MEMORANDUM OF UNDERSTANDING

ON

A COMPREHENSIVE TOBACCO CONTROL PROGRAMME FOR PREVENTION, DETECTION, TREATMENT AND AWARENESS IN GOVT. ASHRAMSHALAS, EKLAVYA MODEL RESIDENTIAL SCHOOLS AND GOVT. HOSTELS OF ATC NAGPUR, MAHARASHTRA

(A School Health Project of Tribal Development Department)

Signed between

Additional Tribal Commissioner, Nagpur

And

Dean, Government Dental College & Hospital, Nagpur

And

Sr. Project Manager, Salaam Mumbai Foundation

On

February 27th, 2019

At

Adivasi Vikas Bhavan, Gorepeth, Nagpur, Maharashtra, 440010

MEMORANDUM OF UNDERSTANDING (MoU)

THIS MEMORANDUM OF UNDERSTANDING is made at Nagpur on 27th day of February 2019 between the **Additional Commissioner, Tribal Development Department, Nagpur,** Opposite RTO Office, Gorepeth, Nagpur, Maharashtra - 440010. **(Hereinafter referred to as 'ATC Nagpur')** of the FIRST PART;

AND

Government Dental College and Hospital, Govt. Medical College & Hospital campus, Medical Square, Hanuman Nagar, Nagpur, 440003 established in 1968 and recognised under Dental Council of India **hereinafter referred to as the GDCHN**, of the SECOND PART.

AND

Salaam Mumbai Foundation, a not for profit organisation registered under the Bombay Public Trusts Act, 1950 in July 2010 having registration number E-27122 (Mum) and having registered office situated at Nirmal Building, 1st Floor, Nariman Point, Mumbai – 400021 **hereinafter referred to as SMF**, (which expression unless repugnant to the context shall mean and include successors and assigns) of the THIRD PART.

ATC Nagpur and GDCHN and SMF are hereinafter collectively referred to as the 'Parties' and individually as the 'Party'.

WHEREAS the ATC NAGPUR, intends to launch for Government Ashram Schools, Eklavya Model Residential Schools (EMRS) and Government Hostels a comprehensive tobacco control programme including prevention, diagnosis, treatment, follow-up and awareness of oral pre-cancerous lesions, Life First cessation counselling for tobacco & other tobacco products and supari (areca nut) users, creating tobacco free schools and capacity building of stakeholders.

ATC NAGPUR, hereby collaborates with GDCHN and SMF to implement the 'Comprehensive Tobacco Control Programme for Prevention, Detection, Treatment and Awareness in Government Ashram School, EMRS and Government Hostels in the ATC Nagpur' and by executing an MoU setting out the terms and conditions therein.

NOW, THEREFORE, THE PARTIES hereby agree as follows:

Definitions:

Government: Additional Tribal Commissionerate (ATC) Nagpur, Integrated Tribal Development Project (ITDP) shall be commonly termed as "Government."

Advance: The word 'advance' used in the MoU shall mean the payment which is/ shall be made to the GDCHN and SMF, as per year-wise rates mentioned in the clause 9.3 under this MoU.

LifeFirst: It is a tobacco cessation programme with a specific protocol for schools which is implemented by Salaam Bombay Foundation with technical support from Narotam Sekhsaria Foundation.

Current Tobacco user: person who has used any form of tobacco in the last 30 days.

Oral Precancerous Lesions: a benign, morphologically altered tissue that has a greater than normal risk of malignant transformation.

1. PERIOD OF AGREEEMENT:

The MoU will come into effect from the date of signing and will remain in effect through the period of operation. The period of operation will be initially for two years from the date of actual implementation of the project i.e. 27th February 2019, which may be extended later by mutual consent with the terms and conditions stipulated therein.

2. OBJECTIVES:

The Parties acknowledge that the main objective of this MoU is to implement a comprehensive tobacco control programme including oral screening, counselling and treatment, follow-up of oral pre-cancerous lesions, cessation counselling for tobacco & other tobacco containing products and supari (areca nut) users, creating tobacco free schools and capacity building of stakeholders in Government Ashram Schools, Eklavya Model Residential Schools (EMRS) and Government Hostels of ATC Nagpur.

3. SCOPE:

GDCHN shall conduct oral screening regarding oral pre-cancer and oral cancer for students of Government Ashram Schools, Eklavya Model Residential Schools (EMRS) and Government Hostels of all 8 ITDP (Nagpur, Bhandara, Deori, Chandrapur, Chimur, Gadchiroli, Aheri and Bhamragad) offices of ATC Nagpur region. Students diagnosed with oral pre-cancer shall be counselled and treated either by medicinal or surgical therapy as per requirement. GDCHN shall co-ordinate with SMF for anti-tobacco awareness in 5 ITDP offices i.e. Nagpur, Bhandara, Devri, Chimur, Chandrapur and with SEARCH (under Muktipath Abhiyan) for 3 ITDPs i.e. Gadchiroli, Aheri and Bhamragad.

SMF shall conduct awareness activities about ill effects of tobacco & other tobacco containing products and supari (areca nut), benefits of quitting for all students of Government Ashram Schools, Eklavya Model Residential Schools (EMRS) and Government Hostels of ATC Nagpur region, conduct trainings for teachers on tobacco free schools, Cigarettes and Other Tobacco Products (Prohibition of Advertisement and regulation of Trade & Commerce, Production, Supply and Distribution) Act, 2003 – (COTPA, 2003), cessation counselling and provide counselling to tobacco & other tobacco containing products and supari (areca nut) for current tobacco users referred by GDCHN and implementation of tobacco-free school criteria as per CBSE criteria in 5 ITDP offices under ATC Nagpur region (Nagpur, Bhandara, Deori, Chandrapur and Chimur).

ATC NAGPUR, Government of Maharashtra shall provide necessary infrastructure, financials resource and support to GDCHN and SMF to perform activities in Government Ashram Schools, Eklavya Model Residential Schools (EMRS) and Government Hostels of ATC Nagpur as per the terms of this MoU.

4. AREA OF IMPLEMENTATION:

The area of implementation for "A Comprehensive Tobacco Control Programme for prevention, detection, treatment and awareness in Govt. Ashramshalas, Eklavya Model Residential Schools and Govt. Hostels of ATC Nagpur region, Maharashtra" shall be

1. All 8 ITDP offices i.e. Nagpur, Bhandara, Deori, Chandrapur, Chimur, Gadchiroli, Aheri and Bhamragad for GDCHN

2. 5 ITDP offices i.e. Nagpur, Bhandara, Devri, Chimur and Chandrapur Project Offices for SMF

5. ROLES AND RESPONSIBILITIES, OBLIGATIONS:

5.1 ADDITIONAL COMMISSIONER,TRIBAL DEVELOPMENT,NAGPUR:

1. To provide advance for 1st instalment on the basis of Clause 9.3 for implementation of comprehensive tobacco control programme for prevention, detection, treatment and awareness in Govt. Ashramshalas, Eklavya Model Residential Schools and Govt. Hostels of ATC Nagpur region, Maharashtra.

2. To provide advance for 2nd & 3rd instalment on the basis of Clause 9.3 for implementation of this project after thorough scrutiny of the documents related to previous instalment i.e. the pertinent bills, attendance records, data on students screened and treated as well as documentation of progress of the project etc.

3. To arrange accommodation for project staff of GDCHN and SMF in School premises for conducting all activities during their visits.

4. To direct concerned authorities in Government Ashramshalas, Eklavya Model Residential Schools to provide logistics for awareness and oral screening of students within their respective school premises.

5. Issue suitable administrative instructions to the field officers of the department, so as to facilitate the conduct of this project viz. facilitation and coordination support from APO (Education) and Extension Officers, distribution of medications provided by GDCHN etc.

6. To provide details and coordinate for conducting training with Head Masters, Superintendents, teachers, Wardens etc. & the Training will be provided by GDCHN & SMF.

7. To conduct biannual review meeting at ATC Nagpur level and direct ITDP Officers to conduct bimonthly review meetings to ensure seamless progress of the project.

8. To direct field officials at ITDP level to coordinate with representatives of GDCHN and SMF to form School & Hostel level Health Committees with equal participation of School staff, students, parents and local health care workers.

9. Issue suitable administrative instructions to the field officers of Public Health Department to facilitate infrastructure i.e. mini operation theatre for maintenance of aseptic conditions for LASER surgery of students identified with oral pre-cancer.

10. To direct ITDP officials to make arrangement for transportation of students having developed malignant changes in the diagnosed oral pre-cancerous lesion which can be treated only at a tertiary health care centre i.e. GDCHN.

11. The procurement committee shall procure and supply well-equipped ‘12-watt soft tissue LASER unit’ as per technical specifications mentioned in ‘Annexure 2’ attached in this MoU.

12. The procurement committee shall procure and supply surgical equipment & consumables required for surgical excision and LASER ablation in students diagnosed with oral pre-cancerous lesion as enlisted in ‘Annexure 3’.

13. The procurement committee shall procure medications as enlisted in ‘Annexure 4’ required for treatment of students diagnosed with oral pre-cancerous lesion.

5.2 GOVERNMENT DENTAL COLLEGE AND HOSPITAL, NAGPUR

1. All the terms and conditions mentioned in this MoU and Government Resolution, work order issued by Tribal Development Department through ATC Nagpur and its decisions in this regard from time to time shall be binding on GDCHN though specific mention is not made in this MoU. Cost implications, if any, of Govt. Resolutions or decisions of Tribal Development Department, the scope of which is not mentioned in the original Government Resolution, passed by the Government, or decisions of TDD from time to time, shall be paid extra to the GDCHN.

2. To provide technical assistance in procurement and supply well-equipped ‘12-watt soft tissue LASER unit’ as per technical specifications mentioned in ‘Annexure 2’ attached in this MoU.

3. To provide technical assistance in procurement and supply surgical equipment & consumables required for surgical excision and LASER ablation in students diagnosed with oral pre-cancerous lesion as enlisted in ‘Annexure 3’.

4. To provide technical assistance in procurement of medications as enlisted in ‘Annexure 4’ required for treatment of students diagnosed with oral pre-cancerous lesion and distribute amongst students in coordination with local school administration, APO (Education), Extension Officer etc.

5. To conduct cluster wise residential oral screening camps of students in Government Ashramshalas, Eklavya Model Residential Schools & Govt. Hostels as specified in ‘Annexure 1’

6. To prepare, print and distribute amongst students of Govt. Ashramshalas, Eklavya Model Residential Schools and Govt. Hostels (in coordination with local school administration and APO (Education), Extension Officers etc.), a comprehensive ‘Oral Health Pro-forma’ as specified in ‘Annexure 5’ for the assessment of oral diseases in general and oral pre-cancer and cancer in particular.

7. To prepare a treatment plan, prescribe medications and provide counselling to students identified with oral pre-cancer. Simultaneously, refer all identified ‘current tobacco users’ to SMF for tobacco cessation counselling.

8. To refer students diagnosed with oral diseases / conditions other than oral pre-cancer viz. dental caries, stains & calculus, orthodontic diseases, fluorosis etc. to nearest dentist located at PHC / RH / SDH / DH. ‘Referral Slip’ shall be as per ‘Annexure 6’.

9. To provide medicinal therapy comprising of antioxidants and multivitamin medicines as per ‘Annexure 4’ for students diagnosed with oral pre-cancer.

10. To perform under aseptic conditions complete excision of lesion by LASER surgery or incisional biopsy shall be taken depending upon the size of lesion.

11. In case the quantum of patients increases beyond the capacity of Department of Oral & Maxillofacial Surgery of GDCHN, it shall take help of Nagpur Chapter of Association of Oral & Maxillofacial Surgeons of India (AOMSI) and GDCHN's Alumni Association to volunteer free of cost in performing biopsy of students diagnosed with oral pre-cancer.

12. To transport tissue samples collected from surgeries done on students diagnosed with oral pre-cancerous lesions to GDCHN for carrying out histo-pathological investigations and preparing individual reports. All the expenses for these investigations shall be borne by GDCHN.

13. To collate information in the form of excel sheets as per Annexure 7 collected during screening and maintain a track record of progress of treatment of individual patients. GDCHN shall not disclose database collected unless prior permission is taken from ATC Nagpur.

14. To give additional remuneration of Rs. 3 per entry to a clerk from GDCHN who shall be given additional charge of data entry of all the students screened and treated as per Annexure 7.

15. To screen, treat and evaluate students treated by medicinal or surgical therapy at quarterly intervals track any recurrence of oral pre-cancerous lesions as per Annexures 8.

16. To conduct a cross sectional research study on diagnosis and treatment analysis of oral pre-cancerous lesions from the data collected during implementation of this project.

17. To manage and secure the database collected of students screened, treated and investigated for oral pre-cancerous lesions during operationalization of this project.

18. To work in close collaboration with SMF viz. sharing of data of no. of current tobacco users and students diagnosed with oral precancerous lesions such that the campaign is comprehensive and sustained throughout the period of the project and beyond.

19. To conduct awareness campaign in collaboration with SEARCH (under Muktipath Abhiyan) In 3 Project areas viz. Gadchiroli, Aheri & Bhamragad (Which are not being covered by SMF) on similar lines of other project awareness campaign.

5.3 SALAM MUMBAI FOUNDATION

1. All the terms and conditions mentioned in this MoU, Government Resolution and work order issued by Tribal Development Department through ATC Nagpur and its decisions in this regard from time to time shall be binding on SMF though specific mention is not made in this MoU. Cost implications, if any, of Govt. Resolutions or decisions of Tribal Development Department, the scope of which is not mentioned in the original Government Resolution, passed by the Government, or decisions of TDD from time to time, shall be paid extra to the SMF.

2. To recruit, train and perform cadre management of personnel (1 - Project Co-ordinator, 5 - Asst. Project Co-ordinators) deployed for effective operationalization and management of this project. Their job description shall be as per 'Annexure 9'.

3. To procure print and supply IEC materials and other accessories needed for operationalization of project.

4. To organise training of teachers (ToT) as per 'Annexure 10' for capacity building of Head Masters, superintendents, teachers and wardens and officials at ITDP level viz. APO (Education) & Extension Officers.

5. To organise in coordination with school administration and take part in activities as per the criteria mentioned in 'Annexure 11' for developing model 'tobacco free schools'.

6. To organise anti-tobacco drive in coordination with school administration through carrying out group discussion, essay writing competition, debates on topics related to ill effects of tobacco consumption, public rallies / *prabhat pheri* etc.

7. To conduct LifeFirst training as per 'Annexure 10' for undergraduates, interns, post graduate students and faculty members of GDCHN. This training shall help in better operationalizing anti-tobacco awareness drive in Government Ashramshalas, Eklavya Model Residential Schools and Govt. Hostel in ATC Nagpur region.

8. Providing counselling and follow-up sessions for six months for tobacco & other tobacco containing products) and supari (areca nut) users in schools and hostels as per LifeFirst programme protocol for users who are referred by GDCHN

9. To organise in coordination with school administration and local ITDP officials, monthly group counselling sessions as per 'Annexure 13' for all current tobacco users using IEC supplied by SMF.

10. To conduct a cross sectional research study on tobacco cessation & awareness of oral pre-cancerous lesions and current tobacco users from the data collected during implementation of this project.

11. To manage and secure the database collected of current tobacco users and students diagnosed with oral pre-cancerous lesions during operationalization of this project.

12. To work in close collaboration with GDCHN viz. sharing schedule on awareness campaigns being carried out for current tobacco users and students diagnosed with oral precancerous lesions so as to have a seamless and synergised campaign throughout the period of the project.

13. To help invigorate 'School Health Committee' formed as per 'Annexure 14' at Government Ashramshalas and Eklavya Model Residential Schools for the purpose of anti-tobacco cessation &awareness campaign.

6. PROCUREMENT COMMITTEE:

The procurement committee shall be mandated to carry out procurement of the '12-watt soft tissue LASER unit', other surgical equipment, consumables and medications for students diagnosed with oral precancerous lesions. The procurement for aforementioned items shall be as per established or agreed upon procurement policy between Tribal Development Department and Medical Education & Drugs Department. The procurement committee is as follows,

1.	Additional Commissioner, Nagpur	-	Chairman
2.	Dean, GDCHN	-	Technical Advisor
3.	Senior Research Officer, ATC, Nagpur	-	Member
4.	Chief Accounts and Finance Officer (CAFO)	-	Member Secretary

7. MONITORING & EVALUATION:

a. A committee at the level of Additional Commissioner, Nagpur shall monitor the implementation & operations of the project. It shall be the responsibility of the committee to convene and hold the committee meetings biannually.

1.	Additional Tribal Commissioner	-	Chairman
2.	Deputy Director, DHS	-	Member
3.	Integrated Tribal Development Project Officer	-	Member
4.	Two nominees each from GDCHN and SMF	-	Member
5.	Two renowned professionals worked on tobacco control	-Member	
6.	Dean, GDCH, Nagpur	-	Member Secretary

b. In addition there shall be an ITDP Level committee headed by Project Officers and members as shown below. It shall be a responsibility of the committee to convene and hold the committee meetings in every 2 months.

1.	ITDP Officer	:	Chairman
2.	District Dental Officer	:	Member
3.	District Health Officer, Zilla Parishad	:	Member
4.	Two Head Masters of Ashram Schools	:	Member
5.	Two Wardens of Govt. Hostels	:	Member
5.	Two nominated parents	:	Member
6.	APO (Education)	:	Member Secy.

* Monitoring the evaluation of the activities will be done through the submission of presentations and reports of no. of patients screened, treated,

counseled. Reports on LifeFirst training conducted as well as progress in tobacco free school campaign etc.

* To resolve any practical difficulties in operationalizing this project viz. difficulty in referral of students with oral diseases other than oral pre-cancer, transport of students requiring treatment at a tertiary health care i.e. GDCHN etc.

* **Functions of ITDP Level Committee:**

  * Conduct bimonthly meeting.

  * Review progress of the project

GDCHN

In all 8 ITDPs i.e.Nagpur, Bhandara, Deori, Chandrapur, Chimur, Gadchiroli, Aheri and Bhamragad

- No. of students screened and treated for oral pre-cancer.
- No. of students referred to nearest PHC / RH / SDH / DH for treatment of other dental ailments.
- No. of histo-pathological reports generated for students diagnosed with oral pre-cancerous lesions and actions taken.
- No. of students referred for tobacco cessation counseling.
- No. of students referred to GDCHN and their progress.
- Any administrative difficulties faced by either party.

SMF

i.e. Nagpur, Bhandara, Deori, Chandrapur and Chimur

- No. of teachers, superintendents, wardens trained for tobacco free schools and cessation.
- No. of schools declared tobacco-free.
- No. of activities carried out in schools and hostels.
- No. of students registered and followed up for tobacco cessation.
- No. of students who quit tobacco after six months.
- Any administrative difficulties faced by either party.

8. OWNERSHIP:

1. The ownership of 12 watt soft tissue LASER unit required for treatment of oral pre-cancer shall be with GDCHN. As and when required, service of 12 watt soft tissue LASER equipment will be provided to Tribal Development Department for treatment of oral pre-cancer in other areas of the state. Laptop purchased for the project will be owned by SMF.

2. Ownership of database and therefore Intellectual Property Rights for database generated shall remain with ATC Nagpur. GDCHN and SMF may retain a copy of such documents but shall be governed by confidentiality obligation under this MoU.

9. PAYMENT TERMS:

GDCHN & SMF have been jointly allocated ₹ 120 Lakhs under Special Central Assistance 2018-19 from Ministry of Tribal Affairs. The amount has been distributed on Pro - rata basis i.e. **₹ 10,44,040** to GDCHN and **₹ 57,55,160** to SMF over two-year period. The remaining **₹ 52,00,800** will be disposal of ATC Nagpur and shall be used for procurement of '12 watt soft tissue LASER', other surgical instruments, consumables, medication and contingency expenses to be incurred on project this Payment will cover following costs:-

1. Capital Expenditure

Procurement Committee:

12 watt soft tissue LASER unit, antioxidants and multivitamin medicines and consumable materials required for screening and treatment of students of Government Ashramshalas, Eklavya Model Residential Schools and Govt. Hostels of ATC Nagpur region.

2. Operational Expenses

GDCHN:

Traveling costs for screening camps
Additional remuneration of ₹ 3 per entry to a clerk from GDCHN who will be given additional charge of data entry.
Printing oral health assessment pro-forma
2 flex posters & pamphlets for total 228 buildings of school & hostels

SMF:

Personnel costs - Project Coordinator, PO Coordinator
Training costs - Training materials, handouts, resource person travel - Staff training, Stakeholder trainings
Materials - Awareness material, posters, rallies for schools and hostels
Laptop and accessories
Travel and accommodation/Communication
Monitoring costs
Documentation, Reporting, Research
External evaluation
Meetings, review, culmination event costs
Overheads / Admin expenses - Accounting, data maintenance
Costs for project development, planning meetings etc. incurred before signature of MoU.

3. Scheme / Nature of payment: ATC Nagpur shall provide periodic installments to GDCHN and SMF in following manner;

Installment	Disbursement proportion	Amount GDCHN (₹)	Amount SMF (₹)	Timeline	Condition
1st installment	50% of year 1 budget	2,61,010	14,38,790	February 2019	On signature of MoU
2nd installment	25% of year 1 budget	1,30,505	7,19,395	August 2019	On submission of reports
3rd installment	25% of year 1 budget	1,30,505	7,19,395	November 2019	On submission of reports
4th installment	50% of year 2 budget	2,61,010	14,38,790	May 2020	On submission of reports

5th installment	25% of year 2 budget	1,30,505	7,19,395	August 2020	On submission of reports
6th installment	25% of year 2 budget	1,30,505	7,19,395	November 2020	On submission of reports

10. TIME SCHEDULE:

All the components of this MoU will be completed and made functional by the GDCHN and SMF as per the following schedule. Time is the essence of the MoU.

10.1 GDCHN Timeline:

Sr. No.	Activity	Timeline
1	Issuance of final work order	4th week of Feb. 2019
2	Purchase of 12 watt soft tissue LASER unit, Consumable materials required for screening as well as drugs & consumables for treatment of oral pre-cancer	31st May 2019
3.	Screening of students for oral pre-cancer	At least 6 - 12 months will be required after purchase of consumable materials for screening of students. Depending upon no of students to be treated, at least 6-12 months will be required for treatment after screening. Screening & treatment shall be carried out simultaneously. **Screening** – 1st week of March 2019 to 2nd week of November 2019 **Treatment** - 1st week of June 2019 to 3rd week of January 2021
4.	Treatment of students diagnosed with oral pre-cancer	
5.	Follow-up	Treated students will be under regular follow-up till January 2021.

10.2 SMF Timeline:

Sr. No.	Activity	Timeline
1.	Signature of MoU	4th week of February 2019
2.	Recruitment and training of project staff	April 2019
3.	Training of Teachers, Principals, Superintendents, Wardens	May 2019
4.	Awareness sessions in schools and hostels	Will be done simultaneously with screening by GDCHN. June 2019 to December 2019
5.	Counseling of referred students	Will be done simultaneously with screening by GDCHN. June 2019 to April 2020
6.	Follow up of students enrolled for LifeFirst counseling	
7.	Implementation of tobacco free school guidelines	May 2019 onwards upto April 2020

8.	Impact assessment	April 2020 to June 2020

11. TAXES:

The capital expenditure and operational expenses are inclusive of all taxes and duties and GDCHN and SMF shall bear goods & services tax, customs duty etc. as may be applicable on the date of final order. In the event of rise or fall of the above taxes, ATC NAGPUR will bear the difference in tax rates.

12. WARRANTEE & ANNUAL MAINTENANCE CONTRACT:

All equipment purchased shall be covered by the GDCHN and SMF under comprehensive warranty or annual maintenance contract during the project period.

13. PENALTY:

A. Penalty in case of Delay in operationalization of the project:

Any delay in completion of the project will invite penalty of ₹ 5000 per week. The penalty will be charged on pro-rata basis (proportionate) for delayed part of operationalization of the project.

B. Penalty in case of Delay in performance during the contract period:

Penalty will come into effect in case the timeline is breached from the date of operationalization of this project.

14. TERMINATION OF MoU:

This MoU may be terminated by ATC NAGPUR by issuing prior written notice of 90 days to GDCHN and SMF if any breach of the terms of MoU is caused by GDCHN and SMF, unless such breach is cured or the service is improved to the satisfaction of ATC NAGPUR within the thirty (30) days after the written notice issued to the GDCHN and SMF.

15. FURNISHING OF INFORMATION:

GDCHN and SMF shall periodically provide details of the progress of the project to ATC Nagpur and respective ITDP offices in the prescribed formats, as well as amendments thereof.

16. CONFILICT OF INTEREST:

GDCHN and SMF agree that there is no conflict of interest. Also, it has been agreed between both parties i.e. GDCHN & SMF that first authorship of research papers shall be based on domain expertise viz. diagnosis & treatment analysis and tobacco cessation & awareness respectively.

17. NODAL CONTACT:

GDCHN and SMF shall nominate one nodal person from both organization for monitoring and coordinating activities of the project. Tribal Development Department shall also appoint a nodal person, equal to the rank of an Asst. Commissioner / Senior Research Officer, Tribal Development Department for coordinating with the GDCHN and SMF.

18. CONFIDENTIALITY

GDCHN and SMF agree to keep confidential all proprietary and confidential information acquired under this MoU. Such information may be disclosed to those employees, directors / dean / officers / representatives of GDCHN and SMF who need to know such information for the purposes of carrying out the screening & treatment and tobacco cessation & awareness provided that such employees shall be informed of and subject to such confidentiality obligations. This obligations shall not apply to disclosure of confidential information that becomes generally available to the public, or was already known to GDCHN and SMF prior to the disclosure by ATC NAGPUR permitted in writing by ATC NAGPUR, required under any applicable laws or governmental regulations or judicial or regulatory process or generally accepted accounting principles applicable to GDCHN and SMF, any legal action, suit or proceeding arising out of or relating to this MoU.

19. FORCE MAJEURE:

For purpose of this Contract, Force Majeure means an event beyond the control of the parties to the Contract and not involving either party's fault or negligence and not foreseeable events.

a. If, at any time during the existence of the Contract, either party is unable to perform in whole or in part any obligation under this contract because of an event rendering performance of obligations impossible, which include acts of God, war, revolutions, hostility, civil commotions, strike, floods, earthquake, epidemics, quarantine restrictions, freight embargoes or explosions, then the date of fulfillment of contract shall be postponed during the period when such circumstances are operative.
b. The party which is unable to perform its obligations under the present contract shall, within seven (07) days from the occurrence of Force Majeure event, inform the other party with suitable documentary evidence. Non-availability of any component, etc. or any price escalation or change in any duty, tax, levy, charge, etc. shall not be an excuse of the Service Provider for not performing his obligations under this clause / contract.
c. In such inability on account of force majeure to perform continues for a period of more than three months, each party shall have the right to be released from further performance of the contract, in which case, neither party shall have the right to claim damages from the other. However, all prior performance shall be subject to contract terms.

20. NON-EXCLUSIVE:

The services being rendered by GDCHN and SMF to ATC Nagpur, Tribal Development Department under this MoU shall be non-exclusive in nature, and GDCHN & SMF shall be free to provide same and / or similar services to other persons.

21. REPRESENTATIONS AND WARRANTS

The Parties hereto represent and warrant to each other that:

i. The Parties are duly formed and validly existing under the respective laws that they are subject to with full power and authority to operate as contemplated in this MoU.
ii. The Parties have full power, capacity and authority to execute, deliver and perform this MoU and has taken all necessary action to authorize the execution, delivery and performance of this MoU.
iii. This MoU and each other MoU executed in connection herewith, if any, have been duly executed and delivered by the Parties and constitute legal, valid and binding

obligations of such Party, enforceable against the other Party in accordance with the terms.

22. ALL ANNEXURES & AMENDMENTS THEREOF FORM AN INTEGRAL PART OF THE MOU:

All Annexures & amendment thereof shall form an integral part of this MoU.

23. NOTICE:

Any notice, directions, instruction to be given by one shall be communicated to other Party either by any mode of written communication or by any verbal mode which shall, unless otherwise agreed by the parties, be backed up subsequently with the written confirmation.

Notice shall be given if:

To GDCHN

Attn: Dean, Government Dental College & Hospital, Nagpur
Email: dean.gdcngp@gmail.com
Tel: 0712-2743400 / 27444496

To SMF

Attn: Senior Project Manager, Salaam Mumbai Foundation
Email: ajay@salaambombay.org
Tel: 022 61491900 / 61491924

To ATC NAGPUR, Maharashtra

Attn: Additional Tribal Commissioner, Nagpur
Email: atc.ngp-mh@nic.in
Tel: 0712 2560127 / 2560314

24. RESOULUTION OF DISPUTE:

In the event of any question, dispute or differences in respect of transaction or terms and conditions of the MoU or interpretation of the terms and conditions or part of the terms and conditions of the MoU arises, the parties may mutually settle the dispute amicably.

25. ARBITRATION:

In case the ATC NAGPUR and GDCHN and SMF are unable to resolve amicably such dispute or differences whatsoever arising between the parties to this MoU out of relating to the meaning, scope, operation or effect of this contract or validity of breach thereof shall be referred to sole Arbitrator by mutual consent of all three parties. If the parties cannot agree on the appointment of the arbitrator within a period of one month from the notification by one party to the other of the existence of such dispute then the Arbitrator shall be nominated by the Commissioner, Tribal Development Department, Nasik. The Award of the arbitrator shall be binding on both the parties. The Arbitrator proceedings shall be carried out as per the provisions of Indian Arbitrator and conciliations act, 1996 and Rules made there under.

26. INDEMNIFICATION

GDCHN & SMF shall indemnify the ATC NAGPUR against all actions, suits, claims and demand or in respect of anything done or omitted to be done by them in connection with the services offered and against any losses or damages to the ATC NAGPUR consequence of any action or suit being brought against him for anything done or omitted to be done by him in the execution of the MoU.

27. DISCLAIMER OF THE LIABILITY:

Tribal Development Department shall not be liable for in respect of any damages or compensation payable in law on account of injury or death arising out of accident caused to any workman/employee or other person in the employment of the GDCHN & SMF or any sub agent as well as third party. Any claim made by third party against the GDCHN & SMF, they shall be solely responsible for such claims, compensation, damages & cost litigation.

28. AMENDMENT:

No modification or alteration or amendment to this MoU shall be valid unless mutually agreed upon the signed by and on behalf of all the three Parties.

29. INDEPENDENT ENTITIES:

It is understood that the each of the Parties are independent entities engaged in the conduct of their own business and this MoU is on principal to principal basis. This MoU shall not constitute them as the agent or partner of each other for any purpose whatsoever and neither Party shall have the right or authority to assume create or incur any liability or obligation of any kind, express or implied, in the name of or on behalf of the other.

30. ASSIGNMENT:

A Party may not assign this MoU and its rights and benefits hereunder without the approval of the other Party.

31. ILLEGALITY:

The illegality, invalidity or unenforceability of any provision of this MoU under the laws of a jurisdiction shall not affect its legality, validity or enforceability under the law of any other jurisdiction nor the legality, validity or enforceability of any other provision.

32. GOVERNING LAW :-

This MoU shall be governed and constructed in accordance with laws of India, rules, amendments and others and thereon from time to time.

33. DIPSUTE RESOLUTION:

The Parties agree to resolve all disputes arising in connection with this MoU, on best effort basis, through mutual consultation in good faith. Where the parties fail to resolve the dispute the dispute shall be referred to an arbitrator appointed by mutual MoU in terms of the Indian Arbitration Act.

Each party acknowledges that it has read this MoU, understands and agrees to be bound by its terms and further agrees that it is the complete and exclusive statement of the MoU among the parties.

IN WITNESS WHEREOF, the Parties here set their hands as on the date first above written.

IN WITNESS WHEREOF, The Parties hereto have caused this MoU to be executed by their duly authorized representatives.

By:

1. For and on behalf of ATC NAGPUR

Signature:

Name: Mr Pradip Chandren

Name Designation: Additional Commissioner, Tribal Development, Nagpur

Mailing Address: atc.ngp-mh@gov.in

2. For and on behalf of GDCHN

Signature:

Name: Dr Sindhu Ganvir

Name Designation: Dean, Govt. Dental College Hospital, Nagpur

Mailing Address: dean.gdcngp@gmail.com

3. For and on behalf of SMF

Signature:

Name: Mr Ajay Pilankar

Name Designation: Senior Project Manager, Rural Tobacco Control Initiative - India

Mailing Address: ajay@salaambombay.org

Witness:

1. Signature:

Name: Mr Dipak Hedau, Assistant Commissioner, Additional Tribal Commissionerate, Nagpur

2. Signature:

Name: Mr Digambar Chauhan, ITDP Officer, Nagpur

ANNEXURE 1

ITDP wise clusters of Govt Ashram Schools, EMRS and Govt Hostels

Sr. No.	Name of Project	Name of School	No. of Students	Nearest hostel from the school	No. of students
1	**Nagpur**			Boys hostel, kalmana (1000 students) 04 hostels	980
				Boys Hostel, kukde layout I & II Hostel	252
				Girls Hostel, Zingabai takli (03 hostels)	494
				Girls Hostel, Nandanwan	
				Boys Hostel, Sakkardara	
		Belda	282	Boys Hostel, Ramtek	75
		Navegaon (Chichda)	162	Girls hostel, Ramtek	75
		Ladgaon	183	Boys Hostel, Katol	75
		Hardoli	68	Girls Hostel, Katol	111
		Kolitmara	46	Boys Hostel, Savner	70
				Girls Hostel, Savner	49
		Kawadas	224	Boys Hostel, Hingana	126
				Girls Hostel, Hingana	69
		Hirapur (Talani)	157	Boys Hostel, Wardha- 02	196
				Girls Hostel, Wardha- 02	215
				Boys Hostel, Selu- 01	78
		Pandhurna	161	Boys Hostel, Ashti	75
				Boys Hostel, Arvi	60
				Girls Hostel, Arvi	96
				Boys Hostel, Karanja	70
				Girls Hostel, Karanja	78
2	**Bhandara**	Gov. Ashram School Khapa	126	Boys Hostel, Tumsar - 1	79
				Girls Hostel, Tumsar - 1	75
				Boys Hostel, Bhandara- 2	200
				Girls Hostel, Bhandara - 2	200
				Boys Hostel, Sakoli - 1	75
				Girls Hostel, Sakoli - 1	75
				Boys Hostel, Pawani - 1	75
3	**Chimur**	Gov. Ashram School Chandankheda	175	Boys Hostel, Warora - 1	75
				Girls Hostel, Warora - 2	80
				Boys Hostel, Bhadravati	
				Girls Hostel, Bhadravati - 1	75
		Gov. Ashram School Jambhulghat	181	Boys Hostel, Chimur - 1	75
				Girls Hostel, Chimur - 2	75
		Gov. Ashram School Kosambi	161	Boys Hostel, Nagbhid - 1	75
				Girls Hostel, Nagbhid - 2	75
		Gov. Ashram School Chindhichak	125	Boys Hostel, Bramhapuri - 1	75
				Girls Hostel, Bramhapuri - 2	75
4	**Chandrapur**	Gov. Ashram School Borda	356	Boys Hostel, Chandrapur - 2	350
				Girls Hostel, Chandrapur - 2	200
		Gov. Ashram School, Jivati	440	Boys Hostel, Jiwati - 1	125
				Girls Hostel, Jiwati - 2	125
		Gov. Ashram School, Patan	219		
		Gov. Ashram School, Dewada	445	Boys Hostel, Rajura - 2	200
				Girls Hostel, Rajura - 1	75
		Gov. Ashram School, Mangi	75	Boys Hostel, Gadchandur - 1	75
				Girls Hostel, Gadchandur - 1	75
		Gov. Ashram School, Rupapeth	60	Boys Hostel, Korpana - 1	75
				Girls Hostel, Korpana - 1	75
		Gov. Ashram School, Maregaon	141	Boys Hostel, Sindewahi - 1	75
				Girls Hostel, Sindewahi - 1	75
				Boys Hostel, Mul - 1	75

				Girls Hostel, Mul - 1	75
		Gov. Ashram School, Devoi	63	Boys Hostel, Gondpimpri - 1	75
				Girls Hostel, Gondpimpri - 1	75
5	**Deori**	Gov. Ashram School, Borgaon (Bajar)	465	Boys Hostel, Deori - 2	220
				Girls Hostel, Deori - 2	150
		Gov. Ashram School, Kadikasa	349	Boys Hostel, Chichgad - 1	125
				Girls Hostel, Chichgad - 1	125
		Gov. Ashram School, Kakodi	249	-	-
		Gov. Ashram School, Palandur	207	-	-
		Gov. Ashram School, Purada	431	-	-
		Gov. Ashram School, Bijepar	469	-	-
		Gov. Ashram School,Shenda	185	Boys Hostel, Sadak Arjini - 1	75
				Girls Hostel, Sadak Arjuni - 1	75
		Gov. Ashram School, Majitpur	582	Boys Hostel, Gondia - 2	325
				Girls Hostel, Gondia - 2	200
		Gov. Ashram School, Jamakudo	314	Boys Hostel, Aamgaon- 1	75
				Girls Hostel, Aamgaon - 1	75
				Boys Hostel, Salekasa - 1	75
				Girls Hostel, Salekasa - 1	75
		Gov. Ashram School, Koilari	163	Boys Hostel, Tiroda - 1	75
		Gov. Ashram School, Ilda	265	Boys Hostel, Arjuni Morgaon	85
				Girls Hostel, Arjuni Morgaon	75
6	**Gadchiroli**	A.S. Gadchiroli	425	B.H. no. 1 Gad	139
		A.S. Karwafa	400	B.H. no. 2 Gad	139
		A.S. Pendhri	484	G.H. Gadchiroli	216
		A.S. Potegaon	256		
		A.S. Sode	365	B.H. Chatgaon	62
		A.S. Rangi	382	B.H. Mohli	29
		A.S. Godalwahi	231	B.H. Dhanora	63
				G.H. Dhanora	65
		A.S. Murumgaon	309	B.H. Malewada	60
		A.S. Yermagad	247		
		A.S. Sawargaon	140		
		A.S. Gyarapatti	273		
		A.S. Kotgul	233		
		A.S. Markandadeo	364	B.H. Ashti	64
		A.S. Bhadbhidi	132	G.H. Ashti	61
		A.S. Regdi	402	B.H. Chamorshi	75
				G.H. Charmorshi	61
				B.H. Ghot	24
		A.S. Kurandimal	309	B.H. Armori	184
		A.S. Bhakrondi	140	G.H. Armori	177
		A.S. Angara	248	B.H. Wadsa	59
		A.S. Sonsari	196	G.H. Wadsa	59
		A.S. Maseli	215	B.H. Korchi	75
		A.S. Korchi	500	G.H. Korchi	74
		A.S. Ramgad	465	B.H. Kurkheda	65
		A.S. Yengalkheda	384	G.H. Kurkheda	73
		A.S. Ghati	200		
7	**Aheri**	A.S. Sironcha	187	B.H. Sironcha	75
		A.S. Bamani	225	G.H. Sironcha	65
		A.S. Zinganoor	297		
		A.S. Jlmalgatta	341	B.H. Alapalli	75
		A.S. Dechalipetta	189	G.H. Alapalli	75
		A.S. Guddigudam	282		
		A.S.Permili	369		
		A.S. Venkatapur	64		

		A.S. Khamancheru	414	B.H. Mulchera	59
		A.S. Lohara	113	G.H. Mulchera	41
		A.S. Mulchera	243	B.H. Aheri	100
				G.H. Aheri	75
8	**Bhamragad**	A.S., Jarawandi	519	B.H., Etapalli	75
		A.S., Kasansur	573	G.H., Etapalli	62
		A.S., Halewara	338		
		A.S., Todsa	449		
		A.S., Jambiya	195		
		A.S., Kothi	237	B.H., Bhamragad	40
		A.S., Tadgaon	426	G.H., bhamragad	30
		A.S., Laheri	291		

ANNEXURE 2

SPECIFICATIONS OF SOFT TISSUE LASER

Soft Tissue Diode Laser Unit with Following Particulars

Model: EPIC X

Make: Biolase, USA

1. Wavelength: 940nm +-10nm
2. Power output: 10W
3. Touch Screen more than" true color
4. Aiming Beam: Laser Diode, max1mw,635nm
5. Operation modes: continuous, Pulse Modulation
6. Pulse Width: 50ms-30s adjustable
7. Pulse Repetition Rate: upto20KHz
8. Foot Control
9. Surgical Handpiece (2)
10. Bleaching Handpiece (1)
11. Bleaching Gel Kit (5)
12. Power Cable & Adaptor (1)
13. Eye Wear (3)
14. Initiation Cork (2)
15. Soft Tissue Laser Tips (348)
16. E4-9MM-perio
17. E3-4MM-Surgical
18. E3-7MM-Perio
19. E3-9MM-Perio
20. E2-14MM-Endo
21. E4-4MM-Surical
22. E4-7MM-Perio

ANNEXURE 3

LIST OF CONSUMABLES

1. LASER Tips
2. Cotton
3. Gauze
4. B. P. Handle
5. Surgical Blade No 11 & 15
6. Local Anaesthesia
7. Toothed & Non-toothed forceps
8. 10% Formalin
9. Syringe & needle
10. 3-0 silk Sutures
11. Haemostatic agent
12. Diagnostic Instruments
13. Mouth Gag

Note: Quantity to be ascertained during procurement committee meeting

ANNEXURE 4

LIST OF MEDICINES

1. Tab Lycowell/Lycostar or any other brand with similar combination
2. Kenocort/Tenovate ointment or any other brand with similar combination
3. Dentogel/Mucopain or any other brand with similar combination
4. Tab Zerodol-SP or any other brand with similar combination

Note: Quantity to be ascertained during procurement committee meeting

ANNEXURE 5

ORAL HEALTH ASSESSMENT PROFORMA

SR NO. : **DATE :**

NAME : **AGE/SEX :**

ADDRESS :

SCHOOL NAME : **EDUCATION STATUS:**

PERSONAL HISTORY

BRUSHING HABIT :

ADDICTIVE HABIT :

Smoking : Bidi /Cigarette/Chillum/ Waterpipe

Duration Frequency

Alcohol : Duration Frequency

Chewing : Pan masala- Gutkha

Betel nut Betel nut +

Tobacco Tobacco +

Kharra Kharra +

Betel Leaf Betel leaf +

Duration

Frequency Quantity

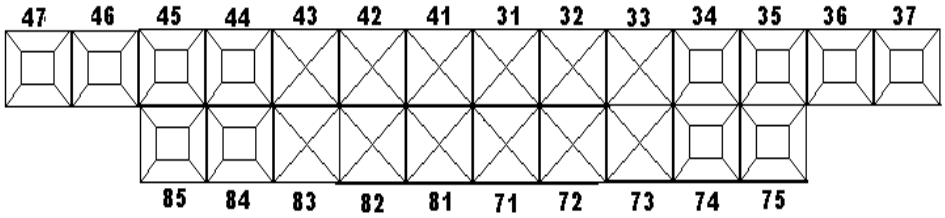
Quid Keeping : Yes/ No Area : Duration :

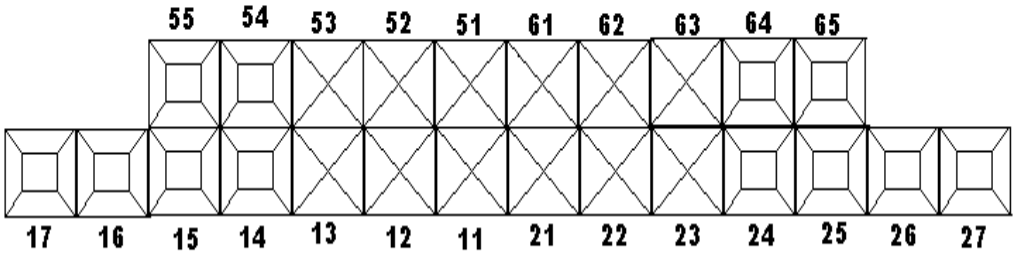
EXTRA ORAL EXAMINATION:

TMJ:

Interincisal Mouth Opening: Approx. _____ mm

DMFT/DMFS:





OHI-S: 17/16 11 26/27

47/46	31	36/37

ORAL PRECANCEROUS LESION/CONDITION:

TYPE: LOCATION:

T/T REQUIRED: SURGICAL/MEDICINAL

DENTAL FLUOROSIS (WITH SEVERITY):

CALCULUS: **STAINS:**

TREATMENT PLAN

ANNEXURE 6

REFERRAL SLIP

Patient details:

Name - Age - Sex-

Diagnosis -

Treatment Advised -

Above patient is referred to the Department of .....

GDC&H, Nagpur for further treatment.

Doctor's Signature

ANNEXURE 7

Sr.no	Name of school	Name of student	UID no.	Age	Sex	Education	Brushing				Habit			IIO	DMFT	OHI-S	Fluorosis	Calculus	Stain	Pre-cancerous Lesion / Condition		Treatment	Referral Institution
							Mode	Direction	Frequency	Substance	Duration	Frequency	Quantity							Type	Location		

Note: UID no. will be given by BVG & Ameya Life

ANNEXURE 8

Sr.no	Name of school	Name of student	UID no.	Pre-cancerous Lesion / Condition		Follow-up			
				Type	Location	1 month	3 months	6 months	12 months

Note: UID no. will be given by BVG & Ameya Life

ANNEXURE 9

Job description – Project Coordinator

Project implementation

- Ensure proper implementation of all project related activities
- Ensure timely completion of project related activities
- Planning activities and timelines in coordination with the head office
- Planning daily, weekly and monthly project activities for the team
- Involve and build rapport with the stakeholder – headmasters , teachers , Superintendents, wardens, village/district authorities, ATC project staff
- Organizing and Managing trainings, events, rallies, wall painting etc.
- Involve media in the activities like rallies, wall paintings etc.
- Support in all research related activities
- Managing all the assigned project related tasks

Coordination

- Coordination with the head office on a daily basis for project activities
- Coordination with the head office team for admin
- Coordination with the ATC project staff for all the project related activities on a regular basis
- Coordination with Government Dental College team
- Coordination with the team members on daily basis
- Coordination with the stakeholders – headmasters , teachers , Superintendents, wardens, village/district authorities, ATC project staff for trainings , implementation of tobacco free guidelines , counseling etc
- Coordination with Health department , Health department, Police department, FDA and social justice for enforcement of COTPA in all schools
- Coordination with the ATC project staff for site visits, logistics, travel and accommodation of the team

Team management

- Planning and assigning tasks to the team members on a daily basis
- Maintaining daily attendance records of the team members
- Maintaining travel reimbursements of the team members
- Conduct monthly meetings with team members
- Identifying training needs for the team
- Manage all admin, accounts and travel related issues of the team

Monitoring

- Monitoring all the day to day activities of all the team members
- Conduct monitoring visits to the project sites
- Conduct meetings with the stakeholders - headmasters , teachers , Superintendents, wardens, village/district authorities, ATC project staff
- Conduct meetings with the Government Dental College team

Reporting

- Daily reporting to head office for project activities
- Daily reporting to head office for attendance, accounts and travel of the team including himself/herself
- Preparing monthly reports
- Reporting promptly any operational challenges, concerns regarding project or team
- Documentation of success stories, cases, events, sessions etc.

Data management

- Collecting data from all the team members
- Ensuring data entry from the team members on daily basis
- Maintaining data sheets of all the project sites
- Timely reporting data to the head office

Job description – PO coordinator

- Conduct awareness sessions in all the project sites
- Conduct counseling sessions for the registered students
- Coordinate with stakeholders headmasters, teachers, Superintendents, wardens, village/district authorities, ATC project staff to conduct anti-tobacco related activities in all the project sites – poster competitions, slogan competitions etc.
- Coordination with the ATC project office staff on regular basis for project site visits
- Coordination with the headmasters, teachers , Superintendents, wardens, village/district authorities, ATC project staff for conducting sessions and logistics requirements for the same
- Implement the guidelines of tobacco free schools in all the schools
- Create Tobacco Control Committee in all the project sites
- Coordinate to organize rallies and make necessary arrangements
- Coordinating and organizing trainings for the teachers
- Daily reporting project activities to the Project Coordinator
- Attendance and travel related reporting to the Project Coordinator
- Data entry and documentation of the project sites
- Documentation of success stories, cases, events, sessions etc.

ANNEXURE 10

LifeFirst Training for GDCHN

- LifeFirst training is imparted by the experienced team of trainers with expertise in tobacco treatment counseling and public health.
- The trained healthcare professionals (HCP) will be able to practice tobacco dependence treatment on their own and thus make standardized tobacco dependence treatment available to all.
- Development of training modules is done in collaboration with Health Communication Core, a department of the Dana Farber / Harvard Cancer Center specializing in combining evidence-based practice with creative expertise with a special focus on smokeless tobacco.
- Trainings will focus on smokeless tobacco based on global as well as local experiences

Technical approach:

LifeFirst will conduct one-day interactive trainings with role-plays, audio-visual media, case discussions etc. for interns, post-graduation students, faculty of GDCHN.

It will cover topics such as types of tobacco products in India, forms and patterns of tobacco use, health effects of using tobacco, tobacco dependence and benefits of quitting. This training will help them to effectively ask every patient about tobacco use, advice on quitting.
It will equip the participants in understanding tobacco users' dependence, identifying triggers, helping them with coping mechanisms for withdrawals and urges and helping them to change their behaviour.

Topics to be covered

1. Tobacco use in India
2. Epidemiology and prevalence of tobacco use
3. Health Effects of tobacco
4. Benefits of quitting tobacco
5. Introduction to tobacco cessation
6. Tobacco dependence - A chronic disease
7. Neurobiology of tobacco dependence
8. Addiction
9. Tobacco treatment model
10. Follow-ups
11. Withdrawal symptoms
12. Relapse prevention

ANNEXURE 11

Guidelines for implementing Tobacco Free Ashramshalas and Hostels

Sr no	Criteria
1	No smoking or chewing of tobacco inside the premises of institution by students/ teachers/ other staff members / visitors.
2	A “Tobacco Control Committee” shall be in place. It may be chaired by school head/ principal, with members comprising of a science teacher, or any other teachers , school counselor (if available), at least two NSS/NCC/scout students, at least two parents representatives, area MLA, area SHO, Municipal Councilor, member of PRIs, any other member. The committee shall monitor the tobacco control initiatives of the s district consultant of NTCP (National Tobacco Control programme) or Civil Surgeon etc.chool / institute. The committee shall meet quarterly and report to the district administration.
3	Display of sign boards “No Smoking Area- Smoking here is an offence” and "No Tobacco Area", of 60X30cm size inside the institution (as mandated by law).
4	Posters with information about the harm effects of tobacco shall be displayed at prominent places in the school/ institutions. Students shall be encouraged to make their own posters on tobacco control themes.
5	A copy of the Cigarette and other tobacco products Act (COTPA) 2003 shall be available with the principal/ head of school/ institution. (May be downloaded from the website of the Ministry of Health & Family Welfare- www.mohfw.nic.in)
6 (a)	No sale of tobacco products inside the premises and Within the radius of 100 yards from school / educational institutions
6 (b)	Mandatory signage in this regard shall be displayed prominently near the main gate and on boundary wall of school / institute.
7	Integrate tobacco control activities with ongoing School Health Programme of the State
8	The principal / head of school / institute shall recognize tobacco control initiatives by students/ teachers/ other staff and certificates of appreciation or awards may be given.
9	State Nodal Officer for Tobacco Control, District Consultant of NTCP (National Tobacco Control programme) or Civil Surgeon etc. in the State Health Directorate may be consulted for technical or any other inputs.
10	Promote writing of Anti- tobacco slogans on the School/Institute stationery.
11	Display of “Tobacco free School” or “Tobacco-free Institution” board at a prominent place on the boundary wall outside the main entrance.

Tobacco Free Hostels

Sr no	Criteria
1	No smoking or chewing of tobacco inside the premises of institution by students/ teachers/ other staff members / visitors.
2	A “Tobacco Control Committee" shall be in place. It may be chaired by warden, APO of tribal department 2 students of hostel, PHC member, Sarpanch or Municipal Councillor etc. The committee shall monitor the tobacco control initiatives of the hostel/ institute. The committee shall monitor the tobacco control initiatives of the hostel. The committee shall meet quarterly and report to the district administration.
3	Display of sign boards “No Smoking Area- Smoking here is an offence” and "No Tobacco Area", of 60X30cm size inside the institution (as mandated by law).
4	Posters with information about the harm effects of tobacco shall be displayed at prominent places in the school/ institutions. Students shall be encouraged to make their own posters on tobacco control themes.
5	A copy of the Cigarette and other tobacco products Act (COTPA) 2003 shall be available with the principal/ head of school/ institution. (May be downloaded from the website of the Ministry of Health & Family Welfare- www.mohfw.nic.in)
6	District Nodal officer Civil Surgeon - National Tobacco Control Programme (NTCP) may be consulted for technical or any other inputs.
7	Display of "Tobacco-Free Hostel" board at a prominent place on the boundary wall outside the main entrance

Central Board of Secondary Education has developed guidelines containing 11 criteria for implementing tobacco free schools. These guidelines have been used as reference and modified to develop the abovementioned guidelines.

ANNEXURE 12

LifeFirst
Yes to Life. No to Tobacco.

INTAKE FORM

Date:

Name: …….....

Age (in years): **Gender: a) Male** ☐ **b) Female** ☐

School/Hostel Name: …… Taluka: …… District:..... PO:

Std. …… Div……

Referred by GDCHN : Yes/ No

Pre-cancerous lesion : Yes / No

1. Last tobacco/ supari use?_____Days /_____Months/_____Years ago

2. Which of the following forms of tobacco do you consume?

A) SMOKING

a. Manufactured cigarettes?	_____Cigarettes/per day
	_____Cigarettes/per week
b. Bidis?	_____bidis/ per day
	____bidis/ per week
c. Hukkah sessions? (1 session= 30 minutes)	____hukkah sessions/per day
	____hukkah sessions/per week
d. Any others? Specify……	_____/per day
	_____/per week

Have you used pen hukkah? Yes/No

B) SMOKELESS

3.

a.Supari	_____times/ per day
	_____times/ per week
b. Tobacco lime mixture	_____times/ per day
	_____times/ per week
c.Gutkha	_____times/ per day
	_____times/ per week
d. Kharra	_____times/ per day
	_____times/ per week
e.Betel quid (paan) with tobacco?	_____times /per day
	_____times /per week
f. Mishri	_____times /per day
	_____times /per week
g. Oral tobacco use (as snuff, gul, gudakhu)?	_____times /per day
	_____times /per week
h. Nasal use of snuff?	_____times /per day
	_____times /per week
i. Any others? (Specify type) _____(NAME)	_____times /per day
	_____times /per week

4. On an average, how much of total money do you think you spend on various tobacco/supari products?

5. If use both – supari and tobacco, which product did you start first?

   a. Supari b. Tobacco

6. At what age did you first use supari/tobacco? …….

7. Where did you first consume supari/ tobacco?

   a. Home b. school c. On the way to school d. Area e. Native Place

   f. Others (Specify.....)

8. Who first introduced you to supari/tobacco?

a. Family b. Peers c. Others (Specify.....)

9. What was the reason to initiate supari/tobacco consumption?

   a. Peer pressure/influence b. Family c. Curiosity d. Fashion/style.

   e. Others (Specify .....)

10. What is the reason to continue consuming supari/tobacco?

    a. Peer pressure/influence b. Family c. Fashion/style. d. Like to eat e. Time pass

    f. Others (Specify.....)

11. Why do you want to quit tobacco/supari?

a. Orientation b. Family c. Health d. Others (Specify.....)

12. Before enrolling into this program, have you ever tried to stop using tobacco/supari?
    a. Yes b. No

Counselor's Signature

Remarks:

……

……

……

……

……

ANNEXURE 13

School name -							Dt:		Dt:		Dt:		Dt:		Dt:	
Group name -							F:		F:		F:		F:		F:	
S.No	Name	Std	Div	Product	Frequency	Session 1	Session 2		Session 3		Session 4		Session 5		Session 6	
						Status	Prod	Freq	Prod	Freq	Prod	Freq	Prod	Freq	Prod	Freq
1																
2																
3																
4																
5																
6																
7																
8																

ANNEXURE 14

SCHOOL HEALTH COMMITTEE

The context of people's lives determines their health, and so blaming individuals for having poor health or crediting them for good health is inappropriate. Individuals are unlikely to be able to directly control many of the determinants of health. This context stands true for the students in Government Ashram Schools. Therefore, providing them with healthy environment is a collective responsibility of the School administration, local health care workers and respective ITDP Office.

Constitution of School Health Committee:

1. School Principal - President
2. Superintendent - Secretary
3. 2nd Superintendent - Member
4. School teacher - Member
5. Medical officer (through Service Provider) - Member
6. Students council (Mantri-mandal) - 2 Members
7. ANM / ASHA worker - Member
8. Parents - 4 Members

Note: a. More experienced superintendent will be the Secretary.
b. Health & Nutrition Ministers will be nominated from Student Council.
c. 2 members in parent's category should be ladies.

Roles & Responsibilities:

SHC should meet at least once a week and actively conduct the following:

1. School Health Committee / School Health Council shall work out the yearly school health plan and plan for its implementation.
2. Ensure that school health programme has the approval and support of respective ITDP Office.
3. School health plan shall focus on improving determinants of health like social environment, physical environment, and the student's individual characteristics and behaviours.
4. Ensure that ANMs visit sick rooms as per prescribed norms and sick room is functional with all necessary equipment and medicines.
5. School health committee shall in collaboration with local health care workers like Service providers' doctor, ANM etc. organise group discussion, essay writing competition, debates etc. on topics related health, sanitation and hygiene.

6. Mobilise health & nutrition ministers in the student council to look after cleanliness in classroom, common room, dormitory and washrooms.
7. Ensure students participation in de-addiction and other health education programmes
8. SHC through its student council shall ensure development of kitchen garden for growing seasonal fruits & vegetables.
9. SHC shall encourage Students' Council to organise events promoting health, WASH and food festivals every month.
10. Evaluation of the programmes and redefining objectives and activities.
11. Drinking Water Quality and availability should be ensured and be monitored by the SHC. Any lapse in the same should be reported to the health co-ordinator appointed by the PO immediately.
12. Ensure adequacy and hygienic storage of medicines and ensure that expired medicines are not given to children.
13. Health co-ordinator appointed by Project Officer to review and monitor functioning of SHCs.