



National Health Mission (Haryana)
Bays No. 55-58, Sector-2, Panchkula



Advt. No.: 1/2019-20(HWC-CP)/06/2428

Date: 26/07/2019

The State Health Society (Haryana) invites online applications from B.A.M.S. Degree Holders for 328 posts of Mid Level Health Providers-cum-Community Health Officers (MLHPs-cum-CHOs) on contract basis under National Health Mission (NHM) for providing Comprehensive Primary Health Care services at Sub Center level "Health & Wellness Centers" being upgraded under Ayushman Bharat in 11 Districts in FY 2019-20, as per detail given below. **The Post Code is 19328.**

Sr. No.	Districts	Total	Gen	SC	BC-A	EWS-GEN	ESM-Gen	BC-B	ESM-BC-B	ESM-SC	ESM-BC-A	OSP-BC-A	OSP-BC-B	OSP-SC	PH-BC-A	PH-Gen
1	Ambala	56	19	8	5	6	4	3	2	2	2	1	1	1	1	1
2	Gurugram	33	13	4	1	3	3	3	1	1	1	1	0	1	1	0
3	Karnal	73	27	11	8	7	5	4	2	2	2	1	1	1	1	1
4	Mewat	24	9	4	3	1	2	1	1	1	0	0	1	0	0	1
5	Panchkula	11	4	2	1	1	1	2	0	0	0	0	0	0	0	0
6	Sirsa	70	25	11	7	6	5	4	3	2	2	1	1	1	1	1
7	Yamunanagar	55	19	8	5	5	3	4	2	2	2	1	1	1	1	1
8	Hisar	01	1	0	0	0	0	0	0	0	0	0	0	0	0	0
9	Kurukshetra	01	0	1	0	0	0	0	0	0	0	0	0	0	0	0
10	Narnaul	03	2	0	0	0	0	1	0	0	0	0	0	0	0	0
11	Sonepat	01	0	0	0	0	1	0	0	0	0	0	0	0	0	0
Total		328	119	49	30	29	24	22	11	10	9	5	5	5	5	5

Abbreviation of Categories: Gen=General, SC=Scheduled Castes, BC=Backward Classes, EWS=Economically Weaker Section, ESM=Ex-serviceman, OSP=Outstanding Sports Persons, PH=Physically Handicapped.

Eligible Candidates are required to apply online at the website of **NHM (Haryana)** i.e. www.nrhmharyana.gov.in and to follow the below mentioned schedule for filling of Application Form, Screening Test & Counseling:

Activities	Date, Time & Venue
Opening date for submission of online applications	29/07/2019
Closing date and Time for submission of online applications	15/08/2019 (5:00pm)
Date, Time & Venue for Screening/ Written Test	18/08/2019 from 9:00am onwards at Lajpat Rai Bhawan, Sector-15, Chandigarh
Date for Counselling for Bond & Contract Signing, and Filling-up of IGNOU Form	20/08/2019 from 9:00am onwards at Lajpat Rai Bhawan, Sector-15, Chandigarh

Essential Eligibility Criteria:

- B.A.M.S. (Bachelor of Ayurvedic Medicine & Surgery) Regular Course from Govt./Recognized Institute.
- Must be registered with Council of Indian Medicines (Haryana), or Central Council of Indian Medicines (New Delhi) or with any other State Council of Indian Medicines.
- Age Limit 18 to 42 years and age relaxation for reserved categories as per Haryana Govt. rules.
- Hindi/Sanskrit upto matriculation level.

Monthly Remuneration and Other Financial Benefits: The post comes under the pay band of PB-2-9300-34800-4800-18750 as per Service Byelaws prescribed for employees of NHM Haryana. However, following emoluments will be given:

- For initial 05 years, monthly honorarium of Rs. 25,000/- (i.e. Rs. 18750/- as per Pay Band-2 + Rs. 6250/- additional honorarium). After completion of 05 years service, salary & all increment/allowances will be given as per pay band only i.e. PB-2-9300-34800-4800-18750.
- There is provision of Rs. 10,000/- performance based incentive after completion of 6 month Certificate Course and due procedures, as per Govt of India norms.
- Benefit of Annual Increment of 5% on initial salary after completion of 6 months satisfactory service.
- Benefit of Dearness Allowance will be given after completion of 5 years satisfactory service.
- Benefit of House Rent Allowance will be given after completion of 10 years satisfactory service.

Other Necessary Formalities and Information:

- Last date for receiving online applications is 15/08/2019 by 5:00pm and date for Screening Test is fixed on 18/08/2019 from 9:00am onwards at Lajpat Rai Bhawan, Madhya Marg, Sector-15, Chandigarh. Document Verification will be done between 9:00 to 11:00am on the same day (i.e. 18/08/2019) and Screening Test of two hour duration will be held from 12:00 noon to 2:00pm, subsequent to the document verifications on 18/08/2019.
- The Candidate can apply for only one district and District-wise merit list will be prepared for the selection. Selection will be done on the basis of Screening Test as per district-wise details given above and the post is non-transferable.
- All Candidates are required to bring printed copy of the online filled application form with Original Certificates and photocopy of self attested Certificates, 02 passport size Photos, and Identity Proof for appearing in the Screening Test.
- The selected Candidates are required to appear in the Counselling on 20/08/2019 from 9:00am onwards; wherein Candidates are required to bring three sets of self attested all Certificates, 5 passport size photos, Bond Paper of Rs. 100/- for agreement of 3 year job, Stamp Paper of Rs. 10/- for Annual Contract with NHM Haryana. The Bond Paper & Stamp Paper may be downloaded from <https://egrashry.nic.in> If any candidate fails to attend the Counselling Session as per fixed schedule, her/his candidature will be considered cancelled for the said post and no further opportunity will be given.
- The selected Candidates are required to serve the State of Haryana for atleast 3 years continuously and, in case any candidate leave the service before 3 years, he/she shall be liable to financial penalty as per NHM norms given in the detailed note available at NHM Website. For this purpose, a Service Bond for 3 years has to be signed with the NHM State HQ.
- The selected Candidates are also required to successfully complete the 6 months Certificate Course in Community Health from IGNOU, for which NHM Haryana will pay allowances as per Govt. of India norms.

Other Important Instructions:

Please read instructions and procedures carefully before filling the Online Application Form.

1. The candidates are advised to ensure the eligibility criteria that they fulfill all qualification for the said post.
2. Job Profile and Term of Reference etc. are given in the Concept Note and Operational Guidelines for Comprehensive Primary Health Care, available at NHM Haryana website link i.e. www.nrhmharyana.gov.in
3. After applying online, Registration No. and Password will be generated. After successful submission of application Candidates should take out print of the online filled Application Form.
4. Candidate should also take out a print of the Registration No. and Password for future reference of your application status and for reprinting of your online filled Application Form.
5. Application by post or by hand shall not be accepted and only online application will be considered.
6. No TA/DA will be paid for attending Screening Test/Counselling.
7. If it is found that any Candidate has furnished false information/document(s) at any stage of the selection process, her/his appointment/ recruitment will be cancelled/ terminated immediately.
8. Reservations and age relaxation will be given as per Haryana Govt. policy.
9. List of short listed candidates for written examination and computer test will be displayed on the official website of NHM Haryana i.e. www.nrhmharyana.gov.in .
10. No separate admit card or communication shall be sent to individual candidate.
11. Mobile phones, calculators and other electronics gazettes etc are strictly prohibited in examination hall.
12. Number of posts can be increased or decreased as per the requirement of the office.
13. NHM Haryana, reserves the right to cancel the whole recruitment process at any time at any stage without assigning any reason(s) to the Candidates.
14. Candidates are advised to visit NHM Haryana website i.e. www.nrhmharyana.gov.in regularly for latest updates regarding the selection for these posts, as no separate communication will be sent for any update/change.
15. The Community Health Officers already working under NHM Haryana are abide for 03 year service bond, as per existing norms. Hence, they are suggested not to apply for the current advertisement; if any of them apply, then she/he shall be responsible for administrative action, as per the bond conditions.

Sd/-
Mission Director
NHM Haryana, Panchkula

Comprehensive Note

Terms and Conditions for IGNOU Course and 3 Year Bond:

1. Selected candidate is required to complete the 6 month residential Certificate Course in Community Health successfully from the designated Programme Study Centers in the State of Haryana.
2. Fee of required Candidate for Certificate Course in Community Health Services will be borne by the NHM Haryana alongwith logistic facilitation. The monthly fixed honorarium will also be provided during the Course period.
3. If any candidate is not able to complete the Certificate Course in Community Health successfully in due course as per IGNOU norms (with one additional chance), then his/ her Contract will be terminated.
4. The Candidate is required to sign a Bond Agreement with the NHM Haryana to serve at-least for 03 years continuously after completion of Certificate Course and if she/he leaves the job before Bond Period, she/he shall be liable to deposit back money earned by him/her during complete duration of the job as MLSP-cum-CHOs to NHM Haryana as penalty, as prescribed below:
 - 75% cost of monthly fixed honorarium in case of leaving before 01 year
 - 50% cost of monthly fixed honorarium in case of leaving before 02 years
 - 25% cost of monthly fixed honorarium in case of leaving before 03 Years

Programme Objective: Moving towards Universal Health Coverage (UHC) is a key goal of 12th Plan and the GoI has already charted a path that depends largely on provision of affordable, quantity health care through the public health system. Provision of Comprehensive Primary Health Care is an integral and pivotal part of UHC and there is a felt need of generating evidences to evolve innovative solution for strengthening the Primary Healthcare. For this purpose, the GoI has planned to upgrade of selected Sub Centers into Health & Wellness Centers across the country under new National Health Policy 2017 which has been approved by Central Cabinet under the chairmanship of Hon'ble Prime Minister on 15 March 2017.

The objective of the programme is to provide Comprehensive Primary Health Care through strengthening of existing Sub Centers and sector level Primary Health Centers in a block to Health & Wellness Centers linked to a block PHC. The Sub Centre level Health & Wellness Centers (HWC) would have one additional MLHP-cum-CHO as additional human resource with HR on the lines of what is defined in the IPHS standards.

Key Activities: Strengthen the Sub Center as a HWC to deliver a package of Comprehensive Primary Health Care services listed below. The first point of referral for such HWC would be a 24/7 Block PHC. The Block PHC and the HWCs should provide the package of Comprehensive Primary Health Care for the population and have effective linkages to the CHC and District Hospital for specially consultation of following 12 services:

- i. Comprehensive maternal health care services to be provided in those sites equipped to serve as 'deliver points'.
- ii. Comprehensive neonatal and infant health care services.
- iii. Comprehensive childhood and adolescent health care services.
- iv. Comprehensive reproductive health care services.
- v. Comprehensive management of communicable diseases.
- vi. Comprehensive management of Non-Communicable diseases
- vii. Basic ophthalmic care services
- viii. Basic ENT care services.
- ix. Screening and basic management of mental health ailments.
- x. Basic dental health care.
- xi. Basic geriatric health care services.
- xii. Emergency Medical Care.

The services listed from (i) through (xii) are already being provided. Some aspects of these services would need to be strengthened. Care for Communicable Diseases is being undertaken under vertical disease control programme, although this will need coordination as to the services being provided through the sub center and how it links to higher level facilities. NCD is one area which accounts for a major burden of disease and health care cost. The other services can be phased in gradually, prioritizing those which cause higher morbidity.

A team of CHOs, one ANM, one male multipurpose worker and ASHAs belonging to the villages of the Sub Center are will be for HWC. Develop a plan for the organization of services and corresponding to this a skill development plan to enable the team to deliver the services as listed above. IT platform to be put in place that enables the team to record the services provided, to provide continuity of care across time and across levels, to perform population based analytics and to enable monitoring. The actual burden of recording and register work for the expanded basket of services should be measurably less than for the current package of services by ensuring that register work is not an added on layer but integrated into the work process itself. The GoI will facilitate the process.

Family Folders and an individual Health Card will be prepared and it will be provided through ASHA, who also informs the family of what services the HWC offers and who the members of the primary care team. The Health & Wellness Center team will have a record of the family health cards. A digital format would be implemented depending on the state of readiness so as to facilitate referrals and enable a continuum of care.

For conditions that require long term treatment, drug supplies will be available at the HWCs so that patients do not have travel far their homes for prescription refills, and the Primary care team can also monitor compliance and provide follow ups and counseling. Develop a system for referral and patient transport for secondary care hospitalization using the golden hour thumb rule.

A strategy for counseling and interpersonal communication at community and facility levels to be developed that emphasizes action on social determinants as well as addresses modifiable risk factors. This is a role that will need to engage VHSNC, ANM and ASHA.

The Team at SC level HWC will undertake a baseline survey to assess morbidity burden and out of pocket expenses.

Guidance Note for States on “Certificate Course in Community Health”

A. About the Course: Trained and competent human resources are essential for an effective health care delivery system. There is a pressing need to strengthen health sub centers to provide Comprehensive Primary Care including for NCDs. Global evidence suggests that suitably trained (3-4 years duration) service providers can provide considerable primary care. As one of the measures to increase the availability of such appropriately qualified HR, especially in rural and remote areas, on 13th November 2013, the Cabinet approved the introduction of a 3 & 1/2 year Bachelor of Science in Community Health (BSc CH) Course in India. However, the uptake for this course has been slow and if some Universities were to start the course, the first batch of professionals will be available for recruitment only by the end of the fourth year.

On the other hand, qualified Ayurveda Doctors are available in the system, who could be trained in public health & primary care through suitably designed ‘Bridge Programs in Community Health’. Such qualified human resource may function as Mid Level Health Care Providers and called ‘Community Health Officers (CHOs)’ and posted at health Sub Centres; which could be developed as ‘Health & Wellness Centres’. The BSc (CH) Curriculum is the benchmark for developing this Certificate Course in Community Health Services and these MLHPs will be primarily deployed at Health

& Wellness Centers (or Sub Centers). They would possess the necessary knowledge and competencies to deliver comprehensive primary care services and implement public health programmes.

Course Outline: The **Certificate Programmes** will be rolled out by IGNOU. Theory classes and hands-on Practicum training will be organized at Program Study Centers and Health Centers (District Hospitals, CHCs, PHCs, Sub Centers, etc.) identified and accredited by IGNOU. In addition to this there would be community visits by students for field-based assignments and research projects.

Eligibility:

Bridge Program in Community Health: BAMS

Medium of Instruction: English/ Hindi for teaching as well as assessments

Course Duration: Six months

Academic Session: 1st January and 1st July of each year

Course Objectives: Based on the gaps identified through curriculum mapping between BSc (CH) the program would broadly cover the following:

Introduction to National Health Programs & Health Systems and adherence to national protocols of treatment and care, development of leadership and management skills for effective functioning of H&WCs. Public Health Competencies such as understanding the history & evolution of public health in India, analysis of health profile of district, state & country, methods to improve health seeking behavior, health promotion, nutritional assessment, promotion, education and rehabilitation, use of basic epidemiological tools, morbidity and mortality profiling of community/district, reproductive and child health, understanding concepts of primary and comprehensive health care, health planning and management.

Teaching on primary care of common conditions will lay emphasis on covering the gaps identified in the course mapping as well as the package of 12 services that has been identified for preventive, promotive and basic curative service delivery for comprehensive primary care – these include the areas of maternal and child health, family planning, communicable diseases, screening for non-communicable diseases, management of acute simple illnesses, basic management of eye, ENT, dental, screening for mental health and provision of basic palliative care and care for the elderly, with a mechanism for prompt and effective referral where appropriate.

The course would cover all essential competencies required by a MLHP to deliver care at the Health and Wellness Centers (HWCs). The course would lay extra emphasis on key areas such as Drug Pharmacology, Diagnostic skills including Physical examination, and use of drugs. Basic skills of leadership and management will also be covered in the course.

Evaluation: Internal evaluation will be conducted by IGNOU periodically through written or practical assignments, depending on the subject being assessed.

- Final Examination will be conducted by IGNOU at the end of the course through written and practical examination.
- Marks distribution to be decided as per IGNOU regulations.
- Criteria for Passing: The candidate should obtain at least 50% marks separately in internal evaluation and final examination in each of the theory and practical papers.

Internship: Rotational postings for 18 days, mainly at the District Hospital, with practical training at PHCs, H&WCs/SCs, Anganwadi Centers and the Community.

Certification: A certificate will be provided by IGNOU on successful completion of the internship and submission of project work.

Job Opportunity: On successful completion, the candidate will be posted at the Health & Wellness Centers as Community Health Officers (CHOs) to lead a primary care provider team consisting of female health workers (ANMs), male health worker (MPW), ASHAs, etc.

Job Responsibilities: The trained CHO would broadly be expected to carry out public health functions, ambulatory care, management and leadership at the Health & Wellness Centers (H&WCs). They would be expected to:

- a) Implement National Programmes
- b) Administration and management at Health and Wellness Centers (or Sub-centers)
- c) Health education and encourage awareness about Family Planning, Maternal and Child
- d) Health, and Non-Communicable Diseases Preventive, promotive and curative care
- e) Identification of Danger Signs and Referral after pre-referral stabilization.
- f) Implement Biomedical waste disposal guidelines and Infection Control policies
- g) Supervision of health workers for Maternal and Child Health, Family Planning and Nutrition related services.

B. ACTION POINTS FOR STATES

(a) Selection of Health Facilities: Program Study Centers (PSC) for this program will be in a District Hospital with minimum bed strength of 100-200. Initially such PSCs could be located in 300+bedded DHs- The majority of practical trainings will take place at these PSCs. These facilities will be accredited by IGNOU prior to commencement of the course. Candidates will be taken for exposure visits and trainings applicable at that level to **CHCs, PHCs and SCs** affiliated to the DH. The **program in-charge** at the PSC will either be the head of the institution or a nominee of the head of the institution. Select **District Hospitals**, which fulfill the following stipulations (preferably those with attached training schools - ANM; or a Medical College, etc.).

- a) Space of approximately 500-800 sq. ft. for exclusive use of IGNOU without charging any rent. This space will be utilized for the office of the Program-in-Charge.
- b) Halls/rooms available for holding counseling sessions and IGNOU examinations.
- c) Library, laboratory, computer facilities etc. that can be extended to IGNOU students for the given program on mutually agreed terms.
- d) Facilities like tape recorder, TV, VCR, VCD etc. for using the cassettes/CDs of IGNOU. Minor gaps, if any, can be traversed with NHM support. These Hospitals will be accredited by IGNOU as Programme Study Centres

There could be 10-30 students per batch per Programme Study Centre. State may plan number of PSCs as per its plan for training Nurses in the bridge programme.

The list of DHs which are nominated as Programme Study Centres may be submitted to MoHFW for forwarding to IGNOU. IGNOU will conduct an inspection of the nominated facilities for consideration and approval as PSC. (A set of Performa for the same are enclosed).

(b) Selection of Trainers for Theory and Practical Trainings

Trainers - The teacher/counselor to student ratio needs to be maintained as per norms specified by IGNOU, from time to time. Presently, it should be 1:30 for theory and 1:5-7 students for practicum. For **theory/practical** there should be two counselors per course from each specialty (i.e. PG in Medical or Nursing from various specialties such as Community Health; OB/Gynecology; Pediatrics; Medicine; Surgery; Eye; ENT etc.).

States should create a **panel of trainers** (counselors/mentors) attached to the DH which is selected as PSC. They should have two years of teaching experience. If adequate numbers are not available in the same PSC, they can be commissioned from other nearby institutions or sourced from a pool of external experts including retired professionals. These identified trainers will be accredited by and given TOT at IGNOU. States/DHs shall submit the details of these trainers while submitting their application to IGNOU for accreditation as PSC.

2. Selection of Candidates

Eligibility Criteria for Bridge Programs in Community Health:
Certificate Course in Community Health

Essential Criteria:

- BAMS from a recognized Institute.
- 18 to 42 years in age
- Willingness to work in Sub Centers

Desirable Criteria

- Local residents/Proficiency in regional/local language
- Work experience in the public health system
- Candidates who are graduates of Government Training Institutes

States need to conduct a screening process for selecting candidates and this may include written examination/interviews by a panel of internal and external experts. The National Health System Resource Centre (NHSRC) shall provide necessary technical assistance in the initial year in this process. IGNOU will admit candidates nominated by States in the initial batches.

Detailed Operational Guidelines for Comprehensive Primary Health Care is provided by the Govt. of India are also attached herewith for ready reference of the Candidates.
