

# MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding (MOU) signed on  $30^{th}$  day of June, 2022

Between

DEPARTMENT OF INTERNAL SECURITY

(POLICE II)

MINISTRY OF HOME AFFAIRS

And

Central TB Division,

Ministry of Health and Family Welfare

Government of India

2/ch

### INTRODUCTION

India has the world's highest Tuberculosis (TB) burden with an estimated 28 lakh people contracting the disease and 4.2 lakh people dying from the disease every year. Moreover, there are almost a million missing patients every year in India which are unregistered or undetected, and who need to be brought under the public health system for ensuring quality diagnosis and treatment.

The economic burden of TB in terms of lives, income and workdays is also substantial. TB usually affects most economically productive age group of the society resulting in a substantial loss of working days and pushing the TB patients further into the vortex of poverty. In the absence of welfare support and mounting catastrophic out-of-pocket expenditures therefore result in patients leaving the treatment prematurely. This jeopardizes not only patients' lives but also the health of the community at large. As per the global estimate, reducing TB incidence could generate benefits of \$43 per dollar spent, and therefore it's in the interest of the country to provide quality care to those with or affected by tuberculosis.

TB is not only a medical disease but a social problem. Even though anyone can be affected by TB, the worse hit isthe vulnerablepopulation who battle poverty, malnutrition, poor hygiene, stigma, loss of wages, poor housing and working conditions andoccupational hazards, etc. Such multi-faceted issues are beyond the ambit of health system alone. It calls for a comprehensive solution by meaningful involvement of non-health sectors. Convergent actions by various Government Ministries are therefore imperative for realization of country's goal of Ending TB by 2025.

Central TB Division (CTD), Ministry of Health and Family Welfare and Department of Internal Security are hereinafter referred to together as "the parties".



## CENTRAL TB DIVISION (CTD)

- 1.1 Central TB Division (CTD) under The Ministry of Health & Family Welfare (MoH&FW) is the nodal agency for coordinating response with respect to tuberculosis in India. It implements National Tuberculosis Elimination Programme (NTEP) across the country.
- 1.2 The Ministry of Health & Family Welfare has developed a National Strategic Plan (2017-25) for elimination of TB in the Country by 2025.
- 1.3 Through Inter-Ministerial Coordination, MoH&FW aims to reach key populations served by various ministries such as youth, workers, miners, migrants, tribal population, women and children, uniformed forces etc.

#### Article 2

## 2. DEPARTMENT OF INTERNAL SECURITY

- 2.1 The Ministry of Home Affairs (MHA) discharges multifarious responsibilities, the important among them being internal security, border management, Centre-State relations, administration of Union Territories, management of Central Armed Police Forces, disaster management, etc. It has six departments and 21 divisions.
- 2.2 The Police-II Division deals with the personnel, financial, administrative, parliamentary, audit and court matters relating to various Central Armed Police Forces (CAPFs). It also deals with the deployment of CAPFs, the Air assets of MHA as well as the Medical Wing of the CAPFs.

All war

- 2.3 Central Armed Police Forces (CAPFs) includes;
  - 1. Assam Rifles (AR)
  - 2. Border Security Force (BSF)
  - 3. Central Industrial Security Force (CISF)
  - 4. Central Reserve Police Force (CRPF)
  - 5. Indo-Tibetan Border Police (ITBP)
  - 6. National Security Guards (NSG)
  - 7. SashastraSeema Bal (SSB)
- **2.4** Central Armed Police Forces (CAPFs) is being deployed for the purpose of ensuring internal security.

#### 3. OBJECTIVE

3.1 To forge convergence at policy, programme and implementation levels across the various office/s, Central Armed Police Forces (CAPFs), programme and schemes under the purview of Department of Internal Security for a multisectoral and accelerated response towards TB-Free India.

#### Article 4

## 4. SCOPE OF COLLABORATION

- 4.1 The thematic areas for collaboration are listed below
  - a) Awareness generation to boost TB-Free India campaign.
  - b) TB screening and linkages for diagnosis and treatment of TB for vulnerable population, Armed Forces engaged in variousCentral Armed Police Forces (CAPFs) under the purview of Department of Internal Security, MHA and associate offices & establishments.

4

- c) Inclusion of TB related services in all health infrastructural of CAPFs include dispensaries, Unit Hospitals, Composite Hospitals, Referral Hospital and other health units. Linkages of health facilities with NIKSHAY, NTEP.
- d) Inclusion of TB related activities majorly in CAPFs (AR, BSF, CISF, SSB, CRPF, ITBP, NSG)
- e) Inclusion of an agenda on TB in various communities' related activities and welfare activities for reaching out vulnerable population and link them with NTEP
- f) Promote TB Free Workplace and adoption of Workplace Policy.
- **4.2** The discretion lies with the Nodal Officers from the parties in terms of amendment to or expansion of the scope of collaboration.
- **4.3** Activities further to be extended for promotion of TB Mukt Bharat Campaign, adoption of clusters/ villages/ block/ town towards TB elimination especially in boarder areas.

#### 5. ROLE OF CENTRAL TB DIVISION

- 5.1 Provide technical assistance Police Division II, Ministry of Home Affairs, Central Armed Police Forces (CAPFs), Associate Office/s, establishmentfor development of annual work plan for TB related activities.
- **5.2** Provide support for implementation of activities under the scope of collaboration.
- 5.3 Provide technical support for capacity building of nodal officer/ concerned officials, divisions, CAPFsunder the purview of D/o Internal Security.

John .

- 5.4 Share relevant IEC material /training modules/ NTEP Guidelineswith D/o Internal Security, associate offices.
- 5.5 All services and incentives as per NTEP and guidelines are applicable when service are availed by any patient who are engaged by various establishments, units of Department of Internal Security, CAPFs and Subordinate Offices.
- NTEP will provide drugs, diagnosis, patient support and monitoring support to all patients referred by department, autonomous institutions, offices, establishments of D/o Internal Security.

# 6. ROLE OF POLICE DIVISION II, DEPARTMENTOF INTERNAL SECURITY

#### 6.1 Directives

- Issuance of advisory/ directive to concerned divisions, institutions, various units of Central Armed Police Forces (CAPFs), subordinate offices under purview of D/o Internal Security for prioritizing TB awareness, prevention and control activities.
- Issuance of directive for deputing a nodal officer/s for TB intervention in all offices/ subordinate offices of CAPFsfor 'TB Free Workplace'.

# 6.2 Information Education and Communication (IEC)

- Integrate messages related to TB awareness in various communication channels wherever possible.
- Inclusion of information on TB prevention & services in the printed materials for dissemination wherever possible.
- Promotion of TB awareness & prevention messages, Active Case Finding (ACF) and management of TB among armed forces and vulnerable communities.
- Promotion of IEC activities towards TB Mukt Bharat through inclusion through many welfare activities conducted by armed forces of CAPFs.

6

# 6.3 Capacity Building

- Capacity building of officials who are identified as Nodal officer, master trainers & peer educators to strengthen activities related to TB awareness, prevention, diagnosis, treatment, treatment adherence etc.
- Training of medical and paramedical on various topics related to TB,
   Treatment and treatment adherence as per national guidelines.
- Capacity building of official/s and other key stakeholders for inclusion of TB related activities as convergence wherever possible and linkages with NTEP.

## 6.4 Integration of Service

 Integration of TB related services in the existing health infrastructure (hospitals/ dispensaries)under purview of D/o Internal Security.

## 6.5 Linkages with NTEP

 Promotion of Active Case Finding (ACF) through TB screening and diagnosis and linkages to NTEP in collaboration with State TB Cell/ District Tuberculosis Centre/ Tuberculosis Unit (TU).

## 6.6 Sharing of Information

- Sharing the progress on activities carried out in collaboration with CTD and State TB Cell (STC) in States/UTs.
- Reflection of activities carried out on Tuberculosis by Department of Internal Security/ CAPFs in Newsletter/ Annual report and Department's website.

## 7. EXECUTION OF MEMORANDUM OF UNDERSTANDING

- 7.1 Both the parties will nominate one Nodal Officer each who will act as a focal point for their respective Ministry.
- 7.2 Joint Working Group (JWG) will set up for drawing up an action plan and its implementation. The Nodal Officers will be responsible for –

7

- a) Finalization of the scope of collaboration between the parties and any subsequent modification to it
- b) Development of implementation plan /strategies and indicators
- c) Facilitation for the effective execution of the implementation plan
- d) Regular monitoring of the indicators and course correction
- e) Periodic reporting of outputs and outcomes
- f) Any other relevant activity agreed upon by both the parties
- **7.3** The modalities for operationalization of the MoU would be decided in accordance with the recommendation of the Nodal Officers.
- **7.4** Nodal Officers would meet on the quarterly basis. The parties can prescribe any modification or extension to the said frequency or period.
- **7.5** The MoU would be effective from the date 30<sup>th</sup>June, 2022 and any modification to the MoU is to be carried out by written agreement of both the parties.

The parties herein have appended their respective signatures on he day and the year

SIGNED FOR ANDON BEHALF OF

CENTRALTB DIVISION, MINISTRY OF HEALTH
& FAMILY WELFARE

Dr RAJENDRA P JOSHI
DEPUTY DIRECTOR GENERAL (TB)
CENTRAL TB DIVISION
MINISTRY OF HEALTH & FAMILY WELFARE
GOVERNMENT OF INDIA
DATE: 30<sup>th</sup>JUNE, 2022

SIGNED FOR ANDON BEHALF OF

POLICE II, DEPARTMENT OF INTERNAL

**SECURITY** 

DR VINAY KUMAR

ADDITIONAL DIRECTOR GENERAL

(MEDICAL),

CAPFs, NSG & AR

**DEPARTMENT OF INTERNAL SECURITY** 

MINISTRY OF HOME AFFAIRS,

**GOVERNMENT OF INDIA** 

**DATE: 30<sup>th</sup>JUNE, 2022** 

### Acronyms

## Acronyms

AR Assam Rifles

ACF Active Case Finding

BSF Border Security Force

CAPFs Central Armed Police Forces

CISF Central Industrial Security Force

CRPF Central Reserve Police Force

CTD Central Tuberculosis Division

DTC District Tuberculosis Centre

DOTS Directly observed treatment, short-course

DR-TB Drug Resistant Tuberculosis

IEC Information Education and Communication

ITBP Indo-Tibetan Border Police

JWG Joint Working Group

MDR-TB Multi Drug Resistant Tuberculosis

MoH&FW Ministry of Health & Family Welfare

MHA Ministry of Home Affairs

MoU Memorandum of Understanding

NSG National Security Guards

NTEP National Tuberculosis Elimination Programme

SSB SashastraSeema Bal

STC State Tuberculosis Cell

TB Tuberculosis

UTs Union Territories

Solv