1/3621382/2023

F. No. Z-28016/03/2021-AHS(Pt.)

भारतसरकार/ GOVT. OF INDIA

MINISTRY OF HEALTH & FAMILY WELFARE

स्वास्थ्यएवंपरिवारकल्याणमंत्रालय

(एएचएसअनुभाग)/(AHS SECTION)

Nirman Bhawan, New Delhi

Dated 11-10-2023

To,

Directorate of Medical Education of All State Government/UTs

Subject: Request for sharing details of institutions offering courses on Allied Health Professions.

Sir/Madam,

I am directed to refer toprevious letter dated 11.08.2023 (copy enclosed) from Additional Secretary and Chairperson(ICAHP) wherein it was requesed to furnish the available details of allied and healthcare institutions (earstwhile called as paramedical institutes) in the concerned state/UT. However, the sought information is awaited so far.

2. It is, therefore, again requested to furnish consolidated desired information from your state/UT to this Ministry in the prescribed format (Excel form) as enclosed. You are also requested to appoint a Nodal Officer from the state/UT for further communication with Ministry, in this regard.

Yours faithfully

Encl: as above

Phone: 011-23062205

REMINDER

F. No. P-16016/19/20222-AHS(Pt-1)
Government of India
Ministry of Health and Family Welfare
Department of Health and Family Welfare
ICAHP

Nirman Bhawan, New Delhi Dated 11-08-2023

To,

Directorate of Medical Education of All State Governments/UTs

Subject: Request for nodal officers and sharing details of institutions offering courses on Allied Health Professions.

Maam/Sir,

I am directed to refer to DO letter dated 04.08.2023 (copy enclosed) from Additional Secretary and Chairperson(ICAHP) wherein it was requesed to furnish the details of allied and healthcare institutions in the concerned state/UT. It was also requested to appoint nodal officers for the same. However, the sought information is awaited so far.

2. It is, therefore, again requested to furnish consolidated desired information from your state to the Interim Commission for Allied and Healthcare Professions(icahp.india@gmail.com) in the prescribed format (Excel form)as enclosed. You are also requested to appoint a Nodal Officer from the state for further communication with ICHAP/Ministry, in this regard.

Yours faithfully

Signed by Dr. Poonam Meena

Phone: 011-23062205

Encl: as above



वी. हेकाली झिमोमी, भा.प्र.से. अपर सचिव

V. Hekali Zhimomi, IAS Additional Secretary



स्वास्थ्य एवं परिवार कल्याण मंत्रालय निर्माण भवन, नई दिल्ली - 110011 Government of India Ministry of Health & Family Welfare Nirman Bhawan, New Delhi - 110011

भारत सरकार



D.O. No. P-16016/19/2022-ICAHP(Pt.1) 4th August, 2023

Dear Sir/Madam,

Please refer to meeting held under the Chairpersonship of Secretary ICHAP on 12.07.2023 at 12:00 Noon with States/UTs which have already constituted the State Councils under National Commission for Allied and Healthcare Professions Act (NCAHP) 2021.

2. Your kind attention is brought to DO letter No. P-16016/19/2022-ICAHP dated 29.06.2022 (copy enclosed) requesting you to furnish the available details of allied and healthcare institutions in your State/UT. It is noticed that desired information has not been received from your State/UT so far. It is also highlighted that consolidated data from the state has to be provided to the ICAHP(icahp.india@gmail.com) in the prescribed format as enclosed. You are therefore requested to appoint a Nodal Officer from the state for further communication with ICHAP in this regard.

With regards,

Yours sincerely,

(Ms. V. Hekali Zhimomi) Chairperson, ICAHP

Encl: As above

Additional Chief Secretary/Principal Secretrary States/UTs Andhra Pradesh, Arunachal Pradesh, Assam, Sikkim, Kerala, Mizoram, West Bengal, Odisha, Telangana, Tripura and Himachal Pradesh.

Room No. 244, 'A' Wing, Nirman Bhawan, New Delhi-110011 Tel.: 011-23061706, 23061398, E-mail: zhimomiv@ias.nic.in



वी. हेकाली झिमोमी, भा.प्र.से. अपर सचिव

V. Hekali Zhimomi, IAS Additional Secretary



भारत सरकार स्वास्थ्य एवं परिवार कल्याण मंत्रालय निर्माण भवन, नई दिल्ली - 110011 Government of India Ministry of Health & Family Welfare Nirman Bhawan, New Delhi - 110011



D.O.No.P-16016/19/2022-ICAHP(Pt.1) Dated: 4th August, 2023

Dear Sir/Madam,

Please refer to the meeting held under the Chairpersonship of Secretary ICHAP on 12.07.2023 at 03:00 PM with States/UTs regarding the non-constitution of the State Councils under National Commission for Allied and Healthcare Professions (NCAHP) Act, 2021.

As you are aware that National Commission for Allied and Healthcare Professions (NCAHP) Act, 2021 (notified on 28.03.2021) came into force on 25.05.2021. As per Section 22(1) of the NCAHP Act, 2021 "every State Government shall, by notification, within six months from the date of commencement of this Act, constitute a State Council to be called the State Allied and Healthcare Council for exercising such powers and discharging such duties as may be laid down under this Act". At present the date for same has been extended up to 25.11.2023 vide Notification dated 18.05.2023. The formation of State Council is being monitored actively by the Prime Minister's Office and also by the Parliamentary Standing Committee on 'Quality of Medical Education'. It is therefore again requested to expedite the formation of state council.

Further, your kind attention is brought to DO letter No. P-16016/19/2022-ICAHP dated 29.06.2022 (copy enclosed) requesting you to furnish the available details of allied and healthcare institutions in your State/UT in given format (copy enclosed). The desired information is yet to be received from your State/UT. It is also highlighted that consolidated data from your State/UT has to be provided to the ICAHP (icahp.india@gmail.com) in the prescribed format as enclosed. You are therefore requested to appoint a Nodal Officer from the State for further communication with ICHAP in this regard.

With regards,

Yours sincerely,

(V. Hekali Zhimomi)

Encl: As above

To

Additional Chief Secretary/Principal Secretary of all States/UTs [except Andhra Pradesh, Arunachal Pradesh, Assam, Sikkim, Kerala, Mizoram, West Bengal, Odisha, Telangana, Tripura and Himachal Pradesh]

Room No. 244, 'A' Wing, Nirman Bhawan, New Delhi-110011 Tel.: 011-23061706, 23061398, E-mail: zhimomiv@ias.nic.in





डॉ. मनोहर अगनानी, भा.प्र.से. अपर सचिव

DR. MANOHAR AGNANI, IAS Additional Secretary

भारत सरकार स्वास्थ्य एवं परिवार कल्याण मंत्रालय निर्माण भवन, नई दिल्ली-110011

GOVERNMENT OF INDIA MINISTRY OF HEALTH & FAMILY WELFARE NIRMAN BHAVAN, NEW DELHI - 110011

D.O. No. P-16016/19/2022-ICAHP Dated 29th June, 2022

Dear All

As you are aware that, the National Commission for Allied and Healthcare Professions Act, 2021 provides for regulation and maintenance of standards of education and services by allied and healthcare professionals, assessment of institutions, maintenance of a Central Register and State Register and creation of a system to improve access, research and development and adoption of latest scientific advancement and for matters connected therewith or incidental thereto.

- 2. In this regard a data base of the allied and healthcare institutions is being prepared. An Allied and healthcare institution has been defined as an educational or research institution which grants diploma or undergraduate, postgraduate or doctoral degree or any other post degree certification in any allied and healthcare profession under this Act. Fifty six allied & healthcare professions have been scheduled under the Act (copy enclosed).
- 3. You are requested to furnish the available details of such Institutes in your State/UT by 5th July, 2022 to the following e-mail ID **icahp.india@gmail.com**. A format (Excel) for sharing the required information is enclosed herewith.

with the regards

Yours sincerely,

(Dr. Manohar Agnani)

Chairman,(ICAHP)

Enc: As above

To: -

Additional Chief Secretary / Principal Secretary / Secretary (Health) & (Medical Education) - All States/UTs

Format for details on Allied Healthcare Institutions

		-		-	
Contact Details of the Institution 1. Email 2. Contact No. 3. Postal Address					
Annual Course intake Duration of (in studen Months) ts per course					
Annual intake of studen ts per course					
Type of Course (Degree/ Diploma/ Certificate)					
Allied Healthcare Professional courses being offered by the Institution	Course 1.	Course 2.	Course 3.	Course 4.	
Type of University which the institution is recognised by/ affiliated to- Central / State/ Private /Deemed / Not Applicable/ Others (Pi.					
Recognize d by/ Affiliated to					
Year of Establishm ent of the Institution					
Registration No. of Institution (If Any)					
Type of Institution- Government/ Private/ Charitable					
Name Name of the State District					
Name of the State					
S.No. Name of Allied Healthcare Teaching Institution					
S.No.	i,				2.