



Dr Sandip Kumar <drsandip71@gmail.com>

RRTC Project

1 message

Dr. Seema Tandon <seema.tandon@ihat.in>

Tue, Jun 27, 2023 at 1:19 PM

To: "drsandip71@gmail.com" <drsandip71@gmail.com>

Cc: "deanrimsnr@gmail.com" <deanrimsnr@gmail.com>, Sumita Rastogi <sumita.rastogi@ihat.in>

Dear Dr Sandip,

Greetings,

Firstly ,thanks for the support and ownership showed by you and your RRTC team for implementation of RRTC Program in district hospitals .I am happy inform you that RRTC agreement has been extended for next 2 years dated July 2023 .I will be sharing with you the agreement copy shortly. Looking forward for the support always.

Thanks & Regards

Dr. Seema Tandon

Deputy Director - Clinical Programs

FRU/RRTC Unit - UP-TSU

Uttar Pradesh Technical Support Unit



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Service Agreement

Between India Health Action Trust

(First Party)

And

Uttar Pradesh University of Medical Sciences
Saifai, Etawah

(Second Party)

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SERVICE AGREEMENT

This Agreement is made on this 6th day of October 2021 at Lucknow, Uttar Pradesh.

BETWEEN

India Health Action Trust, having its registered office in Karnataka at "VK Commerce", No.8, 3rd Main Road, KSSIDC Industrial Estate, Rajajinagar, Bengaluru – 560 010 and State office in at 404, 4th Floor, Ratan Square, 20-A, Vidhan Sabha Marg, - 226001, (hereinafter referred to as "IHAT", which expression shall wherever the context so submits mean and include its successors and assigns) through its Project Lead Dr. Bidyut K Sarkar Director- Health Facility Strengthening, Uttar Pradesh Technical Support Unit, IHAT,.

Party of the First part

AND

Uttar Pradesh University of Medical Sciences, Saifai, Etawah- (hereafter called the `UPUMS' which term shall include its successors, assigns and authorized persons, of the other part) Prof. Dr. Alok Kumar, Professor & Dean.

Party of the Second part

IHAT and UPUMS hereinafter referred to collectively as "Parties" and separately as "Party".

The Project Nodal Officers for RRTC project will be Prof. Dr. Sandip Kumar, Professor and Head of Department of Community Medicine, UPUMS, Safai and Dr Seema Tandon, Deputy Director FRU/RRTC Strengthening, IHAT.

ARTICLE 1 - PARTIES

The parties to this contract titled "Phase 3 - Regional Resource Training Centres" are:

India Health Action Trust (IHAT), having its State office at 404, 4th floor, Ratan Square, 20-A, Vidhan Sabha Marg, Lucknow, Uttar Pradesh – 226001

AND

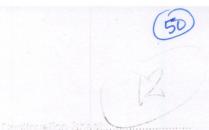
Uttar Pradesh University of Medical Sciences, Saifai, Etawah (UPUMS), Safai, Etawah, Uttar Pradesh - 206130

ARTICLE 2 - BACKGROUND

The purpose of this Agreement is to collaborate with UPUMS for training/mentoring for capacity building of medical staff (Obstetrician, Pediatricians, Anesthetist, and General Surgeons) from the selected District Hospitals (DH) as per annexure -A to reduce maternal and infant mortality through improved complication identification and management.

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2.1 Background of RRTC

With a population of roughly 200 million, Uttar Pradesh (UP) is India's most populous state, accounting for approximately one sixth of India's population. Maternal, neonatal, infant and child mortality rates are substantially higher in UP than in the rest of India. The maternal mortality ratio (MMR) in UP that was estimated at 285 per 100,000 live births for the period 2011-13, is at 197 per 100,000 live births for the period 2016-18. One of the key strategies to reduce maternal and new-born deaths is to strengthen the core competencies of doctors in the First Referral Units in Uttar Pradesh in order to ensure the availability of CEmONC services. This is important to improve maternal and new-born health outcomes.

To achieve the above objective, IHAT envisages to develop selected area-specific medical colleges as Regional Resource and Training Centres (RRTCs) to facilitate area-based teamwork for maternal and neonatal through continued medical education, mentoring, and regular supportive supervision ensuring effective continuum of care. These RRTCs will in turn mentor the key personnel within the DHs namely MBBS Medical Officers, Obstetrician, Paediatricians, Anaesthetist and General Surgeons to improve the quality of service delivery system for maternal and new-born.

2.2 Specific objectives of the RRTC program

The overarching goal of the RRTC program is to implement a cost-effective, participatory and sustainable model of capacity building for DHs to cover both urban and rural areas in all 75 districts in UP to strengthen the access to quality of maternal and neonatal services under the National Health Mission, U.P.

The specific objectives of RRTC are:

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- To build the capacity of DHs through training and mentorship to manage maternal and new born complications among patients referred to them from community or primary health care level delivery service points.
- 2. To prepare a pool of trainers at district hospitals for further training/mentoring of doctors posted at CHC FRUs, CHCs and PHCs.
- 3. To regularly provide feedback to the DHs to improve and strengthen case management and referral mechanisms.
- 4. To support the DHs in tracking maternal and new born outcomes (case fatality rates) of the referred mother and infant within 42 and 28 days of delivery respectively.
- 5. To provide specific feedback to the Government of Uttar Pradesh on process and performance indicators and liaison for infrastructure strengthening and state government buy-in as and where required.

It is envisaged that the above objectives will contribute in reducing the case fatality rates by identifying and managing maternal and new-born complications.

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2.3 Geographical Coverage

The overall geographical coverage of the project will be 76 DHs of 75 Districts of the state. All FRUs will be covered in each of the district including the District Hospital/District Women's Hospital, which have basic human resource, space and equipment for running an NBSU or with signal functions 4,5,6,7,8 &

Districts assigned to UPUMS, for implementation of the RRTC program are mentioned in annexure-A. All functional FRUs (DH as per functionality) will be covered from each of these districts for mentoring and capacity building of key medical staff (Obstetrician, Pediatricians, Anesthetist, General Surgeons and Medical Officers.)

(List of the 75 districts covered by respective medical colleges is placed at Annexure A).

The duration of the project will be two years starting from 1st July 2021 to 30th June 2023.

ARTICLE 4 - SCOPE OF WORK

4.1. Scope of the project

The scope of the project work with respect to Uttar Pradesh University of Medical Sciences, Saifai, Etawah will include:

- 1. IHAT and Uttar Pradesh University of Medical Sciences, Saifai, Etawah will work collectively to establish a system of capacity building and mentoring of identified MBBS doctors and specialists from selected District Hospitals (DH) as per annexure- A.
- 2. Uttar Pradesh University of Medical Sciences, Saifai, Etawah will contribute to the development of training modules and training package in collaboration with IHAT and
- 3. Conducting regional TOT and refresher trainings of service providers i.e. Obstetrician & Gynecologist, Pediatrician and Anesthetist from the selected DH in attached districts.
- 4. Regular mentoring visits to DHs by UPUMS RRTC faculty. Team of 5 faculty members (2 Obstetrician & Gynaecologist, 1 Pediatrician, 1 Anesthetist and 1 Community Medicine Specialist) will visit each DH in the designated districts as per annexure-A, three times during the project period . Emphasis will be given on mentoring the providers in Labour room, Operation Theatres (OT) (C-section), New Born Care Area in Labour room and OT, BT services, Post Natal and Post-Partum Care and SNCU. The clinical mentoring will focus on capacity building of medical doctors and mentoring activities will be supported by CMS

4.2. Role and responsibility of Uttar Pradesh University of Medical Sciences, Saifai, Etawah

The broad activities under its ambit will include:

1. Contribute to the development/revision of training modules for trainers: The resource package will upskill the competencies for CEmONC services. These modules will be reviewed

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- and updated as per GOI CEmONC Guidelines jointly by IHAT and KGMU along with Uttar Pradesh University of Medical Sciences, Saifai, Etawah.
- 2. Mentoring visits: Uttar Pradesh University of Medical Sciences, Saifai, Etawah faculty will visit each facility three times during the project that have been identified in the attached districts as per annexure-A. During each six monthly visit, a team of five specialists namely 2 Obstetrician, 1 Pediatrician, 1 Anesthetist and 1 Community Medicine specialist will visit and provide onsite mentoring on maternal and neonatal complication and management These visit reports will be shared back with IHAT designates for further follow-up.
- 3. Organize Regional TOT and refresher trainings for staff from the attached DH in identified districts: Uttar Pradesh University of Medical Sciences, Saifai, Etawah will organize training for Medical officers and specialist from the attached DHs for better management of maternal and new born complications for patients.
- 4. Train and create a pool of District trainers among specialists in District hospital for clinical mentoring of CHC-FRU doctors and nurses for quality CEMONC services
- 5. Uttar Pradesh University of Medical Sciences, Saifai, Etawah will complete pending training session of phase II, if any
- Supportive Supervisory Visit: 2 members team of UPUMS, Saifai, Etawah will visit RRTC LLRM Medical College, Meerut three times for supportive supervision during
 - 1. Regional TOT
 - 2. Mentoring Visit
 - 3. CME

4.3. Role of IHAT

- 1. Technical skills: IHAT will assemble a talented and committed project management team with strengths in program development and implementation, training, program management and evaluation.
- 2. Set up of Skills labs with mannequins in the 8 newly identified RRTCs and additional skill stations in the existing RRTC.
- 3. Mapping and facility surveys: IHAT will conduct a rapid facility mapping to identify the DWH/DCH that will be trained and mentored to provide maternal and neonatal health services.
- 4. Monitoring and Evaluation: The project management team will be responsible for conducting M& E activities related to this area.
- Organize routine meetings with the RRTC team in UPUMS to understand progress of implementation and mutually trouble shoot emerging issues.
- Share with UPUMS RRTC team on emerging evidence on MNCH from program monitoring and other concurrent monitoring processes.
- 7. Provide financial support for manpower, office, modules development, meetings, site visits etc. to fulfil the mandate of nodal center at UPUMS and the 15 RRTCs.

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ARTICLE 5 - PAYMENT TERMS AND CONDITIONS

UPUMS will be paid a sum of Rs. 32,35,520.00 (Rupees Thirty-Two Lacs Thirty-Five Thousand Five Hundred and Twenty Only) for the services as detailed in Annexure B to this contract.

a) Payments will be done in 04 instalments as per the payment schedule in Annexure C.

b) The contract/contract price is inclusive of Goods and Service Tax, which shall be paid along with the instalments at prevailing rate.

c) While releasing payment to UPUMS, applicable TDS will be deducted by IHAT, wherever

applicable.

d) Any payments/Settlement will be subject to submission of Request / Invoices and related Reports for delivery of services which needs to be duly approved by The Project Lead, Director - Health Facility Strengthening-IHAT.

e) 1st instalment will be released on signing of the contract.

f) 2nd, 3rd & 4th instalments are subject to submission and settlement of Invoices against the previous instalments and successful completion of related deliverables duly approved by The Project Lead-IHAT.

ARTICLE 6 - EFFECTIVE DATE, DURATION & OTHER CONDITIONS

- a) This contract shall be binding upon both the parties (IHAT and UPUMS) from the effective date July 1st, 2021 hereof and shall come into force immediately upon the signature of the form of Agreement.
- b) Should circumstances arise which call for modification of the Agreement these may be made by mutual consent given in writing.
- c) The contract may be terminated forthwith by either party by giving written notice to the other if the other party is in material breach of its obligations under this agreement and/or in case of such breaches capable of being remedied, fails to remedy that breach within one month of receiving notice of such breach.
- d) Upon the termination of contract, the second party shall cease to undertake the delivery of services as per the contracting and shall return all the documents obtained by it from the first
- e) The second party shall not have the right to assign or transfer the benefit or obligation of the Agreement or any part thereof.

ARTICLE 7 - CONFIDENTIALITY

- a) All parties hereto agree not to disclose to any other party to any of its or its affiliate's employees, except as may be necessary only after obtaining written permission for the performance of this contract, any confidential, private or proprietary information supplied under this contract by the other party.
- b) All data collected as part of the project will be the property of IHAT; access and use of data will be guided by IHAT policies.
- Any confidential, private proprietary or classified information which has to be made available by the receiving party to other party for the execution of this contract shall be

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submitted to such other Party with the same restrictions as included in this Article and shall be intimated to the disclosing party in writing.

- d) Receiving party will disclose the confidential information in pursuant to the order or requirement of a court, administrative UPUMS, or other governmental body, provided, however, that the receiving Party will provide prompt written notice thereof to the disclosing Party prior to any disclosure to enable the disclosing Party to seek a protective order or otherwise prevent or restrict such disclosure.
- e) This Article shall survive even after termination or completion of this contract.

ARTICLE 8 - DISPUTE / ARBITRATION / JURISDICTION

- a) Any dispute or difference between the parties arising out of this agreement shall in the first place will be settled by mutual negotiations between the heads of the two organizations or their nominees and their decision shall be final and binding on both the organizations.
- b) If the dispute or difference is not resolved as per the above clause, it shall be referred to the arbitrator appointed as per the Arbitration and Reconciliation Act, 1996 and the rules there under. Any statutory modification thereof for the time being in force shall be deemed to apply to the arbitration proceedings under this clause.
- c) The arbitrator may from time to time with the consent of the parties extend the time for making and publishing the award. The award of the arbitrator shall be final and binding on both the parties. The venue of the arbitration shall be.

ARTICLE 9 - PROJECT PLAN AND DELIVERY SCHEDULE

The project plan and schedule of deliverables are as placed at Annexure D.

ARTICLE 10 - FORCE MAJEURE

Neither party shall be liable for damages or have the right to terminate this contract for any delay or default in performing hereunder if such delay or default is caused by conditions beyond its control including, but not limited to Acts of God or Government restrictions. The performance of the contract shall be deemed suspended during such period and the time for completion shall be extended for a period corresponding to the effects of such delay.

ARTICLE 11 - ADHERENCE TO IHAT GENDER POLICY

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Any issues related to suppression of female workers should be brought to the notice of Committee against Sexual Harassment (CASH) of IHAT. UPUMS will have to follow the decisions or directions of the committee on the same.

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ARTICLE 12 - SIGNATURES & WITNESSING BY PARTIES

In witness whereof the parties hereto have duly executed this agreement as of the date first written above.

For and on Behalf of IHAT`

For and on Behalf of UPUMS

Authorized Signatory
Director Finance IHAT

 Authorized Signatory Professor & Dean UPUMS

Name: Prof. Dr. Alok Kumar Date:....

Read and Agree to the Terms of the Agreement .

Project Lead IHAT

Name: Dr. Bidyut K Sarkar

Nodal officer: UPUMS

Name: Di Sandro er or

1)

1. Witness

2. Witness





ANNEXURE - A

List of Districts proposed to be covered under RRTC (Medical College wise)

Landscape of Phase III RRTC network of medical colleges

SL.No.	Medical Colleges	District	District Hospitals
		Ghaziabad	District Women Hospital
		Gautam Buddha Nagar	District Combind Hospital
	Government Institute of Medical	Bulandshahar	KMC District Women Hospital
1	Sciences, Noida	Bagpat	District Combined Hospital
		Hapur	District Hospital
		Sambhal	District Combined Hospital
	*	Mathura , .	District Women Hospital .
	Sarojini Naidu Medical College,	Agra	District Women Hospital
2	Agra	Etah	District Women Hospital
		Firozabad	RNM District Combined Hospital
		Bareilly	District Women Hospital
		Pilibhit	District Women Hospital
3	Shri Ram Murti Smarak Institute Of	Rampur	District Women Hospital
	Medical Sciences, Bareilly	Shahjahanpur	District Women Hospital
		Moradabad	District Women Hospital
		Badaun	District Women Hospital
		• Kasganj	District Women Hospital
4	Jawaharlal Nehru Medical College, AMU, Aligarh	Aligarh	Mohan Lal Gautam District Women Hospital
		Hathras	District Women Hospital
		Meerut	District Women Hospital
5	Lala Lajpat Rai Memorial Medical	Muzaffarnagar	District Women Hospital
3	College,Meerut	Amroha	District Hospital











		Bijnor	Pandit Deendayal Upadyaya Distric Combined Hospital
		Saharanpur	District Women Hospital
		Shamli	District Hospital
		Orai	District Women Hospital
		Jhansi	District Women Hospital
6	Maharani Laxmi Bai Medical College, Jhansi	Lalitpur	District Women Hospital
	College, Mansi	Hamirpur	. District Women Hospital
		Mahoba	District Women Hospital
	N. S.	Varanasi	District Women Hospital
		Mirzapur	District Women Hospital
7	Institute of Medical Sciences BHU, Varanasi	Sonbhadra	District Combined Hospital Robertsganj
	Valunds	Chandauli	District Women Hospital Mughalsarai
		Ghazipur	District Women Hospital
		Bhadohi	Sub District Hospital Maharaja Balavant Singh
	Government Medical College &	Jaunpur	District Women Hospital
8	Super Facility Hospital, Azamgarh	Azamga#h .	Sub District Women Hospital
		Ballia	District Women Hospital
		Maunathbhanjan	District Women Hospital
		Farrukhabad	District Women Hospital
	Uttar Pradesh University of	Kannauj	District Women Hospital
9	Medical Sciences, Saifai, Etawah	Etawah	District Women Hospital
		Mainpuri	District Women Hospital
	•	Barabanki	District Women Hospital
10	Dr. Ram Manohar Lohia Institute	Unnao	District Women Hospital
10	of Medical Sciences, Lucknow	Lucknow	District Hospital Jhalkari Bai Mahi Hospital
11	King George's Medical University,	Lucknow	District Hospital Awanti Bai Mahil Hospital
	Lucknow	Lakhimpur Kheri	District Women Hospital

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.		Shrawasti	District Combined Hospital
		Balrampur	District Women Hospital
		Sitapur	District Women Hospital
		Deoria	District Women Hospital
		Maharajganj	District Combined Hospital
		SK Nagar	District Combined Hospital
12	Baba Raghav Das Medical College, Gorakhpur	Siddharth Nagar	District Combined Hospital
		Gorakhpur	District Women Hospital
		Kushinagar	District Combined Hospital
		Ambedkar Nagar	District Hospital Mahatma Jyotiba Phule
		Ayodhya	District Women Hospital
13	Mahamaya Rajkiya Allopathic Medical College, Ambedkarnagar	Basti	District Women Hospital
	Medical College, American	Amethi	District Hospital
		Sultanpur	District Women Hospital
		Pratapgarh	District Women Hospital
	Land College	Prayagraj	District Women Hospital
14	Moti Lal Nehru Medical College, Allahabad	Kaushambi ,	District Combined Hospital
		Chitrakoot	District Combined Hospital
		Bahraich	District Women Hospital
	Andical Collogo &	Hardoi	District Women Hospital
15	ERA's Lucknow Medical College & Hospital	Gonda	District Women Hospital
		Rae Bareli	District Women Hospital
		Kanpur Dehat	District Women Hospital
		Kanpur Nagar	District Women Hospital
16	Ganesh Shankar Vidyarthi	Fatehpur	District Women Hospital
10	Memorial Medical College, Kanpur	Banda	District Women Hospital
		Auraiya	District Combined Hospital

New







Continuation Sheet VPVMS

ANNEXURE - B: Cost

Particulars	Timeline	Unit	Cost per Unit	Total Cost
Online Refresher Training (carried forward from phase II)	·Jul-21 to Sep-21	1	3,000	3,000
Regional TOT	Jan-22 to Mar-22	4 Batches	1,73,000	6,92,000
Mentoring Visit Round 1	Apr-22 to Sep-22	4	50,600	2,02,400
Mentoring Visit Round 2	Oct-22 to Mar-23	4	50,600	2,02,400
Mentoring Visit Round 3	Apr-23 to Jun-23	4	50,600	2,02,400
CME after Round 1 Mentoring	Oct-22 to Mar-23	1	89,000	89,000
CME after Round 2 Mentoring	Apr-23 to Jun-23	1 .	89,000	89,000
CME after Round 3 Mentoring	Apr-23 to Jun-23	1	89,000	89,000
Supportive Supervision for New Medical College Activity (1 Regional TOT, 1 CME, 1 Mentoring Visit)	Jan-22 to Mar-23	3	20,000	60,000
Support by UPTSU for Training and Mentoring	Jul-21 to Jun-23	24 Months	66,930	16,06,320
Grand Total				32,35,520

ANNEXURE - C: Project payment schedule

S. No.	Particulars	Amount
1	1st Instalment on Signing of the Contract	4,00,000
2	2nd Instalment on 15-Jan-22	12,00,000
3	3rd Instalment on 15-Jul-22	6,00,000
4	4th Instalment on 15-Jan-23	10,35,520
	Total	32,35,520

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ANNEXURE - D

Project Implementation Plan

Uttar Pradesh University of Medical Sciences, Saifai, Etawah

Activities	Time line	Expected outputs/ outcomes
Govt. order wrt RRTC intervention	Sep/Oct 2021	G.O.Issued
Identification of nodal faculty at RRTC	July-Sep 2021	Nodal persons identified
Refresher training sessions of phase II	July-Sep2021	Training sessions completed
Sign Agreement with Uttar Pradesh University of Medical Sciences, Saifai, Etawah	Oct-Dec 2021	Agreement signed
Orientation of HODs of Medical Colleges about RRTC Program	Oct-Dec 2021	Workshop completed
Updation of Training package jointly by identified nodal faculty of all 16 Medical Colleges	Oct-Dec 2021	Training package updated
Training of Trainers of all identified faculty members as Master Trainers.	Oct 2021-Mar 2022	ToT completed
Updation of skill lab	Jan-Mar 2022	Skill lab updated
Training of Specialists / Doctors of DH from districts allotted to Uttar Pradesh University of Medical Sciences, Saifai, Etawah as per Annexure-A	Jan- Mar 2022	Training of Specialists and MBBS doctors completed.
Six Monthly Mentoring visits by Master Trainers of Uttar Pradesh University of Medical Sciences, Saifai, Etawah to review progress of District team	April-Sep 2022 Round-1, Oct- March 2023 Round- 2, April-Sep 2023 Round- 3	Mentoring reports compiled and analysed for Technical/ Facility Scores
Supportive Supervisory Visit by faculty of Uttar Pradesh University of Medical Sciences, Saifai, Etawah U.P to LLRMC Meerut. during regional TOT	Jan- Mar 2022	Report and feedback of supportive supervision visit
Supportive Supervisory Visit by faculty of Uttar Pradesh University of Medical Sciences, Saifai, Etawah U.P to LLRMC Meerut. during Onsite Mentoring Visit	April -Sep 2022	Report and feedback of supportive supervision visit
Supportive Supervisory Visit by faculty of Uttar Pradesh University of Medical Sciences, Saifai, Etawah U.P to LLRMC Meerut. during CME	Oct-Dec 2022	Report and feedback of supportive supervision visit
Feedback and Response meeting between faculty and government officers of identified attached facilities /district (three to six monthly)	Oct 2022- Dec 2023 (total 3)	Feedback sharing for gap closer / facility improvement
CME (3, after every mentoring round)	Oct 2022- Dec 2023	Training completed
Monitoring and evaluation framework	Continous	M & E framework used for decision making

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Yes/

Phase III Budget RKTC UPUMS, Saitai [Districts Etawah, Mainpuri-Non HPD, Farrukhabad and Kannauj- HPD] Total District Hostpitals -4
Budget from 1st July 2021 to 30th June 2023

	# of	# of days	(Per six	# of	Person	Cost per day	Unit cost	Period: 24 Months
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