



**OFFICE OF THE MISSION DIRECTOR  
NATIONAL HEALTH MISSION, ASSAM**

Saikia Commercial Complex, Srinagar Path, Christianbasti, G.S. Road, Guwahati-05

Website: [www.nrhmassam.in](http://www.nrhmassam.in), E-mail: [misnrhm.assam@gmail.com](mailto:misnrhm.assam@gmail.com)

**Minutes of the Meeting of State level Mentoring Group for ASHA and Community Process**  
**Dated: 11<sup>th</sup> January 2016, at NHM Office under the Chairmanship of Shri Gautam Ganguly,**  
**Special Consultant, NHM Assam.**

**Members Present:**

**State Mentoring group members:**

1. Dr. P.N. Bora – Ex SPM, NHM Assam,
2. Dr. S.N. Choudhury – Retd. Jt Director, Kamrup(M), Guwahati
3. Dr. Indranee Dutta – Prof, OKDISCD, Guwahati
4. Ruchira Neog - Executive Secretary, VHAA

**Special Invitees:**

5. Dr. M Prakashamma – Member- NHM, AGCA
6. Seema Upadhyay – AGCA Secretariat, New Delhi
7. Jyotika Baruah – Senior Programme Manager, VHAA, Guwahati.

**NHM, Assam:**

8. Sikha Borthakur – BCC Expert, NHM, Assam
9. Dr. Dipjyoti Deka – APM, NHM, Assam
10. Partha Saikia – State Community Mobilizer, NHM, Assam

**Regional Resource Centre, NE:**

11. Dr. Biraj Kanti Shome – Consultant- RRC NE
12. Diganta Sarma – Consultant (CP) RRC NE

The Meeting State level Mentoring Group for ASHA and Community Process for finalization of Community Action for Health (CAH) work plan held on 11<sup>th</sup> January 2016, under the Chairmanship of Shri Gautam Ganguly- Special Consultant, NHM Assam, as per order of Mission Director, NHM Assam.

After the introductory session thread bare discussion was held on the presentations made by NHM, Assam & the State Nodal Agency, Voluntary Health Association of Assam(VHAA).

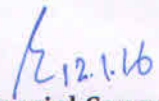
The house decided on the following points:

1. The House pointed out that the approach and activities for Community Action for Health should be on a community based model and follow a bottom-up approach.
2. The house agreed upon the activities as prioritized by NHM, Assam for Community Action for Health as highlighted in PPT. Enclosed Annexure I.
3. The House emphasized on the need to strengthen the existing committees i.e. VHSNC committees, Sub Centre level Committees & Rogi Kalyan Samities and directed the State Nodal Agency to incorporate these activities in their work plan.
4. The House emphasized on the need to sensitize the Service Providers and their role in improving health services like sensitizing ANMs for their accountability.



5. The House agreed upon that the existing Handbook for Members on VHSNC to be used as training module for training & strengthening of VHSNCs.
6. The house reviewed the work plan presented by the State Nodal Agency. Accordingly suggestions, modifications were done and instructed the State Nodal Agency to rework the work plan incorporating the following suggestions:
- a) To focus on the activities at VHSNC & other levels as per detailed activities shared by NHM, Assam.
  - b) To have quarterly review meetings in presence of a member of NHM, Assam.
  - c) Convergence should be incorporated as an activity in the work plan.
  - d) The Planning & Monitoring Committees are not to be constituted and the existing committees under NHM such as VHSNCs, RKS, and Sub Centre Committees to be strengthened.
  - e) The number of VHSNCs, RKS and Sub Centre Committees to be covered under CAH needs to be mentioned so that the activities are specific and measureable.
  - f) Sub Centre to be the focal point for strengthening of VHSNCs.
7. The House decided that a pool of trainers will be identified for carrying out trainings & should be fixed for a minimum 2 years and the list should be shared with NHM, Assam.
8. The House decided Mentoring & supervision of training to be done by Personnel from State HQ, NHM Assam & State Nodal Agency at Block level to avoid dilution of training.
9. The House decided that NHM, Assam & State Nodal Agency (VHAA) will prepare a guideline for proper conduction of Model VHSNC meeting, Sub Centre Committee Meeting and Rogi Kalyan Samity meeting; the house suggested that a video could be developed on model VHSNC meeting.
10. The house decided the finance cell will support the Programme officer in preparation of standard financial reporting formats for submission of UC & SOE by the State Nodal Agency.
11. The house decided that The State Nodal Agency will submit Monthly (10<sup>th</sup> of every month) and quarterly cumulative report to the State Office irrespective of expenditure incurred.
12. The house decided that the State Nodal Agency will reorganize the Budget as per finalized activities during discussion and accordingly NHM, Assam will process for the release of funds.
13. The reports Submitted by the State Nodal Agency and Zonal NGOs should be supported by photographs (digital & print media) & videos.
14. A resolution was passed that the State Mentoring Group for ASHA & Community processes will cover ASHA Programme, VHSNC Programme, Rogi Kalyan Samiti and Community Action for Health.

The meeting ended with a vote of thanks from the chair.

  
Special Consultant,  
National Health Mission,  
Assam



## Attendance Sheet

## State level Mentoring Group for ASHA and Community Process Meeting

Venue: Board Room, NHM, Assam

Date: 11th January 2016

Sl.	Name	Designation	Contact No	E Mail	Signature
1.	Dr. M. Prakashamma	Member, WHM AGA	09440065707	answers-mytri@gmail.com	D. Paul
2.	SEEMA UPADHYAY	Programme Manager ASHA	8826757458	seema@population-foundation.in	Seema Upadhyay
3.	Dr. Gayatri Bezboruah	Member, State Advisory Committee	94350-13645	drbezboruah@gmail.com	
4.	Dr. B. K. Sharma	RLC-NE	9435172953	lirajshome@gmail.com	BK Sharma
5.	PARTHA SAIKIA	SCM, WHM ASSAM	7896423283	scm.nrhmasam@gmail.com	P. Saikia
6.	JYOTIKA BARUAH	Senior Programme Manager VHAA, Gtly	9864044568	vhodasam@gmail.com jbaruah@gmail.com	Jyoti
7.	RUCHIRA NEOG	EXECUTIVE SECRETARY VHA of ASSAM STATE NODAL AGENCY	8822644638 7086041373	neog.ruchira@gmail.com	Ruchira Neog
8.	DIGANTA SARMA	Consultant (COP) PRE-NE	98642-63643	digsaam@yahoo.com	Diganta
9.	Dr. S.N. Choudhury	Retd. Jt. D.H.S. Kamrup Health. Bldg.	98640 22905	satsendrak@yahoo.com	S.N. Choudhury
10.	INDRANEE DUTTA	Prof, ODISCD, Guwahati	9435194718	indraneedutta@gmail.com	Indranee

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Attendance Sheet

State level Mentoring Group for ASHA and Community Process Meeting
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Venue: Board Room, NHM, Assam

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## Initial Activities to be undertaken for CAH

1. Meetings: State & District Level:
  - Orientation on Community Action for Health.
2. Development of resource material:
  - Capacity building of DCM, BCM, NGOs on Community Action for Health.
  - Planning on Community Action for Health.
  - IEC Material. Content development.
3. Mapping & identification of Trainers for Community Action for Health
4. Planning & Mentoring Committees:
  - State Level
  - District Level
  - Block Level
  - Village Level



# CAH at different levels

## Community Action for Health at VHSNC level:

- Identification of VHSNC
- Ensuring Bank Account for each VHSNC (if no account then facilitate opening of A/c)
- Ensuring regular VHSNC meetings
- Ensuring presence of VHSNC members in VHND
- Handholding in preparation of minutes of VHSNC meeting.
- Handhold & Facilitate Maintenance of registers under the VHSNC
- Handhold & Facilitate Maintenance of VHSNC account & Cash Books

### **Community Action for Health at Sub Centre level**

- Ensure smooth functioning of Sub Centres including ANMs visit.
- Ensure support to ANMs for better service delivery

### **Community Action for Health at Block Level**

- Convergence meetings with other line departments for health promotion & promotion of CAH.

### **Community Action for Health at District Level**

- Liaison with district administration to bridge the gap between health department & community.