

# **NATIONAL CANCER CONTROL PROGRAMME**

## **GUIDELINES**



**MINISTRY OF HEALTH AND FAMILY WELFARE  
GOVERNMENT OF INDIA  
MAY, 2005**

# **NATIONAL CANCER CONTROL PROGRAMME GUIDELINES**



**MINISTRY OF HEALTH AND FAMILY WELFARE  
GOVERNMENT OF INDIA**

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**MAY 2005**

## Preface

*The National Cancer Control Programme was initiated in the year 1975. Subsequently it was revised in the year 1984-85 with emphasis on primary prevention and early detection of cancer. Various schemes were introduced under the programme in order to strengthen cancer control activities in the country. Under the Xth Five Year Plan, the schemes have been modified to further augment the existing facilities. The focus is on covering the geographical gaps for providing comprehensive cancer care in the country.*

*This document is a compendium of the revised guidelines for the schemes under the NCCP.*

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# Guidelines for New Regional Cancer Centres

## Introduction

The National Cancer Control Programme has established Regional Cancer Centres (RCCs) to improve availability of cancer treatment facilities. In order to further enhance the treatment facilities across the country and reduce the geographical gap in the availability of cancer care facilities, newer RCCs are being recognized.

## Provisions under the scheme

- 1) A one time financial assistance of upto Rs.Five crores would be provided to the new RCCs for development of cancer treatment facilities. This may include:
  - a) Purchase of equipment related to cancer treatment and research
  - b) Construction for housing the equipment or expanding the cancer wards
- 2) A part of the grant, not exceeding 30% of the total grant may be used if required, for construction of building to house the radio-therapy equipments and patient care units.
- 3) When the proposal is only for equipment, the grant will be approved in principle and will be released after the equipment is ready for procurement.

- 4) If construction and equipment have been proposed, 30% grant amount will be released on approval of proposal. The remaining amount will be released when construction is almost complete (Roof/lintel should have been completed) and the equipment is **about to be procured**.

### **Role of the RCC**

- a. The RCCs should provide Comprehensive cancer treatment services.
- b. There should be a mechanism in place or proposed, to spread awareness in the community and among health personnel regarding common cancers and their early detection/ prevention.
- c. The institution should undertake training of medical officers and health workers, in early detection and prevention of cancers and supportive care.
- d. Training of medical officers and health workers, in early detection and prevention of cancers and supportive care should be undertaken by the institution.
- e. A referral linkage should be developed between the RCC and the hospitals under the DCCP so as to ensure continuity in the treatment chain.
- f. Outreach and research activities in prevention and treatment of cancers should also be carried out.
- g. The RCC will have to undergo periodic monitoring and evaluation to ensure satisfactory functioning.

### **Eligibility Criteria for the new RCCs**

- a. The institute should be a Government Hospital or a Government Medical College Hospital with Radiotherapy facilities. Autonomous institutions supported by the State or Central Government will also be considered for sanction in the absence of any suitable government institution in the region.
- b. The hospital should have atleast 300 general beds of which 50 beds are exclusively for cancer treatment or the institution may be a 100-bedded hospital exclusively for cancer treatment.
- c. The institute should have provided cancer treatment for the previous three years.
- d. The institute should be well equipped with radiotherapy facilities. There should be well-developed departments of Surgery, Gynaecology, ENT and Radiation Oncology with well-developed supporting departments like Medical Oncology, Nuclear Medicine, Anaesthesia, Pathology, Cytopathology, Haematology, Biochemistry and Radiodiagnosis. #If the institute does not have all these facilities at the time of seeking the grant-in-aid, it should give an undertaking that all the required facilities would be made available within a period of five years of the sanction of grant.
- e. The State Government should certify and recommend the institution as fit for being recognized as the RCC.
- f. The recognition by the Ministry of Health and Family Welfare will be given after a team of experts inspects the institute for eligibility to be recognized as an RCC.

## Guidelines for submission of proposal

1. The institute should have a BARC approved layout map and a letter of approval from BARC if radiotherapy installations are asked for.
2. #The institute should ensure proper upkeep and maintenance of the equipment by levying user charges to generate internal resources. Otherwise, state government will furnish an undertaking to bear the cost of maintenance of the equipment.
3. Procurement of equipment will be made after completion of all the codal formalities.
4. #If the cost of the equipment requested for is more than the sanctioned grant amount, details regarding the source of revenue for the balance amount with adequate proof shall be furnished.
5. #The institute should give an undertaking that they would be involved as a Nodal agency for implementation of DCCP and decentralized NGO scheme for IEC activities and would continue to do so even after the discontinuation of financial assistance.
6. The proposal should also include the Action plan indicating the time-schedule of activities to be undertaken by the institution.

The Action Plan should include plan for

- a. Construction of the building (if it has been requested for)
  - b. Procurement of equipment
  - c. Recruitment of personnel
7. The Ministry of Health and Family Welfare will release the grants directly to the RCCs.
  8. The grant will be deposited in a Joint Savings Bank Account in a nationalized bank to be operated by two individuals. The interest

accrued thereon shall be added to the account and will be reflected in the Utilisation Certificate

9. The RCCs will provide Utilisation Certificates for the grants that are provided as per the GFR.
10. The grant will be utilized only for the purpose that it is intended for.

## Procedure for application

- a. The application for the sanction of new RCC should be made in the prescribed application format, copy of which is attached.
- b. The RCC should be recommended by the State government as per the format attached with this document and should be signed by an Officer not below the rank of Deputy Secretary.
- c. The Action plan for upgrading the facilities and utilization of the grants should be enclosed with the application.

The completed applications should be addressed to Under Secretary (Cancer), Ministry of Health and Family Welfare, Nirman Bhavan, New Delhi 110011.

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# Appropriate documents/undertakings should be enclosed with the application.

## PROFORMA FOR RECOGNITION OF NEW RCC

### Technical Details

#### THIS FORM IS IN TWO PARTS:

- I. To collect detailed information about Institution, II. Action Plan

#### PART-I

##### A: Details of the Institute

- Name and address of Institute:
- Nature of the organization (Govt. Institution/ Autonomous Body supported by Govt. etc.)
- Details of infrastructure: Own building/rented building
- Total number of Indoor-beds in the entire hospital:
- Beds for cancer patients**
  - Already available:
  - Proposed full strength:
- Year when cancer treatment was started :

##### B: Information about services provided:

- Districts and region covered by RCC (give details):
  - Population in the above districts and region:
  - Expected number of new cases of cancer per year:
  - Registered new cases of cancer in the last year
  - Total no. of patients in the last year
- Outpatient dept.:

Admissions:

- User charges levied: Yes/No  
(if yes give details including the proportion of paying patients and free patients, payment details, etc.)
- Number of cancer cases treated last year (Stage-wise distribution)

Surgery	Radiotherapy	Chemotherapy

##### C: Facilities for Management of Cancer patients\*

###### 1. Specialities:

Department	Existing	Proposed	Head of department	Name/Qualification/ Experience

\* The RCC should ensure the services of histopathology, cytology, haematology, biochemistry and radio-diagnosis. The comprehensive RCC consists of surgical oncology, radiotherapy, medical oncology and allied specialities.

###### 2. Radiotherapy Facilities

Equipment (Existing)

Type of unit	Make	Model	Date Installed	Status

#### D. Teaching Programme (if being provided)

Speciality Course Duration Seats/Year Affiliation Existing/Proposed

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#### E. Research and Training Activities

1. On-going and proposed research activities in the institute.
2. Training activities and community-oriented programmes
3. Research Publications in the last two years (attach separate list, if any)

#### F: Request for Grant-in-aid

1. Equipment (Proposed )

Type of unit	Make	Model	Proposed date of installation	Estimated cost

#### 2. Plan for Construction: (if proposed)

Estimated cost of construction	Status of facility for housing the radiotherapy unit (Construction status, approval by BARC)

(If cost of equipment/construction is more than grant amount, details regarding source of revenue for the balance amount with adequate proof shall be furnished)

#### PART-II Action plan

The Action Plan should include plan for

- Construction of the building (if it has been requested for)
- Procurement of equipment
- Recruitment of personnel

A detailed time-schedule of activities to be undertaken starting from Day Zero should be provided whereby at the end of the construction activity, equipment and personnel will be in place.

Date \_\_\_\_\_

Name and Seal of Head of RCC/Institution

*Note: Attach separate sheets to provide information wherever necessary.*

#### Payment Details

Kindly indicate the name of officer, bank account number with name of the branch and address in whose name the cheque should be issued.

## Memorandum of Understanding

### [Between Regional Cancer Centre and Department of Health]

#### 1. Parties

The Department of Health implementing the National Cancer Control Programme and Regional Cancer Centre hereinafter referred to as 'designated agency' agree to cooperate in the implementation of Cancer control activities in the region.

The NCCP aims to improve cure rates among Cancer patients. To make the programme more effective, wider participation of health care providers in Cancer control is required.

The designated agency is an organization \_\_\_\_\_  
[insert one sentence about the organization's involvement in health].

#### 2. Objectives

The objectives of this MOU are:

- a. To identify and establish the roles and responsibilities of the partner in the organization and delivery of Cancer care.
- b. To provide preventive, diagnostic, treatment and palliative services for Cancer control following the NCCP strategy.
- c. To develop the capacity of health care workers to prevent and diagnose Cancer and provide palliative care and implement the NCCP.

#### 3. Terms, conditions, and specific services during the period of the MOU.

##### A. The Department of Health shall agree

- (i) To provide financial assistance towards construction for housing

the equipment & cancer wards and for purchase of equipment for Cancer care.

- (ii) To provide technical support in implementation of action plan.
- (iii) To provide technical support guidelines and updates (manuals, circulars, etc.) from the NCCP to the designated agency and re-view educational materials to be used.

##### B. The Designated agency (RCC) shall prepare an action plan to

- (i) Execute this project according to the NCCP policy outlined in the revised EFC memo.
- (ii) Undertake cancer treatment activities and participate in the District Cancer Control Programme and Decentralised NGO scheme.
- (iii) The RCC will extend cancer treatment facilities to all types of patients irrespective of caste, creed and religion.
- (iv) The RCC will work as nodal agency for the District Cancer Control Programme (DCCP) and Decentralised NGO scheme aimed at early detection and supportive services of cancer. Under this one district will be taken up for the programme, which will also be extended to 2-3 congruent districts to be continued over a period of 5 years. The manpower required would be provided by the RCC for which no additional permanent posts may be created. Requisite funds in this regard will be released directly to the RCC who would organize the activities, further release the money to other agencies wherever required and send the UC to this Department along with progress reports.
- (v) The RCC will prepare an action plan for development of infrastructure, indicating the equipment proposed to be purchased and the activities proposed to be undertaken. The Department of Health

will assess the action plan and decide on the quantum of grant to be released. The RCCs will utilize the grant and send the Utilisation Certificates to the Department of Health as per the provisions of the GFR. In view of the grant received, the RCC will be under obligation to extend the treatment facilities to the patients irrespective of caste, creed and religion, including free or subsidized treatment to the poor and needy patients as per the policy of the Central and State Govts.

- (vi) The RCCs will include representatives of the Department of Health in the Governing Body of the Institute.
- (vii) In order to ensure proper upkeep and maintenance of the equipment, for which the financial assistance has been granted, either of the two alternatives may be adopted by the RCC:
  - a. Levying of user charges by the grantee institutions or the State Govt. to generate internal resources.

OR

- b. State Govt. may bear the cost of maintenance of the equipment till the life of the equipment.
- C. It is undertaken that this institution is involved and would continue to be involved in the outreach activities under the District Cancer Control Programme and Decentralised NGO scheme, even after the discontinuation of financial assistance to it as Regional Cancer Centre (RCC), if designated as Nodal Agency for the programme**
- D. This MOU shall be valid for ten years from the date of signing the agreement.**

#### 4. Penalty clause

In case of violation of any of the provisions of this agreement by the RCC, the Ministry of Health will be at liberty to terminate the contract and the concerned RCC will have to refund the entire grant money along with interest.

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Signature of Officer from  
Department of Health and  
Family Welfare

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Signature of Head of  
Designated Agency (RCC)

## CERTIFICATE AND RECOMMENDATIONS OF THE STATE GOVERNMENT/ U.T. ADMINISTRATION

1. The Institution is a Govt. Hospital/ Institution under the State Government/ Union Territory (UT)
2. The State Government/UT has examined the audited accounts of the Institution and are satisfied that their financial position is sound and that all previous grants received by them from various sources, have been spent for the purpose for which the same were sanctioned.
3. The State Government/UT is satisfied about the soundness of the project and that the organisation is of proven capability for undertaking the project.
4. There is nothing against the organisation or its office bearers/staff that should disqualify them for receiving financial assistance from Government. The institution is not involved in any corrupt practices.
5. The information furnished by the Institution is correct.
6. The State Government/UT recommends the proposal for establishment of Regional Cancer Centre in the said Institution and for this proposal a sum of Rs.— crore is recommended for financial assistance under National Cancer Control Programme.

Signature, Name & Designation  
(To be signed by an officer of the State Govt/  
UT not below the rank of Deputy Secretary)

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## Guidelines for Existing Regional Cancer Centres

### Introduction

The National Cancer Control Programme established the Regional Cancer Centres (RCCs) to improve the availability of cancer treatment facilities. The main objective in establishing these centres was to provide cancer treatment facilities in addition to prevention activities across the country. The present scheme envisages enhancement of the capacity of the cancer treatment facilities in the existing RCCs.

### Provisions under the scheme

1. The financial assistance will be a one-time grant of upto Rs.3 crore.
2. The RCCs would be provided financial assistance for augmentation of treatment facilities. This may include:
  - a. Purchase of equipment related to cancer treatment and research
  - b. Construction for housing the equipment or expanding the cancer wards
- 3) A part of the grant, not exceeding 30% of the total grant may be used if required, for construction of building to house the radiotherapy equipments and patient care units.
- 4) When the proposal is only for equipment, the grant will be ap-

proved in principle and will be released after the equipment is ready for procurement.

- 5) If construction and equipment have been proposed, 30% grant amount will be released on approval of proposal. The remaining amount will be released when construction is almost complete (Roof/lintel should have been completed) and the equipment is **about to be procured**.

### **Role of the RCC**

- a. The RCCs should provide Comprehensive cancer treatment services.
- b. They will also be involved as a Nodal agency for implementation of DCCP and Decentralised NGO scheme and would continue to do so even after the discontinuation of financial assistance.
- c. The institution should undertake training of medical officers and health workers, in early detection and prevention of cancers and supportive care.
- d. A referral linkage should be developed between the RCC and the hospitals under the DCCP so as to ensure continuity in the treatment chain.
- e. There should be a mechanism in place to spread awareness in the community and health personnel regarding common cancers and their early detection/ prevention.
- f. Research activities in prevention and treatment of cancers should be carried out whenever possible.

### **Guidelines for submission of proposal**

1. #The Institute will have all the facilities needed to provide comprehensive cancer care. If these facilities are absent, an undertaking shall be given that all these facilities will be made available within five years of sanction of grant-in-aid.
2. The institute should have a BARC approved layout map and a letter of approval from BARC if radiotherapy installations are asked for.
3. #If the cost of the equipment requested for is more than the sanctioned grant amount, details regarding the source of revenue for the balance amount with adequate proof shall be furnished.
4. #The institute should give an undertaking that they would be involved as a Nodal agency for implementation of DCCP and decentralized NGO scheme for IEC activities and would continue to do so even after the discontinuation of financial assistance.
5. There should be a clear action plan for the proposed expansion of cancer treatment facilities. The Action Plan should indicate the time schedule of activities to be carried out in the institute and will include plan for
  - a. Construction of the building (if it has been requested for)
  - b. Procurement of equipment
  - c. Recruitment of personnel
6. The grant amount will be released to the institutions directly by the Ministry of Health and Family Welfare.
7. The grant will be deposited in a *Joint Savings Bank Account* in a nationalized bank to be operated by two individuals. The interest

accrued thereon shall be added to the account and will be reflected in the *Utilisation Certificate*

8. The RCCs will provide Utilisation Certificates for the grants that are provided as per the GFR. Procurement of equipment will be made after completion of all the codal formalities.
9. #The institute should ensure proper upkeep and maintenance of the equipment by levying user charges to generate internal resources. Otherwise, state government will furnish an undertaking to bear the cost of maintenance of the equipment.
10. Periodic monitoring and evaluation will be carried out to ensure satisfactory functioning of the RCC.

### **Procedure for application**

1. The application for the financial assistance for existing RCC should be made in the prescribed application format.
2. The State government should recommend the RCC as per the format attached with this document and should be signed by an officer not below the rank of Deputy Secretary.
3. The Action plan for upgrading the facilities and utilization of the grants should be enclosed with the application.

The applications should be addressed to Under Secretary (Cancer), Ministry of Health and Family Welfare, Nirman Bhavan, New Delhi 110011.

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# Appropriate documents/undertakings should accompany the application.

## **PROFORMA FOR RECOGNITION OF EXISTING RCC**

### **Technical Details**

#### **THIS FORM IS IN TWO PARTS**

- I. To collect detailed information about Institution, II. Action Plan

#### **PART-I**

##### **A: Details of the institute**

1. Name and address of Institute: (include all contact details)
2. Nature of the organization (Govt. Institution/Autonomous Body supported by Govt. etc.)
3. Number of years since it was established as an RCC :
4. Details of infrastructure: Own building/rented building

##### **5. Beds for cancer patients**

- i. Already available:
- ii. Proposed full strength:

##### **B: Information about services provided**

1. Districts and region covered by RCC (give details):
2. Population in the above districts and region:
3. Expected number of new cases of cancer per year:
4. Registered new cases in the last year
5. Total no. Of patients in the last year:
  - a. Outpatient dept.
  - b. Admissions:

6. **User charges levied:** Yes/No (if yes give details including the proportion of paying patients and free patients, payment details, etc.)
7. Number of cancer cases treated last year (Stage-wise distribution)

Surgery	Radiotherapy	Chemotherapy

## C: Facilities for Management of Cancer patients\*

### 1. Specialities:

Department	Existing	Proposed	Head of department	Name/Qualification/Experience

- \* The RCC should ensure the services of histopathology, cytology, haematology, biochemistry and radio-diagnosis. The comprehensive RCC consists of surgical oncology, radiotherapy, medical oncology and allied specialities.

### 2. Radiotherapy Facilities

Existing Equipment:

Type of unit	Make	Model	Date Installed	Status

## D. Teaching Programme (if being provided)

Speciality   Course   Duration   Seats/Year   Affiliation   Existing/Proposed

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## E. Research and Training Activities

- On-going and proposed research activities in the institute.
- Training activities and community-oriented programmes
- Research Publications in the last two years (attach separate list, if any)

## F. Request for grant-in-aid:

### 1. Proposed equipment:

Type of unit	Make	Model	Proposed date of installation	Estimated cost

### 2. Plan for Construction: (if proposed)

Estimated cost of construction	Status of facility for housing the radiotherapy unit (Construction status, approval by BARC)

*(If cost of equipment/construction is more than grant amount, details regarding source of revenue for the balance amount with adequate proof shall be furnished)*

## **PART-II Action plan**

The Action Plan should include plan for

- Construction of the building (if it has been requested for)
- Procurement of equipment
- Recruitment of personnel

A detailed scheme of time-bound activities starting from Day Zero should be mapped out whereby at the end of the construction activity, equipment and personnel will be in place.

Date \_\_\_\_\_

\_\_\_\_\_  
Name and Seal of Head of RCC/Institution

*Note: Attach separate sheets to provide information wherever necessary.*

## **Payment Details**

Kindly indicate the name of officer, bank account number with name of the branch and address in whose name the cheque should be issued.

## **Memorandum of Understanding**

### **[Between Regional Cancer Centre and Deptt. of Health]**

#### **1. Parties**

The Department of Health implementing the National Cancer Control Programme and Regional Cancer Centre, hereinafter referred to as 'designated agency' agree to cooperate in the implementation of Cancer control activities in the region.

The NCCP aims to improve cure rates among Cancer patients. To make the programme more effective, wider participation of health care providers in Cancer control is required.

The designated agency is an organization \_\_\_\_\_  
[insert one sentence about the organization's involvement in health].

#### **2. Objectives**

The objectives of this MOU are:

- a. To identify and establish the roles and responsibilities of the partner in the organization and delivery of Cancer care.
- b. To provide diagnosis and treatment services for Cancer control following the NCCP strategy.
- c. To develop the capacity of health care workers to diagnose and treat Cancer and implement the NCCP.

### **3. Terms, conditions, and specific services during the period of the MOU.**

#### **A. The Department of Health shall**

- (i) Provide financial assistance towards construction for housing the equipments & cancer wards and for purchase of equipments for Cancer care.
- (ii) Provide the technical support in implementation of action plan.
- (iii) Provide technical support guidelines and updates (manuals, circulars, etc.) from the NCCP to the designated agency and review educational materials to be used.

#### **B. The Designated agency (RCC) shall prepare an action plan to**

- (i) Execute this project according to the NCCP policy outlined in the revised EFC memo.
- (ii) Under-take cancer treatment activities, participate in the District Cancer Control Programme and Decentralised NGO scheme.
- (iii) The RCC will extend cancer treatment facilities to all types of patients irrespective of caste, creed and religion.
- (iv) The RCC will work as nodal agency for the District Cancer Control Programme (DCCP) and Decentralised NGO scheme aimed at early detection of cancer. Under this one district will be taken up for the programme, which will also be extended to 2-3 congruent districts to be continued over a period of 5 years. The manpower required would be provided by the RCC for which no additional permanent posts may be created. Requisite funds in this regard will be released directly to the RCC

who would organize the activities, further release the money to other agencies wherever required and send the UC to this Department of Health along with progress reports.

- (v) The RCC will prepare an action plan for development of infrastructure, indicating the equipment proposed to be purchased and the activities proposed to be undertaken. The Department of Health will assess the action plan and decide on the quantum of grant to be released. The RCCs will utilize the grant and send the Utilisation Certificates to the Department of Health as per the provisions of the GFR. In view of the grant received, the RCC will be under obligation to extend the treatment facilities to the patients irrespective of caste, creed and religion, including free or subsidized treatment to the poor and needy patients as per the policy of the Central and State Governments.
  - (vi) The RCCs will include representatives of the Department of Health in the Governing Body of the Institute.
  - (vii) In order to ensure proper upkeep and maintenance of the equipment, for which the financial assistance has been granted, either of the two alternatives may be adopted by the RCC:
    - a. Levying of user charges by the grantee institutions or the State Govt. to generate internal resources.
- OR
- b. State Govt. may bear the cost of maintenance of the equipment till the life of the equipment.
- C. It is undertaken that this institution is involved and would continue to be involved in the outreach activities under the District**

Cancer Control Programme and Decentralised NGO scheme, even after the discontinuation of financial assistance to it as Regional Cancer Centre (RCC), if designated as nodal agency for the programme.

**D This MOU shall be valid for ten years from the date of signing the agreement.**

#### **4. Penalty clause**

In case of violation of any of the provisions of this agreement by the RCC, the Ministry of Health will be at liberty to terminate the contract and the concerned RCC will have to refund the entire grant money along with interest.

\_\_\_\_\_  
Signature of the Officer  
from Department of Health  
and Family Welfare

\_\_\_\_\_  
Signature of the Head of  
Designated Agency (RCC)

## **CERTIFICATE AND RECOMMENDATIONS OF THE STATE GOVERNMENT/ U.T. ADMINISTRATION**

No.....Station and date.....Government of .....

Department of .....

1. The Institution is a Govt. Hospital/ Institution under the State Government/ Union Territory (UT)
2. The State Government/UT has examined the audited accounts of the Institution and are satisfied that their financial position is sound and that all previous grants received by them from various sources, have been spent for the purpose for which the same were sanctioned.
3. The State Government/UT is satisfied about the soundness of the project and that the organisation is of proven capability for undertaking the project.
4. There is nothing against the organisation or its office bearers/staff, which should disqualify them for receiving financial assistance from Government. The institution is not involved in any corrupt practices.
5. The information furnished by the Institution is correct.
6. The State-Government/UT recommends the proposal for continued recognition as Regional Cancer Centre and for this proposal a sum of Rs.——— crore is recommended for financial assistance under National Cancer Control Programme.

Signature, Name & Designation

(To be signed by an officer of the State Govt/ UT  
not below the rank of Deputy Secretary)

## Guidelines for Development of Oncology Wing

### Introduction

The scheme of development of Oncology wing has been in operation for more than a decade under the National Cancer Control Programme. Government Medical Colleges were provided financial assistance to develop Oncology Wing.

As per the revised scheme, the scope has been widened to include government hospitals not attached to medical colleges as well. *The scheme is implemented with the objective of reducing the geographical gaps in cancer treatment facilities in the country by establishing cancer treatment centres in areas where these are deficient.*

### Provisions under the scheme

1. Priority for sanction of grant-in-aid would be given to institutions located in areas where there are no treatment facilities. First-time grantees will be given priority over institutions that have already received grants earlier.
2. Institutions, which had earlier availed of the grant at the rates prevailing then, would be eligible to get the differential amount between the grant received earlier and the grant admissible under the revised scheme.

3. Financial Provisions:
  - a. The selected government institute will be provided one-time financial assistance of Rs.3 crore for procurement of any equipment from the list appended with the document.
  - b. A part of the grant, not exceeding 30% of the total grant may be used if required, for construction of building to house the radiotherapy equipments, patient care units, etc.

### Eligibility Criteria

- a. The selected hospital will be a Government hospital either under the State government or Central Government.
- b. The hospital should have a minimum bed-strength of 100 with major specialities like Surgery, Gynaecology, Medicine and ENT.
- c. The hospital should have the requisite manpower, necessary equipments for surgical care and the support staff necessary for providing comprehensive cancer care.
- d. For the procurement of radiotherapy equipment, the applicant institution should have a Radiotherapist and Medical physicist in place. (Proof of the same to be enclosed). *If there is no existing post of Radiotherapist or Medical physicist, the required formalities for recruitment, like sanctioning of post by the government or provision for recruitment on contract basis should have been initiated. (Proof of the same to be enclosed)*
- e. The State Government should recommend the institute for financial assistance under the scheme.
- f. # If the institute does not have all the facilities required for provid-

ing comprehensive cancer care at the time of seeking the grant-in-aid, it should give an undertaking that all the required facilities would be made available within five years of the sanction of grant.

### **Guidelines for submitting the proposal**

- a. The institute should have a letter of approval from BARC and BARC approved layout map in case of a request for radiotherapy equipment.
- b. # The institute should give an undertaking that it would be involved as a Nodal agency for implementation of DCCP and decentralized NGO scheme for IEC activities and would continue to do so even after the discontinuation of financial assistance.
- c. # If the cost of the equipment requested for is more than the sanctioned grant amount, details regarding the source of revenue for the balance amount with adequate proof shall have to be furnished
- d. The grant amount will be released after the submission of detailed action plan indicating the time-schedule for the activities to be undertaken by the institution. The Action Plan should include plan for
  - i. Construction of the building (if it has been requested for)
  - ii. Procurement of equipment
  - iii. Recruitment of personnel
- e. The grant amount will be released to the institution directly and the head of the Institution will sign the Memorandum of Understanding. If the institution cannot receive the funds directly or sign the MOU, the State Government should undertake to do the needful.
- f. # The institute should ensure proper upkeep and maintenance of

the equipment by either levying of user charges to generate internal resources or an undertaking by the state government to bear the cost of maintenance of the equipment.

- g. The grant will be deposited in a *Joint Savings Bank Account* in a nationalized bank to be operated by two individuals of the institution. The interest accrued thereon shall be added to the account and will be reflected in the *Utilisation Certificate*. The Institutions will provide *Utilisation Certificates* for the grants.
- h. The grant will be used only for the intended purpose.

### **Procedure for Application**

- a. The application for the oncology grant should be made in the prescribed application format, copy of which is attached.
- b. The State government should forward the proposal with the necessary undertakings as discussed earlier and recommendations.
- c. The recommendation letter should be on a prescribed format enclosed with this document and should be signed by an Officer not below the rank of Deputy Secretary in the Dept. of Health and Family Welfare. The applications should be addressed to Under Secretary (Cancer), Ministry of Health and Family Welfare, Nirman Bhavan, New Delhi 110011.

*In exceptional cases where the technical committee feels a compelling need for a cancer treatment facility to cover the geographical gap, even smaller hospitals that have hitherto not provided cancer treatment or may not be fully equipped with all the required facilities may be selected for support to be developed as an Oncology wing.*

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# Appropriate undertakings/documents should be enclosed with the application.

### \* List of Equipment under the scheme

1. Cobalt Unit
2. Linear accelerator
3. Mammography Machine
4. Brachytherapy machine
5. Radiotherapy Simulator
6. Treatment Planning System
7. Mould Room Equipment
8. CT Scan Machine
9. Radiation Monitoring Equipment
10. Ultrasound equipment
11. Fibre Optic Endoscopes
12. X-ray machine
13. Gamma camera and other Nuclear medicine equipment
14. Pathology and Cytology microscope and other related equipment
15. Equipment for Operation theatre/ Anaesthesia

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\* The above list is only indicative.

### A. Details of the Institute

1. Name of the Institution:
2. Address for Correspondence:
3. Nature of the organisation: (Govt. Institution/ Autonomous Body supported by Govt. etc.)
4. Year of establishment:
5. Total number of beds:
6. Total number of cancer beds:  
(if cancer treatment facility is already available)
7. Average OPD per day:
8. Average admissions per month:

### B. Infrastructure:

1. Details of Existing diagnostic and treatment facilities like Operation theatre, laboratory, etc.
2. Building for housing radiotherapy equipment: Already existing/ under construction/ BARC approved layout map ready
3. Details of Existing Radiotherapy Equipment (including accessories):  
(if cancer treatment facility is already available)

### C. Manpower:

Availability of qualified staff for providing cancer treatment:

Name	Designation	Qualification	Years of experience	Remarks

(Kindly provide details of all the staff including Radiotherapist/ Physicist, if present.)

### D. Services:

1. Number of cancer cases treated last year (if cancer treatment facility is already available):

Surgery	Radiotherapy	Chemotherapy

2. Number of surgeries in the last year: (Department-wise)

Department	Major	Minor

### E. Details of grants received, if any, under the NCCP:

Year of grant (Attach copy of sanction letter)	Amount received	Details of Equipment procured

### F. Proposed procurement of equipment under the NCCP:

Type of unit	Make	Model	Estimated Cost of unit/ source

(If the cost of the equipment requested for is more than the sanctioned grant amount, details regarding the source of revenue for the balance amount with adequate proof shall be furnished)

### G. Plan for Construction: (if proposed)

Estimated cost of construction	Status of facility for housing the radiotherapy unit (Construction status, approval by BARC)

### H. Include The Action Plan for:

- Construction of the building (if it has been requested for)
- Procurement of equipment
- Recruitment of personnel

Payment Details:

Kindly indicate the name of officer, bank account number with name of the branch and address in whose name the cheque should be issued.

**CERTIFICATE AND RECOMMENDATIONS OF THE STATE  
GOVERNMENT/U.T. ADMINISTRATION**

No..... Station and date..... Government of .....  
Department of .....

1. The Institution is a Govt. Hospital/ Institution under the State Government/ Union Territory (UT)
2. The State Government/UT has examined the audited accounts of the Institution and are satisfied that their financial position is sound and that all previous grants received by them from various sources, have been spent for the purpose for which the same were sanctioned.
3. The State Government/UT is satisfied about the soundness of the project and that the organisation is of proven capability for undertaking the project.
4. There is nothing against the organisation or its office bearers/staff, which should disqualify them for receiving financial assistance from Government. The institution is not involved in any corrupt practices.
5. The information furnished by the Institution is correct.
6. The State-Government/UT recommends the proposal for establishment of Oncology Wing in the said institution and for this proposal a sum of Rs.——— crore is recommended for financial assistance under National Cancer Control Programme.

Signature, Name & Designation

(To be signed by an officer of the State Govt/  
UT not below the rank of Deputy Secretary)

**Memorandum of Understanding**

**1. Parties**

The Department of Health implementing the National Cancer Control Programme and grantee Government Institution hereinafter referred to as 'designated agency' agree to cooperate in the implementation of Cancer control activities in the region.

The NCCP aims to improve cure rates among Cancer patients. To make the programme more effective, wider participation of health care providers in Cancer control is required.

The designated agency is an organization \_\_\_\_\_  
[insert one sentence about the organization's involvement in health].

**2. Objectives**

The objectives of this MOU are:

- a. Identify and establish the roles and responsibilities of the partner in the organization and delivery of Cancer care.
- b. Provide diagnosis and treatment services for Cancer control following the NCCP strategy.
- c. To develop the capacity of health care workers to diagnose and treat Cancer and implement the NCCP.

**3. Terms, conditions, and specific services during the period of the MOU.**

**A. The Department of Health shall**

- (i) Provide financial assistance towards construction for housing the equipments & cancer wards and for purchase of equipments for Cancer care.

- (ii) Provide the technical support in implementation of action plan.
- (iii) Provide technical support guidelines and updates (manuals, circulars, etc.) from the NCCP to the designated agency and review educational materials to be used.

**B. The Designated agency shall**

- (i) Execute this project according to the NCCP policy outlined in the revised EFC memo.
- (ii) Under-take cancer treatment activities, Cancer Control Programme and Decentralised NGO scheme, conduct activities for health education, prevention and early detection as well as participate in the District Cancer Control Programme scheme and Decentralised NGO scheme, as when and required.
- (iii) The Institution will extend cancer treatment facilities to all types of patients irrespective of caste, creed and religion.
- (iv) In order to ensure proper upkeep and maintenance of the equipment, for which the financial assistance has been granted, either of the two alternatives may be adopted by the Institution:
  - a. Levying of user charges by the grantee institutions or the State Govt. to generate internal resources. OR
  - b. State Govt. may bear the cost of maintenance of the equipment till the life of the equipment.

**C. It is undertaken that this institution is involved and would continue to be involved in the outreach activities under the District Cancer Control Programme and Decentralised NGO scheme, even after the discontinuation of financial assistance to it, if designated as nodal agency for the programme.**

**D. This MOU shall be valid for ten years from the date of signing the agreement.**

**4. Penalty clause**

In case of violation of any of the provisions of this agreement by the grantee Institution, the Ministry of Health will be at liberty to terminate the contract and the concerned Institution will have to refund the entire grant money along with interest.

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Signature of Officer of  
Deptt. of Health and  
Family Welfare

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Signature of Head of  
Designated Agency

## Guidelines for District Cancer Control Programme

**The objectives of the National Cancer Control Programme are:** a. Prevention of cancer b. Early detection c. Prompt treatment d. Palliation of patients in advanced cases. There has to be an interface with the community and the people for any programme to succeed. Districts provide the ideal platform for integration of comprehensive control of cancer and other Non-Communicable Diseases with the general health care delivery system.

The District Cancer Control Programme (DCCP) has been designed with a focus on:

- a. Prevention of cancers,
- b. Early detection,
- c. Minimal treatment of common cancers and
- d. Provision of supportive care in the district.

This may be achieved through increased awareness about cancers among the health professionals and the community and capacity building at district level.

### Provisions under the scheme

1. The state government will identify a Nodal Agency for implementation of DCCP
2. The Nodal Agency will implement the DCCP in two or three con-

gruent districts identified by the State Government.

3. Regional Cancer Centre (RCC) or the Government Medical College or Government hospital with Radiotherapy facility may be designated as the Nodal Agency.
4. DCCP will be implemented through the existing health service by the Nodal Agency.
5. Financial provisions:
  - a. Rs.17 lakhs as recurring expenditure per year with provision for manpower deployment, IEC, training, etc.
  - b. Rs. Five lakhs as non-recurring expenditure for the first year only for augmentation of diagnostic facilities.

(An indicative list of the proposed expenditure under the DCCP has been enclosed with the document.)

6. The appointments in DCCP will be on contractual basis. No permanent post will be created for the purpose.

### Guidelines for submitting proposal for implementation of DCCP

1. The State Government will submit the proposal in the prescribed format.
2. The State Government will identify the Nodal Agency and also the Nodal Officer who will be the Joint signatory for all financial transactions along with the head of the organization or his/ her nominee.
3. The State Government will also identify the Districts in which DCCP will be implemented.

4. The State Government will ensure that the concerned district hospitals will extend all cooperation to the Nodal Agency for the implementation of DCCP.

### **Criteria for selection of Nodal Agency**

1. The Nodal Agency can be an RCC or Medical College or Government Hospital with Radiotherapy facility (Oncology Wing) in addition to the facilities for diagnosis, treatment and palliation of cancers.
2. The Nodal Agency will undertake activities for increasing awareness regarding cancers and prevention of cancers among community and health professionals through IEC and training.
3. The Nodal Agency will undertake activities for early detection of cancers through capacity building and technical assistance to the other health care institutions like Primary Health Centres, Rural Hospitals and District Hospitals
4. # The State Government will give an undertaking that the scheme will be adopted by the state and continued after the cessation of the assistance from the NCCP.
5. The certification of Nodal Agency should be made by an Officer in the State Government not below the rank of Deputy Secretary.

### **Role of Nodal Agency**

#### **1. The Nodal Agency will:**

- a. Implement the DCCP in two or three congruent districts identified by the State Government.

- b. Undertake cancer control activities in the districts through District Hospitals or any other government hospitals.
- c. Act as the referral centre for advanced treatment and palliation of cancers detected in the district.
- d. Impart training to health professionals in prevention, early detection and palliation of cancers at peripheral levels.
- e. Promote IEC activities in the districts.
- f. Through the district hospitals
  - i. Augment facilities for early detection at district level
  - ii. Arrange activities for early detection, and awareness generation
  - iii. Create referral linkages between sub-district level health facilities and district hospitals and Nodal Agency
- g. Monitor all the DCCP activities.
- h. Nodal Agency will have the flexibility in the selection of equipment and personnel depending on the requirements of each district.

### **Funding Mechanism**

1. The grant will be released directly to the Nodal Agency.
2. The grant will be deposited in a *Joint Savings Bank Account* in a nationalized bank. The interest accrued thereon shall be added to the account and will be reflected in the *Utilisation Certificate*
3. The Nodal Agency will provide *Utilisation Certificates* for the grants.

## List of equipment under the DCCP\*

### **Obstetrics equipment** – For example –

Specula (Sim's and Cusco's)

Spatula

Colposcope

### **ENT equipment** – For example –

Nasal and aural specula

Tongue depressors

Bull's lamp and Head mirror

Laryngeal mirrors

### **Surgical equipment** – For example –

Biopsy forceps

Cyrocautery

Suction machine

Other OT equipment

### **Laboratory equipment** – For example –

Microscope

Glassware

Reagents

### **Diagnostic equipment** – For example –

X ray machine

Ultrasound machine

### **General equipment** – For example –

Examination couch

BP apparatus

Computers and accessories

\*The above list is only indicative and is meant for the purpose of augmenting the diagnostic facilities at the district level. The Nodal Agency can decide on the equipment needed to augment cancer facilities within the allocated budget.

## Format for submission of proposal for District Cancer Control programme by State Government

### **A. General Information:**

Name and Designation of the Officer submitting the proposal:

Postal address:

Phone:

Fax:

Email:

### **B: Details of the Nodal Agency:**

1. Name of the Nodal Agency:
2. Name of the Officer in-charge of the programme with contact details:
3. Year of establishment of the institution:
4. Year of establishment as RCC/ Oncology wing:
5. Total number of beds:
6. Total number of beds for cancer (if not an RCC):

7. Details of cancer control activities in the last one year:
- a. No. of camps held for early detection:
    - i. No. of people examined:
    - ii. No. of cases detected:
    - iii. No. of cases treated at the Nodal Agency:
  - b. IEC activities:
    - i. IEC material produced:
      - Number
      - Type:
    - ii. Awareness camps:
      - Number
      - Approximate number of people who attended these camps
    - iii. Other activities:
  - c. Involvement of other hospitals/ health centres / NGOs in the region in cancer control activities: yes/ no
  - d. If yes, give names
8. Details of grants received, under the NCCP:

Year of grant	Amount received

**C. Names of the districts that are proposed to be covered under the District Cancer Control programme:**

Name of the Districts selected:	District I	District II	District III
Population of the districts:			
Cancer treatment facilities in the districts:			
District / Government hospitals in the districts:			

**D: Action Plan:**

A detailed scheme of plan indicating the time-schedule of activities to be undertaken by the institution will be provided.

**E: Payment Details:**

Kindly indicate the name of officer in whose name the cheque should be issued, along with the bank account number with name of the branch and address.

*The completed applications should be addressed to Under Secretary (Cancer), Ministry of Health and Family Welfare, Nirman Bhavan, New Delhi 110011.*

## **CERTIFICATE AND RECOMMENDATIONS OF THE STATE GOVERNMENT/ U.T. ADMINISTRATION**

No.....Station and date.....Government of .....  
Department of .....

1. The Institution is a Govt. Hospital/ Institution under the State Government/ Union Territory (UT)
2. The State Government/UT has examined the audited accounts of the Institution and is satisfied that their financial position is sound and that all previous grants received by them from various sources, have been spent for the purpose for which the same were sanctioned.
3. The State Government/UT is satisfied about the soundness of the project and the capability of the organisation for undertaking the project.
4. There is nothing against the organisation or its office bearers/ staff, which should disqualify them from receiving financial assistance from Government. The institution is not involved in any corrupt practices.
5. The information furnished by the Institution is correct.
6. The State Government/ UT recommends the proposal for implementation of DCCP by the said Institution and the request for release of financial assistance for this proposal for Rs.— crore is recommended for financial assistance under National Cancer Control Programme.

Signature, Name & Designation

(To be signed by an officer of the State Govt./UT not  
below the rank of Deputy Secretary.)

## **Undertaking by the Nodal Agency for implementation of District Cancer Control programme in the district selected:**

1. The Nodal Agency hereby confirms its desire to undertake the implementation of DCCP activities as outlined in the MOU.
2. The Nodal Agency will undertake cancer prevention and early detection activities any one district.
3. The Nodal Agency will expand these activities in 1 or 2 congruent districts over the following years.
4. The Nodal Agency will provide the necessary treatment and support services for all the cancers detected in the district.
5. The Nodal Agency will also organise training for creating awareness in the community and for health professionals.
6. The Nodal Agency will monitor the activities of the DCCP

Signature, Name & Designation

(To be signed by the Director/ Head of the Nodal Agency)

## Memorandum of Understanding

### 1. Parties

The Department of Health implementing the National Cancer Control Programme and grantee Government Institution hereinafter referred to as 'designated agency' agree to cooperate in the implementation of Cancer control activities in the districts.

The NCCP aims to improve cure rates among Cancer patients. To make the programme more effective, wider participation of health care providers in Cancer control is required.

The designated Nodal Agency is an organization \_\_\_\_\_  
[insert one sentence about the organization's involvement in health].

### 2. Period of Cooperation

The objectives of this MOU are:

- a. To identify and establish the roles and responsibilities of the partner in the organization and delivery of Cancer care.
- b. To provide diagnosis and treatment services for Cancer control following the NCCP strategy.
- c. To develop the capacity of health care workers to diagnose and treat Cancer and implement the NCCP.

### 3. Terms, conditions, and specific services during the period of the MOU.

#### A. The Department of Health shall agree

- (i) To provide financial assistance towards purchase of equipments for DCCP.

- (ii) To provide the technical support in implementation of action plan.
- (iii) To provide technical support guidelines and updates (manuals, circulars, etc.) from the NCCP to the designated agency and review educational materials to be used.

#### B. The Designated agency shall

- (i) Execute this project according to the NCCP policy outlined in the revised EFC memo.
- (ii) Under-take cancer treatment activities, conduct activities for health education, augmentation of capacity for prevention and early detection in the districts.
- (iii) The Institution will extend cancer treatment facilities to all types of patients irrespective of caste, creed and religion.
- (iv) # In order to ensure proper upkeep and maintenance of the equipment, for which the financial assistance has been granted, either of the two alternatives may be adopted by the Institution:
  - a. Levying of user charges by the grantee institutions or the State Govt. to generate internal resources.OR
  - b. State Govt. may bear the cost of maintenance of the equipment till the life of the equipment.

#### C. This MOU shall be valid for ten years from the date of signing the agreement.

#### 4. Penalty clause

In case of violation of any of the provisions of this agreement by the grantee Institution, the Ministry of Health and Family Welfare will be at liberty to terminate the contract and the concerned Institution will have to refund the entire grant money along with interest.

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Signature of the Officer  
of Dept. of Health and  
Family Welfare

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Signature of Officer-in-charge  
of Designated Agency

#### Proposed Expenditure on DCCP per year

Expenditure	Amount (Rs. in lakhs)
<b>Recurring</b>	
Manpower	2.5
Consumables, medicines and contingencies	4.5
IEC activities	7.0
Training of health personnel	3.0
Total	17.0
<b>Non-recurring (for first year only)</b>	
Equipment	5.0
<b>Grand total</b>	<b>Rs.22.0 lakhs for first year</b>

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# Appropriate undertakings/documents should accompany the application.

## Guidelines for Decentralised NGO Scheme

**The objectives of the National Cancer Control Programme are:** a. Prevention b. Early detection c. Prompt treatment d. Palliation of cancer. It is necessary to have an interface with the community and the people for any disease control activities. Non-Government Organisations (NGOs), in view of their better reach at the grass root level are important agencies, which may assist in these activities. The NGO scheme is meant to extend financial assistance to NGOs working for cancer.

### Provisions under the scheme

- a. The NGO scheme will be implemented through the Nodal Agency
- b. The Nodal Agency will be a Regional Cancer Centre (RCC) or a Government Medical College with Radiotherapy facilities or Government Hospital with Radiotherapy facility.
- c. State Government will recommend the names of the Nodal Agency (s).
- d. The Ministry of Health and Family Welfare (MOHFW), GOI will issue an advertisement detailing the scheme and intimating the NGOs to approach the respective Agencies in the regions with proposals for the implementation of the scheme. (List of the Nodal Agencies will be provided on the official website of MOHFW, [www.mohfw.nic.in](http://www.mohfw.nic.in))

- e. The identified Nodal Agency will select NGOs as per the prescribed criteria.
- f. The Nodal Agency will then submit proposal for request of grants based on the proposals from the selected NGOs.
- g. Periodic monitoring will be carried out by the MOHFW and Nodal Agency in order to ensure proper functioning of the scheme and suggest modifications if necessary.

### Role of the Nodal Agency

1. The Nodal Agency will select the NGOs for implementation of the NGO scheme on the basis of following criteria:
  - a. The NGOs should have worked in the field of health for 2 years or more. (Proof to be enclosed)
  - b. The NGO should be willing to undertake all the activities as envisaged in the role of the NGO under the scheme, at least for a period of 2 years.
  - c. The NGO should submit an *Action Plan* outlining the activities including the proposed number of camps and the geographical area to be covered.
  - d. The NGO should clearly indicate the health personnel to be involved in each camp and the details of the area in which the camps will be held.
2. The Nodal Agency will:
  - a. Submit the list of NGOs selected for the implementation of the scheme
  - b. Submit the list of the proposed number of camps
  - c. Provide the necessary support if required for organization of

- camps
  - d. Provide referral services to the cases of cancer detected in camps
  - e. Monitor the activities of the NGO.
3. While selecting an NGO, priority may be given to NGOs working in the districts covered by DCCP
  4. The Nodal Agency will submit a proposal with the estimated cost for the release of grants from the centre as per the action plan after ensuring that the NGO is capable of effective implementation of the scheme.
  5. The Nodal Agency will release funds to the organization/s in installments as per the action plan.
  6. The Nodal Agency will give an undertaking to continue the implementation of the NGO scheme even after the discontinuation of financial assistance.

### **Role of the NGO**

The NGO will implement the activities by means of organizing of camps at periodic intervals in a well-defined geographical area. Geographical area will be decided on the basis of the area of activity of the NGO. The interval at which the camps will be held will be decided on the basis of capability of the NGO.

1. The camps will be held in rural areas or at work places like factories, etc.
2. The Nodal Agency will be informed about the camp in advance.
3. Community volunteers from the region where the camp will be held

will be trained with technical assistance from the Nodal Agency. These volunteers will sensitize the community a few weeks prior to the camp regarding the warning signs of cancer. People with such warning signs will be encouraged to attend these camps. With this approach the camps will be able to achieve the objective of detection of cancers at an early stage.

4. Each camp should cater to a minimum of 100 patients
5. For every 50 patients expected, one medical officer should be available in the camp.
6. A card for each patient should be prepared indicating the details regarding the patient, diagnosis, investigations and suggested management/ follow-up.
7. Appropriate and prompt referral should be ensured for suspected cases.
8. IEC activities should also be incorporated into the camps.
9. The NGO may also use suitable innovative measures to improve the effectiveness of the camp.

## Tentative cost of one camp\*

Activity	Amount (Rs.)
Honorarium for 2 doctors @ Rs.500/- each	1000/-
Honorarium for 2 nurses @ Rs.250/- each	500/-
Honorarium for 1 Medical Social Worker	200/-
Honorarium for one Gr.D staff	100/-
Travel (including hiring of vehicle)	1000/-
Printing and use of IEC materials	1200/-
Hiring of space, equipment	1000/-
Consumables/ disposables	2000/-
Contingency	1000/-
<b>Grand Total</b>	<b>8000/-</b>

\* This is an indicative list and appropriate modifications within the existing budget may be made by the concerned agency with the concurrence of the Nodal Agency.

## Format for NGO for submission of proposal for financial assistance under the Decentralised NGO scheme

(to be submitted to the Nodal Agency)

1. Details of the Organisation:
  - a. Name of the organization:
  - b. Address for correspondence: (include all details including email, fax no.)
  - c. Name of the Nodal Officer in the NGO:
  - d. Year of establishment:
  - e. No. of years of work in the field of health:
  - f. Specific areas of work in health (non-communicable diseases, communicable diseases, maternal and child health, etc.) Details are to be provided.
  - g. Activities undertaken in the field of health: (IEC, diagnosis, prevention, etc.)
2. Proposed activities:
  - a. Geographical area for the proposed activities:
  - b. No. of camps proposed:
  - c. Details of activities proposed for each camp:
  - d. Proposed follow-up mechanism:
3. Financial outlay per camp: (Details of cost break-up)
4. Plan of Action for the proposed camps: (Time-bound activity plan)

Signature

(To be signed by the Head of the NGO)

**Format for submission of proposal by the Nodal Agency for financial assistance under the Decentralised NGO scheme**

1. Details of the Organisation:
  - a. Name of the organization:
  - b. Address for correspondence:
  - c. Name of the Nodal Officer:
  - d. Grant received by the Institute in the last year under the NCCP:
2. Details of the NGOs:
  - a. Names of the NGOs selected for the decentralized NGO scheme
  - b. No. of camps to be held by the NGOs: (include a table showing the proposed number of camps by different NGOs)

Name of the NGO	No. of camps proposed in one year	Financial Outlay

3. Total Financial outlay for the scheme:

**Memorandum of Understanding**

**[Between Nodal Agency and Deptt. of Health]**

**1. Parties**

The Department of Health implementing the National Cancer Control Programme and Nodal Agency agree to cooperate in the implementation of Cancer control activities

The NCCP aims at cancer control through prevention and early detection activities in addition to treatment of cancers.

The Nodal Agency is an organization \_\_\_\_\_ [insert one sentence about the organization’s involvement in health].

**2. Period of Cooperation**

The objectives of this MOU are:

- a. To identify and establish the roles and responsibilities of the partner in the organization and delivery of Cancer care.
- b. To provide diagnosis and treatment services for Cancer cases following the NCCP strategy.
- c. To involve the NGOs in cancer control activities through prevention and early detection activities.

**3. Terms, conditions and specific services during the period of the MOU.**

**A. The Department of Health shall agree**

- i. To provide financial assistance towards implementation of the decentralised NGO scheme.
- ii. To provide the technical support in implementation of action plan.

- iii. Provide technical support guidelines and updates (manuals, circulars, etc.) from the NCCP to the designated agency and review educational materials to be used.
- B. The Nodal Agency shall prepare an action plan to operationalise the decentralised NGO scheme.
- C. The Nodal Agency affirms to:
  - 1. Execute this project according to the NCCP policy outlined in the revised EFC memo.
  - 2. Under-take cancer treatment activities and follow-up services for cases detected through the NGOs.
  - 3. Extend cancer treatment facilities to all types of patients irrespective of the caste, creed and religion.
- D. It is undertaken that this institution is involved and would continue to be involved in the outreach activities under the Decentralised NGO scheme, even after the discontinuation of financial assistance to it as Nodal Agency.
- E. This MOU shall be valid for ten years from the date of signing the agreement.

**4. Penalty clause**

In case of violation of any of the provisions of this agreement by the Nodal Agency, the Ministry of Health will be at liberty to terminate the contract and the concerned Nodal agency will have to refund the entire grant money along with interest.

\_\_\_\_\_  
Signature of officer of the  
Deptt. of Health

\_\_\_\_\_  
Signature of the Head of the  
Institute of Nodal Agency

**CERTIFICATE AND RECOMMENDATIONS OF THE STATE GOVERNMENT/  
U.T. ADMINISTRATION**

No..... Station and date..... Government of .....  
Department of .....

1. The Institution is a Regional Cancer Centre/ Govt. Hospital with Oncology Wing under the State Government.
2. The State Government/UT has examined the audited accounts of the Institution and are satisfied that their financial position is sound and that all pervious grants received by them from various sources, have been spent for the purpose for which the same were sanctioned.
3. The State Government/UT is satisfied about the soundness of the project and that the organisation is of proven capability for undertaking the project.
4. There is nothing against the organisation or its office bearers/staff, which should disqualify them for receiving financial assistance from Government. The institution is not involved in any corrupt practices.
5. The information furnished by the Institution is correct.
6. The State-Government undertakes to take over the project after the discontinuation of financial assistance from the Government of India.

Signature, Name & Designation  
(To be signed by an officer of the State Govt/UT  
not below the rank of Deputy Secretary)

## **Undertaking by the Nodal Agency for implementation of Decentralised NGO scheme**

1. The Nodal Agency hereby confirms its desire to undertake the implementation of Decentralised NGO scheme as outlined in the MOU.
2. The Nodal Agency will provide the necessary technical support to the NGOs in conducting the camps.
3. The Nodal Agency will provide the necessary treatment and palliation for all the cancers detected in the camps
4. The Nodal Agency will monitor the activities of the Decentralised NGO scheme

Signature, Name & Designation  
(To be signed by the Director/ Head  
of the Nodal Agency)