

"ഭരണഭാഷ- മാതൃഭാഷ"



കേരള സർക്കാർ

സംഗ്രഹം

ആരോഗ്യ കുടുംബക്ഷേമ വകുപ്പ് - 'നിർണ്ണയ' - ഹബ്ബ് & സ്പോക്ക് ലബോറട്ടറി നെറ്റ് വർക്ക് സിസ്റ്റം - ലബോറട്ടറി ഡവലപ്മെന്റ് കമ്മിറ്റി / ലബോറട്ടറി മാനേജ്മെന്റ് കമ്മിറ്റി എന്നിവയുടെ ഘടന, പ്രവർത്തന മാർഗ്ഗ രേഖ എന്നിവ അംഗീകരിച്ചു ഉത്തരവ് പുറപ്പെടുവിക്കുന്നു.

**ആരോഗ്യ കുടുംബക്ഷേമ (എം) വകുപ്പ്**

സ.ഉ.(സാധാ) നം.2350/2023/H&FWD തീയതി, തിരുവനന്തപുരം, 15-09-2023

പരാമർശം:- 1) സർക്കാർ ഉത്തരവ് (സാധാ)നം. 1668/2023/ ആ ക വ തീയതി 11/07/2023

2) 24/07/2023 തീയതിയിലെ ആരോഗ്യ വകുപ്പ് ഡയറക്ടറുടെ ഇ എച്ച് 1/ 11166/2023/ ആ.വ.ഡ നമ്പർ കത്ത്

ഉത്തരവ്

പരാമർശം 1- ലെ സർക്കാർ ഉത്തരവ് പ്രകാരം 'നിർണ്ണയ' - ഹബ്ബ് & സ്പോക്ക് ലബോറട്ടറി നെറ്റ് വർക്ക് സംവിധാനത്തിന്റെ പ്രവർത്തന മാർഗ്ഗ രേഖ അംഗീകരിച്ചു ഉത്തരവ് പുറപ്പെടുവിച്ചിട്ടുണ്ട്. പരാമർശം 2 കത്ത് പ്രകാരം ഹബ്ബ് & സ്പോക്ക് ലബോറട്ടറി നെറ്റ് വർക്ക് സംവിധാനത്തെ സഹായിക്കുന്നതിനായി സ്റ്റേറ്റ് പബ്ലിക് ഹെൽത്ത് ആൻഡ് കളിനിക്കൽ ലാബോറട്ടറി തലത്തിലും റീജിയണൽ / ജില്ലാതല പബ്ലിക് ഹെൽത്ത് ലാബോറട്ടറി തലത്തിലും യഥാക്രമം ലബോറട്ടറി ഡവലപ്മെന്റ് കമ്മിറ്റിയും, ലബോറട്ടറി മാനേജ്മെന്റ് കമ്മിറ്റിയും രൂപീകരിക്കുന്നതിനായി ആരോഗ്യ വകുപ്പ് ഡയറക്ടർ സർക്കാരിനോട് അഭ്യർത്ഥിച്ചിരിക്കുന്നു

2) സർക്കാർ കാര്യം വിശദമായി പരിശോധിക്കുകയും ഈ ഉത്തരവിനോടൊപ്പം ചേർത്തിരിക്കുന്ന 'അനുബന്ധം' പ്രകാരം 'നിർണ്ണയ' - ഹബ്ബ് & സ്പോക്ക് ലബോറട്ടറി നെറ്റ് വർക്ക് സിസ്റ്റം - ലബോറട്ടറി ഡവലപ്മെന്റ് കമ്മിറ്റി / ലബോറട്ടറി മാനേജ്മെന്റ് കമ്മിറ്റി എന്നിവയുടെ ഘടന, പ്രവർത്തന മാർഗ്ഗ രേഖ എന്നിവ അംഗീകരിച്ചു ഉത്തരവാകുന്നു.

(ഗവർണ്ണറുടെ ഉത്തരവിൻ പ്രകാരം)

എ പി എം മുഹമ്മദ് ഹനീഷ്

പ്രിൻസിപ്പൽ സെക്രട്ടറി

തദ്ദേശ സ്വയംഭരണ വകുപ്പ്

ആയുഷ് വകുപ്പ്

പദ്ധതി നിർവ്വഹണ, വിലയിരുത്തൽ, നിരീക്ഷണ വകുപ്പ്

കോഓർഡിനേറ്റർ, നവകേരള കർമ്മ പദ്ധതി 2, തിരുവനന്തപുരം

സ്റ്റേറ്റ് മിഷൻ ഡയറക്ടർ, നാഷണൽ ഹെൽത്ത് മിഷൻ, തിരുവനന്തപുരം

സ്റ്റേറ്റ് മിഷൻ ഡയറക്ടർ, നാഷണൽ ആയുഷ് മിഷൻ, തിരുവനന്തപുരം

എല്ലാ ജില്ലാ കളക്ടർമാർക്കും

ആരോഗ്യ വകുപ്പ് ഡയറക്ടർ, തിരുവനന്തപുരം  
മെഡിക്കൽ വിദ്യാഭ്യാസ വകുപ്പ് ഡയറക്ടർ, തിരുവനന്തപുരം  
ഡയറക്ടർ, ഭാരതീയ ചികിത്സാ വകുപ്പ്, തിരുവനന്തപുരം  
ഡയറക്ടർ, ആയുർവേദ മെഡിക്കൽ വിദ്യാഭ്യാസ വകുപ്പ് , തിരുവനന്തപുരം  
ഡയറക്ടർ, ഹോമിയോപ്പതി വകുപ്പ്, തിരുവനന്തപുരം  
പ്രിൻസിപ്പൽ ആൻഡ് ചീഫ് കോൺട്രോളിങ് ഓഫീസർ, ഹോമിയോപ്പതി മെഡിക്കൽ  
വിദ്യാഭ്യാസ വകുപ്പ് , തിരുവനന്തപുരം.  
ഡയറക്ടർ, സ്റ്റേറ്റ് പബ്ലിക് ഹെൽത്ത് ആൻഡ് ക്ളീനിക്കൽ ലബോറട്ടറി,  
തിരുവനന്തപുരം.  
എക്സിക്യൂട്ടീവ് ഡയറക്ടർ, സ്റ്റേറ്റ് ഹെൽത്ത് സിസ്റ്റംസ് റിസോഴ്സ് സെന്റർ കേരള ,  
തിരുവനന്തപുരം.  
എല്ലാ ജില്ലാ മെഡിക്കൽ ഓഫീസർ (ആരോഗ്യം) മാർക്കും  
എല്ലാ ജില്ലാ പ്രോഗ്രാം മാനേജർ (നാഷണൽ ഹെൽത്ത് മിഷൻ) - മാർക്കും  
അക്കൗണ്ടന്റ് ജനറൽ (ഓഡിറ്റ്) കേരള , തിരുവനന്തപുരം.  
വിവര പൊതുജന സമ്പർക്ക (ന്യൂ മീഡിയ) വകുപ്പ്  
കരുതൽ ഫയൽ / ഓഫീസ് കോപ്പി

ഉത്തരവിൻ പ്രകാരം

സെക്ഷൻ ഓഫീസർ

പകർപ്പ് :

ബഹു. മുഖ്യമന്ത്രിയുടെ പ്രൈവറ്റ് സെക്രട്ടറിക്ക്  
ബഹു. ആരോഗ്യവും വനിതാ-ശിശു വികസനവും വകുപ്പ് മന്ത്രിയുടെ പ്രൈവറ്റ്  
സെക്രട്ടറിക്ക്  
ആരോഗ്യ കുടുംബക്ഷേമ വകുപ്പ് പ്രിൻസിപ്പൽ സെക്രട്ടറിയുടെ പി എസ്- ന്

## **Composition, Operational Guidelines and Standard Operating Procedures (SOPs) of the Laboratory Development Committees and the Laboratory Management Committees under 'NIRNAYA' (Nava Kerala Integrated Referral Network for Advanced Diagnostics And Care) Hub and Spoke Laboratory Network System**

### **Introduction**

Kerala has had a robust public health Laboratory network in the form of State Public Health Laboratories, Regional and District Public Health Laboratories. These institutions are standalone institutions catering to the diagnostic and surveillance needs of the public and have been instrumental in combating the public health outbreak response and diagnosis. These institutions being non-transferred institutions are under the direct administration of the Department and currently relies on the annual funds for the sustenance of the activities.

The need of establishing a Committee for the management of the Public Health Laboratories of the state has been felt to expand the diagnostic services extended to the General Public. The constitution of a Laboratory Development Committee /Laboratory Management Committee is integral in ensuring the self-sustenance and the quality of the services provided through the Public Health Laboratories. This will also help in stream- lining and operationalizing the newer initiatives including the Hub and Spoke Model of Service Delivery as envisaged in Navakeralam Karmapadhati 2- Aardram.

In the above context, establishment of Laboratory Development Committees (LDC) at the State Public Health Laboratory and Laboratory Management Committees (LMC) at the various regional and District Public Health Labs are inevitable. The State, Regional and District health laboratories, being institutions of Public Health Importance actively involved in Public Health Surveillance and not merely a diagnostic facility, the constitution and establishment of the Committee is envisaged in such a way that the existing public health surveillance activities & the free diagnostic services provided for the eligible category of patients through these institutions shall continue unabated. The State Public Health Laboratory being a referral laboratory and an institution of tertiary level and advanced diagnostic facilities will have a two tiered Laboratory Development Committee (LDC), comprising of a Governing Body and an Executive Committee whereas the Regional and District Public Health Laboratories will have a Laboratory Management Committee (LMC).

Composition, Operational Guidelines and Standard Operating Procedures (SOPs) of the Laboratory Development Committees and the Laboratory Management Committees are as follows:

**(A) Constitution of laboratory development committees (State Public Health Laboratory)**

**I. Laboratory Development Committee:**

Laboratory Development Committee of the State Public Health Laboratory will be a two tiered committee with a Steering Committee and a State Level Executive Committee.

**(a) Steering Committee:**

The Steering Committee is mandated to take policy decisions and to make necessary advice/recommendations only. The Composition of the Steering Committee is as follows;

- Chairperson: Hon. Minister , Health & Family Welfare
- Vice Chairperson: Principal Secretary, Health & Family Welfare Department
- Member Secretary & Convenor : Director, State Public Health and Clinical Laboratory
- Official Members:
  1. State Mission Director, National Health Mission
  2. State Mission Director, National Ayush Mission
  3. Senior Consultant- State Public Health and Clinical Laboratory
  4. Director of Health Services
  5. Director, Ayush Department
  6. Director, Homeopathi Department
  7. Director, Indian Systems of Medicine
  8. Director : ICMR-NIV Field Unit, Alappuzha
  9. Additional Director of Health Services (Public Health)
  10. Additional Director of Health Services (Planning)

**(b) State Level Executive Committee:**

- Chairperson: Principal Secretary, Principal Secretary, Health & Family Welfare Department
- Member Secretary & Convenor: Director, State Public Health and Clinical Laboratory (SPHL)
- Official Members:
  1. State Mission Director, National Health Mission
  2. State Mission Director, National Ayush Mission
  3. Director of Health Services
  4. Director, Ayush Department
  5. Director, Homeopathi Department
  6. Director, Indian Systems of Medicine
  7. Additional Director of Health Services (Public Health)
  8. Additional Director of Health Services (Planning)
  9. Additional Director of Health Services (Medical)
  10. Senior Finance Officer
  11. Senior Consultant- State Public Health and Clinical Laboratory
  12. Senior Administrative Officer

## **II. Regional PH lab and District PH Labs:**

Regional Public Health Laboratories and District Public Health Laboratories will have a single tiered Laboratory Management Committee with the following organizational structure and with the official members and special invitees as described below.

- Chairperson: District Collector
- Vice Chairperson: District Medical Officer (Health)
- Member Secretary & Convenor: Senior Medical Officer/Medical Officer-Regional Public Health Laboratory/District Public Health Laboratory

(RPHL/DPHL)

• Official Members:

1. District Programme Manager, National Health Mission
2. Consultant- Regional Public Health Laboratory/District Public Health Laboratory
3. District Surveillance Officer
4. Bio Medical Engineer (National Health Mission)
5. District Medical Officer- Ayush
6. District Medical Officer - ISM
7. District Medical Officer -Homeo

Note: In any circumstances where an official member, when she/he is unable to attend the meeting due to other pre-occupations, he may depute one of his subordinates to represent him at the meeting.

**Meetings:**

The Steering Committee of the State Public Health Laboratory shall convene the meeting at least once a year and the Executive Committee of the same shall meet at least twice a year. However the Steering Committee can be convened in circumstances where any emergency decisions pertaining to the laboratory/public health response has to be finalized.

The Laboratory Management Committee of the Regional and District Public Health Laboratories shall meet at least once in 3 months. The proceedings/recommendations of the Committee relating to the State Public Health Laboratory shall be forwarded to the Secretary to Government, Department of Health and Family Welfare for information, through the Director of Health Services, Government of Kerala. Similarly, the recommendations relating to District Public Health Laboratories and Regional Public Health Laboratories shall be forwarded to the Director of Health Services through the concerned District Medical Officers.

**Scope of the meeting:**

(a) The meetings shall be convened by the Secretary and the treasurer in consultation with the Chairman. The Committees may discuss topics of public health surveillance and diagnostic facilities and specific issues connected with the institutions concerned. It shall be open to any member of the Committee to forward to the Secretary his remarks or suggestions to be

placed before the Committee for discussion.

(b) The existing Plan fund provision should be maintained as the State/Regional/District Public Health Laboratories are not mere revenue generating diagnostic laboratories but integral institutions for Public Health Surveillance.

(c) The Committee shall not take any decisions hampering the existing services provided to the BPL patients and the eligible patients at free of cost.

(d) The Committee shall not decide on matters hindering the technical functionalities of the laboratory

(f) The minutes of the meeting shall be recorded in a physical or electronic format and shall be signed by the Chairman or the Member whoever presides over the meeting in the absence of the Chairman.

(g) At the beginning of each year the Officer in charge of institutions (RPHL-DPHL Senior Medical Officer/Medical Officer -in-charge) should place before the respective Laboratory Management Committee, the fund provisions for the different activities (Plan/ROP/Other Funds) of the Institution for the year and they should also briefly outline the diagnostic and surveillance activities that they propose to organise during the year to enable the special invitees to know the limitations under which the institution is working so that the discussions will be technically and practically feasible. When the Committee meet once in three months, a review of the activities since the last meeting may be made and it should chalk out advance programme for the next three months. In the case of State Public Health Laboratory, the State Level executive Committee shall meet twice a year.

(h) It shall be the duty of the Director/SMO/ Medical Officers in charge of the Institution concerned to point out the impracticability of any suggestion mooted during the Committee's discussion so that there may not be any room for future discrepancies that the recommendations of the Committee were not given due consideration.

### Laboratory visits:

(a) The individual members of the Committee may arrange with the Director/SMO/Medical Officer in charge of the Institution to visit the administrative section of institution at any time during working hours.

(b) They shall have access to the non-technical areas of the laboratory.

(c) A visitors' book shall be opened in each institution for the members to note their remarks.

**(B) Rights and Responsibilities of the Laboratory Development Committee & The Laboratory Management Committee:**

Rights and responsibilities of the Laboratory Development Committee &amp;

the Laboratory Management Committee will be as follows:

- a. To find out defects; if any, in the amenities and functioning of the Institution and devise ways of remedying them
- b. To strive to maintain orderliness and cleanliness of the institutions and their surroundings
- c. To assess monetary requirements for improvements and organize ways and means to collect funds for the same
- d. To exercise proper control and keep up vigil in preventing malpractices
- e. To help give technical support pertaining to the Health Education and Mass Medical Campaigns pertaining to the public health surveillance and diagnostic services in conjunction with the Directorate of Health Services/ District Medical Offices concerned
- f. To maintain social discipline in laboratories;
- g. To take up maintenance and repair works not exceeding Rs.50,000/-

**(a) Powers of the Management Committees:**

- a. **Suggestions**: To make non-technical suggestions to ensure the smooth functioning of the Laboratory
- b. **Supervisory Power**: Shall have supervisory power over the maintenance of the buildings, vehicles and equipment, water supply, supply of electricity, sanitation, providing amenities to the patients coming for diagnostic tests. The committee shall have no supervisory power over the technical functionalities of the laboratory or to discontinue any of the existing services provided from the laboratory.
- c. **Minimum standards of facilities**: Shall ensure compliance to minimum standards of facilities from time to time and facilitate accreditation in quality control standards
- d. **Review Citizens Charter**: Shall periodically review Citizens Charter of Laboratory and give suggestions for revision.
- e. **Identification of Problems** : Shall identify problems faced by patients and staff of the Institution.
- f. **Grievance Redressal Mechanism**: Shall institute a grievance redressal



mechanism in the Institution.

- g. **Prevent malpractices:** Shall exercise vigil to prevent malpractices in the functioning of the Institution.
- h. **Transparency and accountability:** Shall ensure transparency and accountability in the functioning of the Institution.
- i. **Transparency in the management of funds:** Shall ensure transparency in the management of funds.
- j. **Facilitation of laboratory waste and biomedical waste management if facility non existent:** Shall facilitate scientific management of hospital waste and biomedical Waste can be done if such a facility is non existent

### **(C) Procedure of the Meetings of the Management Committee:**

- (1) **Meeting of the LDC (GB and Exe. Committee) & LMC Committee**  
The Convener shall, in consultation with the Chairperson, convene the meeting of the Management Committee periodically as mentioned above and also according to the needs, in the intervening period.
- (2) **At least seven days before the due date of the meeting**, the Convener shall issue notice to the members of the Management Committee informing the place, date and time of the meeting and the copy thereof to be published on the notice board of the Health Institution.
- (3) **Prepare an agenda:** The Convener shall, in consultation with the Chairperson, prepare an agenda incorporating the matters to be discussed in the LDC/LMC Committee and the same shall be given to the members along with the notice of the meeting.
- (4) **Presiding of the Meeting:** The Chairman or in his absence, the Vice-Chairman shall preside over the meeting of the Committee.
- (5) **Preparation of Minutes Book and Attendance Register:** The Convener shall keep a minutes book for recording the minutes of the proceedings of the meeting and an attendance register for making attendance of the Members present in the meeting.

### **Decisions of the Meeting:**

The decisions of the subjects discussed in the meetings of the Management Committee shall be taken on the basis of the opinion of the majority of the members present in the meeting and the Convener shall communicate the decisions for information to the respective District Medical Offices (RPHL/DPHL) and Director of Health Services (SPHL).

### **(D) Bank Account: (Joint Account by the Member Secretary-Convener**

**and the Treasurer)**

Senior Superintendent of the State Public Health Lab and Administrative Assistant of the District Medical Office (H) will be the treasurer of the LDC/LMC committee respectively.

There shall be a Bank Account for the LDC / LMCs, which shall be opened in a nationalized bank having its branch in the service area of the Laboratory. The account shall be in the joint name of the Member Secretary and the Treasurer and shall be operated jointly. With regard to the State Public Health Laboratory, Director State Public Health Laboratory and Senior Superintendent, State Public Health Laboratory shall be the joined signatories whereas in the case of Regional Public Health laboratories-Senior Medical Officer and Administrative Assistant of the respective District Medical Offices (H) shall be the joined signatories of the account. In the case of District Public Health Laboratories, Medical Officer-in-charge of the DPHL and the Administrative Assistant of the respective District Medical Office (H) will be the joined signatory. All the funds of the Management Committee shall be remitted to the joint bank account of LDC/LMC and shall not be withdrawn except by cheque jointly signed by the above mentioned officers.

**Accounts:** The Lab Development Committees and Management Committees shall keep regular accounts of all its funds and the transactions thereof.

**Audit:** The accounts of the LDC/LMC shall be annually audited by a Chartered Accountant or any qualified person decided by the committee.

**(E) Collection of Funds:**

Fund can be collected by way of tokens, cleanliness charges, parking fees in the premises.

The charges for the diagnostic tests routed through the Hub and spoke diagnostic tests also to be remitted to the LDC/LMC funds.

**(F) Utilization /Expenditure of LDC/LMC Funds:**

### Guidelines for the utilization of the funds:

- a. The need for purchase of additional consumables and reagents which is not supplied through the state procurement and delivery system has to be established and a Committee to be set up at State Public Health Laboratory and the District and Regional Public Health Labs for the procurement of any additional consumables and reagents which are not supplied through the state Plan Fund/ROP fund.
- b. Purchase should be done as per Store Purchase Rules and existing guidelines
- c. The LDC/LMC shall not undertake any major construction works

without the prior approval of the Government

- a. The funds can also be used for the purchase of stationary items, ice pack, sample packing and storage materials ,printing sample referral forms, reporting forms, registers ,disinfectants, cleaning materials, purchase of toilet utensils, cleaning of the laboratory premises and for the emergency maintenance of the building and equipments not exceeding the amount of Rs.50,000/- (Rupees Fifty Thousand Only).
- e. Appointment of essential staff needed for the functioning of the institution shall be subject to the condition that the expenditure towards the pay and allowances etc. will be met from LDC/LMC.

**(G) Establishment Expenditure:**

The Secretary & the Treasurer has to ensure that the limit is not exceeded without Government sanction. Then such decisions, if taken, the matter should be referred to Government.

**(I)** Establishment charges are limited to 50% of the total collection..

**(II)** Appointment of Staff: Criteria –

1. In regard to the substitute arrangements for Class IV and Part Time Contingent employees, the LDC/LMC will engage such employees for a maximum period of two months when there is no chance for immediate posting and where such post exists.
2. LDC/LMC can decide on the appointment of laboratory technicians /lab assistants on temporary basis. However any such appointments shall only be made based on the increased sample load in the laboratory and shall be reviewed on a periodic basis.
3. If there is no such sanctioned posts and if the Director/SMO/MO and the District Medical Officer of Health are jointly satisfied that the service of a class IV employee/Part Time contingent employee/Lab technician and his/her services are inevitable, such an employee with requisite qualification for such a post for a maximum period of two months on daily wages can be appointed as per existing norms or can be outsourced as per the norms.
4. In unavoidable cases, after terminating such daily wages employee he may be reappointed after two days for another period of two months more. If such cases of four months employment on daily wages a written undertaking from the daily wage employee shall be obtained to the effect that he will not raise any claim for regularization and it shall be recorded in the file. And in no cases his continuance shall exceed

four months consecutively.

5. The continuance of daily wages employee is subject to appointment and actual joining of PSC/Employment Exchange hand in the case of laboratories where such posts exists. Upon their joining, such daily wages employees will be terminated. Under no circumstances the employees on daily wages in LDC/LMC will be allowed to continue beyond 4 months.
6. In regard to the appointment of Security Guards/Security Staff, such persons will be appointed by the LDC/LMC on daily wages for a maximum period of six months if there is no such post and such security arrangements are inevitable. Such appointments may be outsourced as per the existing norms as far as possible. If there is such a post, till employment exchange hand/PSC staff joins duty, a maximum period of three months can be allowed after terminating for two days and recording the written undertaking that he will not raise any claim for regularization in the post.
7. The paramedical staff appointed provisionally by LDC/LMC may be allowed to continue up to a period of one year only, after observing 2 days break at every two months interval.

### **(III) Appointment – General guidelines:**

1. Government Directions and guidelines pertaining to the same to be strictly adhered to while making temporary appointments.
2. The appointment should only be based as per the needs of the institution and for supplementing the existing services provided.
3. Termination of the daily wages employees on completion of their period of appointment to be strictly ensured.
4. The LDC/LMC not adhering to these guidelines to be reported to the Government by the Director of Health Services/ concerned District Medical Officer

### **(H) Other Instructions:**

1. No permanent employment shall be made. As far as possible the work should be contracted out to other eligible organizations (as per norms) and individuals not be engaged. Cleaning Staff and Security- Ex service men from Sainik Welfare Board to be appointed.
2. No purchase of vehicle shall be made except for instances where special Government sanction is obtained.

Expenditure for purchase of vehicle should not be spent if budget provision

3. Funds for revenue expenditure should not be spent if budget provisions are available and have not been exhausted. When they are not available due to treasury restrictions, the expenditure may be met from LDC/LMC funds and then recouped.
4. TA/DA will not be met from LDC/LMC funds.

**(I) Vehicles: Parking Fee:**

Stand Alone Labs can collect a parking fee which will be remitted to the LDC/LMC funds as per the existing norms and the rates can be decided by the LDC/LMC.