Resolutions of 5th Fortnightly Coordination Meeting of TI, STI, ICTC and CST Components of NACP-IV dated 13.05.2015:

Venue: Conference Room, WBSAP&CS, Swasthya Bhawan, Kolkata-91

Date: 13.05.2015

Time: 3:30 p.m.

Attended by:

- Shri Biplab Das, Joint Secretary in Dept.of H&FW, Govt.of West Bengal and Addl. Project Director, WBSAP&CS
- Dr. D. N. Goswami, Joint Director (TI) & Chief Coordinator, STI, TI and CST Divisions, WBSAP&CS
- Dr. N. K. Halder, Joint Director (BSD), WBSAP&CS & DNO
- Dr. Pankaj Kr. Mandal, Joint Director (CST), WBSAP&CS
- Dr.Kumares Halder, Deputy Director (STI), WBSAP&CS
- Dr.Anindya Sen, Regional Coordinator (CST), NACO
- Ms.Papia Dastidar, Assistant Director (Nursing), WBSAP&CS
- Mr.Soumya Mondal, Assistant Director (M & E & ICTC), WBSAP&CS
- Ms. Tina Mitra, Assistant Director (TI) and Nodal Asst.Director for TI,STI & CST, WBSAP&CS
- Ms. Ishita Das, Store-In-Charge, WBSAP&CS

Memo No.: ACS/IN-04-2015/ 2.80 Dated: 26-05-2015

The fifth fortnightly coordination meeting of TI, STI, CST and ICTC was held on 12.05.2015 at 3:30 p.m. at the WBSAP&CS' Conference Room, Swasthya Bhawan, Kolkata-91. The same was convened by Dr.D.N.Goswami, Joint Director (TI) and the Chief Coordinator of TI, STI & CST Divisions, WBSAP&CS. The Joint Secretary in Dept.of H&FW, Govt.of West Bengal and Addl.Project Director, WBSAP&CS chaired the said meeting.

The meeting begun with sharing of the resolutions of the 4th fortnightly meeting by the Chief Coordinator that was held on 23.04.15 and acceptance of the same by the house. After detailed discussion on different agenda items, the following resolutions were adopted.

• As informed by JD (BSD) that condemnation of all expired drugs/condoms/kits/blood bags etc.will have to be done by concerned division.

- As informed by both Chief Coordinator and DD (STI), WBSAP&CS, supervision and monitoring committee formation has already been done at Burdwan MC, Burdwan, and minutes of the meeting shared with WBSAP&CS. However, no information has been shared by the rest of the Medical Colleges regarding the same. A reminder to be sent to all (excluding BMC, Burdwan) requesting to share information on status of formation of supervision and monitoring committee and submission of filled up monthly reporting format as prescribed and already shared by WBSAP&CS for further sharing in the next review meeting by Director of Medical Education and Ex Officio Secretary, Govt.of West Bengal.
- As decided earlier, non-DAPCU districts will be tagged with the existing DAPCU districts to ensure better monitoring as well as implementation of the programme. A file in this line to be initiated by DNO, West Bengal.
- DD (STI), WBSAP&CS shared that till date cost estimate for establishing 26 DSRCs have been received from 23 hospital authorities out of which, 10 duly done by PWD/NHM Engineer(s) for necessary civil and/or electrical works, 11 by concerned hospital only, 2 no requirement of any minor refurbishment work. Cost estimate from Gangarampur SDH, Dakshin Dinajpur and Uluberia SDH, Howrah and revised estimate from JNM Kalyani MC&H, Nadia are yet to receive and are being followed up by the concerned division of WBSAP&CS.
- The process of establishment of 25 LACs at DHs/SDHs needs to be expedited. As informed by JD (CST), WBSAP&CS, so far, cost estimate for establishing LAC was received from 6 hospital authorities only viz., Egra SDH, Purba Midnapore, Kurseong SDH, Darjeeling, Tufanganj SDH and Mekhliganj SDH of Cochbehar, Khatra SDH, Bankura and Durgapur SDH, Burdwan. Out of the same, as desired, cost estimate duly done by PWD for necessary civil and/or electrical works have been received from Egra SDH, Tufanganj SDH and Kurseong SDH only.
- As informed by JD (CST), WBSAP&CS, out of the targeted 4 LACs to be established in last FY, i.e., 2014-'15, the requisite fund already sanctioned and released by the Society to JNM Kalyani MC&H, Nadia had been refunded as unspent balance by the concerned authority by the end of last FY. Hence, fresh grant needs to be released in favour of the said facility. As the ICTC Counsellor is supposed to act as LAC Counsellor and as currently the ICTC Counsellor's position is lying vacant at JNM Kalyani MC&H, hence, the LAC will get functional on recruitment (decentralized) of ICTC Counsellor.
- As suggested by both JD (CST), WBSAP&CS and Regional Coordinator (CST), NACO, ICTCs collocated with ARTCs at MC&H/DH level will have to take additional

responsibility of collecting of HIV Positive linelists from all other ICTCs under the concerned ARTC drainage area and share the same with ARTC with a copy to CST Division, WBSAP&CS for discussion on the same during the ARTC-CSC coordination meetings and take necessary action. A circular in this line is to be shared by the ICTC Division to all ARTC-colocated ICTCs.

- Details of HIV positive detected at ICTCs to be henceforth shared with CST Division, WBSAP&CS on monthly basis for analysis of linkage loss.
- Linkage loss between DSRC-referred clients to ICTC and those actually reached ICTC remained a serious concern over time. It was found to be 100% in districts viz., Cochbehar, Dakshin Dinajpur, Jalpaiguri as per SIMS report for 2014-'15 (Data enclosed as shared by M&E Division, WBSAP&CS). However, the same was not accepted to be practical by the committee members and the possible reasons cited for such data were knowledge/understanding gap on part of ICTC Counsellors regarding core entry point, reporting formats. AD (M&E & ICTC) needs to follow up with the same and if necessary provide requisite training to ICTC Counsellors on proper documentation/reporting. At the same time, STI Division, WBSAP&CS needs to take up with the poor performing units/districts and ensure 100% DSRC-ICTC linkage by implementing proper referral slip usage, accompanied referral. An order in this line to be issued by STI Division.
- Local level supervision needs to be strengthened for better implementation of the programme. Centrally visits from all Programme Divisions of WBSAP&CS needs to be done. Poor performing districts to be prioritized for joint supervisory visit.
- As suggested by AD (M & E & ICTC), WBSAP&CS, an Application may be developed for ICTC-ART linkage in which ICTC will have "Add" option to keep on updating unique PID of clients as and when got detected HIV seropositive at the said ICTC and also to which ARTC s/he has been referred to. Similarly on the other hand, each ARTC will also be installed with the said Application but in their case with a "Search" window option unlike "Add" as in case of ICTC to get an idea of patients referred from any ICTC to the same ARTC. The said Applications will be installed in the desktops of all ICTCs (Stand-Alone) and ARTCs as supplied by WBSAP&CS. A demonstration of the same is to be given in the next fortnightly meeting by AD (M&E & ICTC), WBSAP&CS.
- Training of Data Managers of govt.OST Centres to be provided by AD (M & E) in June, 2015.

The next meeting has been scheduled on 29.05.15.

The meeting ended with vote of thanks to the Chair.

Enclo: As stated.

Joint Secretary in Dept. of H&FW & Addl. Project Director, WBSAP&CS

Memo No.: ACS/IN-04-2015/ 280/1(12)

Dated: 26-05-2015

Copy forwarded for necessary information to:

- 1. The Secretary in Dept.of H&FW, Govt.of West Bengal & Project Director, WBSAP&CS
- 2. The Joint Director (TI) & Chief Coordinator, STI, TI and CST Divisions, WBSAP&CS
- 3. The Joint Director (BSD), WBSAP&CS
- 4. The Joint Director (CST), WBSAP&CS
- 5. The Deputy Director (STI), WBSAP&CS
- 6. The Regional Coordinator (CST), NACO
- 7. The Asst.Director (M&E & ICTC), WBSAP&CS
- 8. The Asst. Director (Nursing), WBSSAP&CS
- 9. The Asst. Director (GIPA), WBSAP&CS
- 10. The Assistant Director (TI) and Nodal Asst.Director for TI,STI & CST, WBSAP&CS
- 11. The Store-In-Charge, WBSAP&CS
- 12. Office Copy

Joint Secretary in Dept.of H&FW & Addl. Project Director, WBSAP&CS

Dstrict	STI attendees referred to ICTC	STI referral reached ICTC	Linkages Loss
Maldah		101	#D#1/01
Coochbehar	1284	0 :	#DIV/0!
Dakshin Dinajpur	663	0.	100%
Jalpaiguri	3706	0.	100%
Purulia	2269	16	100%
Kolkata	15693	5720	99%
Uttar Dinajpur	2767		64%
Nadia	1064	1366	51%
Howrah	932	563	47%
Darjeeling	2609	499	46%
Birbhum	1691	1424	45%
Barddhaman	4573	963	43%
Bankura		2744	40%
Hooghly	1622	1023	37%
Purba Medinipur	3946	2503	37%
Murshidabad	2043	1531	25%
South 24 Pgs.	1047	974	7%
Paschim Medinipur	1147	1275	-11%
North 24 Pgs.	1592	1980	-24%
otal	1740	3476	-100%
ULGI	50388	26158	48%

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