

T-11020/29/1998/NACO(Admn ART)
Government of India
Ministry of Health and Family Welfare
National AIDS Control Organization

6th Floor, Chandralok Building,
36 Janpath, New Delhi-110001
Dated :26th August , 2008

OFFICE MEMORANDUM

Sub: Comprehensive care for PLHA's at ART centres – directive reg.

In a Public Interest Litigation, the Hon'ble Supreme Court of India reviewed the steps taken by National AIDS Control Organisation, Ministry of Health and Family Welfare, Government of India to combat HIV/AIDS and the services being provided to PLHA's. In this regard, the Supreme Court has issued directives for enhancing the extent and efficacy of treatment administered to PLHAs.

Attention of all concerned is drawn towards the following directives:

1. ***"At present, 172 ART centres are functional. All category A & B districts shall be covered in a phased manner and ART centres shall be established in these districts".***

Action Taken: All states must ensure that all A& B category districts have at least one fully functional ART centre. Status of ART centre in the states must be reviewed accordingly, so that ART services are made available in all A & B category districts by March 2009.

2. ***"A plan for link ART centres has been formulated and put into operation by NACO. NACO is directed to ensure that all districts which have a critical mass of patients on ART shall have a link ART centre. NACO shall ensure that 650 Link ART centres shall be made functional by 2010."***

Action Taken: All states must identify the sites for Link ART centres based on NACO guideline and intimate the same to NACO for issue of administrative sanction, so that necessary refurbishment and training of manpower at Link ART centres can be undertaken. The Link ART centres need to be operationalised at the earliest so that PLHAs do not have to travel long distance to get ART.

3. ***"Presently 139 CD4 machines are installed in the country to take care of 172 centres, by way of a sample transport mechanism for centres without CD4 machines. The sample is transported by the lab technician who brings back the report also after testing at the Nodal Centre. NACO has also entered into a comprehensive maintenance contract with effect from May 2007 with an agency for maintenance of the CD4 machines and stringent damage clauses have been inserted to ensure that repair and maintenance of these machines is done in a timely and efficient manner. The facilities shall be***

extended by NACO as more centres are opened up and the sample transport mechanism will be further expanded”.

Action Taken: All states must identify the sites for future ART centres as per Global fund Rd IV / VI targets so that CD 4 machines can be procured accordingly. As you are aware that NACO has entered into a comprehensive maintenance contract for CD4 machines, hence, it must be ensured that any fault / break down in the CD4 machines is rectified at the earliest. It should be ensured that all People Living with HIV/AIDS (PLHAs) and Children Living with HIV/AIDS (CLHAs) with ART centres undergo a CD4 test as per National ART Guidelines.

4. “ART centers will be maintained by the Central and State Governments in a clean and hygienic manner and shall provide clean drinking water, seating arrangement and clean toilets facility to all PLHA”.

Action Taken: All ART centres should have adequate space, waiting area, sitting arrangement, clean toilet facility and water drinking. The one time non recurring grant of Rs. 4.5 Lakh and recurring grant Rs. 1.5 lakh per year provided by NACO to ART centre should be utilized for providing these facilities. Requests for requirement of additional grants for this purpose should be forwarded to National AIDS Control Organisation (NACO). The centre should be refurbished in a manner to provide good ambiance at the centre. Since, hospitals are under the control of State Governments, it must be ensured that adequate space is provided for the ART centres.

5. NACO and all State Governments are directed to immediately create a mechanism for redressal of grievances at ART centres. NACO shall post the names and contact details of its Regional Coordinators as well as the Nodal Officers heading an ART Centre on its website and these will be made available to INP+ also. Further, a committee will be constituted in every State, to be chaired by the Secretary, Health of the State Government/ Medical Education and consisting of among others, representatives of PLHA networks; this Committee shall meet every quarter and act as a grievance redressal mechanism. This mechanism will ensure that issues such as improper facilities, shortage of medicines, non-functioning of machines, delays etc are brought to the attention of the Nodal Officer, Regional Coordinator as well as NACO in a systematic manner for timely response.”

Action Taken: (a) All ART centre should have a complaint box so that the PLHAs can put their complaint if any into the box. The Nodal Officers should review the complaints weekly and take the necessary action in a timely manner.

(b) At the state level a committee should be constituted for redressal of grievances at ART centre and to routinely review functioning of the ART centres. The Committee shall be headed by the Health Secretary of the State and shall consist of Project Directors of the SACS, Director of Medical Education, Director Health Services, and the Nodal Officers of the ART centre. The committee may also include a representative of NACO, either the regional coordinator or anyone from NACO directly and a representative from the local NGO/ Network of +ve People. The Committee should meet every once in two months and ensure that the grievances if any are sorted out. A communication in this regard was sent to all States by Director General, NACO in the month of April 2008.

6. ***“Union of India is directed to ensure that drugs for treatment of Opportunistic Infections, in accordance with the NACO lists, will be available free for all PLHAs without any difficulty”.***

Action Taken: NACO has already initiated procurement of drugs for Opportunistic Infections at regional level through State agencies with experience in this regard. Project Directors of SACS must ensure that these drugs are procured & supplied to all ART centre urgently.

7. ***“Union of India is directed to ensure that testing kits shall be available without any shortfall”.***

Action Taken: The SACS must ensure that adequate quantity of HIV test kits are available at all ICTCs and there is adequate buffer stock of test kits. Access to testing is a crucial component of National AIDS Control Programme and availability of kits is the key factor for increasing the testing for HIV.

8. ***“Union of India and all the State Governments shall ensure that in all Public Hospitals, PHC's, CHC's and the like, PEP drugs and material shall be provided (free of cost) to all Doctors, nurses and hospitals staff so that, under no circumstances, is a PLHA denied treatment on the ground that such equipment and material are not available. The State Governments shall ensure that all health workers are provided a safe working environment and that PEP will be easily accessible and available”.***

Action Taken: It must be ensured that adequate quantity of gloves, masks, gowns and other material for universal work precaution are available in the hospitals and patient are not denied treatment due non availability of such material. The hospitals must have the protocol and drugs for PEP in case of accidental needle stick injury to health care workers. The protocols, desk reference and posters in this regard have already been sent to all States and should be widely disseminated.

9. ***“All Doctors and nurses in the public sector and the private sector are directed to immediately familiarize themselves and comply with the protocols and policies as prepared by NACO. The Medical Council of India, Dental Council of India and the Nursing Council of India shall take steps to disseminate the NACO protocols and policies on their respective websites as well as on the websites of the State Medical and Nursing Councils. Further, the Medical Council of India as well as the Nursing Council of India shall ensure that these protocols are made part of the teaching curriculum/reading material at and disseminated to all Medical and Dental colleges as well as other institutions for training of nurses and other health care professionals. The Medical Council of India, Dental Council of India and the Nursing Council of India are directed to file a compliance report within six weeks”.***

Action Taken: The SACS must ensure there is a wide dissemination of NACO protocols to both public and private health facilities. Steps are being taken to ensure that these protocols are made part of the teaching curriculum in medical, nursing and dental colleges through respective Councils viz. Medical Council of India, Nursing Council of India and Dental Council of India etc.

10. ***“All Doctors, nurses and hospital staff, whether in the public sector or private sector shall treat PLHA in a professional and humane manner, treating them always with dignity and care. No Doctor or nurse shall refuse to treat a PLHA on account of his/her positive status. In treating a PLHA, there shall be no discrimination or stigma whatsoever”.***

Action Taken: It must be ensured that there is no discrimination or stigma to PLHA's at health care facilities or otherwise. The cases of denial of services to positive patients should be viewed seriously and action initiated in all such cases.

11. ***“Doctors in the private sector, in particular, are directed to immediately familiarize themselves with the NACO's comprehensive protocols and policies with regard to care and treatment, which are available on NACO website. NACO approved ART regimen have proven to be cost effective, safe and PLHA have shown good response to these regimen. The private practitioners should use these cost effective regimen in the first instance and other regimens should be prescribed only in cases where these cannot be used for the reasons of toxicity/failure etc. The Medical Council of India and the Consumer Courts are to take a strict view of private practitioners who take advantage of the illiteracy and poverty to prescribe wrong or unnecessary regimes of drugs or charge exorbitant amounts. Irrational prescriptions using wrong dosages/wrong combinations shall be dealt with severely and appropriate action taken”.***

Action Taken: The SACS should ensure that doctors in private or public sector are sensitized / trained on NACO protocols on care & treatment. This can be done through association like Indian Medical Association, branches of Association of India, Surgeons of India, Indian Academy of Paediatrician, FOGSI etc. Strict action must be taken on all irrational prescriptions of ART. All advertisements offering potential cure for HIV must be banned and such organizations should be dealt with strictly, as there is no proven cure available for HIV/AIDS so far.

12. ***“The State Governments shall strictly abide by NACO policies and guidelines regarding counselling. Counselling will be done in a meaningful manner, spending time on each individual PLHA in an atmosphere that provides privacy and confidentiality”.***

Action Taken: The SACS must ensure that the quality of counselling offered at all ICTCs and ART Centres is of the highest standard. The counsellor must spend adequate time with each patient and ensure that confidentiality is maintained. The quality of counselling ultimately affects the adherence to therapy and outcome of the patient.

13. ***“A status report shall be filed by NACO, which is directed to act as a nodal agency on behalf of the Government of India, before this Court every three months on the steps taken by the Central Government pursuant to these directions”.***

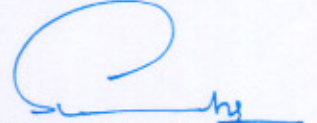
Action Taken: All States must send a report on these issues every two months so that NACO can file a status report every three months to the Hon'ble Supreme Court.

14. ***“All State Governments, Medical Council of India, Dental Council of India and Nursing council of India shall file compliance reports as directed within six months”.***

Action Taken: All State Governments, Medical Council of India, Dental Council of India and Nursing Council of India should send compliance report as directed by the Court within six weeks.

All concerned are requested to ensure strict compliance to the above directives.

This issues with the approval of Secretary (Health & FW), Ministry of Health and Family Welfare, Government of India.



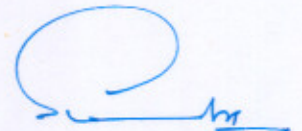
(Subhash Chandra)

Under Secretary to the Government of India

1. Project Director, State AIDS Control Society of all States/UTs/Municipal Corporations.
2. Principal Secretary/Secretary(Health & FW) of all States.
3. Director (Medical Education), Directorate of Health Services, of All States.
4. Director (Health Services), Directorate of Health Services, of All States.
5. Nodal Officer, All ART Centres.
6. Regional Coordinators (CST).
7. All NACO officials.
8. The Additional Solicitor General, India.

Copy for information:

1. PPS to HFM
2. PPS to MOS(H&FW)
3. PPS to Secy. (Health & FW)
4. PPS to DGHS
5. PS to AS & DG, NACO.



(Subhash Chandra)

Under Secretary to the Government of India