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NOTIFICATION

No. B. 12011/2/2012-HFW, the 18th November, 2013. In the interest of public service, the Governor of Mizoram is pleased to constitute State Mentoring Group on Community Monitoring for Community Action for Health under National Health Mission in the State of Mizoram consisting of the following members with immediate effect and until further order.

Sl.No. Names	Designation	Organisation/Agency
Chairman:		
1. Dr. Gordon Zohmingthanga	Mission Director	NRHM, Mizoram
Secretary and Convenor:		
2. Dr. T.C. Hmingthangi	State Nodal Officer	Community Monitoring, NRHM
Convergence Team Members:		
3. Pi Zonunpari	Special Officer	Social Welfare Deptt.
4. Pi Elizabeth Hatzaw	Asst. Professor	Mizoram University
5. Pu Vanlalrema Vantawl	Publisher and Editor	Zalen News
6. Fr. Lorence Kenedy	Director	Zoram Entu Pawl
7. Pi Lalrokimi Pautu	Secretary	Open Doors (NGO)
8. Pu Vanneihluanga	Prominent Citizen	
9. Pi Vanramchhuangi	Human Rights Activist	
10. Designated Personnel	President (MHIP)	Mizo Hmeichhe Insuihkhawm Pawl
11. Designated Personnel	President (YMA)	Central YMA
12. Designated Personnel	Chairman (MKHC)	Mizoram Kohhran Hruaitu Committee
Technical Team Members :		
13. Dr. Vanlalhruaia	State TB Officer	RNTCP, Mizoram
14. Dr. Chawngthansiami	State Leprosy Officer	NLEP, Mizoram
15. Dr. Lalzepuii	Deputy Director	Malaria, Mizoram
16. Dr. Jane R. Ralte	State Nodal Officer	MSTCS, Mizoram
17. Dr. R. Lalthanga	State Prog. Officer	RCH, Mizoram
18. Dr. Lalzawmi	SEPIO	EPI
19. Dr. Pachuau Lalmalsawma	State Prog. Officer	IDSP
20. Dr Hmingthanmawii	State Nodal Officer	Adolescence Health
21. Dr. R. Lalchhuanawma	CMO (NF)	NRHM, Mizoram
22. Pu Danny Khuplianlal	Consultant (CP)	RRC, NRHM, Mizoram
23. Pu R. Lalmuankima	State Facilitator	RRC, NRHM, Mizoram

The role of the State Mentoring Group on Community Action (SMGCA) is to advise the State Cell of Community Monitoring, NRHM and assess the progress in terms of Community Participation and its fulfillment of the provided objectives. These SMGCA will be headed by the Mission Director, NRHM, Mizoram.

Terms of Reference

Establishment :

The Mentoring Group for Community Action (MGCA) is a standing committee within the National Rural Health Mission (NRHM), constituted to support and advise the Ministry of Health and Family Welfare (MoHFW) in the implementation and review of the Community Monitoring, NRHM across the country. The adoption of a comprehensive framework for community-based monitoring and planning at various levels under NRHM places people at the centre of the process of regularly assessing whether the health needs and rights of the community are being fulfilled. The community monitoring process involves a three way partnership between health care providers and managers (health system); the community, community based organizations and NGOs and the Village/Local Council Institutions.

Objectives of the Community Monitoring and State Mentoring Group on Community Action:

- To provide regular and systematic information about community needs, which will be used to guide the planning process appropriately.
- To provide feedback according to the locally developed key indicators.
- To provide feedback on the status of fulfillment of entitlements, functioning of various levels of the public health system and service providers, identifying gaps, deficiencies in services, and levels of community satisfaction, which can facilitate corrective action in a framework of accountability.
- To enable the community and community based organizations to become equal partners in the planning process.
- To increase the community sense of involvement and participation to improve responsive functioning of the public health system.

Responsibilities of the State Mentoring Group on Community Action:

1. Discuss the programmatic and policy issues related to access to health care and to suggest necessary changes.
2. Review and contribute to the development of the State Health Plan, including the plan for implementation of NRHM at the state level; the committee will suggest and review priorities and overall programmatic design of the State Health Plan.
3. Discuss key issues arising from various district health committees, which cannot be resolved at the district and or block level (especially relating to budgetary allocations, recruitment policy, programmatic design etc.) and initiate appropriate action.
4. Discuss administrative and financial level queries, which need urgent attention. Institute a health rights redressal mechanism at all levels of the health system, which will take action within a time bound manner.
5. Review summary report of the actions taken in response to the enquiry reports.
6. Operationalize and assess the progress made in implementing the recommendations of the NHRC, to actualize the right to health care at the state level.
7. Take proactive role to share any related information received from GOI and will also share achievements at different levels.

Esther Lal Ruatkimi,
Secretary to the Govt. of Mizoram,
Health & Family Welfare Department.