

No. No.T 11025/8/2011-NACO
Government of India
Ministry of Health & Family Welfare
(National AIDS Control Organization)

6th Floor, Chandralok Building
36, Janpath, New Delhi- 110001
Dated: 13-4-2011

OFFICE ORDER.

National AIDS Control Programme Phase III is ending in 2012 and preparatory process for NACPIV is on the anvil by forming Working Groups on key areas..

The Working Groups would facilitate the process by discussing all issues through meetings and submit recommendations within the 6-8 week time frame
The following working group is formed for Blood safety

- Dr. Mohammed Shaukat ADG– Convener & Facilitator
- Dr. Sandhya Kabra,ADG(BS)
- Vinita Srivastava PO(VBD)
- Rep. from GTZ
- Dr. Neelam Marwah, HOD, PGI, Chandigarh
- Dr. Rajendra Chaudhary, SGPGI, Lucknow
- Dr. R.N.Makroo, Apollo Hospital
- Dr. S.B. Rajadakshya, Tata Hospital
- Dr. Lata Jaganathan, Surat Raktdan Kendra
- Dr. Manisha Srivastava, Bhopal Medical College
- Dr. Saran Barucha, NACO
- Dr. Veena Doda, RML Hospital
- Dr. Apoorba Ghosh, WBDA
- Rep. from Rotary Blood Bank

Support Staff :-Ms. Binita Thakkur


Detailed TOR and guidelines are attached

The composition of Working group would be as under:-

- Convener/Facilitator : A Senior Officer from NACO will be the facilitator and be the convener of each working group.
- Chair Person : Each working group will have a chair person. The chair person will moderate the discussion and develop a consensus on subject based on the terms of reference for each working groups
- Rapporteur : Chair person will identify a rapporteur for the group whose responsibility is to prepare the draft report of meetings.
- Number of Meetings : It is envisaged that each group will have at least 2 meetings.
- Final Report : The final report must be submitted by chairperson to NACO.
- Format for Report : The final report should address all the issues addressed in the TORs and must have specific actionable recommendation. The report should be concise and not exceed 20 pages
- Time Frame : The time frame for activity is 6-8 weeks

The conveners should co-ordinate with the members and start the activities immediately

This issues with the concurrence of Secretary &DG NACO


((Benoy Choudhury)
Under Secretary to the Govt. of India

To

- 1) Conveners of Working group
- 2) Divisional Officers, NACO
- 3) Officers NACO
- 4) Sr. PS to Secretary&DG
- 5) PS to AS NACO

Terms of Reference

- Review the current status of Blood Banks and strengths and weaknesses of the program
- Suggest ways to improve accessibility and integration services, with emphasis on further integration with NRHM programme below district level.
- Review the policy framework and guidelines existing for blood banking and suggest improvement
- Study the feasibility of using epidemiological surveillance data generated for analysis.
- Study the scope of expansion of blood banking services and its integration into the existing general health systems, including the primary health care system and the financial implications thereof.
- Review the National Blood Policy and Blood Safety Programs and suggest areas for improvement, including rational use of blood.
- Assess quality related issues of Blood Safety Programmes and suggest strategies for improving safe practices of infection control and appropriate disposal of syringes and needles.
- Suggest capacity building measures in the delivery of various services
- HR issues
- Suggest a strategic approach for service delivery in all its facets.
- Suggest innovations in implementation
- Explore the possibilities of integration activities with NRHM

Deliverables: Draft Report with Annexure

Time frame: 6-8 Weeks

NACP IV (2012 – 2017) Programme Plan Preparation Working Group Guidelines

The National Aids Control Programme, Government of India is initiating the programme plan preparation process the NACP IV phase of the programme. Having initiated the process of reversal through focused effort on prevention linked to care support and treatment, the next phase of the NACP will focus on accelerating this reversal process and ensure integration of the next programme response.

NACP IV seeks to consolidate the gains of NACP III and learn from the lessons of the previous phases of programme implementation. It aspires to further strengthen and decentralize the programme management capacities to state and district levels in particular. The focus will remain as prevention oriented plan with adequate coverage of the HIV care in the context of the concentrated epidemic situation in India.

The cross cutting issues which require focus in all WG discussions are

1. Innovation
2. Integration and Convergence
3. Capacity Building
4. GIPA
5. GENDER

Facilitators are encouraged to invite facilitators/members from other groups when issues which relate to other groups are discussed.

Separate meeting and discussion with Facilitators and core group is planned at the end of 1st and 2nd round of meetings.

Working Group Activity Guidelines:

Convener	A Senior Officer from NACO will be the facilitator and convener of each WG.
Chairperson	Each working group will have a chairperson. The chairperson will moderate the discussion and develop a consensus on subject based on the terms of reference.
Rapporteur	Chairperson will identify a Rapporteur for the group whose responsibility is to prepare the draft report of meetings.
Number of Meetings	It is envisaged that each group will have at least 2-3 meetings.
Final Report	The Chairperson and Facilitator of each working group will submit the final report to NACO.
Format for Report	The final report should address all the issues addressed in the TORs and must have specific actionable recommendation. The report should be concise and not exceed 20 pages.
Time Frame	The time frame for activity is 6-8 weeks.
Invited Members	If necessary, each WG can invite one or two key representatives of other relevant groups to discuss the cross cutting issues
Core Team	One NACP Core Team member may participate in the discussion of each WG