

Minutes of 1st Fortnightly Coordination Meeting of TI, STI and CST Components of NACP-IV dated 27.02.2015 :

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

Date : 27.02.2015

Time : 3 p.m.

Attended by :

- Shri Biplab Das, Dy.Secretary in Dept.of H&FW, Govt.of West Bengal and Dy.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
- Dr.Kumares Halder, Deputy Director (STI), WBSAP&CS
- Dr.Anindya Sen, Regional Coordinator (CST), NACO
- Ms.Sumita Samanta, Dy.Director (SP&M), WBSAP&CS
- Ms.Papia Dastidar, Asst.Director (Nursing), WBSSAP&CS
- Mr.Jagadish Jana, Asst.Director (GIPA), WBSAP&CS
- Ms.Tina Mitra, Assistant Director (TI) and Nodal Asst.Director for TI,STI & CST, WBSAP&CS
- Shri Kishore Kr.Shaw, President, BNP+
- Shri Tarit Chakraborty, Secretary, BNP+
- Ms.Sagarika Ghosh, Div.Assistant (CST), WBSAP&CS
- Mr.Amit Maity, Counsellor and Div.Assistant (STI), WBSAP&CS
- Mr.Dhrubotara Naskar, Counsellor and Div.Assistant (CST), WBSAP&CS

Memo No. : ACS/IN-04-2015/ 1771

Dated : 13-03-2015

Following the order issued by the Secretary in the Dept.of H&FW, Govt.of West Bengal and Project Director, WBSAP&CS vide OM No.ACS/IE-08-2012/1565 dated 13.02.2015, the first fortnightly coordination meeting of TI, STI, CST was held on 27.02.2015 at 3 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 Dy.Secretary in Dept.of H&FW, Govt.of West Bengal and Dy.Project Director, WBSAP&CS chaired the said meeting.

The meeting started with sharing by the Dy.Project Director, WBSAP&CS of the already rolled out sms based reporting system of newly detected ANC mothers to state to ensure proper tracking. He also shared proposed plans for better service deliveries to PLHIVs e.g., provision of Rs.600/- only as incentive for each PLHIV once in every six months to attend ARTCs as part of the state govt.initiative, deployment of Staff Nurse from general pool at different ARTCs and DSRCs, upscaling of ICTCs in Facility-Integrated mode upto PHC level, upscaling of LAC and DSRCs at all SDHs, providing Tablets to Kolkata ICTC Counsellors for documentation/reporting as well as IEC display as piloting etc. The Chief Coordinator emphasized upon the necessity of bridging the gap of HIV positives detected and their subsequent linkage to ARTCs especially for the Bridge population e.g., Truckers and Migrant Labourers - who had always remained a hardship to get themselves linked to the existing Care Support and Treatment component. Dr.Goswami suggested that Smartcard for such type of HRGs might be helpful for bridging this linkage gap. He also suggested that the District Level Networks for PLHIVs (DLNs) might be involved fulledgedly for ensuring local level coordination amongst TI, LWS, DSRC, ICTC, ARTC. DD (STI), WBSAP&CS also mentioned about the necessity of further awareness generation amongst ICTC, G&O OPD, TIs to increase referral of eligible clients to DSRCs and the proactive role of DLNs could play in it. Assistant Director (GIPA), WBSAP&CS came up with a proposal of ensuring atleast RPR/VDRL testing or referral for the same to DSRCs if not for all required tests besides routine six monthly CD4 count testing of all PLHIVs. The same was also supported by the Regional Coordinator (CST), NACO. Shri Kishore Shaw, President, BNP+ requested to ensure proper infrastructural support especially to maintain confidentiality at different service delivery centres. Regional Coordinator (CST), NACO emphasized on regularizing of ART Coordination meetings and participation of all members including DLNs in it. He also solicited DLNs' cooperation to let WBSAP&CS know regarding any patient refusal so that it could be promptly addressed. In this connection, the Dy.Project Director, WBSAP&CS shared the state plan of linking of all PLHIVs registered at ARTCs/LACs vide Toll free sms alert system. In this, the PLHIVs could receive sms alerts from time to time as a reminder for his/her scheduled visit to ARTCs/LACs for six monthly CD4 count and/or collection of monthly ARV drugs. In addition, sms system would also be used for lodging any complain regarding service delivery at any level to the concerned state official/division hierarchywise for prompt addressing of the same. The Chief Coordinator pointed out the trend of less DSRC uptake according to its potentiality that ultimately left the state with much undercoverage of the physical targets. He suggested on linking up of districtwise DSRCs with nearby TIs to address this issue. He emphasized on further strengthening of sensitization of HRGs to access govt.health facilities for treatment. He also recommended a district/centrewise data analysis might be done by AD (M&E), WBSAP&CS to assess the ICTC-CST referral-linkage gap.

Followings were the resolutions taken at the end of the meeting :

- Districtwise data analysis of ICTC and ARTC and also DSRC and ICTC needs to be done to find out the areas where the gap of ICTC and ARTC and DSRC and ICTC is maximum. M&E Division, WBSAP&CS will provide the necessary feedback in this regard on regular basis.
- Art Coordination Meeting at each month needs to be conducted in each ART centre regularly where DLNs, DAPCU, DSRCs, ICTCs and nearest TI representatives will be called to improve the issues of LFU, linkage loss at every tier of service delivery, i.e., from DRSC to ICTC, from TI to ICTC, from ICTC to ARTC, from TI to ARTC etc. The minutes of such meeting and actions taken thereof needs to be sent at each month to the Chief Coordinator, TI, STI, CST, WBSAP&CS within one week of completion of meeting.
- Referral from TI to DSRC also needs prioritization. A circular in this respect will be issued by the Dy.Project Director, WBSAP&CS for linking the TI to nearest DRSC.
- It has been observed that PLHIVs registered on Pre-ART are not being followed up for their CD4 testing on six monthly basis resulting delayed initiation of ART. This issue needs to be addressed during ART Coordination meeting in each month. DLNs are also requested to spread the message among them to improve the follow up on six monthly basis at the Pre-ART registration stage.
- Referral of PLHIVs to DSRC for screening of STIs as well as RPR/VDRL testing needs to be ensured. BNP+ is requested to ensure the same among its members beside six monthly CD4 count at ARTC.
- Process to be initiated for opening up of DSRCs and Link ART Centres upto the Sub-divisional level hospitals from the concerned STI and CST divisions.

The next fortnightly coordination meeting was scheduled on 17.03.15.

The meeting was concluded with vote of thanks to and from the Chair.

Brns
10/3/15

Dy.Secretary in Dept.of H&FW &

Dy.Project Director, WBSAP&CS

Memo No. : ACS/IN-04-2015/1771/1(13)

Dated : 13-03-2015

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 Dy.Director (SP&M), WBSAP&CS
8. The Asst.Director (Nursing), WBSAP&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 President, BNP+
12. The Secretary, BNP+
13. Office Copy

10/3/15

Dy.Secretary in Dept.of H&FW &

Dy.Project Director, WBSAP&CS