

SECTION 8 : EVALUATION OF THE PROPOSALS

8.1 Evaluation of Technical Proposals

After receipts of the application, the Desk Appraisal Committee at ULB (Municipal Corporation/Municipality/NAC) level will conduct screening of the proposals. If any deficiency in document submission by the bidder pertaining to the eligibility criteria is found in any of the proposal, then the same proposal shall be rejected. Only those bidders who qualify as per the eligibility criteria will be considered for the next stage of evaluation, i.e. **award of marks**.

The bidder has to secure **at least 50% or above marks** in order to be considered for the preparation of merit list for the project.

SCORING SHEET FOR ASSESSMENT (AWARD OF MARKS)

Sl.	Areas of assessment	Maximum marks	Means of Verification
Registration & Establishment: (10 marks)			
1	a) Years of existence of bidder registered in Society Registration Act/ Indian Trust Act/ Company Act/ Clinical establishment Act. (5 yrs-10 yrs = 6 marks; >10-20 Yrs= 8 marks >20 yrs= 10 marks)	10	Appropriate Registration certificate
Field Level Experience: (60 marks)			
2	a. Years of experience in implementing projects in any social development sector/ running hospital out of any Government Funding support. (5-10 years= 20 marks; >10-15 years=25 marks; > 15 years=30 marks)	30	Attach copy of the Agreement/ MoU/ Authenticated sanctioned with fund released letter The project duration less than one year will not be considered as experience
	b. Years of experience in implementing projects in any social development sector/ running hospital out of any Private Agency Funding support. (5-10 years=10 marks; > 10-15 years=15 marks; > 15 years= 20 marks)	20	Attach copy of the Agreement/ MoU/ Authenticated sanctioned with fund released letter. The project duration less than one year will not be considered as experience
	c. Working experience on social sector/ running hospital in the applied district through Govt. funding (5-10 years=3 marks; > 10-15 years=4 > 15- years= 5 marks)	5	Attach copy of the Agreement/ MoU/ Authenticated sanctioned with fund released letter). The project duration less than one year will not be considered as experience

Sl.	Areas of assessment	Maximum marks	Means of Verification
	d. Agency having Multi-State experience in implementation of similar kind of projects (Hospital operation/management) out of any Govt. Funding support. (5-10 years=3 marks; > 10-15 years=4 marks; > 15 years= 5 marks)	5	Attach copy of the Agreement/MoU/ Authenticated sanctioned with fund released letter. The project duration less than one year will not be considered as experience)
Financial strength: (30 marks)			
3	a. Financial turnover (minimum 100 lakhs per each year in the last three (2018-19, 2019-20, 2020-21) FYs as per audit report. *(>300-400 lakhs = 20 marks; >400-500 lakhs=25 marks; > 500 lakhs =30 marks) * Cumulative turnover of 2018-19, 2019-20, 2020-21	30	Annual Financial Statements of last 3 FYs audited by a qualified CA and supported by Audit report of last 3 FY.
Total Marks		100	

N. B. : The Projects under Social Development Sectors includes health, education, housing, sanitation, nutrition, livelihood, social security, community engagement etc.

File

SECTION 9 – FORMS & FORMATS

FORM T-1

APPLICATION FORM

OPERATION & MANAGEMENT OF URBAN HWC UNDER PPP

Name of the City _____ Name of the District _____

1	Name of the Agency .	
2	Registered Office address with phone, email ID, website. Contact office address with phone, and email ID	
3	Name of the Chief Functionary with Mobile number.	
4	a. Date & year of society registration under Society Registration Act / Indian Trust Act/ Company Act/ Clinical establishment Act (Attach copy)	
	b. Act under which registered	
5	Year of 12 A registration (Attach copy)	
6	Bank details (account number and address & attach photocopy)	
7	PAN Number (Attach photocopy)	
8	Memorandum and bye law of the agency (Attach photocopy)	
9	Annual report (attach copy of the annual report (2018-19, 2019-20, 2020-21)	
10	Copy of Unique ID no under the portal NGO Darpan of NITI Aayog (In case of NGO/Trust)	

11. Financial turn over

Year	Turnover in Lakhs (Rs.)
2018-19	
2019-20	
2020-21	
Total	

(Attached documents as per the T2 format)



12. Experience in implementing projects in any social development sector/ Health Programmes/ running Hospitals out of any Government Funding support.

Name of the program	Grant support by	Project duration (from-to)	Operational area	Project cost	Remark

(Attach copy of the Agreement/MoU/Authenticated sanction letter with fund released letter).
The project duration less than one year will not be considered as experience for scoring

13. Experience in implementing projects in any social development sector/Health Programmes/ running hospitals out of any Private Agency Funding support.

Name of the program	Supported by	Project duration (from-to)	Operational area	Project cost	Remark

(Attach copy of the Agreement/MoU/Authenticated sanctioned with fund released letter).
The project duration less than one year will not be considered as experience for scoring)

14. Experience in respective district applied for grant (in any social development sector/Health Programmes/ running Hospitals).

Name of the program	Supported by	Project duration(from-to)	Project cost	Remark

(Attach copy of the Agreement/ MoU/ Authenticated sanction with fund released letter).
The project duration less than one year will not be considered as experience for scoring)

15. Agency having Multi-State experience in implementation of similar kind of projects (Hospital operation/management) out of any Govt. Funding support. .

Name of the program	Supported by	Project duration(from-to)	Operational area	Project cost	Remark

Attach copy of the Agreement/MoU/Authenticated sanctioned with fund released letter).

The project duration less than one year will not be considered as experience for scoring)

16. Project proposal for UHWC operation & management – Attach the detailed proposal (as per the T8 format).

17. Undertaking of the Agency that; any office bearer on behalf of the organization has not been convicted by any court of law in India or abroad for any criminal offence (as per the T3 format).

18. Affidavit for undertaking certifying that Agency is not blacklisted by any Government (State or Central) Department or Agency in India (as per the T4 format).
19. Willingness and consent letter (as per the T5 format)
20. Declaration regarding more than 10 UHWCs (as per the T6 format).
21. Declaration regarding availability of original annual report and audit report (as per the T7 format).
22. An undertaking in the form of original Affidavit on stamp paper that any project of the Agency has not been terminated/ discontinued on the basis of the conduct of any financial irregularities in past. (as per the form T9)
23. Any other information:

Declaration:

I hereby certify that, I have read the rules and regulation of the Scheme/Project and the above information furnished is true to the best of my knowledge and belief.

Signature of chief functionary of the Agency with seal
Name of the Chief Functionary_____

N. B: All the pages of the documents attached in the application should be signed by the chief functionary of the agency or his/her authorized person, otherwise the application is liable for rejection



FORM-T2

ANNUAL TURN OVER STATEMENT

(To be furnished in the **letter head** of the Chartered Accountant)

The Annual Turnover of M/s _____
For the last 3 financial years are given below and certified that the statement is true and correct.

Sl No	Financial Year	Turnover in Lakhs (Rs.)
1	2018-19	
2	2019-20	
3	2020-21	
	Total Turnover (in Lakhs Rs.)	

Date:

Signature of Chartered Accountant
(Name in Capital)

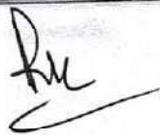
Place:

Seal

Membership No

Note:

- 1) To be issued in the **letter head** of the Chartered Accountant with membership No.
- 2) Also attach photocopies of the audited P/L account or Income/ Expenditure account of each year highlighting the turnover in support of that.



FORM - T3

(To be furnished in the proposal)

**Affidavit Format for Undertaking by the Agency
(On Non Judicial Stamp Paper of relevant value)**

Affidavit

I, _____ (Sole Chief Functionary of the Agency), (the names and addresses of the registered Agency), with reference to RFP No. _____ for _____ (Name of the RFP) do hereby solemnly affirm and sincerely state that;

- a) I or any other office bearer on behalf of the Agency has not been convicted by any court of law in India or abroad for any criminal offence.
- b) The Agency has not been blacklisted by any Government (State or Central) Department or Agency in India, which is in force during the currency of the contract.

I further affirm that, in case of any such evidence in contradiction to above declaration come to the notice of the contracting authority any time during the currency of the contract then our partnership with (Name of the Municipal Corporation/ Municipality/ NAC) under such contract shall be liable for termination in addition to other legal recourse available under the law of the land. Further, the contracting authority has the right to forfeit the performance security money deposited for the purpose of execution of the project for which this affidavit has been made.

Dated this Day of, 2022

.....
Name of the Applicant

.....
Signature of the Authorized Person

.....
Name of the Authorized Person

(Seal of the bidder)

**Notary
Regd. No.
(Seal of the Notary)**



FORM -T4

(To be furnished in the proposal)

**Affidavit Format for undertaking certifying that Agency is not blacklisted
(On Non Judicial Stamp Paper of relevant value)**

Affidavit

This is to certify and confirm that (The name of the agency with address of the registered office), with reference to RFP No. _____ for _____ (Name of the RFP), our organization / we or any of our promoter(s) / director(s) are not barred by Department of Health & FW, Govt. of Odisha / or any other bidder of Govt. of Odisha or blacklisted by any State Government or Central Government/ Department / Organization In India from participating in the Project/s, either individually or as member of a Consortium as on the _____ (Date of Signing of proposal).

We further confirm that we are aware that, our proposal for the captioned Project would be liable for rejection in case any material misrepresentation is made or discovered at any stage of the Bidding Process or thereafter during the agreement period. . Further, the contracting authority has the right to forfeit the performance security money deposited for the purpose of execution of the project for which this affidavit has been made.

Dated this Day of, 2022

Authorized Signatory/Signature [*In full and initials*]: _____

Name and Title of Signatory: _____

(Seal of the bidder)

**Notary
Regd. No.
(Seal of the Notary)**



FORM T 5

(To be furnished in the proposal)

FORMAT FOR WILLINGNESS/ CONSENT LETTER

I, Mr/Ms. (The name of the agency with address of the registered office), with reference to RFP No. _____ for _____ (Name of the RFP), do herewith giving my consent to sign the agreement abiding by all norms.

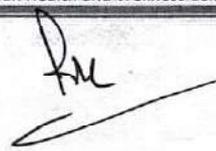
This is for favour of your information and necessary action.

Dated thisDay of, 2022.

Authorized Signatory/Signature [*In full and initials*]: _____

Name and Title of Signatory: _____

(Seal of the bidder)



FORM T6

(To be furnished in the proposal)

Format for undertaking

I, Mr/Ms. (The name of the agency with address of the registered office), with reference to RFP No. _____ for _____ (Name of the RFP), do hereby declared that,

- i) As on date, we have not undertaken more than 10 Urban HWC (UHWC) projects in the State of Odisha and not more than 5 UHWC projects in any District out of XV-FC/ PM- ABHIM grant.
- ii) If selected, we will not execute more than 10 Urban HWC (UHWC) projects in the State of Odisha and not more than 5 UHWC projects in a particular District out of XV-FC/ PM- ABHIM grant.

This information is true to best of my knowledge.

Dated this Day of, 2022.

Authorized Signatory/Signature *[In full and initials]*: _____

Name and Title of Signatory: _____

(Seal of the bidder)



FORM T 7

(To be furnished in the proposal)

Declaration regarding original copy of annual report and audit report

I, Mr/Ms. (The name of the agency with address of the registered office), with reference to RFP No. _____ for _____ (Name of the RFP) , do hereby declared that

1. The Original annual report for the year 2018-19, 2019-20 and 2020-21 is available with the organization. The same shall be produced during the record verification
2. The Original audit report for the year 2018-19, 2019-20 and 2020-21 is available with the organization and shall be produced during the record verification

Failing to produce the above documents during the record verification, the application will be rejected.

This information is true to best of my knowledge,

Dated thisDay of, 2022.

Authorized Signatory/Signature [*In full and initials*]: _____

Name and Title of Signatory: _____

(Seal of the bidder)



FORM T 8

Proposal for management of the Urban HWC
(To be furnished in the proposal- Maximum 3 pages)

1. Name of the agency
2. Name of the proposed UHWC and city/town
3. Location of the proposed UHWC
4. Operation and management of the UHWC
 - Introduction
 - Objectives
 - Implementation plan
 - Outcomes
 - Innovation
 - Documentation
 - Technology and IT
 - Manpower
 - Training
 - Monitoring & evaluation
5. Budget
6. Agency contribution

Authorized Signatory/Signature [In full and initials]: _____

Name and Title of Signatory: _____

(Seal of the bidder)



FORM -T9

(To be furnished in the proposal)

**Affidavit Format for undertaking certifying that any project of the Agency has not been terminated/discontinued on the basis of the conduct of any financial irregularities in past
(On Non Judicial Stamp Paper of relevant value)**

Affidavit

This is to certify and confirm that (The name of the agency with address of the registered office), with reference to RFP No. _____ for _____ (Name of the RFP), any project implemented by our organization has not been terminated/discontinued by any District Administration /State Government /Central Government/ Department / Organization in India on the basis of the conduct of any financial irregularities in past.

I further affirm that, in case of any such evidence in contradiction to above declaration come to the notice of the tendering authority /contracting authority any time during the selection process, our proposal for the captioned Project would be liable for rejection. Also, in case of any such contradiction to above declaration come to the notice of the contracting authority any time during the currency of the contract then our partnership with (Name of the Municipal Corporation/ Municipality/ NAC) under such contract shall be liable for termination.

I further affirm that, the tendering authority /contracting authority has the right to forfeit the EMD money /performance security money deposited for the purpose of execution of the project for which this affidavit has been made.

Dated thisDay of, 2022

Authorized Signatory/Signature [*In full and initials*]: _____

Name and Title of Signatory: _____

(Seal of the bidder)

**Notary
Regd. No.
(Seal of the Notary)**



FORM T-10**List of the documents to be submitted in the application**

Sl.	Name of the document	Whether submitted or not	Page number
1	Application form as per T-1		
2	Copy of the Society registration / Indian Trust Act / Company Act/ Clinical establishment Act registration number certificate		
3	Copy of the 12-A registration certificate		
4	Copy of the bank passbook/ statement of the agency		
5	Copy of the memorandum & bye-law of the agency/Trust deed of the agency		
7	Copy of the annual report (2018-19, 2019-20 & 2020-21)		
8	Copy of the audit report (2018-19, 2019-20 & 2020-21)		
9	Copy of the pan card of the agency		
10	Copy of the Agreement/ MoU/ Authenticated sanction with fund released letter regarding experience in implementing project in social development sector/ hospital out of Govt. funding		
11	Copy of the Agreement/ MoU/ Authenticated sanction with fund released letter regarding experience in implementing project in social development sector/ hospital out of private sector funding		
12	Copy of the Agreement/ MoU/ Authenticated sanctioned with fund released letter regarding experience in implementing project in social development sector/ hospital in the applied district out of Govt. funding		
13	Copy of the agency having Multi-State experience in implementation of similar kind of projects (Hospital operation/management) out of any Govt. Funding support.		
14	Annual average turnover as per the T2 format		
15	Affidavit of undertaking that; any office bearer of the agency has not been convicted by any court of law in India or abroad for any criminal offence as per the T3 format.		
16	Affidavit that the agency has not been blacklisted by any Government (State or Central) Department or Agency in India as per the T4 format		
17	Willingness/ consent letter to abide all the norms as per the T5 format		
18	Undertaking not undertaken more than 10 UHWC in the State as per the T6 format		
19	Declaration regarding submission of annual report/ audit report as per the T7 format		
20	Detailed Project proposal on operation & management as per the T8 format		
21	An undertaking in the form of original Affidavit that any project of the bidder has not been terminated/discontinued on the basis of the conduct of any financial irregularities in past as per the T9 format		
22	Copy of the Unique ID under the portal NGO Darpan of NITI Aayog (In case of NGO/ Trust)		
23	EMD of Rs. 40,000/- per UHWC as applied for		

Non-submission of any documents relating to Sl. No. 1-9, Sl. No. 14-23 and atleast any one or more documents relating to Sl. No. 10-13 on the basis of experience, the application shall be rejected without assigning any reason thereof.

Signature of chief functionary of the Bidder with seal

Operational Guideline for management of Urban Health & Wellness Centre (UHWC) under PPP

Prepared by:
**Mission Directorate
National Health Mission (NHM)
Health & Family Welfare Department
Govt. of Odisha**



Content

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Ru

Part-I

1. Urban Health & Wellness Centre (U-HWC)

Urban HWCs (UHWCs) are envisaged to decentralize comprehensive primary health care services below the existing UPHC level in NUHM targeted cities, act as a standalone facility in smaller towns & peri-urban areas. This is the first port of call for accessing primary health care services in urban and peri-urban areas.

The proposed UHWC is completely a new public health structure in urban areas which will cover smaller population cohorts (15,000-20,000 urban population) residing in the slums, similar habitations & peri-urban areas.

Lack of a frontline health workforce in our cities has emergence as one of the biggest limiting factors in our response to the Covid-19 pandemic. Therefore, a paradigm shift in urban primary health care is envisaged (establishment of UHWCs), based on the learning from the management of the COVID-19 pandemic, which has affected urban areas disproportionately.

The Urban-HWC would also enable strengthening the continuum of care for upward and downward linkages, improve access to high quality care, minimize the out of pocket expenditure incurred on health care services, and decongestion of secondary and tertiary health care facilities.

2. Location of the UHWC:

The location of the UHWC shall be finalized by State Level Committee (SLC) as per the recommendation of concerned District Level Committee (DLC). The Urban Local Body (ULB)/DLC shall take a decision regarding functional of UHWC as per the options given below;

Option- 1 (Building on rent)

- Hiring cost of the building in the identified location
- Provision of fund for Security charges for House Rent , White washing , branding, sinages, hoarding, interior suits to medical set up including power back up etc.

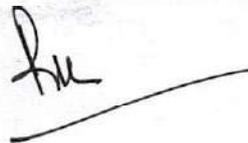
Option- 2 (Govt./ ULB/Community Building)

- Provision fund for Minor repair/maintenance of exiting building, White washing, branding, sinages, hoarding , interior suits to medical set up including power back up etc

Option -3 (Prefab structure in Govt land)

- Provision of fund for Peripheral area development like boundary wall, sheds for yoga & wellness activities, sinages, hoarding, power back up etc.

The facility should be located away from the garbage collection site, water logging area, cattle shed and it should be connected with all whether road, water supply & electricity facilities. The UHWC should not be located in areas which are within 3 kms distance of an UPHC- HWC, Urban CHC, SDH, DHH or any other Govt. health facility. The operational area/boundary of the UHWC to



be notified by the concerned CDM & PHO in case of Municipality/NAC/peri urban area and ADUPHO in case of Municipal Corporation area.

3. Service Areas under UHWCs

Urban HWC would have 9 Service areas which primarily includes outpatient care for a range of Primary Health Care Services as per CPHC(Comprehensive Primary Health Care) guidelines , ancillary health care services like Diagnostic, Physiotherapy, Nutrition Counseling, Outreach services, Public health functions related to surveillance and early outbreak management as well wellness activities at community level. The details of services areas under the UHWC are as follows.

Sl. No.	Service Areas	Description of Major Features
1	OPD Services	<p>Team at OPD: The team responsible for delivering OPD Services is constitute of one MBBS Doctor and one Staff Nurse.</p> <p>Proposed Services at OPD: UHWC will provide 12 Types of comprehensive primary Health Care services as per CPHC guidelines and operational guidelines of UHWC</p> <p>NCD Clinic at OPD: Each 30 + population coming to attend OPD shall be screened for common Non-Communicable Disease(NCD) by the SN before attending general OPD & appropriate measure shall be taken to treat confirmed cases as per the NCD guidelines.</p> <p>OPD equipped with necessary EIF: The OPD of each UHWC will be equipped with necessary equipment/instruments as per National Quality Assurance Standard (NQAS) checklist. The list of EIF required at each UHWC is at operational guidelines of UHWC</p> <p>OPD Timings: The general working hour of UHWC OPD would be 8 AM to 11 AM(morning) and 5 PM to 8 PM(evening) . However, it may be changed basing on the notifications issued by Govt. time to time.</p> <p>Referral: UHWC may facilitate for referral of patients to nearest higher health facility/Poly clinic as per the severity of the case.</p>
2	Drug Dispensing Unit	<p>Manpower: This Department will be managed by a Pharmacist.</p> <p>Establishment of Drug Distribution Centre (DDC): Each UHWC would have a DDC branding as per "Niramaya" guidelines and equipped with necessary provisions like pigeon hole rack, cupboard for keeping records, table, chair etc. Funds for the same as per need can be spent out of provisions under "Refurbishing UHWCs".</p> <p>Provision of Fund for procurement of one computer, printer, scanner</p>

Sl. No.	Service Areas	Description of Major Features
		<p>to equip DDC for online indenting, prescription audit etc.</p> <p>Availability of Drugs at OPD: Govt. will supply drugs to individual UHWC. The UHWC will submit indent to tagged UPHC/other health institution for supply of drugs out of existing EDL (Essential Drug List) till direct online indent to OSMCL. Apart from this, Rs. 3.60 Lakhs per UHWC per annum will be kept at facility level for managing short supply or drugs prescribed outside of EDL through local purchase. The concerned UHWC shall procure the drugs following due procedure and may use the empanelled/shortlisted venders available at District.</p>
3	Diagnostic Services	<p>Manpower at Lab: A LT will be engaged to manage Lab at UHWC.</p> <p>Types of in-house tests to be taken up: 50 types of tests are proposed to be conducted at UHWCs including 24 Types as recommended under Free Diagnostic services for PHC level.</p> <p>Designated Microscopy Centre (DMC) : Testing and collection point of sputum through installing cough collection box etc.</p> <p>Out-house Tests: LT will refer UPHC/UCHC & other referral institutions for any other tests not prescribed at UHWC level.</p> <p>EIF for Lab: The details of EIF required to equip each UHWC is at operational guidelines of UHWC</p> <p>Reagent, consumables & other QA (Quality Assurance) initiatives: Financial provision has been made for procurement of reagent & consumables at local level for smooth functioning of Lab at UHWCs as well as weekly Pathologist visit charges for handholding support to the LT. The portion of this provision can also be utilized for ensuring QA in Diagnostic Services.</p> <p>Quality Assurance:</p> <ul style="list-style-type: none"> • Calibration of equipment/instruments shall be done on regular basis with the support of technical agency. • Qualified Pathologist may be hired at least one day in a week for providing handholding support to local LT for improving his/her skill sets. Honorarium Rs.3000/- per day may be given as honorarium to Pathologist for handholding support. They will be engaged as per the guidelines under AMA clinic
4	Tele-consultation Services	<p>Person Responsible: The OPD team at UHWC is responsible for</p>



Sl. No.	Service Areas	Description of Major Features
		<p>facilitating conduction of tele-consultation services.</p> <p>Training/ Orientation: Training will be conducted centrally by CPMU (City Program Management Unit)/ DPMU (District Program Management Unit) for orienting personnel in the OPD for Tele-consultation Services.</p> <p>Tele-consultation Services: UHWCs will be connected to tagged Polyclinic/other hubs for tele-consultation services on fixed days.</p> <p>Equipping UHWC for Tele-consultation Services: Provision for procurement of Desktop and accessories, Printer, Camera, microphone, tablets etc. to facilitate Tele-consultation Services.</p> <p>Recurring cost for tele-consultation : A sum of Rs. 0.12 lakh per annum towards purchase of internet, Annual Maintenance Cost(AMC) of computers, papers etc.</p>
5	Physiotherapy Services	<p>Manpower to manage Physiotherapy Wing: This division at UHWC will be managed by a qualified Physiotherapist.</p> <p>Scope of Services: The Physiotherapy services will be made available at both facility & community level. This facility based physiotherapy services will be opened for 5 days in a week for general patients. One day in a week will be devoted for providing extended physiotherapy services at community level for identified home bound cases those are unable to rotate. HW-M will identify home bound cases from the operational areas.</p> <p>Infra for Physiotherapy Services: A sum of Rs. 2.71 Lakhs is earmarked for procurement of Physiotherapy EIF for equipping Physiotherapy wing at UHWC level & extended services at community level. Details of EIF is at operational guidelines of UHWC.</p>
6	Yoga Services	<p>Manpower at Yoga Wing: One Yoga Therapist will be engaged on part time basis, suits the local timings to conduct Yoga sessions at UHWC or at feeding areas of respective UHWC.</p> <p>Place of Yoga Sessions: Yoga Sessions may not be conducted preferably at facility level or at nearest park, common civic centre, Common room at nearby larger Society etc. A banner must be displayed at the place of session site if done beyond UHWC premises for publicity.</p> <p>Session Timings: Per day 2 sessions can be planned i.e. 1st session in the morning and other at evening and each session should be of</p>



Sl. No.	Service Areas	Description of Major Features
		<p>minimum 2 hours.</p> <p>Provision for Yoga Sessions & popularizing Yoga: Financial provision for earmarked for taking up of following activities.</p> <ul style="list-style-type: none"> • Yoga sessions in UHWC or its feeding areas • Yoga Mats & Banners shall be procured for conducting regular yoga sessions. • Mega Yoga day celebration on National Yoga Day. • Permanent Hoarding on popularizing yoga at strategic location budgeted under IEC/BCC.
7	<p>Outreach Services/ Community Mobilization</p>	<p>Manpower Responsible for Outreach Services: Health Worker(HW)-Male will own this activity. He will work in coordination with HW-F of virtual Sub Centres of his area.</p> <p>Major Tasks at Community Level:</p> <p>Outreach session: The UHWC shall act as Urban Health and Nutrition Days (UHND) and fixed immunization day (FID) session site. As per the micro plan, UHND and FID sessions shall be held once in a month as per the outreach micro plan of the HW(F). The concerned HW(F) shall held responsible to facilitate the sessions and the HW(M), SN, AWW, ASHA, MAS(Mahila Arogya Samiti) members , SHG(Self Health Group) members will be involved in the process.</p> <p>Screening Services: Two rounds of population based Screening for common NCDs including TB, Leprosy and Mental health shall be done every year and updated in portal as per existing guidelines.</p> <p>Focused Group Discussion (FGDs): 2 Small group meetings per month of patients with common NCDs will be organized to mobilize new patients for treatment & address dropout if any. Local ASHA & MAS must be involved in the process to mobilize patients for such meetings. For organizing the event Rs. 250/- per FGD may be utilized and Rs. 0.60 lakh ear marked for same activity.</p> <p>Identify home bound cases need physiotherapy services & registered at UHWC level for extended services.</p> <p>Follow up of cases under long term treatment through home visits as per prescribed schedule of individual programme/ at least once in month for ensuring medicines, individual / Family Counseling and</p>



Sl. No.	Service Areas	Description of Major Features
		<p>advice.</p> <p>Organize wellness activities especially health events at field level as per Health Calendar @ 0.20 lakh per annum.</p> <p>Review and monitoring of MAS activities/expenditure and the outreach services (UHND, FID immunization sessions, outreach camps, NCD camp etc.) within the geographical areas of the UHWC. The UHWC to facilitate the outreach activities within the operational area.</p> <p>Vulnerability assessment of the slums within the operational area of UHWC to be conducted/updated on yearly basis and the report card to the prepared and shared with the ULB and other stakeholders. The vulnerability assessment guidelines under NUHM to be followed. The cost of the assessment, report, printing of formats, data entry etc. @ 5000/- per UHWC.</p> <p>Provision of laptop for the HW(M) for field level reporting and documentation</p> <p>Identification of Agents / Catalysts of Community Mobilisation & their sensitization:</p> <p>Currently the mechanism of community engagement i.e. the ASHA and Mahila Arogya Samities (MAS) are in place only in slum and slum like areas, and do not reach the homes of middle- and upper-income classes. So, the "Resident Welfare Associations" would be identified & sensitized, those will act as fulcrum for managing public health actions for "well to do" sections of society in towns/cities.</p> <p>Hence, the location based Resident Health Associations (Sthanniya Swasthya Sabhas) would be formed, preferably with the locus being a public health facility. Such associations would be a platform or federation comprised of representatives of MAS, (from poorer areas), Resident Welfare Association (RWA) such as Gully/ Mohalla committees, ASHA etc. Any other activity/ies assigned to him as per need.</p>
8	Disease Surveillance	<p>Decentralizing primary health care particularly in urban areas would enhance disease surveillance and improve reporting for epidemic/outbreaks and risk factor mitigation through focused health promotion and wellness activities. The major activities includes :</p> <p>Responsibility decentralized for Improving Reporting: HW-M in S, LT in L and Doctor at OPD in P format shall prepare report as per IDSP guidelines. Pharmacist will Keep the soft copy of the same for record and communicate the S format to ANM and L & P Format to</p>

Sl. No.	Service Areas	Description of Major Features
		<p>concerned person at UPHC level for compiled report.</p> <p>Water Testing (kits based) will conducted in the laboratory and report will be shared.</p> <p>Contact tracing and implement containment measures for pandemic diseases.</p> <p>Early outbreak management: The whole Team at UHWC shall act as Rapid Response Team (RRT) in case of epidemic management.</p>
9	Wellness Initiatives, IEC/BCC	<p>Sedentary life style, unhealthy food habits, environmental factors and increasing stress have led to changes in disease patterns. So, there is need for paradigm shift from curative to preventive and promotive health care, to empower individuals and communities to adopt healthy behavior through Wellness. These wellness Activities should be feasible, acceptable, culturally appropriate and relevant.</p> <p>The ambit of wellness activities spread across multiple dimensions and can broadly categorized in 3 areas i.e. Physical, Mental & Cross Cutting areas. The suggested activities are as follows.</p> <ul style="list-style-type: none"> • Physical Wellness Initiatives: Walkathons, Marathons, Sports activities, Aerobics, Zumba, Open Gyms etc. • Mental Wellness Initiatives: Meditation, Health Talks/ Counseling, Laughter Clubs, Staying positive Community Campaigns, Aerobics for the children of the locality, raising awareness of mental health issues etc. • Crosscutting Areas: Campaigns on TB Free, Healthy Villages, Water Bell at school level, Eat Right/ Balanced Diet, Health Calendar/ Health days etc. • The facility should have prominent board displaying the name of the centre, services available, timings, citizen charter including patient right. IEC materials on various schemes/programs, protocols to be displayed in the facility. <p>Provision: Financial provision is earmarked for organizing wellness activities and weekly nutrition counseling in the facility.</p> <p>Suggested cost norms:</p> <ul style="list-style-type: none"> • For organizing health days/ events @ Rs.800/- per event (Rs 500/- as organization cost/Refreshment for participants etc. + Rs.200/- as Honorarium to HW-M & Rs.100/- as incentive to

Sl. No.	Service Areas	Description of Major Features
		<p>ASHA for facilitating organization of the event) maximum event in a year.</p> <ul style="list-style-type: none"> • Honorarium to guest speaker, experts in the field of meditation, Aerobics, Zumba, Dietician etc. to take sessions @ Rs.500/- per 2-3 hrs. • Support in kind (Max Rs.5000/- per Institution per annum) to local club, Balika Mandal, school etc for encouraging sports & other initiatives like Water bell initiatives etc. • ½ Day long campaign with mix-media engagement for TB Free Initiatives, healthy baby show, NCD awareness etc. @ Rs.5000/- per event. • Use print/electronic media to convey the message on the services of UHWC • Installation of large Hoardings at strategic location for general awareness- Expenditure as per actual observing due procedures. The prototypes for the same will be communicated by NHM. • Weekly sessions (two days in a week) on diet/nutrition counseling and healthy life styles. The selection criteria for empanelment/ engagement may be followed under AMA clinic guidelines @ 4000/- per month • Nutritional Food demonstration to promote healthy mother to reduce low birth weight baby in the operational areas on half yearly basis @ 2500/- per event.

4. SERVICE DESCRIPTION AND RESPONSIBILITIES

The services include the comprehensive primary healthcare package encompassing outreach, including behavioral change through health education and health promotion, clinical and public health services. The indicative list of Services to be provided at the UHWC is given below;

Sl. No	Services	Brief Description
1.	General OPD Service	The OPD working hour would be 8 AM to 11 AM and 5 PM to 8 PM. However, it may be changed basing on the notifications issued by Govt. time to time. Services to be provided in OPD are; Diagnosis and screening of patients attending Allopathic OPD, prescription of free drugs, referral of complicated cases. In case of emergency, the UHWC Staff shall attend the patient even it is beyond the general working hour.

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Sl. No	Services	Brief Description
2.	Care in pregnancy and Maternal health	<ul style="list-style-type: none"> • Early registration of pregnancy and Antenatal check-up. • Identifying HRP, GDM • Post Natal Cases, counseling etc.
3.	Neonatal and infant health care services	<ul style="list-style-type: none"> • Identification and management of high risk newborn. • Management of BA, ARI, Diarrhoea. • Identification & referral for congenital anomalies and AEFI. • Complete Immunization, Vit. A Supplementation
4.	Childhood & adolescent health care services	<ul style="list-style-type: none"> • Identification and management of vaccine preventable diseases. • Early detection & referral for abnormalities, delay and disability. • Prompt Management of ARI, acute Diarrhoea and detection of SAM • Adolescent Health counseling.
5.	Reproductive health and Contraceptive Service	<ul style="list-style-type: none"> • Provision of condoms, OCP, ECP and insertion & removal of IUCD. • Identification and management of RTIs/STIs • Counseling for Family Planning, access to spacing methods and treatment of hormonal & menstrual disorders track infection etc.
6.	Management of communicable diseases including NHP	<ul style="list-style-type: none"> • Diagnosis and management of VBDs • Provision of DOTS for TB and MDT for leprosy • HIV Screening
7.	Management of Common communicable diseases and acute simple illnesses	<ul style="list-style-type: none"> • Identification, management and referral of common fevers, ARIs, diarrhoea, skin infections, cholera, dysentery, typhoid, hepatitis, rabies and helminthiasis. • Management of common aches, joint pains, and common skin conditions, (rash/urticaria)
8.	Screening & comprehensive management of NCDs	<ul style="list-style-type: none"> • Screening, treatment and referral for Hypertension and Diabetes. • Cancer – screening for oral, breast and cervical cancer and referral for suspected cases of other cancers • Screening and follow up care for occupational diseases, fluorosis, respiratory disorders (COPD and asthma) and epilepsy
9.	Basic ophthalmic and ENT care services	<ul style="list-style-type: none"> • Identification and treatment of common eye problems • Management of common colds, ASOM, injuries, pharyngitis, laryngitis, rhinitis, URI, sinusitis, epistaxis • Manage common throat complaints and removal of foreign body.
10.	Basic dental health care	<ul style="list-style-type: none"> • Screening and basic management for common oral health conditions. • Oral health education about dental caries, periodontal diseases, malocclusion and oral cancers.
11.	Basic geriatric health care services	<ul style="list-style-type: none"> • Management of common geriatric ailments; counselling, supportive treatment • Pain Management and provision of palliative care with support of ASHA
12.	Emergency	<ul style="list-style-type: none"> • Stabilization care and first aid before referral in common conditions.

Sl. No	Services	Brief Description
	Medical Services	<ul style="list-style-type: none"> Identify and refer cases for surgical correction cysts / lipoma/ haemangioma/ ganglion and other conditions.
13.	Screening & basic management of mental health ailments	<ul style="list-style-type: none"> Detection, referral and follow up of patients with severe mental disorders Dispense follow up medication as prescribed by the Medical officer at UPHC/ UCHC or by the Psychiatrist at DH.
14.	Drug Distribution Centre(DDC)	<ul style="list-style-type: none"> DDC branding as per "Niramaya" guidelines Available drugs as per the EDL Local purchase of drugs
15.	Diagnostic services	<ul style="list-style-type: none"> 50 types of tests to be conducted at UHWCs. Testing and collection point of sputum through installing cough collection box etc. Refer to referral institutions for any other tests not prescribed at UHWC level. Calibration of equipment/instruments shall be done on regular basis with the support of technical agency.
16.	Health Promotion / Wellness activities	<ul style="list-style-type: none"> Conducting yoga sessions Organizing other wellness activities/sessions Organizing wellness activities as per Fit India Movement.
17.	Tele-consultation Services	UHWC is responsible for facilitating conduction of tele-consultation services.
18.	Physiotherapy Services	<ul style="list-style-type: none"> The services will be made available at both facility & community level. This facility based physiotherapy services will be opened for 5 days in a week for general patients and one day in a week at community level for identified home bound cases those are unable to rotate.
19.	Outreach services	<ul style="list-style-type: none"> Facilitate UHND /immunization session within the UHWC areas Facilitate ASHA/MAS/WKS activities Facilitate/organize the special outreach sessions/camps. Vulnerability assessment of the slums within the operational area of UHWC to be conducted/updated on yearly basis

5. Key Deliverables of the Project:

Sl. No	Activities	Deliverables
1.	All prescribed manpower are in	There is no vacancy of maximum 60 days of any position in the UHWC throughout the year.

Sl. No	Activities	Deliverables
	position.	
2.	OPD Service (Allopathic)	Min. Avg. OPD 40/day
3.	Laboratory Services	All 50 tests are available as per the standard list under free diagnostic services for UHWC
4.	ANC/PNC Clinic	9 th of every month UHWC conducted Pradhan Mantri Suraksha Matrutya Abhiyan (PMSMA) as per the guideline. ANC/PNC check up to be conducted
5.	12 HWC services	All the services under the UHWC should be rendered in the facility
6.	NCD Clinic/Screening	Daily- OPD and services to the NCD patients.
7.	Functional Designated Microscopy Center (DMC)	Functional Designated Microscopy Centre
8.	Functional Physiotherapy Centre	Five days Physiotherapy Services at the facility and one day at community level
9.	Health Promotion and disease prevention (UHWC)	Conducting/observation of Health Days as per wellness calendar and yoga sessions as per the approved budget
10.	UHWC managing committee	Meeting of the UHWC managing committee as per the mandate
11.	Maintaining Quality Standard and other statutory norms	All the standard norms under BMW/fire safety and other statutory norms to be adhered in the facility
12.	Outreach services	Must oversee/monitor the effective implementation of the community services program i.e MAS,ASHA, WKS activities and UHND sessions, Immunization, special health camps, screening camp for sanitary workers, NCD camps etc.
13.	Yoga Services	Six days in week at the facility or other places as per the decision of the ULB

6. Human Resources of UHWC:

Followings are the Human Resources required to be positioned in the UHWC for operation and management of UHWC.

Sl. No.	Category of Staff	No of post.	Eligibility Qualification (to be selected as per Govt. eligibility norms)
1.	Medical Officer (Allopathic)	1	<ul style="list-style-type: none"> Age- S/he must have attained the age 21-70 years. MBBS degree from an institute recognized by Medical Council of India. Must have valid registration from the Odisha Council of Medical Registration.
2.	Pharmacist	1	<ul style="list-style-type: none"> Age- The age should be between 21-50 years for fresher and upto 65 years for retired person. Minimum Qualification- Degree/Diploma in Pharmacy from a

			Govt./Govt. recognized Institution. Minimum 1 year Experience in managing a drug store in a reputed hospital/health center
3.	Staff Nurse	1	<ul style="list-style-type: none"> • Age- The age should be between 21-50 years for fresher and upto 65 years for retired person • Minimum Qualification- The candidates must have passed the +2 Science examination & shall have completed GNM course from institution recognized by Govt. and approved INC and must have registered in the Odisha Nursing Council.
4.	Lab Technician	1	<ul style="list-style-type: none"> • Age- The age should be between 21-50 years for fresher and upto 65 years for retired person • Minimum Qualification- The candidates must have passed in Diploma in Medical laboratory Technology from AICTE/ AICTE approved institutions/State Govt. recognized institutions.
5	Health Worker (Male)		<ul style="list-style-type: none"> • Age- The age should be between 21-50 years for fresher and upto 65 years for retired person • Minimum Qualification- Degree/Diploma in Pharmacy from a Govt./Govt. recognized Institution. • He/She should have passes odia language in M.E standard.
6	Physiotherapist Part time		<ul style="list-style-type: none"> • Age –The age should be between 21-50 years by the date of advertisement • Eligibility: The Candidate must have passed Bachelor degree in Physiotherapy from a recognized university or institution. The Degree must be 4 years and 6 months of full time course including 6 months of compulsory internship.
7	Yoga Teacher- Part time		<ul style="list-style-type: none"> • Age – The age should be between 21-50 years by the date of advertisement • Eligibility: The candidate must be an M.A. in Yogic Science/ M.A. in Human Consciousness and Yogic Science/ PG Diploma in Yoga/ 1yr Diploma in Yoga from an Institution / College affiliated from a recognized University of "the State/ LO + 2 pass who have obtained yoga Wellness Instructor Certificate from Yoga Certification Board. He should belong to the same District where the HWC is situated. He should be able to read, write and speak odia <p>Female: The candidate must have passed to +2/ Intermediate Examination recognized by Central/ State Board and She should belong to the same Ward. In case of non availability of in same she should belong from same district. She should be able to read, write and speak Odia. She should be of sound Physical and Mental Health and devoid of any Physical Infirmary/ deformity which may create hindrance for discharging the above responsibility</p>

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8.	Centre Co-ordinator	1	<ul style="list-style-type: none"> • Age- The age should be between 21-45 years by the date of advertisement • Qualification : The candidate must have master degree in Hospital administration/Public Health management/Business Administration
9.	Support staff	1	<ul style="list-style-type: none"> • Age- S/he must have attained the age 21 years. • Minimum Qualification- Minimum 8th Standard.
10	Cleaning Staff	1	<ul style="list-style-type: none"> • Age- S/he must have attained the age 21 years. • Minimum Qualification- Minimum 8th Standard.
11	Security Guard	1	<ul style="list-style-type: none"> • Age- S/he must have attained the age 21 years. • Minimum Qualification- Minimum 8th Standard

The JD/ ToR of the staff under UHWC is attached at annexure-II. The Staff so engaged / recruited/ appointed by the Agency shall be exclusively on the pay roll of the agency and shall under no circumstances this staff will ever have any claim, whatsoever for appointment with the Government. The Agency shall be solely responsible for the performance and conduct of the staff notwithstanding the source of hiring such staff. The Agency shall be fully responsible for adhering to provisions of various laws applicable on them including labour laws In case the Agency fails to comply with the provisions of applicable laws and thereby any financial or other liability arises on the Government by Court orders or otherwise, the Service Provider shall be fully responsible to compensate/ indemnify to the Government for such liabilities. For realization of such damages, Government may even resort to the provisions of any Act, which is in force or other laws as applicable on the occurrence of such situations.

7. Management of UHWCs under PPP

The Agency must ensure delivery of preventive, promotive, and curative care as well as all public health functions related to surveillance, management of outbreaks, etc. The agency to engage the Centre Coordinator in each UHWC to ensure day to day management of the UHWC.

One agency can only be allowed to manage a maximum of 10 UHWCs in the State under PPP and maximum 5 UHWCs in a District.

8. Administrative/Reporting Hierarchy: Each UHWC will report to one selected UPHC-Poly Clinic/UPHC or PHC/CHC/SDH/DHH (where UPHC is not exists in the ULB) for functional feasibility irrespective of mode of management. Reporting structure of UHWC are as below ;

- I. Administratively Report to nearby UPHC- Poly clinic
- II. In case non- existence of UPHC- Poly clinic , report to nearest Urban PHC
- III. In case non- existence of both UPHC- Poly clinic and UPHC, report to nearby health facility located in the town/near by areas to be notified by concerned CDM & PHO

A separate order will be issued by the Mission Directorate, NHM in this regard after verifying working feasibility of each UHWC.

9. NIN-ID for UHWCs: These Urban-HWCs shall have a National Identification Number (NIN-ID) and register on the AB-HWC portal after duly mapping of the hierarchy.

10. Modalities for Engagement of HR under UHWCs

Qualified HR as per prescribed minimum educational qualification & experience are to be engaged through proper screening and selection procedures. The post wise details of educational qualification and experience approved for each UHWCs are at the operational guidelines of UHWC. The TOR & job description of Staff is attached at operational guidelines of UHWC. It is the responsibility of the agency to select competent HR, observing proper selection process.

District committee to scrutinize the papers prior to engagement of staff : District Technical Committee consisting of CDM & PHO, DPHO, ADUPHO (in case of Corporation city), City Health Officer, DPM/CPM may verify/secure the certificates & other relevant papers of the candidates prior to engagement by the outsourced agency.

Team Based Incentives to UHWC staff : The staff working under UHWC will be given monthly incentive on achieving set deliverables as follows:

Facility based:

- Medical Officer: Rs. 3000/-pm
- Other facility based paramedics Staff : Rs. 3000/-pm (equally distributed among them)

Field Staff

- Field Staff : Rs. 1500/- pm each to HW(F) & HW(M)

Conditions for payment of incentives:

- The amount should be released to the outsourced agency/PPP agency to transfer the incentive to the staff.
- Incentive can only be claimed from one source.
- The set of deliverables for HWC communicated to the district/city to be followed

11. Procurement & Supply of EIF:

The ULB (Municipal Corporation/ Municipality/ NAC) shall procure the equipment, instrument & furniture and shall handover to Urban HWC. Further, Computers, laptops, printer, scanner and its peripherals shall also have to be procured for OPD, DDC, office/staff and outreach program adhering the procurement norms.

12. Building for UHWCs

Minimum Space required to run a UHWC: 2500 Sqft



Areas	Approx Built up area (in Sqft)
OPD	300
Dispensing	150
Dressing & Injection Room	150
Lab	300
Physiotherapy	300
Wellness room including Yoga Centre	300
Store	200
Patient waiting Space with Toilets for Male & Female	300
Office room	200
Observation and emergency room	300
Total	2500

However, building with more space if available within the approved rate can be taken on rent by the agency. Parking space should be available and the building should be barrier free and easy access to the patient.

13. City wise House Rent Approved

Sl. No	Types of Cities	Maximum ceiling of House Rent approved (inclusive water, electricity etc.)
1	Corporation Cities	Rs.25,000/-
2	Municipalities/NAC	Rs.20,000/-

Refurbishing of existing Building: Refurbishing of hired / Government Building shall be done.

14. Training and Capacity building: The staff of Urban-HWC would be oriented/trained in different thematic areas through capacity building plan to deliver primary health care and improve public health functions, as well in the use of Digital and IT systems to access online training and real time reporting of data. They would also be trained in undertaking vulnerability assessment, community-based processes/intervention to enhance reach to marginalized communities. Training/Orientation/Exposure visit shall be organized by the respective District/City/State accordingly.

15. UHWC Management Committee: A committee shall be formed in each UHWC to look after day to day management of the facility. The committee will sit twice in a month to discuss the progress, issues and prepare plan of action. The followings are the members of the committee

DPHO in case of district /ADUPHO in case of Corporation city	– Chairperson
Representative of the Commissioner/EO, ULB	- Member
Corporator/Counselor/Sarpanch(in case of peri urban area) where UHWC is located	- Member
MO (I/C) of the reporting unit of the UHWC	- Member
DPM & DAM	- Member (In case of District)
CPM & CAM	- Member (In case of Corporation city)
APM- UH & PHM of UPHC	- Member
MO (/C) of UHWC	- Member Convener
Centre Co-ordinator	- Member
One NGO representative	- Member (To be nominated by Chairperson)

16. Financial Management procedures

A sum of Rs. 70 Lakhs has been approved under XV-FC grant for operationalisation of each UHWC in the FY 2021-22. This annual grant will be utilized for taking up of different activities as detailed out in this approved UHWC guidelines & Budget. The budget details for operationalisation of UHWC will be approved & communicated annually along with the implementation guidelines.

The fund has been sanctioned to respective ULBs. A part of the sanctioned fund has to be released to Individual Institution (UHWC) from the ULB. The fund has to be released to UHWC on half yearly basis. Budget in other heads has to be paid to the vendor/Service providers directly by ULB & keep record. Procurement norms should be followed for procurement of EIF and drugs.

Negative List: The ULB/ UHWC should utilize the grants as per the approval heads. The fund under the XV-FC health grants should not be used by the District/City for any CSS component or for any other mandate, apart from the components listed for the utilization of the health grants under XV-FC.



No-duplication: There is no duplication or overlap of proposals, tasks, procurements, construction, hiring of HR etc. for which funds have already been provided under NHM, State budgets any other funds.

Bank A/C: A Joint Bank account will be opened in the name of MO (I/C) of the UHWC and MO/Suppt. of the UPHC/ CHC/ Other hospital in a nationalized bank. In the absence of the MO (I/C) of the UHWC, any Paramedical staff/Program Management staff to be nominated by UHWC management committee shall act as joint signatory of the UHWC bank account.

17. Reporting & Monitoring

The SLC (State Level Committee) will send the progress report on both physical and financial progress against the approved plan on quarterly basis to the Ministry of Health and Family Welfare, Govt. of India. The District/ City to submit the progress report of UHWC to State on monthly basis regularly. A dashboard will be prepared to monitor the activities of 15th FC grants, which would track the physical as well as financial progress. The dashboard would be updated regularly. Further, the district/ city may follow up for submission of following report;

- The report on (HIMS/ standalone/ NCD/ DCP/ vital statistic/ UHND/ Immunisation/ Community process) of UHWC will be submitted as per the standard format/ template to the reporting unit. The reporting format of UHWC is at Annexure-I
- The report of the virtual sub-centre shall be compiled and consolidated at UHWC level
- The Outreach activities i.e UHND, Immunisation, special outreach camp, ASHA/MAS activities etc shall be reported by the UHWC
- The district/city to compile the report and send it to the State/NHM

Review

- Monthly review of UHWC and outreach activities in the presence of hospital/field staff.
- Visit of MO to the UHND / immunization / outreach camps sites
- Quarterly review of the progress of UHWC at ULB/District level
- Half yearly review/ annual assessment at State level

