.2023 on the above mentioned subject for information and compliance.

With regards,  
Chawnglienmaw,  
Section Officer (PMSSY-V),  
M/o Health and Family Welfare b

**From:** "Shri Raj Kumar Deputy Secretary" <raj.kumar28@nic.in>

**To:** "Ms. Chawnglienmaw" <cl.mawi85@nic.in>, "T Chinsum Naulak" <chinsum.n@nic.in>

**Sent:** Thursday, October 19, 2023 12:10:02 PM

**Subject:** Fwd: General instruction to Ministries / Departments for acquisitions / purchase of immoveable property other than land in Delhi / NCR -reg

Forward to all AIIMS for information and compliance

Raj Kumar  
राज कुमार  
Deputy Secretary  
PMSSY  
Ministry of Health and Family Welfare  
Tel. no. 23062555

---

**From:** "ANKITA MISHRA BUNDELA" <js-pmssy-mohfw@gov.in>  
**To:** "PRIYADARSHIKA SRIVASTAVA" <priyadarshika.s@gov.in>, "Shri Raj Kumar Deputy Secretary" <raj.kumar28@nic.in>, "Narendra K Oza" <Nk.oza@gov.in>, "Subrata Hazra" <subrata.hazra@nic.in>  
**Sent:** Wednesday, October 18, 2023 5:36:09 PM  
**Subject:** Fwd: General instruction to Ministries / Departments for acquisitions / purchase of immoveable property other than land in Delhi / NCR -reg

---

**From:** "DEEPAK KUMAR BHATT" <healthcdn-mohfw@gov.in>  
**To:** "Vandana Jain" <vandana.jain@nic.in>, "Indrani Kaushal" <indrani.k@nic.in>, "Elangbam Robert Singh" <robert.elangbam@gov.in>, "Rajiv Manjhi" <rajiv.manjhi@nic.in>, "Dr. (Mr.) P. Ashok Babu" <jsrch-mohfw@gov.in>, "Reena Singh" <reena.singh@nic.in>, "ARADHANA PATNAIK" <jsadm-mohfw@gov.in>, "Anjali Rawat DDG Stats" <anjali.rawat79@nic.in>, "Dr. Manashvi kumar" <jstraining-mohfw@gov.in>, "Dr Kavitha Gotru" <cca-mohfw@nic.in>, "Vipul Aggarwal" <dr.vipul@nic.in>, "ANKITA MISHRA BUNDELA" <js-pmssy-mohfw@gov.in>, "Dr. K. K. Tripathy" <kk.tripathy@nic.in>  
**Cc:** "Sudhansh Pant" <secyhfw@nic.in>, "Jaideep Kumar Mishra" <asfa-mhfw@nic.in>, "Ms. V Hekali Zhimomi" <zhimomiv@ias.nic.in>, "ROLI SINGH" <asfr-mohfw@gov.in>, "L Sweety Changsan" <lschangsan@nic.in>, "Rakesh Kumar" <rk.singh67@nic.in>, "Arvind kukrety DDC" <arvindkukrety@cdsco.nic.in>, "Amit Kumar" <amit.kumar82@nic.in>  
**Sent:** Wednesday, October 18, 2023 4:25:50 PM  
**Subject:** General instruction to Ministries / Departments for acquisitions / purchase of immoveable property other than land in Delhi / NCR -reg

Sir/Madam,

Please find the attached OM dated 26.09.2022 on the above mentioned subject for information.

*Kind regards,*

Deepak Kumar Bhatt  
Section Officer  
Coordination Section,  
Ministry of Health and Family Welfare  
Department of Health and Family Welfare

011-2306-1866 | healthcdn-mohfw@gov.in

525 C, Nirman Bhawan, New Delhi 110011









No. 15(16)/2023-E.II(A)  
Government of India  
Ministry of Finance  
Department of Expenditure

\*\*\*\*\*

North Block, New Delhi  
Dated the 26 September, 2023

**OFFICE MEMORANDUM**

**Sub:** General instructions to Ministries/Departments for acquisition/ purchase of immoveable property other than land in Delhi/NCR - reg.

Keeping in view ongoing projects and the need to optimize expenditure, the undersigned is directed to inform that any acquisition/purchase of immovable property other than land viz. buildings/flats etc. by Central Government Ministries/Departments in Delhi/NCR region shall be done with prior concurrence of Department of Expenditure regardless of the amount involved. Further, any acquisition / transfer/ alienation of land would continue to be governed by the existing provisions.

2. This is issued with the approval of Finance Secretary & Secretary (Expenditure)

  
(Avinash K. Nilankar)

Deputy Secretary to the Government of India

To

- ✓
- (i) The Secretaries of all Ministries / Departments of Govt. of India - as per list attached.
  - (ii) All Financial Advisors - as per list attached.



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

---

**Fwd: Payment of Gratuity Act, 1972 and the rules made there under -reg.**

1 message

---

DDA AIIMS PATNA <dda@aiimspatna.org>  
To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Sat, Dec 27, 2025 at 12:42 PM

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>  
Date: Wed, Oct 25, 2023 at 12:39 PM  
Subject: Payment of Gratuity Act, 1972 and the rules made there under -reg.  
To: <director@aiimspatna.org>  
Cc: DDA AIIMS PATNA <dda@aiimspatna.org>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, <ak.biswas57@nic.in>, <dev.gothal@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards

PMSSY-IV Section

Ministry of Health and Family Welfare

---

Letter AIIMS Patna 2.pdf  
77K

I/3624088/2023

F. No. Z-28015/65/2023-PMSSY-IV  
Government of India  
Ministry of Health and Family Welfare  
(PMSSY-IV Section)

\*\*\*\*\*

745A Nirman Bhavan, Nirman Bhawan, New Delhi

Dated 25th October, 2023

To,

The Executive Director,  
AIIMS Patna

**Subject: Payment of Gratuity Act, 1972 and the rules made there under -reg.**

Sir,

I am directed to refer to AIIMS Patna's letter No. F-148035/AIIMS/Pat/Admin./2023/02 dated 29.09.2023 on the above mentioned subject and to state that the letter of AIIMS Patna has not given any details of the background for the letter of Labour Commissioner. It is not clear what irregularities have been pointed out in the Inspection Report cum Show cause notice dated 18.01.2023. Therefore, AIIMS Patna is requested to send a detailed clarification with supporting documents in the matter. It is also requested to check and intimate the procedure being followed by the other fully functional AIIMS in the matter.

Yours faithfully,

Signed by

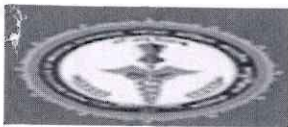
(K Balasubramanian)

Under Secretary to the Government of India

Tele : 011-23063190

Copy to: DD(A), AIIMS Patna





Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

**Fwd: Implementation of e-office in Attached Offices/Subordinate Officers / Autonomous Bodies / CPSEs of the MoHFW -reg.**

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 12:43 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Tue, Nov 7, 2023 at 12:54 PM

Subject: Implementation of e-office in Attached Offices/Subordinate Officers / Autonomous Bodies / CPSEs of the MoHFW -reg.

To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiimsmangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Lt Col Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, <ak.biswas57@nic.in>, <dev.gothal@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards


PMSSY-IV Section

Ministry of Health and Family Welfare

---

**2 attachments**

 **Letter All AIIMS 28.pdf**  
69K

 **Encl 20.10.2023.pdf**  
1444K

I/3627154/2023

F. No. Z-28015/79/2023-PMSSY-IV  
Government of India  
Ministry of Health and Family Welfare  
(PMSSY-IV Section)

\*\*\*\*\*

Room No. 745A, Nirman Bhawan, New Delhi  
Dated November, 2023

To,

The Director/ Executive Director, all new AIIMS

**Subject: Implementation of e-office in Attached  
Offices/Subordinate Officers / Autonomous Bodies / CPSEs of  
the MoHFW -reg.**

Sir,

I am directed to forward herewith a copy of OM No. Z-28011/01/2021-Estt.I-Part(1) dated 20.10.2023 on the above mentioned subject and to request to provide the following information in the format given below (in excel sheet) to this Division and to Establishment-I Section, Ministry of HFW on e-mail ID: sp.gahlaut@nic.in immediately:

Status e-office has been implemented				
Name of Wing/ Division		e-Office implementation status (please write against relevant column)		
S. No.	Name of the Abs/Institutes/Hospitals, etc.	e-office fully implemented	e-office partially implemented	e-office process not yet stated

Yours faithfully,

Signed by Arun Kumar  
Biswas

Date: 06-11-2023 19:22:32

Reason: Approved  
(Arun Kumar Biswas)

Under Secretary to the Govt. of India

Tele : 011-23061343

Copy to:

DD (A), all new AIIMS



I/3627154/2023

FD. 3383209/23

Most Immediate

No.Z.28011/01/2021-Estt.I-Part(1)  
Government of India  
Department of Health and F.W.  
(Establishment I Section)

New Delhi Nirman Bhawan  
Dated 20.10.2023

OFFICE MEMORANDUM

**Subject: Implementation of e-office in Attached offices/Subordinate Offices/Autonomous Bodies/CPSEs of the Ministry of Health & Family Welfare-reg.**

\*\*\*\*\*

The undersigned is directed to refer to this Division's OM. of even number dated 25.08.2023 vide which all Programme Divisions were requested to get the e-Office adopted and implemented in all Attached Offices/Subordinate Offices/Autonomous Bodies/CPSEs under the aegis of the Ministry of Health & Family Welfare (copy attached for ready reference). Subsequently, the status of e-office implementation has continuously been reviewed in the Senior Officers' Meetings (SoMs) held under the Chairmanship of Secretary (Health). In the SoM held on 18.10.2023, Secretary(Health) has directed that all Divisions should immediately furnish the status of e-office implementation process in respect of the respective ABs/Institutes/Hospitals, etc. to Administration Division for compilation, along with and list of ABs/Institutes/Hospitals, etc., where this process is still incomplete.

2. All Additional Secretaries, Joint Secretaries and Economic Advisors are, accordingly, requested to please issue necessary directions for arranging and forwarding (wing-wise) compiled information to this Division in the following formats (in excel sheet):-

Status e-office has been implemented				
Name of Wing / Division		e-Office implementation Status (please write against relevant column)		
S.No.	Name of the ABs/Institutes/Hospitals, etc	e-office fully implemented	e-office partially implemented	e-office process not yet started

3. It is requested that the above information may be please provided on or before 26<sup>th</sup> October, 2023.

Encl. A/A

To

JS(PAB) / JS(AMB) / JS(MK) / JS(VA) / JS(VJ) / JS(ERS) / JS(RM) / EA(İK) / EA(KKT)

Copy to: PPS to AS&MD / PPS to AS(RS) / PPS to AS(VHZ)

Copy for information to: 1. JS(Admn)

2. PSO to Secretary(Health)

(Sushil P. Gahlaut)

Director(Establishment)

Email: sp.gahlaut@nic.in

No. Z.28011/01/2021-Estr.1  
Government of India  
Ministry of Health and Family Welfare  
(Department of Health and Family Welfare)


Nirman Bhavan, New Delhi  
Dated the 25<sup>th</sup> August, 2023

OFFICE MEMORANDUM

Subject: implementation of e-Office in Attached Offices/Subordinate Offices/Autonomous Bodies/CPSEs of the Ministry of Health and Family Welfare - Reg.

The undersigned is directed to say that instructions were earlier issued on 16th April, 2021 to get the e-Office adopted and implemented in all Attached Offices/Subordinate Offices/Autonomous Bodies/CPSEs of Ministry of Health and Family Welfare. During Senior Officers Meeting held on 22.08.2023, it was directed/reiterated that Heads of all Autonomous Bodies/Institutes may be asked to implement e-office in full and monitor file and receipt disposal regularly.

2. All Joint Secretaries/EA are requested to issue necessary directions to the entities under their Administrative Control for implementation of e-office in full and monitor file and receipt disposal regularly.

  
(Rajeev Jaiswal)  
Under Secretary to the Govt. of India  
Telefax: 23061323

To

All Joint Secretaries/EA of MoHFW (through e-Office)

Copy to:-

1. PSO to Secretary (H&FW)
2. PPS to All Additional Secretaries, MoHFW



**Most Immediate**

No.Z.28011/01/2021-Estt.I-Part(1)  
Government of India  
Department of Health and F.W.  
(Establishment I Section)

New Delhi Nirman Bhawan  
Dated 20.10.2023

**OFFICE MEMORANDUM**

**Subject: Implementation of e-office in Attached offices/Subordinate Offices/Autonomous Bodies/CPSEs of the Ministry of Health & Family Welfare-reg.**

\*\*\*\*\*

The undersigned is directed to refer to this Division's OM of even number dated 25.08.2023 vide which all Programme Divisions were requested to get the e-Office adopted and implemented in all Attached Offices/Subordinate Offices/Autonomous Bodies/CPSEs under the aegis of the Ministry of Health & Family Welfare (copy attached for ready reference). Subsequently, the status of e-office implementation has continuously been reviewed in the Senior Officers' Meetings (SoMs) held under the Chairmanship of Secretary (Health). In the SoM held on 18.10.2023, Secretary(Health) has directed that all Divisions should immediately furnish the status of e-office implementation process in respect of the respective ABs/Institutes/Hospitals, etc. to Administration Division for compilation, along with and list of ABs/Institutes/Hospitals, etc., where this process is still incomplete.

2. All Additional Secretaries, Joint Secretaries and Economic Advisors are, accordingly, requested to please issue necessary directions for arranging and forwarding (wing-wise) compiled information to this Division in the following formats (in excel sheet):-

Status e-office has been implemented				
Name of Wing / Division		e-Office implementation Status (please write against relevant column)		
S.No.	Name of the ABs/Institutes/Hospitals, etc	e-office fully implemented	e-office partially implemented	e-office process not yet started

3. It is requested that the above information may be please provided on or before 26<sup>th</sup> October, 2023.

Encl. A/A

To

JS(PAB) / JS(AMB) / JS(MK) / JS(VA) / JS(VJ) / JS(ERS) / JS(RM) / EA(IK) / EA(KKT)

Copy to: PPS to AS&MD / PPS to AS(RS) / PPS to AS(VHZ)

Copy for information to: 1. JS(Admn)  
2. PSO to Secretary(Health)

(Sushil P. Gahlaut)  
Director(Establishment)  
Email: sp.gahlaut@nic.in

No. Z.28011/01/2021-Estt.I  
Government of India  
Ministry of Health and Family Welfare  
(Department of Health and Family Welfare)

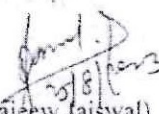
Nirman Bhavan, New Delhi  
Dated the 25<sup>th</sup> August, 2023

OFFICE MEMORANDUM

Subject: implementation of e-Office in Attached Offices/Subordinate Offices/Autonomous Bodies/CPSEs of the Ministry of Health and Family Welfare – Reg.

The undersigned is directed to say that instructions were earlier issued on 16th April, 2021 to get the e-Office adopted and implemented in all Attached Offices/Subordinate Offices/Autonomous Bodies/CPSEs of Ministry of Health and Family Welfare. During Senior Officers Meeting held on 22.08.2023, it was directed/reiterated that Heads of all Autonomous Bodies/Institutes may be asked to implement e-office in full and monitor file and receipt disposal regularly.

2 All Joint Secretaries/EA are requested to issue necessary directions to the entities under their Administrative Control for implementation of e-office in full and monitor file and receipt disposal regularly.

  
(Rajeev Jaiswal)  
Under Secretary to the Govt. of India  
Telefax: 23061323

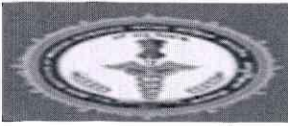
To

All Joint Secretaries/EA of MoHFW (through e-Office)

Copy to: -

1. PSO to Secretary (H&FW)
2. PPS to All Additional Secretaries, MoHFW





Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Regularisation of services of contractual employees.

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 12:45 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Tue, Nov 7, 2023 at 12:42 PM

Subject: Regularisation of services of contractual employees.

To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiimsmangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Lt Col Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaiimsbilaspur <ddaiimsbilaspur@gmail.com>, ddaiimsjammu <ddaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <cao.finance@aiimsbhopal.edu.in>, <fa@aiimsbhopal.edu.in>, <fa@aiimsbhubaneswar.edu.in>, <aco@aiimsjodhpur.edu.in>, AMIT MUNDRA <amitpmundra@gmail.com>, <fa@aiimsjodhpur.edu.in>, <fa@aiimspatna.org>, <fa@aiimsraipur.edu.in>, fcao@aiimsraipur.edu.in <fcao@aiimsraipur.edu.in>, <fa@aiimsrishikesh.edu.in>, <aiimsrbl@gmail.com>, <fa@aiimsmangalagiri.edu.in>, <fa@aiimsnagpur.edu.in>, <fic-finance@aiimskalyani.edu.in>, <abhayk@cag.gov.in>, <accounts@aiimsbilaspur.edu.in>, <acctsofficeraimjsammu@gmail.com>, <fa@aiimsguwahati.ac.in>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, <ak.biswas57@nic.in>, <dev.gothal@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards



PMSSY-IV Section  
Ministry of Health and Family Welfare

---

**3 attachments**



**Encl 11.12.2006.pdf**  
48K



**Encl 07.10.2020.pdf**  
1911K



**Letter All AIIMS 27.pdf**  
94K

No. 49019/1/2006-Estt©  
Govt. of India  
Ministry of Personnel, Public Grievances & Pensions  
(Department of Personnel & Training)

New Delhi, dated the 11<sup>th</sup> December, 2006

**OFFICE MEMORANDUM**

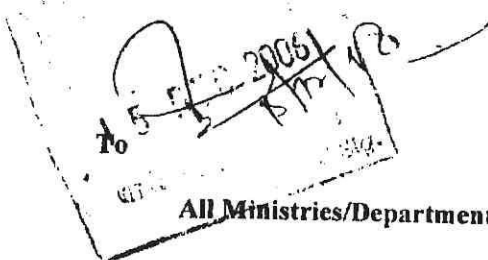
**Subject: Regularisation of qualified workers appointed against sanctioned posts in irregular manner.**

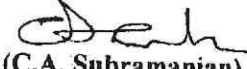
-----

The undersigned is directed to say that the instructions for engagement of casual workers enunciated in this Department's OM No. 49014/2/86 Estt.(C) dated 7<sup>th</sup> June, 1988 as amplified from time to time, inter-alia provided that casual workers and persons on daily wages should not be recruited for work of regular nature. They could be engaged only for work of casual or seasonal or intermittent nature, or for work which is not of full time nature for which regular post can not be created. Attention is also invited to this Department's OM No. 28036/1/2001-Estt. (D) dated 23<sup>rd</sup> July, 2001 wherein it was provided that no appointment shall be made on ad hoc basis by direct recruitment from open market.

2. A Constitution bench of the Supreme Court in civil appeal No. 3595-3612/1999 etc. in the case of Secretary State of Karnataka and Ors. Vs. Uma Devi and others has reiterated that any public appointment has to be in terms of the Constitutional scheme. However, the Supreme Court in para 44 of the aforesaid judgement dated 10.4.2006 has directed that the Union of India, the State Governments and their instrumentalities should take steps to regularize as a one time measure the services of such irregularly appointed, who are duly qualified persons in terms of the statutory recruitment rules for the post and who have worked for ten years or more in duly sanctioned posts but not under cover of orders of courts or tribunals. The Apex Court has clarified that if such appointment itself is in infraction of the rules or if it is in violation of the provisions of the Constitution, illegality cannot be regularized.

3. Accordingly the copy of the above judgement is forwarded to all Ministries/Departments for implementation of the aforesaid direction of the Supreme Court.



  
(C.A. Subramanian)  
Director

All Ministries/Department of the Govt. of India etc.

No.49014/7/2020-Estt.(C)  
Government of India  
Ministry of Personnel, PG & Pensions  
Department of Personnel & Training

\*\*\*\*\*

North Block, New Delhi  
Dated: 7<sup>th</sup> October, 2020

**OFFICE MEMORANDUM**

Subject: Regularisation of qualified workers appointed against sanctioned posts- Uma Devi judgement- facts/clarification- reg.

The undersigned is directed to say that the instructions for Regularisation of qualified workers appointed against sanctioned posts in the light of Hon'ble Supreme Court's Judgement dated 10.04.2006 in case of Uma Devi were issued vide DoPT's O.M. No. 49019/1/2006-Estt(C) dated 11.12.2006. The above instructions state that:

*"... in the case of Secretary State of Karnataka and Ors. Vs. Uma Devi it was directed that any public appointment has to be in terms of the Constitutional scheme. However, the Supreme Court in **para 44** of the aforesaid judgement directed that the Union of India, the State Governments and their instrumentalities should take steps to regularize as a one time measure the services of such irregularly appointed, who are duly qualified persons in terms of the statutory recruitment rules for the post and who have worked for ten years or more in duly sanctioned posts but not under cover of orders of courts or tribunals.*

*Accordingly a copy of the above judgement is forwarded to all Ministries/Departments for implementation of the aforesaid direction of the Supreme Court."*

2. In this regard, various cases have been received in this department seeking clarifications regarding implementation of the above judgement. Therefore, it has been decided that further important aspects of the judgement dated 10.04.2006 may be enunciated for the purpose of clarity of the judgement. These important points as quoted from the judgement are reproduced below:

- i. *Equality of opportunity is the hallmark for public employment and it is in terms of the Constitutional scheme only (Para 1).*
- ii. *The filling of vacancies cannot be done in a haphazard manner or based on patronage or other considerations (Para 2).*
- iii. *The State is meant to be a model employer and can make appointments only in accordance with the rules framed under Article 309 of the Constitution (Para 5).*



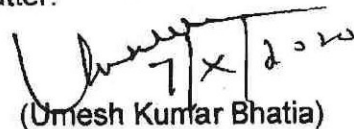
- iv. *Regularization is not and cannot be a mode of recruitment by any State within the meaning of Article 12 of the Constitution of India, or any body or authority governed by a statutory Act or the Rules framed thereunder. Regularization, furthermore, cannot give permanence to an employee whose services are ad hoc in nature. The fact that some persons had been working for a long time would not mean that they had acquired a right for regularization. (Para 27).*
- v. *Any regular appointment made on a post under the State or Union without issuing advertisement inviting applications from eligible candidates and without holding a proper selection where all eligible candidates get a fair chance to compete would violate the guarantee enshrined under Article 16 of the Constitution (Para 30).*
- vi. *If it is a contractual appointment, the appointment comes to an end at the end of the contract (Para 34).*
- vii. *Regularization, if any already made, but not sub judice, need not be reopened based on this judgment, but there should be no further by-passing of the Constitutional requirement and regularizing or making permanent, those not duly appointed as per the Constitutional scheme (Para 44).*
- viii. *In cases relating to service in the commercial taxes department, the High Court has directed that those engaged on daily wages, be paid wages equal to the salary and allowances that are being paid to the regular employees of their cadre in government service, with effect from the dates from which they were respectively appointed. The objection taken was to the direction for payment from the dates of engagement. We find that the High Court had clearly gone wrong in directing that these employees be paid salary equal to the salary and allowances that are being paid to the regular employees of their cadre in government service, with effect from the dates from which they were respectively engaged or appointed. It was not open to the High Court to impose such an obligation on the State when the very question before the High Court in the case was whether these employees were entitled to have equal pay for equal work so called and were entitled to any other benefit. They had also been engaged in the teeth of directions not to do so. We are, therefore, of the view that, at best, the Division Bench of the High Court should have directed that wages equal to the salary that are being paid to regular employees be paid to these daily wage employees with effect from the date of its judgment. Hence, that part of the direction of the Division Bench is modified and it is directed that these daily wage earners be paid wages equal to the salary at the lowest grade of employees of their cadre in the Commercial Taxes Department in government service, from the date of the judgment of the Division Bench of the High Court. Since, they are only daily wage earners, there would be no question of other allowances being paid to them (Para 46).*



3. Additionally, it is also stated that vide the judgement of **State of Karnataka Vs. M.L. Kesari dated 03.08.2010**, the Hon'ble Supreme Court had clarified some aspects of the Uma Devi judgement which are pertinent for proper understanding of the said judgement dated 10.04.2006. These aspects brought out in the M.L. Kesari judgement are reproduced as under:

- i. *The employee concerned should have worked for 10 years or more in duly sanctioned post without the benefit or protection of the interim order of any court or tribunal. In other words, the State Government or its instrumentality should have employed the employee and continued him in service voluntarily and continuously for more than ten years.*
  - ii. *The appointment of such employee should not be illegal, even if irregular. Where the appointments are not made or continued against sanctioned posts or where the persons appointed do not possess the prescribed minimum qualifications, the appointments will be considered to be illegal. But where the person employed possessed the prescribed qualifications and was working against sanctioned posts, but had been selected without undergoing the process of open competitive selection, such appointments are considered to be irregular.*
  - iii. *The employees who were entitled to be considered in terms of Para 53 of the decision in Umadevi, will not lose their right to be considered for regularization, merely because the one-time exercise was completed without considering their cases, or because the six month period mentioned in para 44 of Umadevi has expired. The one-time exercise should consider all daily-wage/adhoc/those **employees who had put in 10 years of continuous service as on 10.4.2006** without availing the protection of any interim orders of courts or tribunals. If any employer had held the one-time exercise in terms of para 44 of Umadevi, but did not consider the cases of some employees who were entitled to the benefit of para 44 of Umadevi, the employer concerned should consider their cases also, as a continuation of the one-time exercise. **The one time exercise will be concluded only when all the employees who are entitled to be considered in terms of Para 44 of Umadevi, are so considered.***
4. It is also clarified that regularisation under Uma Devi judgement was only a **one time exercise**.
5. It is also emphasized that all concerned administrative authorities should take steps to effectively defend the Court cases on the basis of principles in the Uma Devi judgement and instructions of DoPT within the limitation period without giving any scope to the Courts

to decide the cases against the Government on grounds of delay in filing its reply/appeal. Any laxity in the matter to comply with these instructions leading to adverse orders of the Courts shall be viewed seriously inviting disciplinary action in the matter.

  
(Umesh Kumar Bhatia)

Deputy Secretary to the Government of India  
Telefax: 23094471

To:

All Ministries/Departments of Government of India.  
(As per the Standard List)



1/3 6266 66/2023

**Z-28015/58/2023-PMSSY-IV**  
**Government of India**  
**Ministry of Health & Family Welfare**  
**PMSSY-IV Section**

Room No. 745-A, Nirman Bhawan, New Delhi

Dated the 3rd November, 2023

To

Directors/Executive Directors of all new AIIMS

**Subject: Regularisation of services of contractual employees.**

Madam/Sir,

I am directed to state that it has come to the notice of this Ministry that some of the new AIIMS are placing proposals before their Governing Bodies/Institute Bodies for approval for regularisation of services of contractual employees. In this regard, extant DoPT instructions and Supreme Court Judgement on the subject matter is as follows:

(i) *DoPT OM No.49-19/1/2006-Estt(c) dated 11.12.2006 has mentioned that as amplified from time to time, inter-alia provided that casual workers and persons on daily wages should not be recruited for work of regular nature. They could be engaged only for work of casual or seasonal or intermittent nature, or for work which is not of full time nature for which regular posts cannot be created. It is also mentioned that no appointment shall be made on ad hoc basis by direct recruitment from open market.*

(ii) *A constitution bench of the Supreme Court in Civil Appeal No.3595-1612/1999 etc. in the case of Secretary State of Karnataka and Ors. Vs Uma Devi and others has reiterated that any public appointment has to be in terms of the Constitutional Scheme.*

(iii) Further, vide OM No.49014/7/2020-Estt. (C) dated 07.10.2020 DoPT has reiterated the same. It has inter alia been mentioned that –

- a. ***The filing of vacancies cannot be done in a haphazard manner or based on patronage or other considerations.***
- b. *Regularisation is not and cannot be made a mode of recruitment by any State within the meaning of Article 12 of the Constitution of India, or anybody or authority governed by a Statutory Act or the Rules made thereunder. Regularisation, furthermore cannot give permanence to an employee whose*

I/3626666/2023

*services are ad hoc in nature. **The fact that some persons had been working for a long time would not mean that they had acquired a right for regularisation.***

- c. *Any regular appointment made on a post under the State or Union without issuing advertisement inviting applications from eligible candidates and without holding a proper selection where all eligible candidates get a fair chance to compete would violate the guarantee enshrined under Article 16 of the Constitution.*
- d. *If it is a contractual appointment, the appointment comes to an end at the end of the contract.*

2. Accordingly, all the new AIIMS are directed to strictly comply with the aforementioned Supreme Court Judgement and extant DoPT instructions on the subject matter.

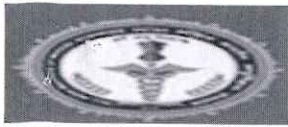
Yours faithfully

Encl. As above

Signed by  
K.balasubramanian  
(K. Balasubramanian)  
Under Secretary to the Government of India  
Date: 03-11-2023 19:28:08  
Tel. 23060010

Copy to: DDA /FA of all New AIIMS.





Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Fixation of pay of retired government servants.

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Sat, Dec 27, 2025 at 12:44 PM

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Wed, Nov 8, 2023 at 6:48 PM

Subject: Fixation of pay of retired government servants.

To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiismangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiismangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Lt Col Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <cao.finance@aiimsbhopal.edu.in>, <fa@aiimsbhopal.edu.in>, <fa@aiimsbhubaneswar.edu.in>, <aco@aiimsjodhpur.edu.in>, AMIT MUNDRA <amitpmundra@gmail.com>, <fa@aiimsjodhpur.edu.in>, <fa@aiimspatna.org>, <fa@aiimsraipur.edu.in>, fcao@aiimsraipur.edu.in <fcao@aiimsraipur.edu.in>, <fa@aiimsrishikesh.edu.in>, <aiimsrbl@gmail.com>, <fa@aiismangalagiri.edu.in>, <fa@aiimsnagpur.edu.in>, <fic-finance@aiimskalyani.edu.in>, <abhayk@cag.gov.in>, <accounts@aiimsbilaspur.edu.in>, <acctsofficeraimsjammu@gmail.com>, <fa@aiimsguwahati.ac.in>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, <ak.biswas57@nic.in>, <dev.gothal@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards



PMSSY-IV Section  
Ministry of Health and Family Welfare

---

**2 attachments**



**Letter All AIIMS 57.pdf**  
91K



**Encl 13.10.2023.pdf**  
515K

I/3627837/2023

Z-28016/123/2021-PMSSY-IV (Part 1)  
Government of India  
Ministry of Health & Family Welfare  
(PMSSY-IV Division)  
\*\*\*\*\*

745 A, Nirman Bhawan, New Delhi.  
Date: 08.11.2023

To

The Directors/Executive Directors of all new AIIMS.

**Subject: Fixation of pay of retired government servants.**

Madam/Sir,

I am directed to state that this Ministry had consulted Department of Expenditure in connection with fixation of pay of retired government servants. Vide MoF (DoE) ID No. 03-25/2020-E.III (A) dated 13.10.2023 (copy enclosed), Department of Expenditure has advised that *the principles of remuneration of retired Central Government servants as contained in DoPTs OM No.3(3)/2016-Estt. (Pay.II) dated 01.05.2017 provide that pay plus gross pension on re-employment not to exceed Rs.2,25,000/- i.e. Pay Level 17 as applicable to Secretary to Government of India. Further, this Department's guidelines dated 09.12.2020 on engagement of retired Central Government servants on contract basis including as Consultants states that admissible monthly remuneration shall be arrived at by deducting the basic pension from the pay drawn at the time of retirement. Therefore, the basic principle of remuneration of retired Government servants appointed on contract basis or on re-employment is pay minus pension.*

2. There may be instances where pay of retired government servants appointed on contract basis or on re-employment in your Institute have been fixed without deducting pension. It may be ensured that the laid down principle of pay fixation is scrupulously followed and in case the same has not been done the pay of the concerned officer should be re-fixed and excess amount drawn by them should be recovered under intimation to the Ministry. **The Compliance report in the matter should be sent within 10 days positively.**

Encl(1): As above

Yours faithfully,

Signed by  
(K. Balasubramanian)  
Under Secretary to the Government  
Tele: 011-23060010  
Date: 08-11-2023 17:52:03

**Copy to: ( for appropriate action)**

**Deputy Director (Admn.)/FA of all new AIIMS**



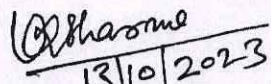
Ministry of Finance  
Department of Expenditure  
( E.III-A Branch )

Ministry of Health & Family Welfare may please refer to their proposal sent in e-file bearing No.Z-28016/123/2021-PMSSY-IV(Part-I)/Computer No.300592807 seeking advice of this Department regarding pay fixation in respect of Dr Dinesh Kumar Singh, Dr Hanumantha Rao and Dr C.S. Katoch who have been appointed Executive Directors, AIIMS at Bathinda, Madurai and Rajkot respectively by the Appointments Committee of the Cabinet(ACC).

2. The principles of remuneration of retired Central Government servants as contained in DoPT's OM No.3(3)/2016-Estt(Pay.II), dated 01.05.2017 provide that pay plus gross pension on re-employment not to exceed Rs.2,25,000/- i.e. Pay Level 17 as applicable to Secretary to the Government of India. Further, this Department's guidelines dated 09.12.2020 on engagement of retired Central Government servants on contract basis including as Consultants states that admissible monthly remuneration shall be arrived at by deducting the basic pension from the pay drawn at the time of retirement. Therefore, the basic principle of remuneration of retired Government servants appointed on contract basis or on re-employment is pay minus pension.

3. In the present cases, the ACC has approved the appointment of the above mentioned officers on deputation including short term contract/contract basis for a period of 5 years or till the incumbent attains the age of 70 years, or until further orders, whichever is the earliest. Therefore, the pay of the above mentioned officers, **those appointed after retirement**, may be fixed by deducting their pension from the pay drawn at the time of retirement.

4. This issues with the approval of the competent authority.

  
13/10/2023  
( Vijay Kumar Sharma )  
Under Secretary

AS&FA, Ministry of Health & FW, Nirman Bhawan, New Delhi.  
MoF (DoE) ID No.03-25/2020-E.III(A), dated: 13.10.2023.





Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## **Fwd: Instructions relating to writing of APARs of officers**

1 message

**DDA AIIMS PATNA** <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 12:44 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Prmsy Section** <prmsysection@gmail.com>

Date: Mon, Nov 13, 2023 at 12:53 PM

Subject: Instructions relating to writing of APARs of officers

To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiimsmangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Lt Col Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <cao.finance@aiimsbhopal.edu.in>, <fa@aiimsbhopal.edu.in>, <fa@aiimsbhubaneswar.edu.in>, <aco@aiimsjodhpur.edu.in>, AMIT MUNDRA <amitpmundra@gmail.com>, <fa@aiimsjodhpur.edu.in>, <fa@aiimspatna.org>, <fa@aiimsraipur.edu.in>, fcao@aiimsraipur.edu.in <fcao@aiimsraipur.edu.in>, <fa@aiimsrishikesh.edu.in>, <aiimsrbl@gmail.com>, <fa@aiimsmangalagiri.edu.in>, <fa@aiimsnagpur.edu.in>, <fic-finance@aiimskalyani.edu.in>, <abhayk@cag.gov.in>, <accounts@aiimsbilaspur.edu.in>, <acctsofficeraimjsammu@gmail.com>, <fa@aiimsguwahati.ac.in>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, <ak.biswas57@nic.in>, <dev.gothal@gov.in>

Sir/ Madam

Please find the attachment.


Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.


Regards

PMSSY-IV Section  
Ministry of Health and Family Welfare

---

**2 attachments**

 **Letter Instructions relating to writing of APARs of officers.pdf**  
82K

 **Encl 09.08.2016.pdf**  
78K

I/3628631/2023

**A-11013/13/2023-PMSSY-IV**  
**Government of India**  
**Ministry of Health & Family Welfare**  
**(PMSSY-IV Division)**

\*\*\*\*\*

745 A, Nirman Bhawan, New Delhi.

Date: 13.11.2023

To

The Directors/Executive Directors of all new AIIMS.

**Subject: Instructions relating to writing of APARs of officers.**

Madam/Sir,

I am directed to state that vide letter dated 09.08.2016 (copy enclosed), MoHFW has defined the Reporting, Reviewing and Accepting Authorities for the Annual Confidential Report (ACR) of the project cell posts in New AIIMS set up under PMSSY .

2. However, it has been noticed with concern that some Institutes are not sending Annual Performance Assessment Reports (APARs) of the officers holding Project Cell posts of Deputy Director Administration/ Financial Advisors on deputation to the Ministry for reviewing/accepting of APARs . Instead the APARs are being sent directly to the parent office of the officers bypassing the Ministry in deviation of the above instructions of MoHFW .

3. Therefore, Executive Directors of all new AIIMS are advised to scrupulously adhere to the guidelines laid down by the MoHFW vide letter dated 09.08.2016 for reporting/reviewing and acceptance of APARs .

4. This is issued with the approval of Secretary HFW

**Encl(1): As above**

Yours faithfully,

Signed by

K.balasubramanian

(K. Balasubramanian)  
Date: 13-11-2023 12:34:06

Under Secretary to the Govt. of India

Tele:011-23060010



I/3628631/2023

**Copy to: Deputy Director (Admn.)/FA of all AIIMS**



No. Z. 28016/6/2013-SSH  
Government of India  
Ministry of Health & Family Welfare  
PMSSY Division  
\*\*\*\*

Nirman Bhawan, New Delhi- 110108  
Dated : 9<sup>th</sup> August, 2016

To,  
The Director, AIIMS Bhopal  
The Director, AIIMS Bhubaneswar  
The Director, AIIMS Jodhpur  
The Director, AIIMS Patna  
The Director, AIIMS Raipur  
The Director, AIIMS Rishikesh

**Subject : Procedure for reporting , reviewing and accepting of Annual Confidential Reports of the Project Cell posts in six new AIIMS**

Sir,

The Competent Authority has approved the following reporting channel for the Project Cell posts of the six new AIIMS.

Post	Reporting officer	Reviewing officer	Accepting Authority
Director	Secretary (HFW)	President , AIIMS	President , AIIMS
Deputy Director (Admn. )	Director, AIIMS	Joint Secretary (PMSSY)	Additional Secretary (PMSSY)
Financial Advisor	Director , AIIMS	Joint Secretary (PMSSY)	Additional Secretary & Financial Advisor (MoHFW)
Medical Superintendent	Director , AIIMS	Additional Secretary (PMSSY)	Secretary (HFW)
Superintending Engineer	Director , AIIMS	Joint Secretary (PMSSY)	Additional Secretary (PMSSY)

2 It is also requested to the Officers that they may get their ACRs reported and reviewed directly from their Reporting and Reviewing Officers. A record of the ACRs should also be maintained by the respective AIIMS.

Yours faithfully,

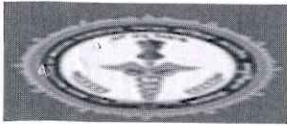
(P. A. Mini)  
Director

Tel: 011- 23061288

Copy to:

PS to HFM /PS to Secretary (HFW)/ PPS to AS (Health)/ PPS to AS& FA/ PPS to JS (PMSSY)





Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

**Fwd: Implementation of e-office in Attached Officers / Subordinate Officers/ Autonomous Bodies / CPSEs of the MoHFW - reg.**

1 message

**DDA AIIMS PATNA** <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 12:43 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Wed, Nov 15, 2023 at 11:46 AM

Subject: Implementation of e-office in Attached Officers / Subordinate Officers/ Autonomous Bodies / CPSEs of the MoHFW - reg.

To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiismangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiismangalagiri.edu.in>, ddaaiimsnagpur1 <ddaaiimsnagpur1@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Lt Col Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrjakot <dda.aiimsrjakot@gmail.com>, <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <sp.gahlaut@nic.in>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, <ak.biswas57@nic.in>, <dev.gothal@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards

PMSSY-IV Section


Ministry of Health and Family Welfare



---

**2 attachments**

 **Letter All AIIMS 20.pdf**  
57K

 **Encl 06.11.2023.pdf**  
1610K

**REMINDER**

No. Z. 28015/79/2023-PMSSY-IV  
Government of India  
Ministry of Health and Family Welfare  
PMSSY-IV Section

\*\*\*\*

Room No. 745A, Nirman Bhawan, New Delhi

Dated the November, 2022

To

The Directors/ Executive Director, all new AIIMS

**Sub: Implementation of e-office in Attached Officers / Subordinate Officers/ Autonomous Bodies / CPSEs of the MoHFW - reg.**

Sir,

I am directed to refer to this Ministry's letter of even number dated 06.11.2023 (copy enclosed) on the above mentioned subject and to say that it was requested to provide the information (in excel sheet) to this Division and to Establishment-I Section, MoHFW. However, the same has not been received so far from your institute.

2. It is, therefore, once again requested to provide the status of implementation of e-office to this Section and Establishment-I Section of this Ministry on e-mail ID; sp.gahlaut@nic.in, dev.gothal@gov.in, ak.biswas57@nic.in immediately.

Encl: As above

Yours faithfully,

**(Arun Kumar Biswas)**

Under Secretary to the Govt. of India

Tele : 011-23061343

Copy to:

DD (Admin.) of all above AIIMS.

Signed by Arun Kumar  
Biswas

Date: 14-11-2023 17:43:50

Reason: Approved

I/3629040/2023



F. No. Z-28015/79/2023-PMSSY-IV  
Government of India  
Ministry of Health and Family Welfare  
(PMSSY-IV Section)

\*\*\*\*\*

Room No. 745A, Nirman Bhawan, New Delhi  
Dated November, 2023

To,

The Director/ Executive Director, all new AIIMS

**Subject: Implementation of e-office in Attached  
Offices/Subordinate Officers / Autonomous Bodies / CPSEs of  
the MoHFW -reg.**

Sir,

I am directed to forward herewith a copy of OM No. Z-28011/01/2021-Estt.I-Part(1) dated 20.10.2023 on the above mentioned subject and to request to provide the following information in the format given below (in excel sheet) to this Division and to Establishment-I Section, Ministry of HFW on e-mail ID: sp.gahlaut@nic.in immediately:

Status e-office has been implemented				
Name of Wing/ Division		e-Office implementation status (please write against relevant column)		
S. No.	Name of the Abs/Institutes/Hospitals, etc.	e-office fully implemented	e-office partially implemented	e-office process not yet stated

Yours faithfully,

Signed by Arun Kumar  
Biswas

Date: 06-11-2023 19:22:32

Reason: Approved  
(Arun Kumar Biswas)

Under Secretary to the Govt. of India  
Tele : 011-23061343

Copy to:

DD (A), all new AIIMS





Pmssy Section <pmssysection@gmail.com>

## Implementation of e-office in Attached Offices/Subordinate Officers / Autonomous Bodies / CPSEs of the MoHFW -reg.

Pmssy Section <pmssysection@gmail.com>

Tue, Nov 7, 2023 at 12:53 PM

To: "AIIMS Bhopal, Director" <director@aiimsbhopal.edu.in>, "Director, AIIMS Bhubaneswar" <director@aiimsbhubaneswar.edu.in>, director@aiimsjodhpur.edu.in, director@aiimspatna.org, Director AIIMS Raipur <director@aiim سراipur.edu.in>, director@aiimsrishikesh.edu.in, edaiimsrbl@gmail.com, rajwanshiarvind@hotmail.com, director@aiimsmangalagiri.edu.in, directoraiimsnagpur@gmail.com, sramji57 <sramji57@gmail.com>, executivedirector@aiimsgorakhpur.edu.in, "Prof. Dr. D.K. Singh, Director" <director@aiimsbathinda.in>, director@aiimsdeoghar.edu.in, "Dr. Vikas Bhatia" <director@aiimsbibinagar.edu.in>, vsnegi22@yahoo.co.in, shakti810505@gmail.com, drmhraosvims1957@gmail.com, cdskatoch@gmail.com, puranik\_6@hotmail.com, madhabananda@gmail.com  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiim سراipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, "Dr. PRADIP KUMAR" <kpradip10@gmail.com>, kochas27@gmail.com, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Lt Col Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, office.aiimsdeoghar@gmail.com, dda@aiimsdeoghar.edu.in, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrjkot <dda.aiimsrjkot@gmail.com>, thaiu.mag@gov.in, Rakesh Kumar <rakeshkumar7123@yahoo.in>, "Cc:" <dinesh.kumar14@nic.in>, "K.Balasubramanian Under Secretary" <k.balasubramanian38@nic.in>, ak.biswas57@nic.in, dev.gothal@gov.in

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.


Regards

PMSSY-IV Section

Ministry of Health and Family Welfare

### 2 attachments

 Letter All AIIMS 28.pdf  
69K

 Encl 20.10.2023.pdf  
1444K



FD. 3383209/23

Most Immediate

No.Z.28011/01/2021-Estt.I-Part(1)  
Government of India  
Department of Health and F.W.  
(Establishment I Section)

New Delhi Nirman Bhawan  
Dated 20.10.2023

OFFICE MEMORANDUM

Subject: Implementation of e-office in Attached offices/Subordinate Offices/Autonomous Bodies/CPSEs of the Ministry of Health & Family Welfare-reg.

\*\*\*\*\*

The undersigned is directed to refer to this Division's OM of even number dated 25.08.2023 vide which all Programme Divisions were requested to get the e-Office adopted and implemented in all Attached Offices/Subordinate Offices/Autonomous Bodies/CPSEs under the aegis of the Ministry of Health & Family Welfare (copy attached for ready reference). Subsequently, the status of e-office implementation has continuously been reviewed in the Senior Officers' Meetings (SoMs) held under the Chairmanship of Secretary (Health). In the SoM held on 18.10.2023, Secretary(Health) has directed that all Divisions should immediately furnish the status of e-office implementation process in respect of the respective ABs/Institutes/Hospitals, etc. to Administration Division for compilation, along with and list of ABs/Institutes/Hospitals, etc., where this process is still incomplete.

2. All Additional Secretaries, Joint Secretaries and Economic Advisors are, accordingly, requested to please issue necessary directions for arranging and forwarding (wing-wise) compiled information to this Division in the following formats (in excel sheet):-

Status e-office has been implemented				
Name of Wing / Division		e-Office implementation Status (please write against relevant column)		
S.No.	Name of the ABs/Institutes/Hospitals, etc	e-office fully implemented	e-office partially implemented	e-office process not yet started

3. It is requested that the above information may be please provided on or before 26<sup>th</sup> October, 2023.

Encl. A/A

To

JS(PAB) / JS(AMB) / JS(MK) / JS(VA) / JS(VJ) / JS(ERS) / JS(RM) / EA(IK) / EA(KKT)

Copy to: PPS to AS&MD / PPS to AS(RS) / PPS to AS(VHZ)

Copy for information to: 1. JS(Admn)

2. PSO to Secretary(Health)

(Sushil P. Gahlaut)  
Director(Establishment)  
Email: sp.gahlaut@nic.in

20/10/23  
JS(PAB) A 26/10  
30(PK)

No. Z.28011/01/2021-Estt.I  
Government of India  
Ministry of Health and Family Welfare  
(Department of Health and Family Welfare)

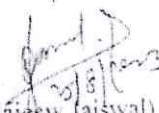
Nirman Bhavan, New Delhi  
Dated the 25<sup>th</sup> August, 2023

OFFICE MEMORANDUM

Subject: implementation of e-Office in Attached Offices/Subordinate Offices/Autonomous Bodies/CPSEs of the Ministry of Health and Family Welfare - Reg.

The undersigned is directed to say that instructions were earlier issued on 16th April, 2021 to get the e-Office adopted and implemented in all Attached Offices/Subordinate Offices/Autonomous Bodies/CPSEs of Ministry of Health and Family Welfare. During Senior Officers Meeting held on 22.08.2023, it was directed/reiterated that Heads of all Autonomous Bodies/Institutes may be asked to implement e-office in full and monitor file and receipt disposal regularly.

2. All Joint Secretaries/EA are requested to issue necessary directions to the entities under their Administrative Control for implementation of e-office in full and monitor file and receipt disposal regularly.

  
(Rajeev Jaiswal)  
Under Secretary to the Govt. of India  
Telefax: 23061323

To

All Joint Secretaries/EA of MoHFW (through e-Office)

Copy to: -

1. PSO to Secretary (H&FW)
2. PPS to All Additional Secretaries, MoHFW



Most Immediate

No.Z.28011/01/2021-Estt.I-Part(1)  
Government of India  
Department of Health and F.W.  
(Establishment I Section)

New Delhi Nirman Bhawan  
Dated 20.10.2023

OFFICE MEMORANDUM

**Subject: Implementation of e-office in Attached offices/Subordinate Offices/Autonomous Bodies/CPSEs of the Ministry of Health & Family Welfare-reg.**

\*\*\*\*\*

The undersigned is directed to refer to this Division's OM of even number dated 25.08.2023 vide which all Programme Divisions were requested to get the e-Office adopted and implemented in all Attached Offices/Subordinate Offices/Autonomous Bodies/CPSEs under the aegis of the Ministry of Health & Family Welfare (copy attached for ready reference). Subsequently, the status of e-office implementation has continuously been reviewed in the Senior Officers' Meetings (SoMs) held under the Chairmanship of Secretary (Health). In the SoM held on 18.10.2023, Secretary(Health) has directed that all Divisions should immediately furnish the status of e-office implementation process in respect of the respective ABs/Institutes/Hospitals, etc. to Administration Division for compilation, along with and list of ABs/Institutes/Hospitals, etc., where this process is still incomplete.

2. All Additional Secretaries, Joint Secretaries and Economic Advisors are, accordingly, requested to please issue necessary directions for arranging and forwarding (wing-wise) compiled information to this Division in the following formats (in excel sheet):-

Status e-office has been implemented				
Name of Wing / Division		e-Office implementation Status (please write against relevant column)		
S.No.	Name of the ABs/Institutes/Hospitals, etc	e-office fully implemented	e-office partially implemented	e-office process not yet started

3. It is requested that the above information may be please provided on or before 26<sup>th</sup> October, 2023.

Encl. A/A

To

JS(PAB) / JS(AMB) / JS(MK) / JS(VA) / JS(VJ) / JS(ERS) / JS(RM) / EA(İK) / EA(KKT)

Copy to: PPS to AS&MD / PPS to AS(RS) / PPS to AS(VHZ)

Copy for information to: 1. JS(Admn)  
2. PSO to Secretary(Health)

(Sushil P. Gahlaut)  
Director(Establishment)  
Email: sp.gahlaut@nic.in



No. Z.28011/01/2021-Estt.I  
Government of India  
Ministry of Health and Family Welfare  
(Department of Health and Family Welfare)

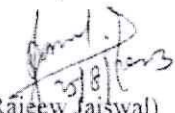
Nirman Bhavan, New Delhi  
Dated the 25<sup>th</sup> August, 2023

OFFICE MEMORANDUM

Subject: implementation of e-Office in Attached Offices/Subordinate Offices/Autonomous Bodies/CPSEs of the Ministry of Health and Family Welfare - Reg.

The undersigned is directed to say that instructions were earlier issued on 16th April, 2021 to get the e-Office adopted and implemented in all Attached Offices/Subordinate Offices/Autonomous Bodies/CPSEs of Ministry of Health and Family Welfare. During Senior Officers Meeting held on 22.08.2023, it was directed/reiterated that Heads of all Autonomous Bodies/Institutes may be asked to implement e-office in full and monitor file and receipt disposal regularly.

2 All Joint Secretaries/EA are requested to issue necessary directions to the entities under their Administrative Control for implementation of e-office in full and monitor file and receipt disposal regularly.

  
(Rajeev Jaiswal)

Under Secretary to the Govt. of India  
Telefax: 23061323

To

All Joint Secretaries/EA of MoHFW (through e-Office)

Copy to: -

1. PSO to Secretary (H&FW)
2. PPS to All Additional Secretaries, MoHFW



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Guidelines for Cyber Security Audit vide DO Letter dated 14.11.2023 -reg.

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 12:42 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **mn mishra** <mnrmishra.mohfw@gmail.com>

Date: Mon, Nov 20, 2023 at 6:33 PM

Subject: Re: Guidelines for Cyber Security Audit vide DO Letter dated 14.11.2023 -reg.

To: DDA AIIMS Jodhpur <dda@aiimsjodhpur.edu.in>, <dda@aiismangalagiri.edu.in>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, <dda@aiimsnagpur.edu.in>, <dda.aiimsrajkot@gmail.com>, Deputy Director Administration <dda@aiimsbhubaneswar.edu.in>, <ddaaiimsjammu@gmail.com>, Dy Director Administration AIIMS, Raebareli <ddaaiimsrbl@gmail.com>, DDA AIIMS Rishikesh <dda@aiimsrishikesh.edu.in>, <ddamadurai1189@gmail.com>, <dda@aiimsdeoghar.edu.in>, <dda@aiimspatna.org>, Rakesh Kumar <ddaaiimsawantipora@gmail.com>, <ddaaiimsbilaspur@gmail.com>, <dda.aiimsbibinagar@gmail.com>, DDA AIIMS Bhopal <dydir@aiimsbhopal.edu.in>  
Cc: cc: Narendra K Oza <nk.oza@gov.in>, ShriRajKumar Under Secretary <raj.kumar28@nic.in>, DINESH KUMAR <dinesh.kumar14@nic.in>

Dear Sir,  
Kindly take necessary action.

Regards,  
Er.M.N.Mishra,  
7982125857

On Mon, Nov 20, 2023 at 4:43 PM Shri Raj Kumar Deputy Secretary <raj.kumar28@nic.in> wrote:

Raj Kumar  
राज कुमार  
Deputy Secretary  
PMSSY  
Ministry of Health and Family Welfare  
Tel. no. 23062555

From: "EHealth Section" <telmed-mohfw@gov.in>

To: "Subrata Hazra" <subrata.hazra@nic.in>, "Harsh Mangla" <harsh.mangla@ias.nic.in>, "Narendra K Oza" <nk.oza@gov.in>, "Nidhi Kesarwani" <nidhikesarwani@nic.in>, "ROLI KHARE" <roli.khare@gov.in>, "Neha Garg" <nehagarg.irs@gov.in>, "Sachin Kumar" <sachin.k@nic.in>, "Sushil Pal Gahlaut" <sp.gahlaut@nic.in>, "Kumar Rahul" <kumar.rahul@nic.in>, "Govind Kumar" <govind.bansal78@gov.in>, "RAJ KUMAR" <rkumar.edu@nic.in>, "Rakesh Kumar" <rk.singh67@nic.in>, "PRIYADARSHIKA SRIVASTAVA" <priyadarshika.s@gov.in>, "KIRAN KARLAPU" <kiran.karlapu@gov.in>, "Noorin Bux Khan" <noorinbux@ord.gov.in>, "dr pulkesh" <dr.pulkesh@gov.in>, "Manoj Kumar Sinha" <mk.sinha26@nic.in>, "Poonam Meena" <poonam.22@gov.in>, "Manmohan Badola" <manmohan.badola@nic.in>, "Sarvajit Kumar" <kumar.sarvajit@nic.in>, "Gopal Aaditya Raghuvanshi" <gopal.aaditya@nic.in>, "Sarita Nair" <sarita.nair@gov.in>, "Shri Raj Kumar Deputy Secretary"

<raj.kumar28@nic.in>, "Dinesh Kumar" <dinesh.kumar64@nic.in>, "Zuber Ahmed Khan" <us-doj@mha.gov.in>, "M. K. HARIKUMAR" <mk.harikumar@nic.in>, "SHARMA" <dsfr-mohfw@gov.in>, "C K RAMASWAMY" <ck.rswamy@nic.in>, "JITENDER SINGH DD(G)" <jitender.singh28@nic.in>, "KamalArora US" <kamal.arora@nic.in>, "abhijit cgca" <abhijit.cgca@gov.in>  
**Cc:** "ADWAIT KUMAR" <adwaitk.singh@ias.nic.in>, "pawan kumar13" <pawan.kumar13@nic.in>, "PAWAN PATEL" <pawan.patel88@nic.in>, "Swarup Dutta" <swarup.dutta@gov.in>, "indu ehealth" <indu.ehealth@gmail.com>, "pankaj ehealth" <pankaj.ehealth@gmail.com>, "babloo ehealth" <babloo.ehealth@gmail.com>, "ehealth mohfw1" <ehealth.mohfw1@gmail.com>

**Sent:** Monday, November 20, 2023 3:07:42 PM

**Subject:** Guidelines for Cyber Security Audit vide DO Letter dated 14.11.2023 -reg.

Sir/Madam,

Kindly refer attached DO. No. Cybersecurity/Audit/NIC/2023/CriticalDB/1 dated 14th November, 2023 received from Ministry of Electronics & Information Technology (MeitY) for your information and necessary action.

Regards

**eHealth Section**  
**Ministry of Health & Family welfare**  
**Room No.-213, D-wing, Nirman Bhawan**  
**New Delhi-110011**  
**Tel No.-23062263**

--  
regards,  
Er.M.N.Mishra,  
Mob: 7982125857





Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Viksit Bharat Sankalp Yatra reg.

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>  
To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Sat, Dec 27, 2025 at 12:42 PM

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Tue, Nov 21, 2023 at 1:49 PM

Subject: Viksit Bharat Sankalp Yatra reg.

To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiismangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiismangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Lt Col Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, <ak.biswas57@nic.in>, <dev.gothal@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards

PMSSY-IV Section

Ministry of Health and Family Welfare



I/3630347/2023

**Z-28016/157/2023-PMSSY-IV**  
**Government of India**  
**Ministry of Health & Family Welfare**  
**(PMSSY-IV Division)**

\*\*\*\*\*

745 A, Nirman Bhawan, New Delhi.

Date: .11.2023

To

The Directors/Executive Directors of all new AIIMS.

**Subject: Viksit Bharat Sankalp Yatra reg.**

Madam/Sir,

As you may be aware, **Viksit Bharat Sankalp Yatra** is a nationwide campaign to raise awareness through outreach activities to achieve saturation of schemes of Govt. of India across the country covering all Gram Panchayats, Nagar Panchayats and Urban Local Bodies with the objectives of:

- i. Reaching the unreached - reach out to the vulnerable who are eligible under various schemes but have not availed benefit so far
- ii. Dissemination of information and generating awareness about schemes
- iii. Learning from the citizens - Interaction with beneficiaries of government schemes through their personal stories/ experience sharing
- iv. Enrolment of potential beneficiaries through details ascertained during the Yatra.

2. The campaign is being taken up by adopting a whole of government approach with active involvement of various Ministries/Departments of Government of India, State Governments, Central Govt. Organizations and Institutions to ensure the widest possible participation of all concerned for the benefit of Citizens of the country and to realize the vision of Viksit Bharat.

3. In view of above, all new AIIMS are advised **to undertake the following activities :**

(i). Actively participate in the Viksit Bharat Sankalp Yatra being organized in the districts wherever the new AIIMS are located and also in neighboring districts in coordination with the District Magistrate;

(ii). Organize Health Camps as part of outreach activity during the visit of the Mobile van in various gram panchayats and nagar palikas for screening of Non-



I/3630347/2023

Communicable Diseases (NCDs) , conduct of immunization, dissemination of information on health issues etc.

(iii). The Community Medicine Department to be made the Nodal Department for coordinating the above activities .

All Institutes are advised to send a detailed report to the Ministry along with photographs ,details of activities undertaken and beneficiaries covered for record and reference

Yours faithfully,

Signed by Dinesh Kumar

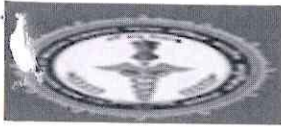
Date: 21-11-2023 10:11:43

(~~Dinesh Kumar~~)

**Joint Director, MoHFW**

**Tele:011-23061730**

**Copy to : Deputy Director (Admn.) of all new AIIMS.**



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Annual Capacity Building Plan (ACBP) under Mission Karamyogi-reg.

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 12:41 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>

Date: Tue, Nov 21, 2023 at 1:38 PM

Subject: Annual Capacity Building Plan (ACBP) under Mission Karamyogi-reg.

To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiimsmangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, <executivedirector@aiimsgorakhpur.edu.in>, Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Dr. Vikas Bhatia <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Lt Col Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <amitkumar.mol@nic.in>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, <ak.biswas57@nic.in>, <dev.gothal@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.

Regards

PMSSY-IV Section

Ministry of Health and Family Welfare

2 attachments



**Letter ACBP.pdf**  
53K



**Encl 14.11.2023.pdf**  
2089K



I/3630315/2023

No. Z. 28015/50/2023-PMSSY-IV  
Government of India  
Ministry of Health and Family Welfare  
(PMSSY-IV Section)

\*\*\*\*

Room No. 745A, 7<sup>th</sup> Floor, Nirman Bhawan, New Delhi  
Dated the November, 2023

To

The Directors/ Executive Directors of all new AIIMS

**S u b : Annual Capacity Building Plan (ACBP) under Mission Karamyogi-reg.**

Sir,

I am directed to enclose herewith a copy of D.O. letter No. A-11033/09/2023-Trg. Dated 14.11.2023 received from Director, Training, MoHFW, on the above mentioned subject for appropriate action, under intimation to this Division.

Yours faithfully,

Signed by Arun Kumar  
Biswas

Date: 20-11-2023 19:27:01

(Arun Kumar Biswas)

Under Secretary to the Govt. of India  
Tel.011-23061343

Encl: As above

**Copy to:**

- I. DD (A) all new AIIMS
- II. Under Secretary, Training Division, MoHFW



निधि केसरवानी, भा.प्र.से.  
निदेशक

**Nidhi Kesarwani, I.A.S.**  
Director

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

**Government of India**  
**Ministry of Health & Family Welfare**  
**Nirman Bhawan, New Delhi - 110011**

US(AKB)

JD(DK)

Pl. share this  
on the AIIMS  
Directors Group  
for appropriate  
action.

DO No. A-11033/09/2013-Eng.

Dated: 14-11-2023

Dear Ankita ma'am,

14/11

श्रीमान

US(AKB)

17/11

SO(DK)

As you are aware that Annual Capacity Building Plan (ACBP) under Mission Karmayogi has been launched by Hon'ble HFM on 17th May, 2023. In this regard, MOHFW is in process of implementation of ACBP through its Training Institutes and associated organizations. Under ACBP, trainings have to be conducted through offline online hybrid mode. For online training, each and every employee of Deptt. of Health and Family Welfare need to be on boarded on iGOT platform.

2. In order to implement Mission Karmayogi in time bound manner, I have been taking up the matter for implementation of Annual Capacity Building Plan shared by CBC on regular basis with CBC, iGOT and Training Institutions. All AIIMS and other Organizations of this Ministry. The list of on boarded organizations of MOHFW along with users data is attached at **Annexure-I**. The primary requirement of iGOT Platform is to first on board the details of the employees on it through bulk uploading by Nodal Officer of that organization.

3. It is worth appreciating that the details of nodal officer for new AIIMS under Pradhan Mantri Swasthya Suraksha Yojna (PMSSY), AIIMS, New Delhi, PGIMER, Chandigarh and JIPMER, Puducherry has been received. However, the uptake of courses among the employees of these organizations is very low.

4. Therefore, I would like to request you to look into the matter personally and to incorporate the low consumption of courses in your routine review of these Institutions so

Room No. 244-B, A-Wing, Nirman Bhawan, New Delhi-110011

Ph. : 011-23062434, Email : [nidhikesarwani@nic.in](mailto:nidhikesarwani@nic.in)

that the uptake of these courses can be enhanced. Also, the concerned nodal officers may be directed to attend the weekly review meeting taken by the undersigned to ensure progress and resolve any issues.

*Regards!*

Encl: As above

Yours sincerely,



(Nidhi Kesarwani)

Ms. Ankita Mishra Bundela  
Joint Secretary, MoHFW  
Nirman Bhawan, New Delhi



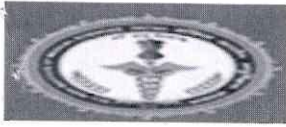
Annexure-I

MDO	Onboarded	Active	Unique Completions	Total Enrolments	Total Completion	In prog	Not Started
All India Institute of Medical Sciences AIIMS - Jodhpur	2837	2028	1957	11633	10944	557	132
Central Government Health Scheme CGHS	3512	813	603	3354	2452	596	306
All India Institute of Medical Sciences AIIMS - Bhopal	2064	522	448	1232	1040	137	55
All India Institute of Medical Sciences AIIMS - Manglagiri	465	369	341	1951	1753	153	45
All India Institute of Medical Sciences AIIMS - Samba Jammu	506	356	320	1853	1557	248	48
All India Institute of Medical Sciences AIIMS - Rajkot	482	293	262	1093	905	136	52
Department of Health and Family Welfare	1226	247	226	376	316	43	17
All India Institute of Medical Sciences AIIMS - Guwahati	462	209	194	573	483	71	19
All India Institute of Medical Sciences AIIMS - Mangalagiri	439	194	183	1023	939	70	14
All India Institute of Medical Sciences AIIMS - New Delhi	2195	137	120	253	214	32	7
All India Institute of Medical Sciences	862	166	113	587	408	98	81

AIIMS - Bathinda							
All India Institute of Medical Sciences AIIMS - Gorakhpur	739	131	110	519	441	56	22
All India Institute of Medical Sciences AIIMS - Deoghar	593	142	102	407	252	98	57
All India Institute of Medical Sciences AIIMS - Kalyani	550	119	98	227	181	33	13
National Institute of Health and Family Welfare	230	108	94	518	457	49	12
All India Institute of Medical Sciences - Patna	559	94	76	178	148	23	7
National Health Systems Resource Centre	258	81	71	334	269	54	11
All India Institute of Medical Sciences AIIMS - Rishikesh	2248	76	51	223	157	42	24
Directorate General of Health Services	83	50	48	77	67	10	
All India Institute of Medical Sciences AIIMS - Bilaspur	735	76	41	176	86	63	27
All India Institute of Medical Sciences AIIMS - Raebareli	893	56	34	174	118	35	21
All India Institute of Hygiene and Public Health	395	46	32	160	112	38	10

All India Institute of Medical Sciences AIIMS - Nagpur	1042	49	32	151	88	35	28
All India Institute of Medical Sciences AIIMS - Bibinagar	590	64	31	138	66	34	38
All India Institute of Medical Sciences AIIMS - Raipur	1051	32	21	53	36	14	3
JIPMER - Puducherry	3815	38	11	70	27	22	21
All India Institute of Medical Sciences AIIMS - Bhubaneswar	505	16	10	33	24	9	
Directorate General of Health Service	5	4	2	5	3	1	1
All India Institute Of Medical Sciences	2	2	1	2	1	1	
Gandhigram institute of rural health and family welfare trust	3	1	1	3	3		
PGIMER Satellite Center Sangrur - Punjab	974	3	1	8	6	1	1
All India Institute of Medical Sciences AIIMS - Madurai	57	1		2			2
JIPMER - Karaikal	1						
National Health System Resource Centre NISRC	2						
<b>Total</b>	<b>30380</b>	<b>6523</b>	<b>5634</b>	<b>27386</b>	<b>23553</b>	<b>2759</b>	<b>1074</b>





Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

---

## Fwd: Implementation of Technical Resignation and availing the benefits of past services - Reg

1 message

---

DDA AIIMS PATNA <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 12:40 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **K.Balasubramanian Under Secretary** <k.balasubramanian38@nic.in>

Date: Wed, Nov 22, 2023 at 4:10 PM

Subject: Implementation of Technical Resignation and availing the benefits of past services - Reg

To: director <director@aiimspatna.org>, dda <dda@aiimspatna.org>

Sir,

PFA

K.Balasubramanian  
Under Secretary(PMSSY-IV)  
MoHFW  
Tele:23060010

---

 **Technical Resignation letter.pdf**  
102K

I/3620474/2023

F.No. Z-28016/192/2020-PMSSY-IV  
Government of India  
Ministry of Health and Family Welfare  
(PMSSY-IV Section)

\*\*\*\*

Room No.745A, Nirman Bhavan, New Delhi  
Dated the 9th October 2023

To

The Director, AIIMS New Delhi.  
The Director, PGIMER, Chandigarh.  
The Director, JIPMER, Puducherry.  
All Directors/Executive Directors of new AIIMS.

**Subject: Implementation of Technical resignation and availing the benefits of past service.**

Madam/Sir,

I am directed to state that the matter regarding implementation of Technical resignation and availing the benefits of past service in respect of employees of new AIIMS is being deliberated in the Ministry. The matter was discussed in various Standing Finance Committee meetings and also in the 5<sup>th</sup> Central Institute Body meeting held on 16.06.2021.

2. Several representations were received from new AIIMS seeking clarifications on acceptance of technical resignation. A proposal was referred by the Ministry to the Department of Personnel and Training (DoP&T) with the request to allow extension of benefits of technical resignation to faculty/officers of various new AIIMS.

3. Vide note dated 16.06.2022 (copy enclosed), DoP&T stated that *AIIMS is an autonomous organization. The Rules and instructions which are issued by this Department under proviso to Article 309 of the Constitution are applicable only to the Central Government Civilian "employees" and "posts". These are, unless clearly specified, not suo motu applicable to the employees of Autonomous Bodies, Statutory Organizations, Public Sector Enterprises, Trusts, Banks etc. which are governed by their respective Statute/Act by which they are created or came into existence and the Bye-laws/regulations of the bodies concerned. The concerned bodies, with the approval of the concerned administrative Ministry/Department, may adopt the Rules/instructions of this Department to the extent necessary, as a part of service conditions of employees of such Organizations but this does not bring them directly under the Rules/instructions of this Department. It is, therefore, for the Administrative Ministry concerned to take appropriate decision in respect of employees of such bodies, as per the Rules applicable to them.*

4. The matter was further deliberated in the Ministry and the pros and cons of allowing the benefits of technical resignation to employees of AIIMS are given as under:



**Pros - Allowing technical resignation to employees of new AIIMS**

- (i). Employees working in one new AIIMS will get the option of transfer to another new AIIMS without having to resign their posts. This will benefit them because they may get to work near their home town which could help them to stay with their families. Issues relating to availability of residential accommodation, schooling of their children will be addressed if acceptance of technical resignation is allowed.
- (ii). Acceptance of technical resignation of employees will not result in the lapse of the leave to the credit of the employees. Therefore, there will be continuity for accumulation of leave which will benefit the employees.
- (iii). Acceptance of technical resignation of employees will allow entitlement to Leave Travel Concession (LTC) to be carried forward who joins another AIIMS after submitting technical resignation.
- (iv). Acceptance of technical resignation of employees will allow pay protection, eligibility of past service for reckoning of the minimum period for grant of annual increment which will benefit the employees.
- (v). Acceptance of technical resignation of employees could also encourage employees of State Govt./Central Govt. to apply for posts in new AIIMS.
- (vi). In view of above, allowing technical resignation of employees will definitely benefit the employees. This could also benefit some new AIIMS which could attract experienced employees to work in their Institute, which they are otherwise finding it difficult to attract.

**Cons - Allowing technical resignation to employees of new AIIMS**

- (i). Acceptance of technical resignation of employees will put additional financial burden of new AIIMS on payment of salaries as the employees will join with entitlement of pay protection, Leave, LTC, Pay protection, etc.
- (ii). Allowing technical resignation of employees and joining in another Institute could result in jumbling in seniority list which may cause heart burn to existing employees.
- (iii). Acceptance of technical resignation and movement of employees from one AIIMS to another could hamper the promotion opportunities of existing employees.
- (iv). All AIIMS are independent autonomous organisations and each Institute issue their own advertisements inviting applications from candidates, conduct tests/interviews and, appoint employees to work in their institutions. The cost involved and the efforts made in the process will go waste if employees submit technical resignation and join another AIIMS.
- (v). Acceptance of technical resignation and transfer of employees from one AIIMS to another AIIMS will affect the long term plan of the Institutes on human resource management.



I/3620474/2023

5. The following points were placed before the Competent Authority for perusal:

(i). All new AIIMS/INIs are receiving Grant-in-Aid from the Ministry of Health and Family Welfare and, therefore, the financial implication on account of technical resignation will be revenue neutral and will not affect the Institute as employee of one AIIMS/INIs will be joining another AIIMS/INIs only.

(ii). At the same time, all new AIIMS/INIs will be benefited as they can attract officers/faculties from other Institutions. Officers/Faculties with vast experience would not hesitate to join new AIIMS as their pay and other benefits would be protected. Even officers/faculties from Govt. Hospitals may apply for the posts in these Institutes. It is expected that this will help to improve in filling up the large number of vacant posts in these Institutes.

(iii). As AIIMS/INIs are situated all over the country, there are cases where one of the spouse is working in one institute and the other is working in other Institute. As there is no transfer policy, transfer on spouse ground is not allowed presently. If the benefit of technical resignation is available, one of the spouse may get the opportunity to apply for the post in another Institute where the other spouse is working, thereby their family life is not disturbed.

6. It was proposed that implementation of technical resignation with pay protection to employees may be considered within AIIMS/INIs. If any officer/faculty from INIs (AIIMS New Delhi, PGIMER Chandigarh and JIPMER Puducherry) gets an offer to join new AIIMS and vice versa, technical resignation with pay protection along with consequential benefits may be allowed.

7. The Competent Authority has advised to circulate the proposal to all AIIMS and INIs for comments.

8. In view of above, it is requested to furnish your comments in the matter positively within two weeks to take up the matter further.

Yours faithfully,

Signed by

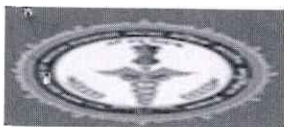
(K Balasubramanian)

Under Secretary to the Govt. of India  
Date: 09-10-2020 10:20:15  
Tele : 011-23063190

Copy to:

- (i). DD (A)s of INIs and all new AIIMS
- (ii). Director (INI), MoHFW, New Delhi, with the request to obtain and send the comments of AIIMS New Delhi, PGIMER Chandigarh and JIPMER Puducherry.

Copy to information to: PPS to JS (AMB)



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

**Fwd: Various measures taken by Department of Legal Affairs for reforming arbitration eco-system by facilitating efficacious resolution of disputes by recourse to Alternative Dispute Resolution (ADR) - Reg.**

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>

Sat, Dec 27, 2025 at 12:40 PM

To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **PMSSY V** <pmssysection5@gmail.com>

Date: Thu, Nov 23, 2023 at 1:00 PM

Subject: Various measures taken by Department of Legal Affairs for reforming arbitration eco-system by facilitating efficacious resolution of disputes by recourse to Alternative Dispute Resolution (ADR) - Reg.

To: Director AIIMS Bhopal <director@aiimsbhopal.edu.in>, director bhubaneswar <director@aiimsbhubaneswar.edu.in>, Director AIIMS Jodhpur <director@aiimsjodhpur.edu.in>, Director Patna <director@aiimspatna.org>, Director AIIMS Raipur <director@aiim سراipur.edu.in>, Director AIIMS Rishikesh <director@aiimsrishikesh.edu.in>, Exe.Dir. AIIMS RAEBARELI <rajwanshiarvind@hotmail.com>, Director AIIMS Nagpur <directoraiimsnagpur@gmail.com>, Director Mangalagiri <director@aiimsmangalagiri.edu.in>, ED AIIMS Kalyani <ed@aiimskalyani.edu.in>, ED AIIMS Guwahati <executive-director@aiimsguwahati.ac.in>, Director AIIMS Bibinagar <director.aiimsbibinagar@gmail.com>, Exe. Director AIIMS Bathinda <director@aiimsbathinda.edu.in>, Director AIIMS Deoghar <director@aiimsdeoghar.edu.in>, ED AIIMS Bilaspur <edaaiimsbils@gmail.com>, Director AIIMS Vijaypur <shakti810505@gmail.com>, Director AIIMS Jammu <directoraiimsjammu@gmail.com>, DDA AIIMS Awantipora <rakeshkumar7123@yahoo.in>, Executive Director AIIMS Rajkot <ed.aiimsrjkot@gmail.com>, Director AIIMS Madurai <drmhraosvims1957@gmail.com>, Executive Director AIIMS Darbhanga <madhabananda@gmail.com>

Cc: DDA BHOPAL <dydir@aiimsbhopal.edu.in>, DDA Bhubaneswar <dda@aiimsbhubaneswar.edu.in>, DDA NAGPUR <dda@aiimsnagpur.edu.in>, DDA AIIMS Patna <dda@aiimspatna.org>, DDA AIIMS Rishikesh <dda@aiimsrishikesh.edu.in>, DDA RAEBARELI <ddaaiimsrbl@gmail.com>, DDA Jodhpur <dda@aiimsjodhpur.edu.in>, DDA AIIMS Raipur <dda@aiimsrampur.edu.in>, DDA MANGALAGIRI <dda@aiimsmangalagiri.edu.in>, Dr. DDA AIIMS Kalyani <kpradip10@gmail.com>, DDA AIIMS Guwahati <dda@aiimsguwahati.ac.in>, DDA AIIMS BIBINAGAR <dda.aiimsbibinagar@gmail.com>, AIIMS DDA Gorakhpur <dda@aiimsgorakhpur.edu.in>, DDA AIIMS Bathinda <rajeevsenroy30@gmail.com>, DDA BATHINDA <devender.rawat1@gmail.com>, DDA AIIMS Deoghar AIIMS Deoghar <dda@aiimsdeoghar.edu.in>, DDA AIIMS BILASPUR\_ <dda@aiimsbilaspur.edu.in>, DDA AIIMS Vijaypur, Jammu <ddaaiimsjammu@gmail.com>, DDA AIIMS Rajkot <dda.aiimsrjkot@gmail.com>, DDA AIIMS Madurai <ddamadurai1189@gmail.com>, <raj.kumar28@nic.in>, US T.C Naulak <chinsum.n@nic.in>, <cl.mawi85@nic.in>

Respected Sir/Madam,

With reference to the subject cited above, Please find the attachment herewith.

**Note: In case this email requires you to reply, you are requested to CC your reply to all the officers in CC to this email.**

Yours faithfully,  
PMSSY-V  
Nirman Bhawan,

746-A, A Wing,  
New Delhi-110001

---

**2 attachments**



**Encl\_\_\_.pdf**  
12934K



**Letter \_\_23.11.23.pdf**  
81K



/3628541/2023

E.O. No 8247630

File No. 18017/29/2023- Legal Cell

भारत सरकार / GOVERNMENT OF INDIA

स्वास्थ्य एवं परिवार कल्याण मंत्रालय / MINISTRY OF HEALTH &amp; F.W.

स्वास्थ्य एवं परिवार कल्याण विभाग / DEPARTMENT OF HEALTH &amp; F.W.

(लीगल सेल) / (Legal Cell)

Nirman Bhawan, New Delhi-110011

Dated 10.11.2023

OFFICE MEMORANDUM

Subject:- Various measures taken by Department of Legal Affairs for reforming arbitration eco-system by facilitating efficacious resolution of disputes by recourse to Alternative Dispute Resolution(ADR) -regarding

-----

The undersigned is directed to forward herewith a copy of D.O. letter No A-60011/50/2023-ADR dated 31<sup>st</sup> October 2023 along with its enclosure received from the Department of Legal Affairs, Ministry of Law & Justice on the above mentioned subject informing that under India International Arbitration Centre Act, 2019, the India International Arbitration Centre (IIAC), an Institution of national importance, has been established, which is located at Plot No.6, Vasant Kunj Institutional Area, New Delhi. Department of Legal affairs has also enclosed a copy of Gazette Notification of India International Arbitration Centre (Conduct of Arbitration) Regulations, 2023 for providing detailed institutional modalities for conduct of arbitration under its aegis. Department of Legal Affairs has requested to peruse the said Regulations and consider incorporating appropriate clauses in their contracts for reference of their contractual disputes for resolution through arbitration.

2. All the Programme Divisions and Organizations under MoHFW are requested to peruse the aforesaid Regulations and consider incorporating appropriate clauses in their contracts for reference of their contractual disputes for resolution through arbitration.

Encl: As stated.

Signed by M.k. Harikumar

Date: 10-11-2023 18:00:03

Reason: Approved

Deputy Secretary (Legal Cell)

To,

1. All ASs/JSs/EAs/Directors/DSs of DoHFW.
2. Secretary (DHR)/ DG-Dte.GHS

Copy to:-

PSO to Secretary(H)/ PPS to AS(RS)

Shum  
17/11  
So (Sen)  
Chawng  
21/11/23  
ASO (EG)  
16/11/23  
VS (TCN)



डा. राजीव मणि, भा.वि.से.

Dr. Rajiv Mani, I.L.S.

अपर सचिव एवं मुख्य सतर्कता अधिकारी  
Additional Secretary & CVO

सत्यमेव जयते

75  
आज़ादी का  
अमृत महोत्सवभारत सरकार  
विधि और न्याय मंत्रालय  
विधि कार्य विभाग  
GOVERNMENT OF INDIA  
MINISTRY OF LAW & JUSTICE  
DEPARTMENT OF LEGAL AFFAIRS

DO No. A-60011/50/2023-ADR

31<sup>st</sup> October, 2023

Dear Sir,

The Department of Legal Affairs has taken various measures for reforming the arbitration eco-system with a view to promote India as a jurisdiction facilitating efficacious resolution of disputes by recourse to Alternative Dispute Resolution mechanism including promotion of institutional arbitration and mediation. As further step in this direction, under the India International Arbitration Centre Act, 2019, the India International Arbitration Centre, an institution of national importance, has been established. The Centre is located at self-owned premises at Plot No. 6, Vasant Kunj Institutional Area, New Delhi.

2. The India International Arbitration Centre (IIAC), provide facilities, administrative assistance and enables conduct of arbitration proceedings through eminent arbitrators. Justice Hemant Gupta, former judge of the Supreme Court of India has been appointed as the Chairperson of the Centre. The Centre is being developed as a flagship institution for creating an independent and autonomous regime for institutional arbitration, in the country.

3. The IIAC has also published the India International Arbitration Centre (Conduct of Arbitration) Regulations, 2023, providing the detailed institutional modalities for conduct of arbitration under its aegis. A copy of the said Regulations are enclosed for ready reference

4. I shall be grateful, if your Department and other entities including Central Public Sector Enterprises under the administrative control of your Department may peruse the India International Arbitration Centre (Conduct of Arbitration) Regulations, 2023 and consider incorporating appropriate clauses in their contracts for reference of their contractual disputes for resolution through arbitration, to the India International Arbitration Centre.

Warm regards,

Yours sincerely,

(Dr. Rajiv Mani)

Encl: As above.

To

All Secretaries of Departments/Ministries

चतुर्थ तल, शास्त्री भवन, डा. राजेन्द्र प्रसाद रोड, नई दिल्ली-110 001

4th Floor, Shastri Bhawan, Dr. R.P. Road, New Delhi-110 001

Tel. : +91-11-23384836 E-mail : rajiv.mani68@gov.in, Website : <https://legalaffairs.gov.in>



(ग) सुविधाओं और समर्थन सेवाओं के उपयोग के लिए खर्च (उदाहरण के लिए: सुनवाई कक्ष, उपस्कर, प्रतिलेखन सेवाओं और निर्वचन सेवाओं का किराया)

(घ) माल और सेवा कर (जीएसटी) जो लागू किया जाए।

### भाग 3 – तदर्थ माध्यस्थ्य मामलों में नियुक्ति फीस

#### घरेलू माध्यस्थ्य

- (क) 1 मध्यस्थ - 5000/- भारतीय रुपए;  
 (ख) 2 मध्यस्थ - 10,000/- भारतीय रुपए;  
 (ग) 3 मध्यस्थ - 15,000/- भारतीय रुपए;

#### अंतरराष्ट्रीय माध्यस्थ्य

- (क) 1 मध्यस्थ - 500/- यूनाइटेड स्टेट्स डॉलर (या भारतीय रुपए में समतुल्य)  
 (ख) 2 मध्यस्थ - 1,000/- यूनाइटेड स्टेट्स डॉलर (या भारतीय रुपए में समतुल्य)  
 (ग) 3 मध्यस्थ - 1,500/- यूनाइटेड स्टेट्स डॉलर (या भारतीय रुपए में समतुल्य)

हेमंत गुप्ता, अध्यक्ष

[विज्ञापन III/4/असा.406/2023-24]

## INDIA INTERNATIONAL ARBITRATION CENTRE

### NOTIFICATION

New Delhi, the 31st August, 2023

**F. No. A-60011/96/2023-Administration(AR)-IIAC.**—In exercise of the powers conferred by sub-section (2) of section 31 of the India International Arbitration Centre Act, 2019 (17 of 2019), the India International Arbitration Centre with the previous approval of the Central Government, hereby makes the following regulations to provide for the conduct of arbitration, namely: -

1. **Short title and commencement.** - (1) These regulations may be called the India International Arbitration Centre (Conduct of Arbitration) Regulations, 2023.  
 (2) They shall come into force on the date of their publication in the Official Gazette.
2. **Definitions.** - (1) In these regulations, unless the context otherwise requires, -
  - (a) "Act" means the India International Arbitration Centre Act, 2019 (17 of 2019);
  - (b) "advisory panel" means a panel constituted by the Centre under regulation 9 for the purpose of advising the Chairperson in relation to the appointment of arbitrator, other than an emergency arbitrator;
  - (c) "administration fee" means the administration fee specified in the Schedule;
  - (d) "Arbitral Tribunal" includes a sole arbitrator or all the arbitrators where more than one arbitrator is appointed;
  - (e) "arbitrator's fee" means the arbitrator's fee specified in the Schedule;
  - (f) "Arbitration Act" means the Arbitration and Conciliation Act, 1996 (26 of 1996);
  - (g) "award" includes an interim, partial, final or additional award;
  - (h) "Centre" means the India International Arbitration Centre, established and incorporated under section 3 of the Act;



- (i) "Chairperson" means the Chairperson of the Centre referred to in clause (a) of section 5 of the Act;
  - (j) "Chamber of Arbitration" means the Chamber of Arbitration as defined under section 28 of the Act;
  - (k) "Chief Executive Officer" means the Chief Executive Officer appointed under section 21 of the Act;
  - (l) "emergency arbitrator" means an arbitrator appointed pursuant to regulation 18;
  - (m) "filing fee" means the filing fee specified in the Schedule;
  - (n) "Member" means a member of the Centre referred to in section 5 of the Act;
  - (o) "panel of arbitrators" means the panel of arbitrators maintained by the Centre;
  - (p) "practice directions" means the guidelines published by the Centre from time to time, to implement these regulations;
  - (q) "Registrar" means the registrar of the Centre or any other person entrusted with the duties of the registrar;
  - (r) "Schedule" means the Schedule appended to these regulations;
- (2) The words and expressions used herein and not defined but defined in the Act or in the Arbitration Act shall have the meanings respectively assigned to them in those Acts.

3. **Application.** - Where parties have agreed to refer their dispute to the Centre for arbitration (whether before or after a dispute has arisen) or where any Court directs that the arbitration be conducted between the parties under the aegis of the Centre, the parties shall be deemed to have agreed that the arbitration is to be conducted or administered by the Centre in accordance with the provisions of these regulations.

4. **Request for arbitration.** - (1) An arbitration proceeding under these regulations shall commence, -

- (a) when a party makes a request, preferably by uploading it on the portal provided on the website of the Centre ([www.indiaiac.org](http://www.indiaiac.org)), or by way of an e-mail to the Registrar, or by filing the physical copy of the request with the Centre; or
  - (b) on receipt of a judgment, direction or order of any Court referring the parties to the Centre for arbitration.
- (2) When a party makes a request for arbitration with the Centre (hereinafter referred to as the claimant), the request must contain or be accompanied by, -
- (a) the order of the Court referring the parties to arbitration, in cases covered by clause (b) of sub-regulation (1);
  - (b) the complete arbitration clause or the separate arbitration agreement where the parties have agreed for conduct of arbitration by or under the Centre;
  - (c) a reference to and, where possible, a copy of the contract or other instruments out of, or in relation to which, the dispute has arisen;
  - (d) the full name and postal address including telephone number, mobile number and electronic mail address, to the extent known, of the parties to the arbitration and their legal representative and successor in interest, if any;
  - (e) a statement briefly describing the nature and circumstances of the dispute and the claims made against other party to the arbitration (hereinafter referred to as the respondent), specifying the relief sought (including the amounts of any quantified claims and, to the extent possible, an estimate of the monetary value of any such claims);
  - (f) a statement of any matters which the parties have previously agreed with regard to conduct of the arbitration or with respect to which the claimant desires to make a proposal as regard to the number of arbitrators, governing law of the contract, governing law of arbitration, the language of the arbitration and place/seat of arbitration;
  - (g) the nomination of an arbitrator, if the arbitration agreement provides for three arbitrators, or a proposal nominating a sole arbitrator if the arbitration agreement provides for a sole arbitrator, unless the parties have agreed otherwise including the power of nomination and appointment, as the case may be, being conferred with the Chairperson or the Centre in accordance with these regulations or except where an arbitrator has been named by a Court referring the parties for arbitration;
  - (h) confirmation that copies of the request for arbitration and any documents, have been or are being served simultaneously on all other parties, specifying the mode of service employed and the date of service, to



be supported then or as soon as possible thereafter by documentary proof of actual delivery including the date of delivery; and

(i) confirmation that the requisite filing fee as specified in the Schedule has been paid.

(3) The request for arbitration shall not prevent any party from subsequently adding, supplementing or amending in its pleadings, the matters referred to arbitration or the reliefs claimed, provided such matters and reliefs fall within the scope of the arbitration agreement and are relevant to the dispute.

(4) The date of receipt of the complete request for arbitration by the Centre shall be deemed to be the date of commencement of the arbitration and the request for arbitration shall be deemed to be complete when all the requirements of sub-regulation (2) are fulfilled or when the Centre determines that there has been substantial compliance with such requirements and notifies the parties of the date of commencement of the arbitration.

**5. Response to the request for arbitration.**— (1) The respondent shall send to the claimant and to the Centre a response within fourteen days of the receipt of the request for arbitration, preferably by uploading it on the portal provided on the website of the Centre ([www.indialiac.org](http://www.indialiac.org)) or by way of an e-mail, or by filing the physical copy of the response to the request for arbitration with the Centre, which shall contain or be accompanied by:-

- (a) a confirmation or denial of all or part of the claims, or the claimant's invocation of the arbitration;
  - (b) the full name and postal address along with telephone number, mobile number and e-mail ID of the respondent and its legal representative and successor in interest, if any;
  - (c) a statement describing in brief the nature and circumstances of the dispute and the defence to the claim, and a brief statement describing the nature and circumstances of any counter-claims, specifying the relief claimed, including the amounts of any quantified counter-claims and, to the extent possible, an estimate of the monetary value of any other counter-claims;
  - (d) any comment in response to any statement contained in the request for arbitration, or with respect to which the respondent desires to make a proposal, on matters relating to the conduct of the arbitration as regard to the number of arbitrators, governing law of the contract, governing law of the arbitration, the language of the arbitration and the place/seat of arbitration;
  - (e) where the arbitration agreement provides for a sole arbitrator, concurrence with the claimant's proposal for a sole arbitrator or otherwise; or where the arbitration agreement provides for three arbitrators, the nomination of arbitrator as envisaged in such agreement, unless the parties have agreed otherwise including the power of nomination and appointment, as the case may be, being conferred with the Chairperson or the Centre in accordance with these regulations or except where one or more arbitrators have been named by a Court;
  - (f) confirmation that copies of the response and the documents relied on have been or are being served simultaneously on the other parties, specifying the mode of service employed and the date of service, by documentary proof of actual delivery including the date of delivery;
  - (g) confirmation that the requisite filing fee as specified in the Schedule has been paid for any counter-claim.
- (2) The contents of the response shall not prevent the respondent from subsequently adding, supplementing or amending its pleadings.

**6. Written communication and calculation of period.**— (1) Any notice or communication or proposal shall be in writing, or by way of electronic communication, hereinafter referred to as the written communication and such written communication may be delivered personally or by registered post or by a courier service, or transmitted by any form of electronic means or delivered by any other means that provides a record of its transmission or in any other manner as may be directed by the Centre or the Arbitral Tribunal and such written communication shall be deemed to have been received if it is delivered,-

- (a) to the addressee personally; or
- (b) to his habitual residence, place of business or designated address; or
- (c) to any address agreed by the parties for service of communication; or
- (d) according to the practice of the parties in prior dealings; or
- (e) to his known e-mail address; or
- (f) if none of the aforesaid can be found after making reasonable inquiry, then at the addressee's last-known place of business or residence.

**Explanation.**— In this regulation, "electronic communication" includes electronic mail and any other type of communication which provides a record of transmission.



(2) Any written communication shall be deemed to have been received on the day when it is delivered or, in the case of electronic means, transmitted, and such time shall be determined with reference to the time zone of the place/seat of arbitration and in the event no place/seat of arbitration has been chosen by the parties or determined by the Arbitral Tribunal, the time of receipt shall be construed based on Indian Standard Time.

(3) Any period under these regulations shall be calculated from the day following the day when a written communication is deemed to have been received under sub-regulation (2).

**Explanation-** When the day next following such date is a non-business day in the place of receipt of such written communication pursuant to sub-regulation (1), the period commences on the first following business day and if the last day of such period is a non-business day at the place of such receipt, the period is extended until the first business day which follows.

(4) Non-business days occurring during the running of the period are included in calculating the overall period.

(5) After the constitution of the Arbitral Tribunal, where any party delivers any written communication to the Arbitral Tribunal, it shall simultaneously deliver a copy to each arbitrator, all parties and the Registrar and it shall confirm in writing to the Arbitral Tribunal that it has done so or is doing so.

(6) The Registrar may, if the parties so request or the circumstances so warrant, amend the time limits prescribed in these regulations provided it does not contravene any provisions of the law applicable to the arbitration or any time limits as fixed by the Arbitral Tribunal.

**7. Joinder of additional parties.-** (1) After the constitution of the Arbitral Tribunal, a party to the arbitration may apply to the Arbitral Tribunal to join one or more additional parties in a arbitral proceeding pending before it.

(2) The arbitral tribunal may allow the application after satisfaction of the following conditions, namely:-

(a) the parties, including the additional party to be joined, have consented to the joinder of the additional party; or

(b) the additional party to be joined is *prima facie* bound by the arbitration agreement;

(3) An application for joinder shall include,-

(a) a brief statement of the facts and reasons supporting the application.

(b) the details of the pending arbitration in which one or more additional parties are sought to be joined;

(c) the name and address along with telephone numbers and e-mail ID, of the additional party to be joined, and their representatives, if any;

(d) whether the additional party is to be joined as a claimant or a respondent;

(e) identification of the relevant arbitration agreement and a copy of such agreement;

(f) a reference to the contract or other instrument out of or in relation to which the dispute arises and, where possible, a copy of the contract or other instrument.

(4) The Arbitral Tribunal shall, after giving the parties, including the additional party to be joined, an opportunity to be heard, and having regard to the circumstances of the case, decide whether to allow, in whole or in part, any application for joinder under sub-regulation (1).

(5) The decision of the Arbitral Tribunal to allow the application for joinder under this regulation shall be without prejudice to its power to subsequently decide any question as to its jurisdiction for such decision.

(6) Where an application for joinder is allowed under sub-regulation (4), the filing fee under these regulations shall be payable for any additional claims or counter-claims.

**8. Consolidation of arbitrations.-** (1) Prior to the constitution of the arbitral tribunal in the arbitration sought to be consolidated, at the request of a party for consolidation, and after notice to the other parties and any Arbitral Tribunal, if constituted in the arbitration that commenced first, the Chairperson may allow to consolidate two or more arbitrations into a common arbitration where-

(a) the parties agree to the consolidation; or

(b) the claims in the arbitrations are made under the same arbitration agreement; or

(c) the disputes or differences therein are identical and between the same parties or between the parties having commonality of interests, or where such disputes arise out of separate contracts but relate to the same transaction.

(2) The party making the request for consolidation shall provide copies of such request to all other parties and to the Arbitral Tribunal, if any, in the arbitration that commenced first.



(3) In deciding whether to consolidate, the Chairperson shall take into account all the circumstances of the case and he shall endeavor to decide the application for consolidation within a period of fourteen days of the receipt of the request for consolidation.

(4) Where the Chairperson decides to consolidate two or more arbitrations under sub-regulation (1), the arbitrations shall be consolidated into the arbitration that commenced first, unless the Chairperson decides otherwise, taking into account the circumstances of the case.

(5) The Registrar shall provide copies of the decision of the Chairperson to all parties and to the Arbitral Tribunal constituted, if any, in the arbitration that commenced first.

(6) The Centre may suitably adjust its administration fee and the Arbitral Tribunal's fee (where appropriate) after a decision to consolidate the arbitrations has been made.

**9. Composition and functions of the advisory panel.—** (1) The advisory panel constituted by the Centre shall consist of the Members of the Centre, other than Members *ex officio*, and other eminent individuals having wide experience in the area of alternative dispute resolution mechanisms including arbitration, at domestic or international level.

(2) The advisory panel may consist of such number of advisors as the Centre may decide from time to time, which shall not be less than three but not more than ten.

(3) Not less than two advisors of the advisory panel shall advise the Chairperson in respect of appointment of an arbitrator either from the panel of arbitrators maintained by the Centre, or any other arbitrator in exceptional circumstances.

**10. Disclosure on independence and impartiality of the arbitrators.—** (1) Where a person is to be appointed as an arbitrator, he shall disclose in writing—

(a) the existence, either direct or indirect, of any past or present, relationship with or interest in any of the parties or in relation to the subject-matter in dispute, whether financial, business, professional or of any other kind, which is likely to give rise to justifiable doubts as to his independence or impartiality; and

(b) which are likely to affect his ability to devote sufficient time to the arbitration and in particular his ability to complete the entire arbitration within the specified time.

(2) An arbitrator, from his appointment and throughout the arbitral proceedings, shall, without delay, disclose to the parties in writing any circumstances referred to in sub-regulation (1), unless they have already been informed of them by him.

**11. Appointment and confirmation of arbitrators.—** (1) Unless the parties have agreed otherwise, a sole arbitrator shall be appointed.

(2) Subject to the agreement between the parties, the parties may nominate an arbitrator from the panel of arbitrators maintained by the Centre or in exceptional circumstances, any other arbitrator.

(3) If the parties have agreed that any arbitrator is to be appointed by one or more of the parties, or by any third person or by the arbitrators already appointed, such agreement shall be treated as an agreement to nominate an arbitrator under these regulations and such nominations shall be subject to appointment by the Chairperson.

(4) The Chairperson shall appoint arbitrators including from the panel of arbitrators maintained by the Centre after considering the advice of the advisory panel.

(5) In appointing an arbitrator under these regulations, due consideration shall be given to the qualifications required for the arbitrator as per the agreement of the parties, and to such considerations as are likely to secure the appointment of an appropriate arbitrator, who is independent and impartial, has sufficient time, availability and ability to conduct the case in a prompt and efficient manner.

(6) No claimant or respondent or any person shall make any *ex-parte* or private communication relating to the case with any arbitrator after he is appointed.

**12. Arbitral tribunal comprising of Sole Arbitrator.—** (1) If a sole arbitrator is to be appointed, either of the parties may propose to the other party the names of one or more persons to be appointed as the sole arbitrator and after reaching consensus on the nomination of a sole arbitrator, the Chairperson may appoint such nominated person as sole arbitrator.

(2) If the parties have not reached consensus for the nomination of a sole arbitrator within twenty-eight days from the date of commencement of the arbitration, the Chairperson, on the request of either party, shall appoint the sole arbitrator after considering the advice of the advisory panel.



13. **Arbitral tribunal comprising of Three arbitrators.**— (1) If three arbitrators are to be appointed, each party shall nominate one arbitrator.

(2) If a party fails to nominate an arbitrator within fourteen days after receipt of a party's nomination of an arbitrator, the Chairperson shall proceed to appoint an arbitrator on its behalf after considering the advice of the advisory panel.

(3) Unless the parties have agreed upon another procedure for appointing the third arbitrator, or if such agreed procedure does not result in a nomination within the period agreed by the parties or set by the Chairperson, the Chairperson shall appoint the third arbitrator after considering the advice of the advisory panel, who shall be the presiding arbitrator.

14. **Multi-party appointment of arbitrator.**— (1) Where there are more than two parties to the arbitration, and a sole arbitrator is to be appointed, the parties may jointly nominate the sole arbitrator and in the absence of such joint nomination having been made within twenty-eight days of the date of commencement of the arbitration, the Chairperson shall appoint the sole arbitrator after considering the advice of the advisory panel.

(2) Where there are more than two parties to the arbitration, and three arbitrators are to be appointed, the claimants shall jointly nominate one arbitrator and the respondents shall jointly nominate one arbitrator and unless the parties have agreed upon another procedure for appointing the third arbitrator, or if such agreed procedure does not result in a nomination within the period agreed by the parties or set by the Chairperson, the Chairperson shall appoint the third arbitrator on the advice of the advisory panel, who shall be the presiding arbitrator.

(3) In the absence of both such joint nominations having been made within twenty-eight days from the date of commencement of the arbitration, the Chairperson shall appoint all three arbitrators on the advice of the advisory panel and shall designate one of them to be the presiding arbitrator.

15. **Challenge of arbitrators.**— (1) The appointment or continuation of a person as an arbitrator may be challenged by any party if circumstances exist that give rise to justifiable doubts as to the arbitrator's impartiality or independence, or if the arbitrator does not possess any requisite qualification which the parties have previously agreed, or if the arbitrator becomes unable to discharge his functions or is not discharging those functions in accordance with these regulations or within the specified period.

(2) A party may challenge the arbitrator nominated by him only for reasons of which he becomes aware after such nomination has been made.

(3) A party who intends to challenge the appointment of an arbitrator shall send a notice to the Registrar within fourteen days after the receipt of the notice of appointment of such arbitrator, or within fourteen days after the circumstances mentioned in sub-regulation (1) become known to that party.

(4) The notice of challenge shall be sent simultaneously to the other party, the arbitrator who is being challenged and the other members of the Arbitral Tribunal.

(5) The notice of challenge shall be in writing and shall state the grounds for the challenge specified in sub-regulation (1).

(6) The Registrar may, by order suspend the arbitration proceedings until the challenge is resolved.

(7) When an arbitrator is challenged by one party, and the other party does not dispute the challenge made by the first party within seven days of the date of receipt of the notice of challenge, the Chairperson may replace such arbitrator and the arbitrator so challenged may also withdraw voluntarily from his office.

(8) In neither case referred to in sub regulation (7), does this imply acceptance of the validity of any of the grounds for the challenge.

(9) In instances referred to in sub-regulation (7), a substitute arbitrator shall be appointed in accordance with the procedure referred to in regulation 16.

(10) If the other party does not agree to the challenge and the arbitrator, who is being challenged does not withdraw himself voluntarily, the Chairperson shall send a copy of the notice to the parties and to the arbitrator to make submissions, or as the case may be, comments on the challenge within such period as may be provided by the Chairperson.

(11) The Chairperson shall endeavour to decide on the challenge within fifteen days from the date of submissions of the parties or the comments of the arbitrator, whichever is later.

(12) If the Chairperson accepts the notice of challenge, a substitute arbitrator shall be appointed in accordance with these regulations.

(13) If the Chairperson rejects notice of the challenge, the arbitrator shall continue with the arbitration.



**16. Substitution of arbitrator.-** (1) An arbitrator shall be substituted upon the following conditions:

- (a) refusal or failure to act in accordance with these regulations or within specified period; or
- (b) unable to perform the functions in accordance with these regulations; or
- (c) in case of his death, resignation, or withdrawal from the arbitration; or
- (d) acceptance of a challenge of arbitrator under regulation 15 by the Chairperson; or
- (e) in case of written request made by all the parties for the removal of the arbitrator to the Chairperson and where such request has been accepted by him.

(2) When an arbitrator is to be substituted for any reason, a substitute arbitrator shall be appointed by the Chairperson as per the procedure specified for the appointment of the arbitrator under these regulations.

(3) On substitution of an arbitrator, the reconstituted Arbitral Tribunal may invite and hear the parties to determine as to whether and to what extent the proceedings that have already taken place, shall be repeated or otherwise before the reconstituted Arbitral Tribunal:

Provided that if the previous Arbitral Tribunal has made an interim or partial award, any hearings related to such award, shall not be held again by the reconstituted Arbitral Tribunal and such interim or partial award shall remain effective.

**17. Fast track procedure. -** (1) The parties to an arbitration agreement may mutually agree in writing to have their dispute resolved through a fast track procedure at any stage, either before or at the time of appointment of the Arbitral Tribunal.

(2) Pursuant to such agreement, the parties may apply to the Registrar in writing for the arbitral proceedings to be conducted in accordance with the Fast Track Procedure.

(3) The parties making an application under sub-regulation (2) shall send a copy of the application to the other parties and to the Registrar.

(4) Where a party has made an application under sub-regulation (2), and where the Chairperson decides, after considering the views of the parties and having regard to the circumstances of the case, that the arbitral proceedings shall be conducted in accordance with the fast track procedure, the following procedure shall apply, notwithstanding anything contrary to the arbitration agreement between the parties, namely:-

- (a) the case shall be referred to a sole arbitrator, unless the Chairperson decides otherwise;
- (b) the Registrar may reduce any time period under these regulations;
- (c) the Arbitral Tribunal shall decide the dispute on the basis of written pleadings, documents and submissions filed, unless agreed otherwise by the parties;
- (d) the Arbitral Tribunal shall have the power to call for any further information or clarification from the parties in addition to the pleadings and documents filed by them;
- (e) an oral hearing may be held only if all the parties make a request or if the Arbitral Tribunal considers it necessary to have an oral hearing for clarifying certain issues;
- (f) the Arbitral Tribunal may dispense with any technical formalities, if an oral hearing is held, and adopt such procedure, as deemed appropriate for expeditious disposal of the case;
- (g) the award under this regulation shall be made within a period of six months from the date of intimation by the Registrar to the parties, of the constitution of the Arbitral Tribunal.
- (h) if the award is not made within the said period of six months, the mandate of the Arbitral Tribunal shall terminate unless the period to make the award has been extended by the Registrar for reasons to be recorded in writing.

(5) Upon application by a party, the Arbitral Tribunal may, after giving the parties the opportunity to be heard and in consultation with the Registrar, order that the arbitral proceedings shall not be conducted in accordance with the fast track procedure under this regulation, and where the Arbitral Tribunal allows such application, the arbitration shall continue to be conducted by the same Arbitral Tribunal that was constituted to conduct the arbitration in accordance with the fast track procedure.

**18. Emergency arbitrator.-** (1) Where an application for emergency interim relief cannot wait till the Arbitral Tribunal is constituted, a party may apply to the Registrar in writing for such emergency interim relief.

(2) The application under sub-regulation (1) may be made at the time of filing or subsequent to the filing of the request for arbitration but prior to the constitution of the Arbitral Tribunal.



- (3) The party making an application under sub-regulation (1) shall simultaneously send a copy thereof to the other parties to the arbitration.
- (4) The party making such an application shall -
- include a statement briefly describing the nature and circumstances of the relief sought and specific reasons why such relief is required on an emergency basis and the reasons why the party is entitled to such relief;
  - pay the applicable fee as specified in the Schedule for the appointment of the emergency arbitrator; and
  - file proof of service of such application upon the other parties to the arbitration.
- (5) The Chairperson shall endeavor to appoint the emergency arbitrator within three days (including non-business days) of receipt of the application by the Registrar.
- (6) The emergency arbitrator to be appointed under sub-regulation (5) must disclose to the Registrar any facts or circumstances which may give rise to justifiable doubts as to his impartiality or independence, before accepting the appointment.
- (7) Any challenge to the appointment of the emergency arbitrator may be made by either of the parties within one business day of the communication by the Registrar of the said appointment and the application must state the circumstances which form the basis for the challenge.
- (8) An emergency arbitrator may not act as an arbitrator in any future arbitration relating to the said dispute unless agreed by all the parties.
- (9) The emergency arbitrator so appointed shall schedule a hearing including the filing of submissions and documents by the parties within two business days of his appointment and shall provide a reasonable opportunity of being heard to all the parties to the dispute before granting any urgent interim measures of protection and shall record reasons in the order.
- (10) The parties shall comply with any order made by the emergency arbitrator.
- (11) The emergency arbitrator shall have the power to order any interim relief that he deems necessary.
- (12) An order of the emergency arbitrator shall be made in writing, with a brief statement of reasons and shall be signed.
- (13) The emergency arbitrator shall ensure that the entire process of arbitration from date of his appointment to making of the order shall be completed within fifteen days, which may only be extended by the Registrar in exceptional circumstances or by written agreement of all the parties to the said proceedings.
- (14) The emergency arbitrator shall become *functus officio* after the order is made and shall not be a part of the Arbitral Tribunal, which may be formed subsequently, in accordance with these regulations unless otherwise agreed to by all the parties.
- (15) The order for urgent interim measures made by the emergency arbitrator shall not bind the Arbitral Tribunal on the merits of any issue or dispute that the Arbitral Tribunal may be required to determine.
- (16) The order made by the emergency arbitrator shall remain operative for a period of two months from the date of the order unless modified, substituted or vacated by the Arbitral Tribunal:
- Provided that the Arbitral Tribunal shall have the power to extend the said order beyond the period of two months if it deems it necessary for reasons to be recorded in writing.
- (17) Any order of the emergency arbitrator may be confirmed, varied, discharged or revoked, in whole or in part, by order or award made by the Arbitral Tribunal upon application by any party or upon its own initiative.
19. **Interim measures by Arbitral Tribunal.**— (1) A party may, during the arbitral proceedings apply to the Arbitral Tribunal for an interim measure of protection in respect of the subject-matter of the dispute as it may consider necessary, including-
- the appointment of a guardian for a minor or person of unsound mind for the purposes of arbitral proceedings; or
  - an interim measure of protection in respect of any of the following matters, namely: -
    - the preservation, interim custody or sale of any goods which are the subject matter of the arbitration;
    - securing the amount in dispute in the arbitration;
    - the detention, preservation or inspection of any property or thing which is the subject-matter of the dispute in arbitration, or as to which any question may arise therein and authorizing for any of the



aforesaid purposes any person to enter upon any land or building in the possession of any party or authorizing any samples to be taken, or any observation to be made, or experiment to be tried, which may be necessary or expedient for the purpose of obtaining full information or evidence;

(iv) interim injunction or the appointment of a receiver;

(v) such other interim measures of protection as may appear to the Arbitral Tribunal to be just and convenient.

(2) The Arbitral Tribunal may modify, suspend or terminate an interim measure granted by it, upon an application by a party, if the circumstances so warrant.

**20. Statement of claim.-** (1) The claimant shall, within such period as may be determined by the Arbitral Tribunal, submit the statement of claim, preferably by uploading it on the portal provided on the website of the Centre ([www.indiaiac.org](http://www.indiaiac.org)) or by way of an e-mail, or by filing a physical copy of the statement of claim with the Arbitral Tribunal with a copy to the respondent and to the Centre, setting out in full detail subject to any specific directions of the Arbitral Tribunal in this regard-

- (a) statement of facts supporting the claim;
- (b) copies of supporting documents; and
- (c) the relief claimed, together with the amount of all quantifiable claims.

(2) If the claimant fails to submit its statement of claim with the specified period, the Arbitral Tribunal may issue an order for the termination of the arbitral proceedings or give such other directions as may be appropriate, unless a respondent has brought a counter claim and requests the arbitration to continue.

**21. Statements of defence and counter claim.-** (1) The respondent shall submit its statement of defence before the Arbitral Tribunal within the period specified by the Arbitral Tribunal, preferably by uploading it on the portal provided on the website of the Centre ([www.indiaiac.org](http://www.indiaiac.org)) or by way of an e-mail, or by filing a physical copy of the statement of defence and furnish a copy to the claimant and to the Centre, setting out its full defence to the statement of claim, subject to any specific directions of the Arbitral Tribunal in this regard.

(2) The statement of defence may also include a counter claim (if any), which shall comply with the requirements of regulation 20.

(3) If a counter claim is made, the claimant shall within a specified period decided by the Arbitral Tribunal, send to the respondent a statement of defence to the counter claim (with a copy to the Arbitral Tribunal and the Centre), setting out its full defence to the counter claim.

(4) If the respondent fails to submit a statement of defence, or, if at any stage any party fails to avail itself of the opportunity to present its case in the manner directed by the Arbitral Tribunal, the Arbitral Tribunal may proceed with the arbitration.

**22. Amendments to the statements of claim or defence.-** (1) A party may, with the leave of the Arbitral Tribunal, amend, supplement or modify its claim, counter-claim or other pleadings, unless the Arbitral Tribunal considers it inappropriate to allow such amendment, having regard to the delay in making the request or the prejudice it might cause to the other party or any other circumstance.

(2) If a party is permitted to amend its claim or counter-claim, the Registrar may require such party to pay such additional Arbitral Tribunal's fees and the administration fee specified in the Schedule, as it considers appropriate.

**23. Further pleadings.-** The Arbitral Tribunal shall decide whether further pleadings shall be required from the parties or may be presented by them and it shall fix the periods of time for filing such pleadings, if any.

**24. Jurisdiction.-** (1) If a party objects to the existence or validity of the arbitration agreement, or to the competence of the Centre to administer an arbitration, the same shall be decided by the Arbitral Tribunal after it is constituted.

(2) The Arbitral Tribunal shall have the power to decide on its own jurisdiction, including any objections with respect to the existence, termination or validity of the arbitration agreement.

(3) A plea that the Arbitral Tribunal does not have jurisdiction shall be raised not later than in a statement of defence or in a statement of defence to the counter-claim and a failure by a party to raise an objection on jurisdiction by then, shall be treated as an express waiver of that objection.

**25. Conduct of proceedings.-** (1) The Arbitral Tribunal may conduct the arbitration in such manner as provided in the law governing the arbitration and as it considers appropriate to ensure the cost effective, fair and timely resolution of the dispute.

(2) As soon as practicable after the appointment of all arbitrators, the Arbitral Tribunal shall conduct a preliminary



meeting with the parties (in person, by audio/video conferencing or any other electronic mode), to discuss the procedures that will be most appropriate and efficient for the case.

(3) During or following the preliminary meeting, the Arbitral Tribunal shall establish the procedural time table that it intends to follow for the conduct of the arbitration (including the period within which parties shall lead evidence and make oral submissions on a day-to-day basis) and shall communicate the procedural time table to the Centre and the parties.

(4) The Arbitral Tribunal after consulting the parties, may adopt further procedural measures or modify the procedural timetable from time to time and all such modified procedural timetables and orders shall be communicated to the parties and the Centre, to ensure continued effective case management.

(5) The filing of the statement of claim and statement of defence shall be completed within a maximum period of six months from the date the arbitrator or all the arbitrators, as the case may be, received notice in writing of their appointment.

(6) The Arbitral Tribunal may frame a list of issues after the pleadings are completed, if it deems it appropriate to do so.

(7) The Arbitral Tribunal may proceed with the arbitration notwithstanding the failure or refusal of any party to comply with these regulations or orders or directions of the Arbitral Tribunal or any partial or interim award or to attend any meetings or hearings, and may impose such costs as the Arbitral Tribunal deems appropriate in such circumstances.

**26. Language of the arbitration proceedings.**— (1) Unless the parties have agreed otherwise, the language of the arbitration shall be English.

(2) If a document is in a language other than the language of the arbitration, the Arbitral Tribunal, or if the Arbitral Tribunal has not been established, the Registrar, may order a party to submit translation of the document, in the language of the arbitration.

**27. Party representatives.**— (1) Any party may be represented by legal practitioners or any other authorised representatives, subject to submission of proof of authority of the party representatives.

(2) Any change or addition by a party to its representatives shall be promptly communicated in writing to the Registrar, the Arbitral Tribunal and the other parties.

**28. Place/seat of arbitration.**— (1) The parties may agree on the place/seat of arbitration, failing such an agreement, the place/seat of arbitration shall be determined by the Arbitral Tribunal having regard to the circumstances of the case.

(2) The Arbitral Tribunal, in consultation with the parties may hold all proceedings including hearings either physically, virtually or in a hybrid manner and where the Arbitral Tribunal decides to hold the hearings (including for recording of evidence) physically, it may hold it at any location agreed to by the parties or where there is no such agreement hold it at a place which the Arbitral Tribunal considers convenient or appropriate, after consulting the parties.

*Explanation:* 'Place of Arbitration' shall mean 'Seat of Arbitration' and *vice versa*.

**29. Applicable law.**— (1) The Arbitral Tribunal shall, for deciding the merits of the dispute, apply the law or rules, as the case may be, agreed upon by the parties and in case of failure of such agreement between the parties, the Arbitral Tribunal shall decide the dispute on merits by applying the law or rules which it determines to be appropriate in the facts and circumstances of the case.

(2) In an arbitration other than international commercial arbitration, the Arbitral Tribunal shall decide the dispute submitted to arbitration in accordance with the law for the time being in force in India.

(3) The Arbitral Tribunal shall decide as *amiable compositeur* or *ex aequo et bono* only if the parties have expressly authorised the Arbitral Tribunal to do so.

(4) In all cases, the Arbitral Tribunal shall take into account the terms of the contract, any trade usages applicable to the transaction to the extent that the Arbitral Tribunal considers it relevant to the arbitration.

**30. Hearings.**— (1) Unless the parties have agreed otherwise or where the parties have opted for fast track procedure, the Arbitral Tribunal shall if either party so requests or the Arbitral Tribunal so decides, hold a hearing in a manner as agreed for the presentation of evidence and for oral arguments on interim applications, if any and on the merits of the dispute.

(2) The Arbitral Tribunal shall fix the date, time and place of any meeting or hearing and shall give the parties reasonable notice in advance.



(3) If any party to the proceedings, without sufficient cause, fails to appear at a hearing, the Arbitral Tribunal may proceed with the arbitration and may make the award based on the evidence and submissions before it.

(4) Unless the parties agree otherwise, all meetings and hearings shall be held privately, and any recordings, transcripts, documents or other materials used in the proceedings shall remain confidential.

**31. Witnesses-** (1) Prior to hearing, the Arbitral Tribunal may require any party to give a list of witnesses, including expert witnesses, whom it intends to produce, the subject of their testimony and its relevance to the issues.

(2) The Arbitral Tribunal shall have the discretion to allow, refuse or limit the number of witnesses intended to be produced by a party and to determine the time to be allocated for the oral testimony of a witness.

(3) The Arbitral Tribunal shall determine the manner in which witnesses are to be examined, and may direct that the testimony of any witness be presented in written form.

**32. Appointment of experts by the Arbitral Tribunal-** (1) Unless the parties have agreed otherwise, the Arbitral Tribunal may—

(a) in consultation with the parties, appoint one or more experts to report on specific issues which shall be set out by the Arbitral Tribunal in writing; and

(b) require a party to give such expert any relevant information, or produce, or provide access to any relevant documents, goods or property for inspection.

(2) Any expert so appointed shall submit a report in writing to the Arbitral Tribunal and upon receipt of the said written report, the Arbitral Tribunal shall supply a copy of the report to the parties.

(3) Unless the parties have agreed otherwise, if a party so requests or if the Arbitral Tribunal considers it necessary, any such expert shall after delivery of his written report, participate in an oral hearing where the parties may cross-examine him.

(4) Any expert so appointed shall furnish a declaration that he is and shall continue to be impartial and independent.

(5) The charges and costs relating to the expert shall be borne by the parties, as determined by the Arbitral Tribunal.

**33. Making of award-** (1) The Arbitral Tribunal, upon being satisfied that the parties have no further relevant and material evidence to produce or submissions to make, shall declare that the proceedings are closed and the Arbitral Tribunal may, on its own motion or upon application of a party before any award is made, reopen the proceedings.

(2) The Arbitral Tribunal shall submit all draft awards to the Registrar within sixty days from the date on which it declares the proceedings closed unless, in exceptional circumstances and further to an application by the Arbitral Tribunal or on the own motion of the Registrar, the Registrar extends the period for submission of the draft award.

(3) The Registrar may suggest changes, within twenty-one days as to the form of the draft award and point out any typographical or clerical errors in the draft award without affecting the decision of the Arbitral Tribunal.

(4) The Arbitral Tribunal may make such changes, if any, as it deems fit to the award.

(5) The Arbitral Tribunal may make partial awards on different issues at different times.

(6) Where the Arbitral Tribunal consists of more than one arbitrator, the Arbitral Tribunal shall decide by a majority.

(7) The award shall be made in writing and signed by the Arbitral Tribunal and unless agreed otherwise by the parties in writing, the award shall state the reasons upon which it is based.

(8) The award may be executed in any number of counterparts, each of which is an original and all of which together evidence the same award.

(9) Where there are three arbitrators and any of them fails to sign the award, the award shall state the reason for the absence of the signature of such arbitrator.

(10) If the majority arbitrators of the Arbitral Tribunal sign the award, it shall be final and binding for the purposes of these regulations, provided that all arbitrators were provided with a reasonable opportunity to sign the award.

(11) The award shall be delivered by the Arbitral Tribunal to the Registrar, who shall transmit certified copies to the parties upon the full settlement of the costs of arbitration.

(12) The Arbitral Tribunal may award interest on any principal sum which is the subject of the arbitration at such rates as the parties may have agreed or, in the absence of such agreement, as the Arbitral Tribunal determines and in respect of any period, as it determines appropriate.



(13) In the event of a settlement, if the parties so request, the Arbitral Tribunal may render a consent award recording the settlement, provided always that such award contains an express statement that it is an award made with the consent of the parties, which need not contain reasons.

(14) If the parties do not require a consent Award, the parties shall confirm to the Arbitral Tribunal and the Registrar that a settlement has been reached.

(15) The Arbitral Tribunal shall be discharged and the arbitration concluded upon payment of any outstanding costs of the arbitration.

(16) By agreeing to arbitration under these regulations, the parties agree that an award shall be final and binding on the parties from the date it is made.

**34. Correction and interpretation of award, additional award.-** (1) Within thirty days from the receipt of the arbitral award—

- (a) a party, with notice to the other party, may request the Arbitral Tribunal to correct any computation errors, any clerical or typographical errors or any other errors of a similar nature occurring in the award;
- (b) if so agreed by the parties, a party, with notice to the other party, may request the Arbitral Tribunal to give an interpretation of a specific point or part of the award.

(2) If the Arbitral Tribunal is satisfied with the request made under sub-regulation (1), it shall make the correction or give the interpretation within thirty days from the receipt of the request and the interpretation shall form part of the arbitral award.

(3) The Arbitral Tribunal may correct any error of the type referred to in clause (a) of sub-regulation (1), on its own initiative, within thirty days from the date of the award.

(4) A party with notice to the other party, may request, within thirty days from the receipt of the award, the Arbitral Tribunal to make an additional award as to claims presented in the arbitral proceedings but omitted from the award.

(5) If the Arbitral Tribunal is satisfied with the request made under sub-regulation (4), it shall make the additional award within sixty days from the receipt of such request.

(6) The Arbitral Tribunal may extend, if necessary, the period within which it shall make a correction, give an interpretation or make an additional award under sub-regulation (2) or sub-regulation (5).

(7) The regulation 33 shall apply to a correction or interpretation of the award or to an additional award.

**35. Fees and expenses of arbitration.-** (1) The fees of the arbitrator and the administration fee shall be fixed by the Registrar in accordance with the fee specified in the Schedule.

(2) The Arbitral Tribunal's reasonable out-of-pocket expenses necessarily incurred and other allowances shall be reimbursed in accordance with the applicable practice directions.

**36. Deposits for costs of arbitration.-** (1) The Registrar shall fix the amount of deposits towards the costs of arbitration.

(2) Unless the Registrar directs otherwise, fifty per cent. of such deposits shall be payable by the claimant and the remaining fifty per cent. of such deposits shall be payable by the respondent and the Registrar may fix separate advances on costs for claims and counter-claims, respectively.

(3) Where the amount of the claim or the counter-claim is not quantifiable at the time payment is due, a provisional estimate of the costs of the arbitration shall be made by the Registrar, based on the nature of the dispute, the contract amount and the circumstances of the case, which shall be adjusted subsequently.

(4) The Registrar may from time to time direct the parties to make further payments towards costs of the arbitration incurred or to be incurred on behalf of, or for the benefit of, the parties.

(5) If a party fails to make the deposits as directed, the Registrar may, after consulting the Arbitral Tribunal and after informing the parties, direct the Arbitral Tribunal to suspend the arbitration proceedings and set a period, not exceeding sixty days, on the expiry of which the relevant claims or counter-claims shall stand terminated without prejudice to the parties reintroducing the same claims or counter-claims in another proceeding *de novo*, in accordance with law.

(6) Parties are jointly and severally liable for the deposits for costs of the arbitration.

(7) Any party is free to pay the whole of the deposits towards costs of the arbitration in respect of the claim or the counter-claim, in case the other party fails to pay its share.



(8) If the arbitration is settled or disposed of without a hearing, the costs of arbitration shall be finally determined by the Registrar having regard to the circumstances of the case, including the stage of proceedings at which the arbitration is settled or disposed.

(9) In the event that the costs of arbitration determined are less than the deposits made, there shall be a refund made to the parties by the Centre in such proportions as the deposits were made unless otherwise agreed by the parties.

(10) All deposits shall be made to and held by the Centre and any interest which may accrue on such deposits shall be retained by it.

(11) The Centre shall have a lien on the arbitral award for any unpaid costs of the arbitration and the award shall not be notified to the parties unless all such costs have been fully paid to the Centre by the parties or by any one of them.

**37. Costs of arbitration.**— (1) The Arbitral Tribunal shall specify in the award, the total amount of the costs of the arbitration, and unless the parties have agreed otherwise, the Arbitral Tribunal shall determine in the award, the apportionment of the costs of the arbitration among the parties.

(2) The term "costs of the arbitration" includes -

- (a) the fees and expenses of the Arbitral Tribunal;
- (b) the administration fees of the Centre and its expenses; and
- (c) the costs of expert advice and of other assistance reasonably required by the Arbitral Tribunal.

**38. Legal and other costs.**— (1) The Arbitral Tribunal shall have the authority to order in its award that all or a part of the legal or other costs of a party be paid by another party.

(2) The Arbitral Tribunal shall take into account in making its decision as to costs, circumstances it considers relevant, including the extent to which each party has conducted the arbitration in an expeditious manner.

**39. Appointment fees.**— (1) The appointment fees, as specified in the Schedule shall be payable when a request for appointment of arbitrator has been made to the Centre in an *ad hoc* arbitration and where parties have agreed for the Centre to make such appointment either before or after the dispute has arisen and such appointment fee shall be payable by the party making the request for appointment.

(2) Where a court refers a matter to the Centre for appointment of arbitrator on an application made by a party for such appointment, then the appointment fee shall be payable by the party who has made an application to the court for the appointment of arbitrator.

(3) Where a court on its own motion refers a matter to the Centre for appointment of arbitrator, the appointment fee shall be payable by both the parties in equal share or either party may pay the entire amount of appointment fee.

**40. Exclusion of liability.**— (1) The Centre, the Chairperson, Members, Chief Executive Officer, Registrar, Member of the advisory panel or Chamber of Arbitration of the Centre, other officers, employees, any arbitrator or emergency arbitrator, shall not be liable to any person for any negligence, act or omission in good faith, in connection with any arbitration conducted under these regulations.

(2) The Centre, the Chairperson, Members, Chief Executive Officer, Registrar, Member of the advisory panel or Chamber of Arbitration of the Centre, other officers, employees, any arbitrator or emergency arbitrator, shall not be under any obligation to make any statement in connection with any arbitration conducted under these regulations and no party shall seek to make the Chairperson, any Members, officers, employees, any arbitrator or emergency arbitrator act as a witness in any legal proceedings in connection with any arbitration conducted under these regulations.

**41. Waiver of right to object.**— A party who knows or ought to know of a failure to comply with any of the provisions, or requirement under these regulations, and which are applicable to the proceedings, any direction given by the Arbitral Tribunal, or any requirement under the arbitration agreement relating to the constitution of the Arbitral Tribunal or the conduct of the proceedings and yet proceeds with the arbitration without promptly stating its objection, or if a period is provided for stating that objection, within that period, shall be deemed to have waived its right to object.

**42. Confidentiality.**— (1) The parties, the Arbitral Tribunal, an emergency arbitrator, Members of the Centre and the Centre shall at all times treat all matters relating to the arbitration and the award including the proceedings as confidential.

(2) A party or any arbitrator shall not, without the prior written consent of all the parties, disclose to a third party any such matter, except—

- (a) for the purpose of making an application to a court of competent jurisdiction, to enforce or challenge the award; or
- (b) pursuant to the order made by a court of competent jurisdiction; or



- (c) for the purpose of pursuing or enforcing a legal right or claim; or
- (d) in compliance with the provisions of any laws which are binding on the party making the disclosure; or
- (e) in compliance with the request or requirement of any regulatory body or other authority under any law; or
- (f) pursuant to an order by the Arbitral Tribunal on application by a party with proper notice to the other parties.

(3) In this regulation, "*matters relating to the proceedings*" means the existence of the proceedings and the pleadings, evidence and other materials in the arbitration proceedings and all other documents produced by another party in the proceedings or the award arising from the proceedings, but excludes any matter that is otherwise in the public domain.

#### 43. Decisions of Chairperson, Members, Chief Executive Officer and Registrar.-

(1) Subject to the provisions of these regulations, the decisions of the Chairperson, Members, Chief Executive Officer and Registrar with respect to all matters relating to an arbitration conducted under these regulations shall be conclusive and binding upon the parties and the Arbitral Tribunal.

(2) The Chairperson, Members, Chief Executive Officer and the Registrar shall not be required to provide reasons for such decisions, unless expressly provided for in these regulations.

44. **Miscellaneous.-** (1) In all matters not expressly provided for in these regulations, the Chairperson, Members, Chief Executive Officer, Registrar and the Arbitral Tribunal shall act in the spirit of these regulations and shall make every reasonable effort to ensure the fair, expeditious and economical conclusion of the arbitration.

(2) The Centre may from time to time issue practice directions for implementation of these regulations, for the purpose of facilitating the administration of arbitration.

### SCHEDULE

#### FEE FOR ARBITRATION

##### PART I- DOMESTIC ARBITRATION

(A) **NON-REFUNDABLE FILING FEE** - Indian Rupees 5,000/- plus GST, as applicable

(B) **ADMINISTRATION FEE**

Sl. No.	Amount in Dispute ((Indian Rupees) [claim + counter-claim (if any)]	Administration Fee (Indian Rupees) (excluding GST)
(i)	Upto 25,00,000	15,000
(ii)	Above 25,00,000 and upto 1,00,00,000	25,000
(iii)	Above 1,00,00,000 and upto 5,00,00,000	50,000
(iv)	Above 5,00,00,000 and upto 7,00,00,000	75,000
(v)	Above 7,00,00,000 and upto 10,00,00,000	90,000
(vi)	Above 10,00,00,000 and upto 25,00,00,000	1,00,000
(vii)	Above 25,00,00,000	1,50,000

**Note.-** The Administration fee of the Centre does not include the following, namely:-

- (a) The disbursements and incidental expenses incurred by the Centre in connection with the arbitration;
- (b) Cost for usage of facilities and support services (for example: Hearing Rooms, Hire of Equipment, Transcription Services and Interpretation Services), as may be applicable;
- (c) Good and Services Tax (GST) as may be applicable.



**(C) ARBITRATOR'S FEE- FOR EACH ARBITRATOR**

Sl. No.	Amount in Dispute (Indian Rupees) [Claim + Counterclaim (if any)]	Arbitrator's Fee (Indian Rupees) (excluding GST)
(i)	Upto 5,00,000	45,000
(ii)	Above 5,00,000 and upto 20,00,000	45,000 plus 3.5% of amount in excess of 5,00,000
(iii)	Above 20,00,000 and upto 1,00,00,000	97,500 plus 3% of amount in excess of 20,00,000
(iv)	Above 1,00,00,000 and upto 10,00,00,000	3,37,500 plus 1% of amount in excess of 1,00,00,000
(v)	Above 10,00,00,000 and upto 20,00,00,000	12,37,500 plus 0.75% of amount in excess of 10,00,00,000
(vi)	Above 20,00,00,000 and upto 50,00,00,000	48,62,500 plus 0.50% of amount in excess of 20,00,00,000
(vii)	Above 50,00,00,000 and upto 75,00,00,000	78,62,500 plus 0.25% of amount in excess of 50,00,00,000
(viii)	Above 75,00,00,000 and upto 100,00,00,000	84,87,500 plus 0.10% of amount in excess of 75,00,00,000
(ix)	Above 100,00,00,000 and upto 200,00,00,000	87,37,500 plus 0.03% of amount in excess of 100,00,00,000
(x)	Above 200,00,00,000	91,00,000

**Note.-** (1) In case the Arbitral Tribunal comprises of a sole arbitrator, he shall be entitled to an additional amount of 25% on the fee payable as per the table set out above.

(2) The arbitrator's fee does not include-

- (a) the expenses of the arbitrator;
- (b) Good and Services Tax (GST) as may be applicable.

**(D) FEE FOR EMERGENCY ARBITRATOR PROCEEDINGS**

Administration fee of the Centre - Indian Rupees 1,00,000/-

Emergency arbitrator's fee - Indian Rupees 7,00,000/-

**Note.-** The fee for emergency arbitrator proceedings does not include the following, namely:-

- (a) the disbursements and incidental expenses incurred by the Centre in connection with the emergency arbitrator proceedings;
- (b) the expenses of the emergency arbitrator;
- (c) cost for usage of facilities and support services (for example: Hearing Rooms, Hire of Equipment, Transcription Services and Interpretation Services) as may be applicable;
- (d) Good and Services Tax (GST) as may be applicable.

**PART II- INTERNATIONAL ARBITRATION**

**(A) NON-REFUNDABLE FILING FEE-** United States Dollars 500/- (or equivalent in Indian Rupees) plus Good and Services Tax (GST), as applicable.

**(B) ADMINISTRATION FEE**



Sl. No.	Amount in Dispute (United States Dollars or equivalent in Indian Rupees) [Claim + Counterclaim (if any)]	Administration Fee (United States Dollars or equivalent in Indian Rupees) (excluding GST)
(i)	Up to 50,000	1,000
(ii)	Above 50,000 and upto 100,000	1,000 plus 2% of amount in excess of 50,000
(iii)	Above 100,000 and upto 500,000	2,000 plus 1% of amount in excess of 100,000
(iv)	Above 500,000 and upto 1,000,000	6,000 plus 0.60% of amount in excess of 500,000
(v)	Above 1,000,000 and upto 2,000,000	9,000 plus 0.30% of amount in excess of 1,000,000
(vi)	Above 2,000,000 and upto 5,000,000	12,000 plus 0.10% of amount in excess of 2,000,000
(vii)	Above 5,000,000	15,000

Note:- The administration fee of the Centre does not include the following, namely:-

- the disbursements and incidental expenses incurred by the Centre in connection with the arbitration;
- cost for usage of facilities and support services (for example: Hearing Rooms, Hire of Equipment, Transcription Services and Interpretation Services), as may be applicable;
- Good and Services Tax (GST) as may be applicable.

**(C) ARBITRATOR'S FEE – FOR EACH ARBITRATOR**

S. No.	Amount in Dispute (United States Dollars or equivalent in Indian Rupees) [Claim + Counterclaim (if any)]	Arbitrator's Fee (United States Dollars or equivalent in Indian Rupees) (excluding GST)
(i)	Up to 50,000	5,000
(ii)	Above 50,000 and upto 100,000	5,000 plus 10% of amount in excess of 50,000
(iii)	Above 100,000 and upto 500,000	10,000 plus 6% of amount in excess of 100,000
(iv)	Above 500,000 and upto 1,000,000	34,000 plus 4% of amount in excess of 500,000
(v)	Above 1,000,000 and upto 2,000,000	54,000 plus 2.5% of amount in excess of 1,000,000
(vi)	Above 2,000,000 and upto 5,000,000	79,000 plus 1.25% of amount in excess of 2,000,000
(vii)	Above 5,000,000 and upto 10,000,000	116,500 plus 0.60% of amount in excess of 5,000,000
(viii)	Above 10,000,000 and upto 50,000,000	146,500 plus 0.10% of amount in excess of 10,000,000
(ix)	Above 50,000,000 and upto 100,000,000	186,500 plus 0.025% of amount in excess of 50,000,000
(x)	Above 100,000,000	200,000

Note:- The fee of the arbitrator does not include:-

- the expenses of the arbitrator.



(b) Good and Services Tax (GST) as may be applicable.

**(D) FEE FOR EMERGENCY ARBITRATOR PROCEEDINGS**

Administration fee of the Centre - United States Dollars 2,000/-  
(or equivalent in Indian Rupees)

Emergency arbitrator's fee - United States Dollars 15,000/-  
(or equivalent in Indian Rupees)

**Note:-** The fee for emergency arbitrator proceedings does not include the following, namely:-

- (a) the disbursements and incidental expenses incurred by the Centre in connection with the Emergency Arbitrator proceedings;
- (b) the expenses of the emergency arbitrator;
- (c) cost for usage of facilities and support services (for example: Hearing Rooms, Hire of Equipment, Transcription Services and Interpretation Services)
- (d) Good and Services Tax (GST) as may be applicable.

**PART III- APPOINTMENT FEE IN AD-HOC ARBITRATION MATTERS**

**Domestic Arbitration**

- (a) 1 Arbitrator – Indian Rupees 5,000/-;
- (b) 2 Arbitrators – Indian Rupees 10,000/-;
- (c) 3 Arbitrators – Indian Rupees 15,000/-;

**International Arbitration**

- (a) 1 Arbitrator – United States Dollars 500/- (or equivalent in Indian Rupees)
- (b) 2 Arbitrators – United States Dollars 1,000/- (or equivalent in Indian Rupees)
- (c) 3 Arbitrators – United States Dollars 1,500/- (or equivalent in Indian Rupees)

HEMANT GUPTA, Chairperson

[ADVT.-III/4/Extry./406/2023-24]



I/3631021/2023

File No. C-17011/07/2023-PMSSY-V (8251118)  
Government of India  
Ministry of Health and Family Welfare  
PMSSY-V section

Room No. 746 , "A" wing,  
Nirman Bhawan, New Delhi-110001.  
Dated: 23-11-2023.

To,

The Director /Executive Director  
All AIIMS

[Bhopal, Bhubaneswar, Jodhpur, Patna, Raipur, Rishikesh, Raebareli, Nagpur,  
Manglagiri, Kalyani, Guwahati, Bibinagar, Gorakhpur, Bathinda, Deoghar, Bilaspur,  
Vijaypur (Jammu), Awantipora (J&K), Rajkot, Madurai, Darbhanga]

**Subject:** Various measures taken by Department of Legal Affairs for reforming arbitration  
eco-system by facilitating efficacious resolution of disputes by recourse to Alternative Dispute  
Resolution (ADR) -- regarding

Sir/Madam ,

I am directed to refer to the above mentioned subject and to enclose a copy of letter  
No.1817/29/2023-Legal Cell dated 10.11.2023 received from Legal Cell, MoHFW and  
D.O.No.A-60011/50/2023-ADR dated 31-10-2023 received from Department of Legal Affairs,  
Ministry of Law & Justice for information and compliance.

Encl.: As above

Yours faithfully,

Signed by

Thawngzachin Chinsum Naulak

Date: 23-11-2023 10:05:48

T. Chinsum Naulak)

Under Secretary to the Govt. of India

Tel: 011-23736978

Copy to: DDA of All AIIMS

[Bhopal, Bhubaneswar, Jodhpur, Patna, Raipur, Rishikesh, Raebareli, Nagpur,  
Manglagiri, Kalyani, Guwahati, Bibinagar, Gorakhpur, Bathinda, Deoghar, Bilaspur,  
Vijaypur (Jammu), Awantipora (J&K), Rajkot, Madurai, Darbhanga]- for similar action



Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

## Fwd: Cyber Security -reg.

1 message

DDA AIIMS PATNA <dda@aiimspatna.org>  
To: Shivanshu Shekhar <shivanshu12623@aiimspatna.org>

Sat, Dec 27, 2025 at 12:39 PM

Regards,  
Deputy Director (Admin.)  
AIIMS, Patna  
801507

----- Forwarded message -----

From: **Pmssy Section** <pmssysection@gmail.com>  
Date: Fri, Nov 24, 2023 at 2:54 PM  
Subject: Cyber Security -reg.  
To: Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, <director@aiimsbilaspur.edu.in>, <director@aiimsjodhpur.edu.in>, <ED@aiimskalyani.edu.in>, <director@aiimspatna.org>, <edaaiimsrbl@gmail.com>, Director AIIMS Raipur <director@aiim سراipur.edu.in>, <director@aiimsrishikesh.edu.in>, <director@aiimsmangalagiri.edu.in>, surekhakishore <surekhakishore@rediffmail.com>, <director@aiimsdeoghar.edu.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>  
Cc: Lt Col Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, <dda@aiimsbilaspur.edu.in>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, <dda@aiimskalyani.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, Saroj Singh <sarojkr.singh@gov.in>, DDA AIIMS Raipur <dda@aiim سراipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, dda <dda@aiimsmangalagiri.edu.in>, <kochas27@gmail.com>, <dda@aiimsdeoghar.edu.in>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, Cc: <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, <ak.biswas57@nic.in>, <dev.gothal@gov.in>, <vivek.mishra92@gov.in>

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.


Regards

PMSSY-IV Section

Ministry of Health and Family Welfare

2 attachments

 Letter Cyber Security -reg..pdf  
78K

 Encl 22.12.2022.pdf  
4590K



I/3631292/2023

**Reminder I**

**Z-28015/86/2023-PMSSY-IV**  
**Government of India**  
**Ministry of Health & Family Welfare**  
**(PMSSY-IV Division)**

**745 A, Nirman Bhawan, New Delhi.**

**Date: 23.11.2023**

To

The Directors/ Executive Director, all new AIIMS (as per the list)

**Subject: Cyber Security -reg.**

Madam/Sir,

I am directed to refer to the subject mentioned above and to say that vide this Ministry's letter dated 22.12.2022 (copy enclosed) along with letter of DG CERT-in, all the new AIIMSs were requested to conduct security audit of their IT resources. Further, vide letter of even number dated 17.11.2023 another communication has also been sent to all new AIIMS regarding Cyber Security for compliance.

2. Security Audit of the IT platforms is a high priority item. However, the Institutes are yet to provide compliance report. It is requested to take necessary action immediately and send compliance report **positively latest by 28.11.2023.**

Yours faithfully,

Signed by

(K. Balasubramanian)

Under Secretary to the Govt. of India

Tele:011-2306 0010

Encl. As above

Copy to: Deputy Director (Admn.) of new AIIMS

No. A-27023/33/2022-PMSSY-IV  
Government of India  
Ministry of Health and Family Welfare  
PMSSY-IV Section

\*\*\*\*\*

4<sup>th</sup> Floor, IRCS Building, New Delhi

Dated the 22nd December, 2022

To

Director, AIIMS, New Delhi  
Director, PGIMER, Chandigarh  
Director, JIPMER, Puducherry  
Director, NIMHANS, Bengaluru  
Directors/Executive Directors of all new AIIMS

**Sub: Cyber-attacks in health sector -  
Advisory- reg.**

Madam/Sir,

I am directed to forward a copy of letter No. 10(30)/2022-CERT-IN dated 08.12.2022 from Director General (CERT-In), Ministry of Information and Technology, along with advisory on the above mentioned subject for compliance. The feedback on compliance related to security auditing and implementation of security recommendations may be sent to this Ministry with a copy to CERT-In **within a fortnight positively.**

Yours faithfully,

Signed by K  
Balasubramanian  
Date: 22-12-2022 13:41:22

**(K Balasubramanian)**

Under Secretary to the Govt. of India  
Tele : 011-23350010



pmssysection@gmail.com;  
k.balasubramanian38@nic.in

**Encl: As above**



Pmssy Section &lt;pmssysection@gmail.com&gt;

**Cyber-attacks in health sector - Advisory - reg.**

Pmssy Section &lt;pmssysection@gmail.com&gt;

Thu, Dec 22, 2022 at 3:27 PM

To: director@aiims.edu, director@aiims.ac.in, pgimer-chd@nic.in, director@jipmer.edu.in, director@jipmer.nic.in, nimhans@gmail.com, Director <director@aiimsbhopal.edu.in>, director@aiimsbhubaneswar.edu.in, director@aiimsjodhpur.edu.in, director@aiimspatna.org, Director AIIMS Raipur <director@aiimsraipur.edu.in>, director@aiimsrishikesh.edu.in, edaiimsrbl@gmail.com, director@aiismangalagiri.edu.in, directoraiimsnagpur@gmail.com, sramji57 <sramji57@gmail.com>, executivedirector@aiimsgorakhpur.edu.in, director@aiimsbathinda.in, director@aiimsdeoghar.edu.in, director@aiimsbibinagar.edu.in, vsnegi22@yahoo.co.in, shakti810505@gmail.com, drmhraosvims1957@gmail.com, cdskatoch@gmail.com, puranik\_6@hotmail.com, madhabananda@gmail.com, dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, dda@aiimsjodhpur.edu.in, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiismangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, siddhartha.nandy@gov.in, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, Rakesh Kumar <rakeshkumar7123@yahoo.in>

Cc: "Cc:" <dinesh.kumar14@nic.in>, k.balasubramanian38@nic.in, mayukh.paul88@gov.in, dev.gothal@gov.in

Sir/Madam

Please find the attachment.

Regards

PMSSY-IV Section

Ministry of Health and Family Welfare

**2 attachments** **Letter Cyber Attacks 01.pdf**  
58K **Encl Cyber Attacks.pdf**  
4458K





Dr. Sanjay Bahl  
Director General

Office of Secretary (H&amp;FW)

Office No. 2929601

Date 12/12/2022

भारत सरकार  
Government of India

इलेक्ट्रॉनिकी और सूचना प्रौद्योगिकी मंत्रालय  
Ministry of Electronics & Information Technology

भारतीय कम्प्यूटर आपात प्रतिक्रिया दल (सर्ट-इन)

Indian Computer Emergency Response Team (CERT-In)

इलेक्ट्रॉनिक्स निकेतन 6, सी जी ओ कॉम्प्लेक्स, नई दिल्ली-110003

Electronics Niketan, 6, C G O Complex, New Delhi-110003

Tel. : 24368544, Fax : 24366806, E-mail : sanjay.bahl@gov.in

08 December 2022

F.No. 10(30)/2022-CERT-In

14.12.2022  
ASO (Dr)

### Sub: Cyber-attacks in Health sector - Advisory

Indian Computer Emergency Response Team (CERT-In) is the national nodal agency for responding to cyber security incidents as per provisions of Section 70B of the Information Technology Act 2000. Details are available on website: [www.cert-in.org.in](http://www.cert-in.org.in)

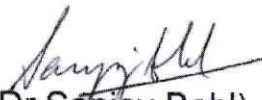
2. In recent times, healthcare industry is becoming prime target for cyber threat actors. Attackers are exploiting vulnerable healthcare facilities, which are having poor cyber hygiene. Also, Covid-19 pandemic has accelerated digital adoption in the Healthcare Industry, which has provided new opportunities to cyber criminals to exploit security gaps and cause impactful incidents like Ransomware, Data breaches/Leaks, Advanced Persistence Threats (APT), thus further leading to compromise of sensitive Protected Health Information (PHI).
3. It may be noted that CERT-In has already created a panel of "Empanelled Information Security Auditing Organisations" for auditing including vulnerability assessment and penetration testing of the computer systems, networks and applications involving public service delivery. To ensure cyber resilient healthcare ecosystem, it is essential that Ministry of Health advises all authorised medical care entities/ service providers in the country to carryout special audit by CERT-In empanelled auditors on priority basis entity wise and take immediate steps thereafter to comply with the findings of the audit report and ensure implementation of security best practices. This should be accorded top most priority while CERT-In be informed of the steps taken in this regard.
4. Overall, improving the security of the health care sector will require a comprehensive and ongoing effort that involves a range of different measures and technologies such as:

- a) Ensuring that all medical devices are properly configured and secured, with strong passwords and regularly updated software.

Very Imp. to be circulated to all  
ED AIMS, All directors of INIS. On priority  
13/12  
12/12/22 DIG (NI) / DIG (NKO) / AS (RK)  
Generated from eOffice by KRESHA SURESH RAMAN (PMSSY/10-DIG (NKO)) PMSSY/10-DIG (NKO) 28/12/2022 11:52:11 AM  
CERT-In Office : Block-1, Delhi IT Park, Shastri Park, Delhi-110058  
Tel. : +91-11-22902703, +91-11-22902704  
JS (PMSSY) 411 of 449



- b) Implementing robust data protection measures, such as encryption and regular backups, to protect patient data and other sensitive information.
  - c) Developing and regularly testing a crisis management and response plan to follow in the event of a cyber-attack, to minimize the impact and quickly restore normal operations.
  - d) Providing regular cyber security training to employees, to help them understand the risks and how to protect themselves and the organization.
5. In this regard, a special cyber security advisory vide CIAD-2022-S3 is enclosed for your kind reference and dissemination to all the stakeholders for necessary action.
6. The feedback on compliance related to security auditing and implementation of security recommendations should be sought from all the organisations under Ministry of Health with a copy to CERT-In on immediate basis.

  
(Dr. Sanjay Bahl)  
Director General  
CERT-In

Encl: As above

To

Shri. Rajesh Bhushan  
Secretary  
Ministry of Health & Family Welfare  
Room No. 156-A, Nirman Bhawan  
New Delhi – 110011

Copy for kind information:  
Shri. Alkesh Kumar Sharma  
Secretary  
Ministry of Electronics and Information Technology  
Room No. 1001, Electronics Niketan, 6, CGO Complex  
Lodhi Road  
New Delhi – 110003



[RESTRICTED - Not for Hosting in Public Domain]

TLP:GREEN

## **CERT-In Special Advisory Note CIAD-2022-S3**

### **Cyber Security issues in Healthcare Sector and measures to be taken**

**Original Issue Date: December 8, 2022**

Severity Rating: Critical

The health care industry is increasingly relying on technology to improve the delivery of care and services. However, with this increased reliance on technology comes an increased risk of cyber-attacks and other security threats.

Cyber-attacks in the health care sector can have serious consequences, including the theft of sensitive patient data, disruption of critical operations, and even harm to patients.

Health care sector is often seen as an attractive target for cyber criminals. Some of the key factors include:

- a) The health care industry has large amounts of sensitive patient data, which can be highly valuable to cyber criminals
- b) Many health care organizations are not well-prepared to defend against cyber-attacks, and may have outdated or inadequate security measures in place.
- c) Health care organizations often have a large number of connected medical devices, such as pacemakers and insulin pumps, which can be vulnerable to cyber-attacks.
- d) Health care organizations are often under pressure to quickly restore operations in the event of an attack, which may make them more willing to pay a ransom to attackers.

Overall, the combination of valuable data, inadequate security measures, and a willingness to pay ransoms makes the health care sector vulnerable to cyber-attacks.

Health care IT infrastructure can be easily exploitable due to:

1. Lack of cyber hygiene and awareness among the staff
2. Vulnerable and outdated systems
3. Absence of security controls such as Antivirus, Firewall, SIEM
4. Applications with default settings /misconfigured/publicly exposed instances
5. Poor network architecture without proper segmentation and visibility
6. Absence of security policies and procedures
7. Insecure data storage without encryption and privileged access management
8. Non-maintenance of secured offline backups for critical data
9. Lack of log management and continuous monitoring

10. Lack of dedicated security teams for monitoring, detecting and mitigating cyber threats

Most common types of attacks observed in health care sector:

1. Targeted attacks by Advanced Persistent Threat (APT) groups
2. Ransomware & malware attacks
3. Data leaks / breaches

To protect against cyber-attacks, health care organizations need to implement robust security measures. It is also important to have a response plan in place to quickly identify and mitigate any potential attacks.

**Security measures for Health care entities:**

1. Nominate a CISO or Point of contact for IT Security and provide the details to CERT-In as per directions. Formulate cyber security policy and assign roles and responsibilities for Chief Information Security Officer (CISO) and a dedicated cyber security functional team. CISO roles and responsibilities attached for reference.
2. Healthcare sector organizations should audit the entire ICT infrastructure and deploy appropriate security controls based on the audit outcome. Services of 150 CERT-In empaneled auditors may be utilized including those of STQC and CDAC for this purpose. List of empaneled auditors with details such as skills, competence, experience in audits, manpower, tools used etc., is available on website "<https://www.cert-in.org.in>".
3. Healthcare Sector organizations are advised to implement these measures on immediate basis:
  - i. Ensure installation of reputed Antivirus/EDR software on all the systems with regular signature updates
  - ii. Deploy perimeter security devices such as Firewalls and Intrusion Prevention Systems for blocking malicious traffic
  - iii. Upgrade any outdated operating systems & applications and update patches on regular basis
  - iv. Maintain secure offline backup for critical databases and use of encryption for sensitive data
  - v. Conduct security audit for the entire IT infrastructure every 6 months
  - vi. Audit and patch vulnerable web applications and other public facing applications



- vii. Configure individual user accounts without Administrator right and restrict installation of software from individual user accounts
  - viii. Disable/restrict RDP, SMB, PowerShell and any other unwanted services across all endpoints
  - ix. Regularly rotate the credentials of services and users with strong password policy and avoid usage of common passwords
  - x. Enforce multi factor authentication for accessing critical services, especially for public facing and remote connectivity services like VPN, RDP
  - xi. Create a structured network with network segmentation. Review and revamp the complete network architecture in security perspective for better visibility, management and control of IT resources
  - xii. Implement Sender Policy Framework (SPF), Domain-Based Message Authentication Reporting & Conformance (DMARC), and Domain Keys Identified Mail (DKIM) for email security
  - xiii. Enforce privileged access management for critical databases involving Protected Health Information (PHI) & Personally Identifiable Information (PII)
  - xiv. Maintain centralized patch management and centralized Antivirus server managing antivirus on end points
  - xv. Ensure continuous monitoring of all servers and systems against security threats using security solutions like Security Information and Event Management (SIEM) and Security Orchestration, Automation and Response (SOAR) and ingest Cyber Threat Intelligence from CERT-In for effective detection and prevention of cyber threats
  - xvi. Enable and maintain logs of the ICT infrastructure for a rolling period of 180 days as per the CERT-In directions. Conduct regular review of alerts and logs.
  - xvii. It would be preferable to keep all the systems containing sensitive data disconnected from the internet.
  - xviii. Deploy a dedicated team of personnel having capability in the cyber security domain.
  - xix. Monitor/Block the communication to malicious IPs and Domains regularly shared by CERT-In & other security agencies.
  - xx. Build and implement inventory management & change management process
4. Formulate security policies and procedures for building cyber resiliency. Prepare, test and implement Business Continuity Plan (BCP) and Disaster Recovery (DR) plan

5. Monitor/Block the communication to malicious IPs and Domains regularly shared by CERT-In & other security agencies
6. Follow measures suggested by CERT-In for cyber hygiene including prevention of ransomware attacks. Alerts and advisories are available on the following websites  
"https://www.cert-in.org.in"  
"https://www.cyberswachhtakendra.gov.in/index.html"
7. Cyber security incidents observed need to be mandatorily reported to CERT-In immediately at Incident Response Help Desk (1800114949, Email: incident@cert-in.org.in). CERT-In shall endeavor to respond to any incident pertaining to healthcare sector on PRIORITY.
8. Maintain situational awareness of latest cyber security threats and educate end users about security practices against cyber threats like phishing campaigns, social engineering

\*\*\*\*\*



**INDIAN-COMPUTER EMERGENCY RESPONSE TEAM**  
**Ministry of Electronics and IT**  
**Government of India**

No. 6(12)/2017-PDP-CERT-In

Dated: 14/03/2017

**Ref:** Ministry of Electronics and IT letter No. 1(1)/2017-CLES dated 13/2/2017

**Sub: Key Roles and Responsibilities of Chief Information Security Officers (CISOs) in Ministries/Departments and Organisations managing ICT operations**

**1. CISO to be appointed in each Ministry/Department/Organisation**

1.1 With the rapid digitalisation of functions and processes of Government/Government organizations, the need for adopting secure cyber practices is becoming extremely important. A cyber breach can cause severe financial damage, bring the functioning of Government/Government organisation to standstill. It is therefore imperative, that every organisation involved in the use of Information Technology in the discharge of its functions must identify and document its Information Security (IS) requirements that arise from various sources including the following sources:

- (a) An assessment of risks (RA) to the organisation in the context of the organisation's business strategy and objectives; through which threats to an organisation's information assets are identified, vulnerabilities and likelihood of occurrence are evaluated and their potential impact is estimated;
- (b) The legal, statutory, regulatory and contractual requirements that an organisation, its trading partners, contractors and service providers have to fulfil;
- (c) The set of principles, objectives and business requirements for Information handling, processing, storing, communicating and archiving that are developed for Operations Support in an organisation.

1.2 Organisations must identify and implement an **Information Security Management System (ISMS)** that encompasses Cyber Security as well as physical and logical security controls for risk mitigation as appropriate, to protect the organisation from business harm resulting from information security issues or cyber crises.

- 1.3 To ensure a structured mechanism, in accordance with best information security system practices, the Ministry of Electronics and IT has advised all Ministries/Departments to nominate a Chief Information Security Officer (CISO) for the Ministry/Department and also advise similar action to Chief Executives/Heads of Government organizations including PSUs/Autonomous Bodies/Attached Offices/ Statutory Bodies under their control. It shall be the responsibility of Secretary of the Ministry/Department (CEO/Head in case of organizations) to identify a member of senior management as a 'Chief Information Security Officer (CISO)' to establish a cyber security program, coordinate security policy compliance efforts across the organisation and interact regularly with CERT-In 'Point of Contact'.
- 1.4 The CISO must be given the mandate and resources to establish an Information Security program, coordinate security policy compliance efforts across the organisation and interact regularly with regulatory agencies such as CERT-In.
- 1.5 The CISO shall preferably report to the Secretary of the Ministry/Department (CEO/Head in case of organisations). If for some reason, that is not possible, CISO must report directly to next seniormost person in the Ministry/Department (CEO/Head in case of organisations)
- 1.6 The Ministry hereby issues a charter of roles and responsibilities for the CISOs so appointed. It shall be the duty of CISO to undertake the functions assigned herein with respect to cyber activities of his Ministry/Department/organization. The performance appraisal of the CISO may take these responsibilities into account while assessing the performance of the officer.

## 2. Roles and Responsibilities of CISOs

CISOs shall, inter alia, be responsible for the following:

- 2.1 Maintaining and updating the threat landscape for the organisation on a regular basis including staying up to date about the latest security threat environment and related technology developments.
- 2.2 Establishing a cyber security program and business continuity programme and for drafting of various security policies e.g., Information security policy, Data governance and classification policy, Access control policy, Acceptable use of assets



and asset management, Risk assessment and risk treatment methodology, Statement of Applicability, Risk management framework including third parties, Cryptography, Communications security, Information Security awareness programs for all personnel in the organisation and Incident management. This would also include:

- 2.2.1 Ensuring review of the Information Security Policy by internal and/or external subject matter experts to check for the adequacy and effectiveness of the ISMS programme
- 2.2.2 Reviewing and updating the cyber security policy documents.
- 2.2.3 Defining rules for secure and acceptable use of communication channels for the business requirements of the department/organization.
- 2.3 Developing and implementing a security architecture for the organisation by leveraging technology and understanding of threat landscape.
- 2.4 Establishing and reviewing the Risk Assessment methodology and selection of appropriate controls for risk mitigation by leveraging technology and an understanding of the threat landscape in the organisation.
- 2.5 Interacting with regulatory bodies and external agencies that could be of help to maintain information security for the organization, e.g. CERT-In
- 2.6 Ensuring that the following activities are carried out at regular intervals, either directly or through the deployment of subject matter experts:
  - 2.6.1 Log review, analysis and exception reporting
  - 2.6.2 **Vulnerability Assessment & Penetration Testing (VAPT)** of all websites, portals and IT systems, on a quarterly basis at a minimum; ensuring that websites are GIGW compliant
  - 2.6.3 **Web Application Security Assessment (WASA)** and white-listing of all web applications in use by the organisation, annually at a minimum
  - 2.6.4 **Software Development Lifecycle (SDLC) Audit and periodic Code Reviews** to ensure that applications continue to be secure
  - 2.6.5 **Information Security Audit** of IT Systems and controls, including site audits as appropriate, where online operations span multiple locations. The audit should ensure the following:
    - 2.6.5.1 No unsupported operating systems are in use in the department
    - 2.6.5.2 CISO prescribed hardening guidelines, patch management guidelines, anti virus / malware guidelines, no privilege access on endpoints, regular review of access privileges, acceptable configuration guidelines and procedures are properly implemented;

- 2.6.5.3 Ensure defined principles of secure software development process is followed for all software applications and the same is reflected in contracts, if software development is outsourced;
- 2.6.5.4 Citizen / customer data privacy to be ensured in case if citizen / customer data is captured and maintained;
- 2.7 Periodic assessment / audits of third party service providers to assess risks to you organisation;
- 2.8 Certify that the time synchronisation of the Network Time Protocol in the organisation has been done with the National Physical Laboratory.
- 2.9 **Issuing and periodic review** of device hardening guidelines, patch management guidelines, anti-virus / malware guidelines, User Access Management guidelines, privilege access management guidelines, end point management guidelines, connectivity guidelines for Trading partners and external agencies, controls on mobile devices and wireless technology
- 2.10 **Authorising an Acceptable Use policy for software packages and freeware** in consonance with the organisation's risk/threat landscape, business objectives and Security Policy & Procedures
- 2.11 Adopting a suitable IT Governance framework for implementing supporting processes such as **Configuration Management, Change Management, Incident Management and Problem Management** etc. CISO should ensure that appropriate instructions are issued for adherence to processes within the organisation and that no authorised changes are carried out to online systems without specific Change Approval.
- 2.12 Ensuring that the IT infrastructure deployed for online operations is kept up to date as per policy and is always under maintenance and technical support so that security patches and bug fixes are regularly applied to protect the infrastructure from vulnerabilities.
- 2.13 Ensuring that clauses pertaining to Information Security are incorporated into contracts/agreements/MoUs with service providers.
- 2.14 Securing senior management approval for emergent/urgent procurements necessary to keep the infrastructure safe from attacks and exploits
- 2.15 Developing and Implementation of scenario-based **Incident Response plans to deal with Cyber crises, contingencies and disasters, attack on IT systems** etc. This should include incident containment, assessment, root cause analysis, mitigation/



prevention, continuous monitoring, forensics and reporting as required. This should include the following:

- 2.15.1 Ensuring that Incidents, especially repeat incidents are investigated and corrective action taken as identified through a comprehensive Root Cause Analysis (RCA)
- 2.15.2 Ensuring that information security incidents are reported to CERT-In
- 2.16 Coordination with stakeholders in all matters related to internal and external security and covering the following aspects:
  - 2.16.1 Assessing the adequacy of controls for Confidentiality, Integrity and Availability of all the Information Systems;
  - 2.16.2 Explaining exceptions, if any, to security policies and procedures along with the risk to business;
  - 2.16.3 Systematically identifying and managing security risks from an end-to-end perspective on a periodic basis;
  - 2.16.4 Assessment of the maturity and effectiveness of the security program;
  - 2.16.5 Steps proposed to remediate gaps identified, if any; and
  - 2.16.6 Impact of the incidents and breaches on the organisation from a business perspective.
- 2.17 Establishing a **Cyber Crisis Management Group** with the head of organisation (or his appointed representative) as its Chairman and to prepare a list of contact persons to be contacted during crisis e.g. internal: financial, personnel etc. and external: law enforcement agencies, CERT-In etc. complete with up-to-date contact details. CCMG should authorise a **Cyber Crisis Management Plan (CCMP)** outlining roles and responsibilities of organisational stakeholders. Implementing the CCMP, including security best practices and specific action points:
  - 2.17.1 Planning and executing periodic disaster recovery drills/simulation exercises in order to establish the adequacy of the Business Continuity Plan
  - 2.17.2 Ensuring that periodic tests are conducted to evaluate the adequacy and effectiveness of technical security control measures, especially after each significant change to the IT applications/systems/networks as well as after any major incident
  - 2.17.3 Where the geographical spread of IT Systems and online operations spans multiple locations across the country, identifying personnel responsible for implementation of information security at the local level as well as for periodic reporting as required to the CISO.
- 2.18 Coordinating all matters related to security internally and externally while providing regular reports to the head of the organisation covering the following aspects:

- 2.18.1 Assessing the adequacy of controls for confidentiality, integrity and availability of all the information systems;
- 2.18.2 Explaining exceptions, if any, to security policies and procedures along with the risk to business;
- 2.18.3 Systematically identify and manage security risks from an end to end perspective on a periodic basis;
- 2.18.4 Assessment of the maturity and effectiveness of the security program;
- 2.18.5 Steps proposed to remediate gaps identified, if any; and
- 2.18.6 Impact of the incidents and breaches on the organisation from a business perspective.
- 2.19 Develop and implement ICT disaster recovery and security incident management processes, which consists of following activities:
  - 2.19.1 To coordinate response to security incidents;
  - 2.19.2 To prepare evidence for legal action following an incident; and
  - 2.19.3 To comply with the security suggestions provided to them in incidents' analysis' reports;
  - 2.19.4 To analyze incidents in order to prevent their recurrence; and
  - 2.19.5 To report information about security incidents without delay to CERT-In.

-----





## Fwd: Implementation of Technical Resignation and the benefits of past services - Reg

K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>

Wed, Nov 29, 2023 at 4:15 PM

To: director <director@aiimsbhopal.edu.in>, dydir <dydir@aiimsbhopal.edu.in>, director <director@aiimsbhubaneswar.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, director <director@aiimsjodhpur.edu.in>, dda <dda@aiimsjodhpur.edu.in>, director <director@aiimspatna.org>, dda <dda@aiimspatna.org>, director <director@aiimsraipur.edu.in>, dda <dda@aiimsraipur.edu.in>, directoraiimsnagpur <directoraiimsnagpur@gmail.com>, dda <dda@aiimsnagpur.edu.in>, T Mag <thaiu.mag@gov.in>, puranik 6 <puranik\_6@hotmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, ao aiimsmadurai <ao.aiimsmadurai@gmail.com>  
Cc: Vivek Kumar Mishra <vivek.mishra92@gov.in>, DevenderKumarGothal DevenderKumarGothal <dev.gothal@gov.in>

### REMINDER

Sir/Madam

Please see the trailing mail and provide the inputs urgently.

**From:** "K.Balasubramanian Under Secretary" <k.balasubramanian38@nic.in>

**To:** "pmssysection" <pmssysection@gmail.com>

**Sent:** Friday, November 24, 2023 3:46:21 PM

**Subject:** Fwd: Implementation of Technical Resignation and the benefits of past services - Reg

**From:** "K.Balasubramanian Under Secretary" <k.balasubramanian38@nic.in>

**To:** "director" <director@jipmer.ac.in>, pgmir-chd@nic.in

**Sent:** Wednesday, November 22, 2023 6:05:23 PM

**Subject:** Fwd: Implementation of Technical Resignation and the benefits of past services - Reg

**From:** "K.Balasubramanian Under Secretary" <k.balasubramanian38@nic.in>

**To:** director@jipmer.edu.in, director@jipmer.ac.in, "pgimer chd" <pgimer.chd@nic.in>, "Srinivas.M" <director@aiims.gov.in>

**Sent:** Wednesday, November 22, 2023 6:02:25 PM

**Subject:** Fwd: Implementation of Technical Resignation and the benefits of past services - Reg

Pl. urgent send the reply urgently

**From:** "K.Balasubramanian Under Secretary" <k.balasubramanian38@nic.in>

**To:** "dydir" <dydir@aiimsbhopal.edu.in>, "director" <director@aiimsbhopal.edu.in>, "dda" <dda@aiimsbhubaneswar.edu.in>, "director" <director@aiimsbhubaneswar.edu.in>, "dda" <dda@aiimsjodhpur.edu.in>, "director" <director@aiimsjodhpur.edu.in>, "dda" <dda@aiimsraipur.edu.in>, "director" <director@aiimsraipur.edu.in>, "Saroj Singh" <sarojkr.singh@gov.in>, "rajwanshiarvind" <rajwanshiarvind@hotmail.com>, "ddoaiimsgkp" <ddoaiimsgkp@gmail.com>, "directoraiimsnagpur" <directoraiimsnagpur@gmail.com>, "dda" <dda@aiimsnagpur.edu.in>, "dda aiimsbibinagar" <dda.aiimsbibinagar@gmail.com>, "Director AIIMS Bibinagar" <director@aiimsbibinagar.edu.in>, "AMRENDRA KUMAR" <amrendra.kumar72@gov.in>, "director" <director@aiimsbilaspur.edu.in>, "ddaaiimsbilaspur" <ddaaiimsbilaspur@gmail.com>, "ps dda aiimsrajkot" <ps.dda.aiimsrajkot@gmail.com>, "dda aiimsrajkot" <dda.aiimsrajkot@gmail.com>, "cdskatoch" <cdskatoch@gmail.com>, "T Mag" <thaiu.mag@gov.in>, "puranik 6" <puranik\_6@hotmail.com>, "ddamadurai1189" <ddamadurai1189@gmail.com>, "ao aiimsmadurai" <ao.aiimsmadurai@gmail.com>

**Sent:** Wednesday, November 22, 2023 4:28:47 PM

**Subject:** Fwd: Implementation of Technical Resignation and the benefits of past services - Reg

**From:** "K.Balasubramanian Under Secretary" <k.balasubramanian38@nic.in>

**To:** "director" <director@aiimspatna.org>, "dda" <dda@aiimspatna.org>

**Sent:** Wednesday, November 22, 2023 4:10:39 PM

**Subject:** Implementation of Technical Resignation and availing the benefits of past services - Reg

Sir,

PFA

K.Balasubramanian  
Under Secretary(PMSSY-IV)  
MoHFW  
Tele:23060010



**Technical Resignation letter.pdf**

102K



I/3620474/2023

**F.No. Z-28016/192/2020-PMSSY-IV**  
**Government of India**  
**Ministry of Health and Family Welfare**  
**(PMSSY-IV Section)**

\*\*\*\*

Room No.745A, Nirman Bhavan, New Delhi  
Dated the 9th October 2023

To

The Director, AIIMS New Delhi.  
The Director, PGIMER, Chandigarh.  
The Director, JIPMER, Puducherry.  
All Directors/Executive Directors of new AIIMS.

**Subject: Implementation of Technical resignation and availing the benefits of past service.**

Madam/Sir,

I am directed to state that the matter regarding implementation of Technical resignation and availing the benefits of past service in respect of employees of new AIIMS is being deliberated in the Ministry. The matter was discussed in various Standing Finance Committee meetings and also in the 5<sup>th</sup> Central Institute Body meeting held on 16.06.2021.

2. Several representations were received from new AIIMS seeking clarifications on acceptance of technical resignation. A proposal was referred by the Ministry to the Department of Personnel and Training (DoP&T) with the request to allow extension of benefits of technical resignation to faculty/officers of various new AIIMS.

3. Vide note dated 16.06.2022 (copy enclosed), DoP&T stated that *AIIMS is an autonomous organization. The Rules and instructions which are issued by this Department under proviso to Article 309 of the Constitution are applicable only to the Central Government Civilian "employees" and "posts". These are, unless clearly specified, not suo motu applicable to the employees of Autonomous Bodies, Statutory Organizations, Public Sector Enterprises, Trusts, Banks etc. which are governed by their respective Statute/Act by which they are created or came into existence and the Bye-laws/regulations of the bodies concerned. The concerned bodies, with the approval of the concerned administrative Ministry/Department, may adopt the Rules/instructions of this Department to the extent necessary, as a part of service conditions of employees of such Organizations but this does not bring them directly under the Rules/instructions of this Department. It is, therefore, for the Administrative Ministry concerned to take appropriate decision in respect of employees of such bodies, as per the Rules applicable to them.*

4. The matter was further deliberated in the Ministry and the pros and cons of allowing the benefits of technical resignation to employees of AIIMS are given as under:

**Pros - Allowing technical resignation to employees of new AIIMS**

- (i). Employees working in one new AIIMS will get the option of transfer to another new AIIMS without having to resign their posts. This will benefit them because they may get to work near their home town which could help them to stay with their families. Issues relating to availability of residential accommodation, schooling of their children will be addressed if acceptance of technical resignation is allowed.
- (ii). Acceptance of technical resignation of employees will not result in the lapse of the leave to the credit of the employees. Therefore, there will be continuity for accumulation of leave which will benefit the employees.
- (iii). Acceptance of technical resignation of employees will allow entitlement to Leave Travel Concession (LTC) to be carried forward who joins another AIIMS after submitting technical resignation.
- (iv). Acceptance of technical resignation of employees will allow pay protection, eligibility of past service for reckoning of the minimum period for grant of annual increment which will benefit the employees.
- (v). Acceptance of technical resignation of employees could also encourage employees of State Govt./Central Govt. to apply for posts in new AIIMS.
- (vi). In view of above, allowing technical resignation of employees will definitely benefit the employees. This could also benefit some new AIIMS which could attract experienced employees to work in their Institute, which they are otherwise finding it difficult to attract.

**Cons - Allowing technical resignation to employees of new AIIMS**

- (i). Acceptance of technical resignation of employees will put additional financial burden of new AIIMS on payment of salaries as the employees will join with entitlement of pay protection, Leave, LTC, Pay protection, etc.
- (ii). Allowing technical resignation of employees and joining in another Institute could result in jumbling in seniority list which may cause heart burn to existing employees.
- (iii). Acceptance of technical resignation and movement of employees from one AIIMS to another could hamper the promotion opportunities of existing employees.
- (iv). All AIIMS are independent autonomous organisations and each Institute issue their own advertisements inviting applications from candidates, conduct tests/interviews and, appoint employees to work in their institutions. The cost involved and the efforts made in the process will go waste if employees submit technical resignation and join another AIIMS.
- (v). Acceptance of technical resignation and transfer of employees from one AIIMS to another AIIMS will affect the long term plan of the Institutes on human resource management.



I/3620474/2023

5. The following points were placed before the Competent Authority for perusal:

(i). All new AIIMS/INIs are receiving Grant-in-Aid from the Ministry of Health and Family Welfare and, therefore, the financial implication on account of technical resignation will be revenue neutral and will not affect the Institute as employee of one AIIMS/INIs will be joining another AIIMS/INIs only.

(ii). At the same time, all new AIIMS/INIs will be benefited as they can attract officers/faculties from other Institutions. Officers/Faculties with vast experience would not hesitate to join new AIIMS as their pay and other benefits would be protected. Even officers/faculties from Govt. Hospitals may apply for the posts in these Institutes. It is expected that this will help to improve in filling up the large number of vacant posts in these Institutes.

(iii). As AIIMS/INIs are situated all over the country, there are cases where one of the spouse is working in one institute and the other is working in other Institute. As there is no transfer policy, transfer on spouse ground is not allowed presently. If the benefit of technical resignation is available, one of the spouse may get the opportunity to apply for the post in another Institute where the other spouse is working, thereby their family life is not disturbed.

6. It was proposed that implementation of technical resignation with pay protection to employees may be considered within AIIMS/INIs. If any officer/faculty from INIs (AIIMS New Delhi, PGIMER Chandigarh and JIPMER Puducherry) gets an offer to join new AIIMS and vice versa, technical resignation with pay protection along with consequential benefits may be allowed.

7. The Competent Authority has advised to circulate the proposal to all AIIMS and INIs for comments.

8. In view of above, it is requested to furnish your comments in the matter positively within two weeks to take up the matter further.

Yours faithfully,

Signed by

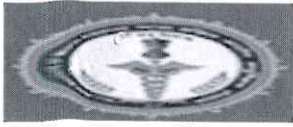
(K Balasubramanian)

Under Secretary to the Govt. of India  
Date: 09-10-2023 10:20:15  
Tele : 011-23063190

Copy to:

- (i). DD (A)s of INIs and all new AIIMS
- (ii). Director (INI), MoHFW, New Delhi, with the request to obtain and send the comments of AIIMS New Delhi, PGIMER Chandigarh and JIPMER Puducherry.

Copy to information to: PPS to JS (AMB)



## Cyber Security Reminder - II

**Vivek Kumar Mishra** <vivek.mishra92@gov.in>

Sat, Dec 2, 2023 at 12:57 PM

To: "Director, AIIMS Bhubaneswar" <director@aiimsbhubaneswar.edu.in>, director@aiimsjodhpur.edu.in, director@aiimspatna.org, Director AIIMS Raipur <director@aiimsraipur.edu.in>, director@aiimsrishikesh.edu.in, edaiimsrbl@gmail.com, rajwanshiarvind@hotmail.com, director@aiimsmangalagiri.edu.in, directoraiimsnagpur@gmail.com, sramji57 <sramji57@gmail.com>, executivedirector@aiimsgorakhpur.edu.in, "Prof. Dr. D.K. Singh, Director" <director@aiimsbathinda.in>, director@aiimsdeoghar.edu.in, Director AIIMS Bibinagar <director@aiimsbibinagar.edu.in>, vsnegi22@yahoo.co.in, shakti810505@gmail.com, drmhraosvims1957@gmai.com, puranik\_6@hotmail.com, madhabananda@gmail.com, director@aiimsguwahati.ac.in  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, "Dr. PRADIP KUMAR" <kpradip10@gmail.com>, kochas27@gmail.com, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, office.aiimsdeoghar@gmail.com, dda@aiimsdeoghar.edu.in, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, T Mag <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, dda@aiimsguwahati.ac.in, DINESH KUMAR <dinesh.kumar14@nic.in>, ARUN KUMAR BISWAS <ak.biswas57@nic.in>, "K.Balasubramanian Under Secretary" <k.balasubramanian38@nic.in>

Sir/Madam,


Please find attached a communication regarding the subject mentioned above.


Regards,

Vivek Kumar Mishra,  
Section Officer  
PMSSY IV Section  
Ministry of Health and Family Welfare

---

### 3 attachments

 encl 1 cyber sec.pdf  
82K

 encl 2 cyber sec.pdf  
78K

 issued cyber security reminder 01122023.pdf  
78K



**No. Z. 28015/86/2023-PMSSY-IV**  
**Government of India**  
**Ministry of Health and Family Welfare**  
**(PMSSY-IV Section)**

\*\*\*\*

**Room No. 745A, Nirman Bhawan, New Delhi**  
**Dated the 17th November, 2023**

To

The Directors/ Executive Director, all new AIIMS

**Subject: Cyber Security - reg.**

Madam/Sir,

I am directed to refer to the subject cited above, and to state that the Health sector especially Institutions like AIIMS, Institutes of National Importance (INIs) and other Autonomous Bodies / Statutory Bodies under MoHFW are prone to cyber attacks and therefore it is essential that all cyber security related protocols are strictly adhered to .

2. In view of the above, you are advised to ensure strict adherence to and compliance of the following Cyber Security Measures in your Institute as per directions received from MeITY, CERT-In & National Critical Information Infrastructure Protection Centre (NCIIPC):

- i. To appoint a Chief Information Security Officer (CISO) in each Department/Organization/Autonomous Bodies / Statutory Bodies/Attached Offices under MoHFW.
- ii. To ensure all medical devices properly configured and secured, with strong passwords and regularly updated software
- iii. To Implement robust data protection measures to protect personal data
- iv. To develop and regularly testing a crisis management and response plan to follow in the event of a cyber-attack, to minimize the impact and quickly restore normal operations.
- v. To provide regular cyber security training to employees.

3. Keeping cyber security in view, the following actions and timelines are provided for immediate implementation:

Sl. No.	Action (Priority: High)	Timelines	Reference

I/3629724/2023

1	To appoint a Chief Information Security Officer (CISO) in each Department/Organization/ Autonomous Bodies / Statutory Bodies/Attached Offices	20th November, 2023	Refer eHealth DO dated 10th November, 2023 for CISO role & responsibility <b>(copy enclosed)</b>
2.	To ensure renew/close all inactive websites duly following security guidelines	30th November, 2023	Refer eHealth OM dated 13th July, 2023 <b>(copy enclosed)</b>
4	To ensure Installation/renewal of Security Sockets Layer (SSL) certificate in all websites	30th November, 2023	Refer eHealth OM dated 13th July, 2023 <b>(copy enclosed)</b>
5	Security Audit all authorized medical care entities/ service providers/Websites/ Portal/Applications from CERT-In empanelled auditors.	31st December, 2023	Refer eHealth OM dated 6th November, 2023 <b>(copy enclosed)</b>

4. It is requested to take necessary action on the above matter as per timeline and to provide the compliance report to this Ministry at the earliest.

Yours faithfully,

Signed by  
(K Balasubramanian)  
Under Secretary to the Govt. of India  
Date: 17-11-2023 10:27:27  
Tele : 011-23060010

Copy to: DD (Admin.) of all new AIIMS.



Reminder I

**Z-28015/86/2023-PMSSY-IV**  
**Government of India**  
**Ministry of Health & Family Welfare**  
**(PMSSY-IV Division)**

**745 A, Nirman Bhawan, New Delhi.**

**Date: 23.11.2023**

To

The Directors/ Executive Director, all new AIIMS (as per the list)

**Subject: Cyber Security -reg.**

Madam/Sir,

I am directed to refer to the subject mentioned above and to say that vide this Ministry's letter dated 22.12.2022 (copy enclosed) along with letter of DG CERT-in, all the new AIIMSs were requested to conduct security audit of their IT resources. Further, vide letter of even number dated 17.11.2023 another communication has also been sent to all new AIIMS regarding Cyber Security for compliance.

2. Security Audit of the IT platforms is a high priority item. However, the Institutes are yet to provide compliance report. It is requested to take necessary action immediately and send compliance report **positively latest by 28.11.2023.**

Yours faithfully,

Signed by

(K. Balasubramanian)

Under Secretary to the Govt. of India

Tele:011-2306 0010

Encl. As above

Copy to: Deputy Director (Admn.) of new AIIMS

**Reminder II**

Z-27023/86/2023-PMSSY-IV

Government of India  
Ministry of Health & Family Welfare  
(PMSSY-IV Division)

745 A, Nirman Bhawan, New Delhi.  
Date: 01 December, 2023

To

The Directors/Executive Directors,  
to new AIIMS (as per list)

**Subject: Cyber Security -reg.**

Sir,

I am directed to refer to the letter of even number dated 17.11.2023 and 23.11.2023 (Copies enclosed) regarding the subject mentioned above and to state that compliance report is still awaited from your Institute. It is requested to expedite the matter without further delay and **send the compliance report by 04.12.2023 positively.**

Yours faithfully,

Signed by

(K. Balasubramanian)

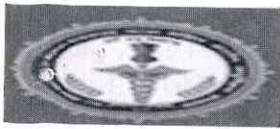
Under Secretary to the Govt. of India

Tele:011-2306 0010

Encl. As above

Copy to: Deputy Director (Admn.) of new AIIMS (as per list)





## Instructions received from Department of Legal Affairs for engagement/appointment of Government Counsel from the panel of Union of India- reg.

1 message

**Pmssy Section** <pmssysection@gmail.com>

Tue, Dec 19, 2023 at 3:24 PM

To: "AIIMS Bhopal, Director" <director@aiimsbhopal.edu.in>, "Director, AIIMS Bhubaneswar" <director@aiimsbhubaneswar.edu.in>, director@aiimsjodhpur.edu.in, director@aiimspatna.org, Director AIIMS Raipur <director@aiimsraipur.edu.in>, director@aiimsrishikesh.edu.in, rajwanshiarvind@hotmail.com, director@aiimsmangalagiri.edu.in, vdajet@rediffmail.com, ED@aiimskalyani.edu.in, surekhakishore <surekhakishore@rediffmail.com>, "Prof. Dr. D.K. Singh, Director" <director@aiimsbathinda.in>, director@aiimsdeoghar.edu.in, vsnegi22@yahoo.co.in, Director AIIMS Bibinagar <director@aiimsbibinagar.edu.in>, shakti810505@gmail.com, director@aiimsguwahati.ac.in, ed aiimsrajkot <ed.aiimsrajkot@gmail.com>, drmhraosvims1957@gmail.com  
Cc: dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, DDA AIIMS PATNA <dda@aiimspatna.org>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiimsmangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, "Dr. PRADIP KUMAR" <kpradip10@gmail.com>, kochas27@gmail.com, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, dda@aiimsdeoghar.edu.in, dda@aiimsbilaspur.edu.in, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, dda@aiimsbhubaneswar.edu.in, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, ddaaiimsrbl@gmail.com, dda@aiimskalyani.edu.in, dda@aiimsgorakhpur.edu.in, amrendra kumar <akumar.its96@gmail.com>, dda@aiimsdeoghar.edu.in, dda@aiimsbilaspur.edu.in, dda@aiimsguwahati.ac.in, adminofficer@aiimsguwahati.ac.in, dda@aiimsnagpur.edu.in, "Cc:" <dinesh.kumar14@nic.in>, "K.Balasubramanian Under Secretary" <k.balasubramanian38@nic.in>, ak.biswas57@nic.in, vivek.mishra92@gov.in

Sir/ Madam

Please find the attachment.

Note: In case this email requires you to reply, you are requested to cc your reply to all the officers in cc to this email.


Regards


PMSSY-IV Section

Ministry of Health and Family Welfare

### 3 attachments

 document-249.pdf  
77K

 Encl 17.12.2021.pdf  
387K

 Encl 30.06.2017.pdf  
1075K

I/3636893/2023

Z-28016/162/2023-PMSSY-IV

Government of India  
Ministry of Health & Family Welfare  
(PMSSY-IV Division)

745 A, Nirman Bhawan, New Delhi.  
Date:18-12-2023

To

The Director/Executive Director,  
All new AIIMSs

**Subject: Instructions received from Department of Legal Affairs for engagement/appointment of Government Counsel from the panel of Union of India- reg.**

Sir,

I am directed to forward herewith the instructions received from Department of Legal Affairs for engagement/appointment of Government Counsel from the panel of Union of India vide Department of Legal Affairs' OM dated 30.06.2017 and DO letter dated 09.12.2021 and this Ministry's OM dated 17.12.2021 (copies enclosed) for compliance.

Yours faithfully,

Signed by  
K.balasubramanian  
(K. Balasubramanian)  
Date:18-12-2023

Under Secretary to the Govt. of India  
Tele:011-2306 0010

Encl. As above

Copy to:

1. Deputy Director (Admin.) of all new AIIMSs



OFFICE MEMORANDUM

**Subject :-** For engagement/ appointment of Government counsel from the panel of Union of India for defending court cases where Union of India is also a party alongwith an Autonomous Body.

-----  
The undersigned is directed to forward herewith D.O. Letter No. J-18/50/2021-Judicial dated 09.12.2021 from Secretary, Department of Legal Affairs and Office Memorandum J-12012/2/2017- Judicial dated 30.06.2017 (copy enclosed) on the above subject received from Department of Legal Affairs wherein the Ministries/Departments of Government of India have been advised to issue instructions to the autonomous bodies under their administrative control that the 1 Court Cases wherein Union of India is also a party along with an autonomous body, the same should be defended on behalf of both, the autonomous body as well as Union of India by the Panel Counsel engaged by the Department of Legal Affairs only.

2. In this regard, all the autonomous bodies and the Divisions of the Ministry are requested to comply with the instructions as received from the Department of Legal Affairs in this regard.

This issues with the approval of Competent Authority.

Digitally Signed by Manish Raj  
Date: 17-12-2021 14:44:41  
Reason: Approved  
(Manish Raj)

Under Secretary to the Government of India  
email: legal-mohfw@gov.in  
Telephone:011-23062068

Enclosure: As above

To,

- i. 1. The DGHS, Dte. General Health Services, Nirman Bhawan, New Delhi.
- ii. 2. The Secretary, Deptt. of Health Research, IRCS Building, New Delhi.
- iii. 3. Heads of all Autonomous Bodies under MoHFW.

**Copy for information:-**

PPS to Secretary (Health), AS(AS)/ AS(AA)/ AS(VS)/ AS(MA);

JS(VC)/ JS(LA)/ JS(MKB)/ JS(VHZ)/ JS(VJ)/ JS(PS)/ JS(PAB)/ JS(HS)/ JS(GM)/ JS(VK)/ JS(RS).



F. No. J-12012/2/2017-Judicial  
Government of India  
Ministry of Law & Justice  
Department of Legal Affairs  
Judicial Section  
....

Shastri Bhawan, New Delhi.  
Date 29<sup>th</sup> June, 2017

-30%

OFFICE MEMORANDUM

**Sub: For engagement / appointment of Government counsel from the panel of Union of India for defending Court cases where Union of India is also a party alongwith an Autonomous Body.**


The undersigned is directed to state that it has come to notice of this Department that in a number of cases before Tribunals and Courts, where Union of India and autonomous bodies are the main contestant parties, the Counsel appearing on behalf of autonomous bodies are not defending the cases in true spirit. This has resulted in matters having been lost despite the fact that experienced panel Counsel (for UoI) were available to properly defend the case.

2 Apart from the above, Ministry of Law & Justice has received complaints against the Counsel representing autonomous bodies that many such Counsel are not assisting the panel Counsel of Union of India wherever they have been engaged, giving way to many legal complications / problems due to the vested interests of such Counsel

3 It is also pertinent to mention here that most of the autonomous bodies are not only funded by Government of India but also governed by various rules and regulations of the Government of India. They are also cooperative with the Government of India in implementing various policy decisions. Any adverse decision of the courts impacts the policy framework of the Government as well as set principals and also imposes huge financial implications on the Government of India

4 In light of the above, all the Ministries / Departments are advised to issue instructions to the autonomous bodies under their administrative control that the cases where Union of India is also a party along with an autonomous body, should be defended on behalf of both, the autonomous body as well as Union of India before any Court / Tribunal by the panel Counsel engaged by the Department of Legal Affairs only

This issues with the approval of competent authority.

  
(R. K. Srivastava)  
Deputy Legal Adviser

All the Ministries / Departments of Govt. of India.

Page 1 of 2

अनूप कुमार मेंदीरत्ता

Anoop Kumar Mendiratta



सचिव  
विधि और न्याय मंत्रालय  
भारत सरकार  
SECRETARY  
DEPARTMENT OF LEGAL AFFAIRS  
MINISTRY OF LAW & JUSTICE  
GOVERNMENT OF INDIA

D.O. No. J-18/50/2021-Judicial

Dated : 09<sup>th</sup> December, 2021

Dear Secretary,

Kind attention is invited to this Department's earlier Office Memorandum No. J-12012/2/2017-Judicial dated 30.06.2017 (copy enclosed for ready reference) issued to all the Ministries/Departments under the Government of India advising all the Ministries/Departments to issue instructions to the autonomous bodies under their administrative control that the cases wherein Union of India is also a party along with an autonomous body, the same should be defended on behalf of both before any Court or Tribunal, by the panel counsel engaged by the Department of Legal Affairs, Ministry of Law and Justice.

2. It may be impressed upon that most of the autonomous bodies are not only funded by the Government of India but are also governed by the rules and regulations framed by Government of India and as such are expected to implement various policy decisions in true spirit. However, it has been observed that some of the autonomous bodies functioning under the respective Ministries/Departments have been availing the services of their own panel counsel or private counsels, in litigations wherein Union of India is also a party. As such, any adverse decision of the courts impacts the policy framework of the Government of India.

3. In view of above, all the Ministries/Departments are advised to issue instructions to the autonomous bodies under their administrative control that the cases wherein Union of India is also a party along with an autonomous body, the same should be defended on behalf of both, the autonomous body as well as Union of India before any Court or Tribunal by the panel counsel engaged by the Department of Legal Affairs only.

With warm regards,

Yours sincerely,

(Anoop Kumar Mendiratta)

Encl : As above

To

All the Secretaries to Govt. of India

चतुर्थ तल, शास्त्री भवन, डा. राजेन्द्र प्रसाद रोड, नई दिल्ली-110 001

4th Floor, Shastri Bhawan, Dr. R.P. Road, New Delhi-110 001

Tel. : +91-11-23384205, 23387908, Fax : +91-11-23384403, E-mail : secylaw-dla@nic.in

Generated from eOffice by SARITA, EA(S)-PMSSY, DEO, DOHFW DEPARTMENT ON 19/12/2023 6:30 PM

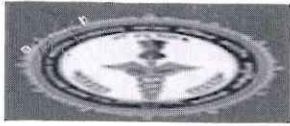


-2-

**Copy for information to :**

1. Law Officers/Assistant Solicitors General of India as per list enclosed.
2. The Incharge, Central Agency Section, Supreme Court Compound, New Delhi.
2. Branch Secretariats at Mumbai, Kolkata, Chennai & Bengaluru.
3. Incharge, Litigation (High Court/CAT) Section.
4. Incharge, Litigation (Lower Court) Section.

  
(Anoop Kumar Mendiratta)



## Fwd: Pay Fixation of retired Government Servants- reg

2 messages

Director . <director@aiimspatna.org>  
To: DDA AIIMS PATNA <dda@aiimspatna.org>

Thu, Dec 21, 2023 at 12:40 PM

Sd/-  
Prof. (Dr.) Gopal Krushna Pal  
Executive Director & CEO,  
All India Institute of Medical Sciences Patna  
Bihar - 801 507  
Email: director@aiimspatna.org  
Tel: 06122451109

----- Forwarded message -----

From: **Vivek Kumar Mishra** <vivek.mishra92@gov.in>  
Date: Wed, Dec 20, 2023 at 11:03 AM  
Subject: Pay Fixation of retired Government Servants- reg  
To: AIIMS Bhopal, Director <director@aiimsbhopal.edu.in>, Director, AIIMS Bhubaneswar <director@aiimsbhubaneswar.edu.in>, <director@aiimsjodhpur.edu.in>, <director@aiimspatna.org>, Director AIIMS Raipur <director@aiimsraipur.edu.in>, <director@aiimsrishikesh.edu.in>, <edaiimsrbl@gmail.com>, <rajwanshiarvind@hotmail.com>, <director@aiismangalagiri.edu.in>, <directoraiimsnagpur@gmail.com>, sramji57 <sramji57@gmail.com>, Prof. Dr. D.K. Singh, Director <director@aiimsbathinda.in>, <director@aiimsdeoghar.edu.in>, Director AIIMS Bibinagar <director@aiimsbibinagar.edu.in>, <vsnegi22@yahoo.co.in>, <shakti810505@gmail.com>, <drmhraosvims1957@gmail.com>, <cdskatoch@gmail.com>, <puranik\_6@hotmail.com>, <madhabananda@gmail.com>, dydir <dydir@aiimsbhopal.edu.in>, dda <dda@aiimsbhubaneswar.edu.in>, Manumanish Gupta <guptairss@gmail.com>, DDA AIIMS JODHPUR <dda@aiimsjodhpur.edu.in>, DDA AIIMS Raipur <dda@aiimsraipur.edu.in>, dda <dda@aiimsrishikesh.edu.in>, Saroj Singh <sarojkr.singh@gov.in>, dda <dda@aiismangalagiri.edu.in>, ddaiimsnagpur1 <ddaiimsnagpur1@gmail.com>, Dr. PRADIP KUMAR <kpradip10@gmail.com>, <kochas27@gmail.com>, Rajeev Sen Roy <rajeevsenroy30@gmail.com>, Rajeev Sen Roy <dda@aiimsbathinda.edu.in>, AMRENDRA KUMAR <amrendra.kumar72@gov.in>, <office.aiimsdeoghar@gmail.com>, <dda@aiimsdeoghar.edu.in>, dda aiimsbibinagar <dda.aiimsbibinagar@gmail.com>, ddaaiimsbilaspur <ddaaiimsbilaspur@gmail.com>, ddaaiimsjammu <ddaaiimsjammu@gmail.com>, ddamadurai1189 <ddamadurai1189@gmail.com>, dda aiimsrajkot <dda.aiimsrajkot@gmail.com>, T Mag <thaiu.mag@gov.in>, Rakesh Kumar <rakeshkumar7123@yahoo.in>, <cao.finance@aiimsbhopal.edu.in>, <fa@aiimsbhopal.edu.in>, <fa@aiimsbhubaneswar.edu.in>, <aco@aiimsjodhpur.edu.in>, AMIT MUNDRA <amitpmundra@gmail.com>, <fa@aiimsjodhpur.edu.in>, <fa@aiimsraipur.edu.in>, <fa@aiimsrishikesh.edu.in>, <aiimsrbl@gmail.com>, <fa@aiismangalagiri.edu.in>, <fa@aiimsnagpur.edu.in>, <fic-finance@aiimskalyani.edu.in>, Kumar Abhay IAAS <abhayk@cag.gov.in>, <accounts@aiimsbilaspur.edu.in>, <acctsofficeraiimsjammu@gmail.com>  
Cc: DINESH KUMAR <dinesh.kumar14@nic.in>, K.Balasubramanian Under Secretary <k.balasubramanian38@nic.in>, ARUN KUMAR BISWAS <ak.biswas57@nic.in>, DevenderKumarGothal <dev.gothal@gov.in>, pmssysection <pmssysection@gmail.com>

Sir/Madam,

Please find attached a communication regarding the subject mentioned above.


Regards,

Vivek Kumar Mishra,  
Section Officer  
PMSSY IV Section  
Ministry of Health and Family Welfare



---

**3 attachments**

 **encl issued pay fixation 22112023.pdf**  
77K

 **encl 2 issued pay fixation 08112023.pdf**  
91K

 **issued Pay fixation 20122023.pdf**  
95K

---

**DDA AIIMS PATNA** <dda@aiimspatna.org>

Sat, Dec 23, 2023 at 5:36 PM

To: Vivek Kumar Mishra <vivek.mishra92@gov.in>

Cc: DINESH KUMAR <dinesh.kumar14@nic.in>, "K.Balasubramanian Under Secretary" <k.balasubramanian38@nic.in>, ARUN KUMAR BISWAS <ak.biswas57@nic.in>, DevenderKumarGothal DevenderKumarGothal <dev.gothal@gov.in>, pmssysection <pmssysection@gmail.com>, Director <director@aiimspatna.org>

Sir/Madam,

Please find attached previous reply/ compliance report sent in this regard for your perusal and necessary action.

Regards,

Deputy Director (Admin.)

AIIMS, Patna

801507

[Quoted text hidden]

---

 **Fixation of Pay of Retired Government Servant.pdf**  
244K

I/3630584/2023

Z-28016/123/2021-PMSSY-IV(Part-1)  
Government of India  
Ministry of Health & Family Welfare  
(PMSSY-IV Division)  
\*\*\*\*\*

**REMINDER**

745 A, Nirman Bhawan, New Delhi.  
Date:22.11.2023

To

The Directors/Executive Directors of all new AIIMS.

**Subject: Fixation of pay of retired government servants - Reg**

Madam/Sir,

I am directed to refer to this Ministry's letter of even number dated 08.11.2023 (copy enclosed) on the subject mentioned above and to state that the compliance report has not yet been received.

2. It is requested again to send the compliance report without further loss of time.

**Encl(1): As above**

Yours faithfully,

Signed by

(K. Balasubramanian)  
Under Secretary to the Govt. of India  
Date: 23/11/2023 06:11:50

**Copy to: (for appropriate action)  
Deputy Director (Admn.)/FA of all new AIIMS**



I/3627837/2023

Z-28016/123/2021-PMSSY-IV (Part 1)  
Government of India  
Ministry of Health & Family Welfare  
(PMSSY-IV Division)  
\*\*\*\*\*

745 A, Nirman Bhawan, New Delhi.  
Date: 08.11.2023

To

The Directors/Executive Directors of all new AIIMS.

**Subject: Fixation of pay of retired government servants.**

Madam/Sir,

I am directed to state that this Ministry had consulted Department of Expenditure in connection with fixation of pay of retired government servants. Vide MoF (DoE) ID No. 03-25/2020-E.III (A) dated 13.10.2023 (copy enclosed), Department of Expenditure has advised that *the principles of remuneration of retired Central Government servants as contained in DoPTs OM No.3(3)/2016-Estt. (Pay.II) dated 01.05.2017 provide that pay plus gross pension on re-employment not to exceed Rs.2,25,000/- i.e. Pay Level 17 as applicable to Secretary to Government of India. Further, this Department's guidelines dated 09.12.2020 on engagement of retired Central Government servants on contract basis including as Consultants states that admissible monthly remuneration shall be arrived at by deducting the basic pension from the pay drawn at the time of retirement. Therefore, the basic principle of remuneration of retired Government servants appointed on contract basis or on re-employment is pay minus pension.*

2. There may be instances where pay of retired government servants appointed on contract basis or on re-employment in your Institute have been fixed without deducting pension. It may be ensured that the laid down principle of pay fixation is scrupulously followed and in case the same has not been done the pay of the concerned officer should be re-fixed and excess amount drawn by them should be recovered under intimation to the Ministry. **The Compliance report in the matter should be sent within 10 days positively.**

**Encl(1): As above**

Yours faithfully,

Signed by  
(K. Balasubramanian)  
Under Secretary to the Government of India  
Tele: 011-23060010  
Date: 08-11-2023 17:52:03

**Copy to: ( for appropriate action)**

**Deputy Director (Admn.)/FA of all new AIIMS**

I/3637346/2023

Z-28016/123/2021-PMSSY-IV-Part(1)  
Government of India  
Ministry of Health & Family Welfare  
(PMSSY-IV Division)

745 A, Nirman Bhawan, New Delhi.  
Date:20-12-2023

To

The Directors/Executive Directors of new AIIMS(Bhopal, Bhubaneswar, Jodhpur, Raipur, Rishikesh, Rae Bareli, Mangalagiri, Nagpur, Kalyani, Bathinda, Deoghar, Bibinagar, Bilaspur, Samba Vijapur (Jammu), Madurai, Rajkot, Guwahati )

**Subject: Pay Fixation of retired Government Servants- reg**

Sir,

I am directed to refer to this Ministry's letters of even number dated 08.11.2023 and 22.11.2023 (copies enclosed) on the above-mentioned subject. As regards fixation of pay of retired government servants, it was *inter-alia* mentioned that **a fixed monthly amount shall be admissible, arrived at by deducting the basic pension from the pay drawn at the retirement.** Accordingly, it was advised to re-fix the pay and make recovery of additional pay drawn by the officer under intimation to the Ministry.

2. It has, however, been observed that various new AIIMS have not furnished the compliance reports so far. Further, representations have been received from AIIMS Rajkot, AIIMS Jammu and AIIMS Madurai claiming non-applicability of instructions of Department of Expenditure (DoE) , Ministry of Finance Govt of India in the matter.

3. In this background, it is again clarified that the issue has already been deliberated extensively in consultation with Department of Expenditure (DoE) , Ministry of Finance (MoF) Govt of India and conveyed to Institutes with the approval of Competent Authority.

***DoE has advised that the principles of remuneration of retired Central Government servants as contained in DoPTs OM No.3(3)/2016-Estt. (Pay.II) dated 01.05.2017 provide that pay plus gross pension on re-employment not to exceed Rs.2,25,000/- i.e. Pay Level 17 as applicable to Secretary to Government of India. Further, DoE guidelines dated 09.12.2020 on engagement of retired Central Government servants on contract basis including as Consultants states that admissible monthly remuneration shall be arrived at by deducting the basic pension from the pay drawn at the time of retirement. Therefore, the basic principle of remuneration of retired Government servants appointed on contractbasis or on re-employment is pay minus pension.***

4. All Institutes are, therefore, once again advised to scrupulously follow the laid down principle of pay fixation as clarified by DoE, MoF and to submit a compliance report along with complete details of re-fixation of pay done and



I/3637346/2023

recovery of excess amount by the Institute **within one month positively**. Any non compliance of the directions of the Ministry of Finance Govt of India on the subject will be viewed seriously .

Yours faithfully,

Signed by

K.balasubramanian

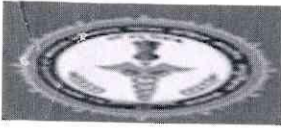
(K. Balasubramanian)

Under Secretary to the Govt. of India

Tele:011-2306 0010

Encl. As above

Copy to: Deputy Director(Admn.)/FAs of new AIIMS as per the list above for necessary action .



**Fwd: Implementation of CCS (INPS) Rules, 2021 vide G.S.R. 227 (E) dated 30.03.2021 issued by the Department of Pension and Pensioner's Welfare and granting permission to open portal for withdrawal from NPS in the case of death of Subscribers covered under CCS (INPS) Rules, 2021- reg**

1 message

Director . <director@aiimspatna.org>  
To: DDA AIIMS PATNA <dda@aiimspatna.org>

Thu, Dec 28, 2023 at 11:58 AM

Sd/-  
Prof. (Dr.) Gopal Krushna Pal  
Executive Director & CEO,  
All India Institute of Medical Sciences Patna  
Bihar - 801 507  
Email: director@aiimspatna.org  
Tel: 06122451109

----- Forwarded message -----

From: **SANJEEV KUMAR** <so.ini2-mohfw@gov.in>

Date: Wed, Dec 27, 2023 at 12:53 PM

Subject: Implementation of CCS (INPS) Rules, 2021 vide G.S.R. 227 (E) dated 30.03.2021 issued by the Department of Pension and Pensioner's Welfare and granting permission to open portal for withdrawal from NPS in the case of death of Subscribers covered under CCS (INPS) Rules, 2021- reg

To: directoroffice <directoroffice@aiimsraipur.edu.in>, director <director@aiimsbhopal.edu.in>, director <director@aiimsbhubaneswar.edu.in>, director <director@aiimsjodhpur.edu.in>, director <director@aiimspatna.org>, director <director@aiimsrishikesh.edu.in>, rajwanshiarvind <rajwanshiarvind@hotmail.com>, director <director@aiismangalagiri.edu.in>, pa director <pa.director@aiimsnagpur.edu.in>, executivedirector <executivedirector@aiimsgorakhpur.edu.in>, director <director@aiimsbathinda.in>, director <director@aiimsguwahati.ac.in>, director <director@aiimsbilaspur.edu.in>, director <director@aiimsdeoghar.edu.in>, Director AIIMS Bibinagar <director@aiimsbibinagar.edu.in>, shakti81505 <shakti81505@gmail.com>, edschest <edschest@gmail.com>, drmhraosvims1957 <drmhraosvims1957@gmail.com>, director <director@jipmer.ac.in>, Director JIPMER <director@jipmer.edu.in>, dda <dda@jipmer.ac.in>  
Cc: Dr Vivek Lal <dpgi@pgimer.edu.in>, ddapgi <ddapgi@gmail.com>, ao establishment1 <ao.establishment1@gmail.com>, BISHNU PADA KIRTANIA <bp.kirtania@nic.in>, K.Balasubramanian Under Secretary <K.balasubramanian38@nic.in>

Sir,  
please find the attachment.

With Regards  
INI-II Section  
MoHFW

2 attachments

document-192.pdf  
78K





I/3638912/2023

**REMINDER-I**

**No. V-17020/73/2023-INI-II  
Government of India  
Ministry of Health & Family Welfare  
(INI-II Section)**

Nirman Bhawan, New Delhi  
Dated 26-12-2023

To,  
All INIs as per the list (except PGIMER, Chandigarh)

Subject: - Implementation of CCS (INPS) Rules, 2021 vide G.S.R. 227 (E) dated 30.03.2021 issued by the Department of Pension and Pensioner's Welfare and granting permission to open portal for withdrawal from NPS in the case of death of Subscribers covered under CCS (INPS) Rules, 2021- reg.

Sir,

I am directed to refer to this Ministry's earlier letter of even number dated 23.11.2023 (enclosed) on the subject mentioned above and to say that the Institutes were asked to furnish the requisite information. However, no reply in this regard has yet been received as far.

2. It is therefore requested to expedite the matter and provide the necessary information in this regard at the earliest.

**Encl:- As above.**

Yours faithfully,

Signed by  
Bishnu Pada Kirtania

(Date: 26-12-2023) 18:27:05

Under Secretary to the Govt. Of India  
Tel: 23061843

Copy for necessary action:-

- (i) US (INI-I)
- (ii) US (PMSSY)

Copy for information to :-

Director, PGIMER, Chandigarh



I/3631022/2023

**No.V.17020/73/2023-INI-II/ 8233927**  
**Government of India**  
**Ministry of Health and Family Welfare**  
**(INI-II Section)**

Nirman Bhawan, New Delhi-110011

Dated the 23 November , 2023

To

All INIs as per the list (except PGIMER, Chandigarh)

Subject: Implementation of CCS (INPS) Rules, 2021 vide G.S.R. 227 (E) dated 30.03.2021 issued by the Department of Pension and Pensioner's welfare and granting permission to open portal for withdrawal from NPS in the case of death of Subscribers covered under CCS (INPS) Rules, 2021 -reg.

Sir/Madam,

I am directed to the subject mentioned above and to request you to provide information :-

(i) Acceptance of CCS (INPS) Rules, 2021 vide G.S.R 227 (E ) dated 30.03.2021 issued by the Deptt. of Pension and Pensioner's Welfare in your Institute, and

(ii) Whether the Permission for opening of portal for withdrawal from NPS in case of death of subscriber under CCS (NPS) Rules, 2021 has been received by your Institute for releasing of benefits to the beneficiary

2. It is further requested that if the rules as mentioned above have been implemented in your Institute, you are requested to clarify whether the same have been implemented with the concurrence of Ministry of Finance and / or Ministry of Personnel, Public Grievance and Pensioners.

Yours faithfully

Encl :- As above

Signed by

Amit Kumar

(Amit Kumar)

Under Secretary to the Government of India

Tel No: 23061875

Copy for necessary action:-

(i) US (INI-I)

(ii) US (PMSSY)

Copy for information to :-

Director, PGIMER, Chandigarh