MEMORANDUM OF UNDERSTANDING

between
Government of India
and
ILEP Members active in India


A. PREAMBLE

ILEP (International Federation of Anti-Leprosy Associations) is a federation of autonomous non-governmental organisations working together in India in close partnership with the Government of India for the common goal of a world without leprosy.

ILEP uses a system of co-ordination; which means that when two or more ILEP Members are active in a certain country or state, one member will be chosen by the General Assembly of ILEP as ILEP Co-ordinator and represent all ILEP Members in that area. It is the responsibility of this Co-ordinator to ensure co-ordination, to guarantee the flow of information and initiate co-operation between all partners, including the Government.

In India ten ILEP members are active, who through their local bodies work in close collaboration with the Government of India, directly supporting National Leprosy Eradication Programme (NLEP) of Government of India (GOI). These organisations and their local bodies are:

AFRF  Association Française Raoul Follereau (French Leprosy Relief Association) - AFRF-India
AIFO  Italian Leprosy Relief Association (Associazione Italiane Amici di Raoul Follereau) - AIFO-India
ALES  Aide aux Lépreux Emmaüs-Suisse (Swiss Leprosy Relief Association) - ALES-India
ALM  American Leprosy Missions - ALM-India
DFB  Damien Foundation Belgium - Damien Foundation, India Trust (DFIT)
Fontilles  Fontilles, Lucha Contra La Lepra (Spanish Leprosy Relief Association) - Fontilles - India
DAHW  Deutsche Lepra- und Tuberculosehilfe (German Leprosy & TB Relief Association) - GLRA-India
LEPRA  British Leprosy Relief Association - LEPROSA Society
NLR  Netherlands Leprosy Relief - NLR Branch Office (NLR)
TLM  The Leprosy Mission International - TLM Trust India (TLM)

This Memorandum of Understanding provides the formal framework for collaboration between Government of India and ILEP for the period 1st January 2005 to 31st March 2007.

ILEP reiterates its commitment through their member organisations for continuing support to leprosy programme beyond the year 2007.

B. CURRENT STATUS OF GOI-ILEP COLLABORATION

At present the ILEP Members are supporting NLEP by facilitating and strengthening the process of integration of leprosy services into the General Health Care system. On the principle of supporting the national goal of NLEP and of sustaining effective leprosy services after integration into the general health services (GHS), the ILEP members has been carrying out / supporting the following activities:
- Provision of technical advice through international, national and State Level Consultants;
- Provision of District Technical Support Teams;
- Capacity building of General Health Care staff (through training and follow up after training - supervision);
- Provision of support to specialised training centres (Karigiri, Naini, Purulia etc);
- Direct participation in the Leprosy programme in selected areas;
- Supporting local NGOs.

Other areas of support are:
- IEC activities and Advocacy
- POD camps/programmes
- Hospital based care (as part of Referral Services)
- Rehabilitation (physical and socio-economic)
- (Operational) Research
- Monitoring and evaluation
- Logistics & drugs supply management
- Leprosy Elimination Campaigns (LEC)

As part of the advocacy role, staff of ILEP Members are also participating in State Leprosy Societies and District Leprosy Societies.

The overall budget of ILEP-supported activities in India in 2004 was more than US$21 million i.e., Rs.96.6 crores.

C. COLLABORATION AND CONTRIBUTION BY ILEP MEMBERS

The Government of India is committed to eliminate Leprosy i.e. prevalence rate less than 1 case per 10,000 inhabitants at national level by 31st December 2005 and will continue its National Leprosy Eradication Programme through an integrated approach beyond December 2005, which is laid down in a strategic plan for the years 1st January 2005 to 31st March 2007.

The ILEP Members active in India are offering their support in partnership with Government of India to Strategic Plan of NLEP of Government of India through this MOU with the aim to provide assistance to those activity areas that are crucial to sustain effective, integrated leprosy services within the frame work of strategic plan of NLEP of Government of India.

The ILEP Members will continue supporting those activity areas that are crucial to sustain effective integrated leprosy service for the period of January 2005 to March 2007.

ILEP members will not undertake any activity which would adversely affect support to NLEP. Additional resources would be used if and when within the financial capacities of ILEP for any add on activities.

In view of this partnership, the following areas of activities under NLEP will be supported / implemented:

1. Support to sustained capacity building of GHC staff;

2. Provision of technical support – National, State and district level;

3. Strengthening of an adequate referral system;
4. Establishing Reconstructive Surgery Services in Government Medical Colleges;
5. Special attention to urban leprosy control;
6. Participation in community education and advocacy;
7. Joint monitoring and evaluation;
8. Support to (operational) research;
9. Support to Community Based Rehabilitation;

1. Support to sustained capacity building of GHC staff:
   Capacity building activities of GHC staff will be continued for efficient implementation
   of integrated leprosy services and sustaining the quality of leprosy services through
   improving their knowledge and skills in diagnosis and management of leprosy including
   Disability Prevention and Care of leprosy affected persons. This will be achieved through
   assistance to training courses to all (new) staff, to periodical refresher courses and to
   follow-up of all GHC staff after training (supervision and on-the-job training).

   ILEP will assist in developing curriculum for training of various categories of General
   Health Care (GHC) staff in leprosy.

   ILEP will update, print and supply the learning material for training of different category
   of GHC staff. (Annexure 1).

   ILEP through its panel of facilitators will help in facilitating the training of members of
   district nucleus (Annexure 2).

2. Provision of Technical support at National, State and District levels:
   At National level, Technical Advisers (both national and international) are available to
   facilitate taking decisions on policies and strategies as and when required. At State level,
   technical support will be provided to assist in analysis of epidemiological situations and
   programme management. ILEP Members will also provide technical support through
   District Technical Support Teams (DTSTs) at peripheral level to sustain the achievements
   of the NLEP and to facilitate the establishment and maintenance of adequate quality
   integrated leprosy services (Annexure – 3).

   DTST staff will focus on NLEP only. Additional staff with mobility will be posted if
   other health programmes are taken up. However, the Medical Officer of DTST will be
   involved in TB programme in Bihar, Jharkhand, West Bengal and Andhra Pradesh during
   their monthly meetings only.

   NLEP consultant will be provided at National level for a period of one year to assist
   Central Leprosy Division, in planning, in implementing and monitoring of activities of
   NLEP mainly in relation to the assistance provided by ILEP agencies to the NLEP.

3. Strengthening of an adequate referral system:
   The secondary and tertiary referral system at the district and sub-district level, for
   diagnosis, care and management of leprosy and its complications, including disability
   care of leprosy affected persons will be strengthened by appropriate capacity building
   activities. As a result, all GHC staff should be aware of the referral system functioning in
   their area (Annexure – 4).
Complementary to this, currently functioning ILEP supported leprosy hospitals, which are designated as centres of excellence, will be strengthened to cater for the needs of diagnosis and treatment of complicated cases. These centres will furthermore render more specialised services such as POD services, reconstructive surgery and physical rehabilitation (Annexure – 5).

4. Establishing Reconstructive Surgery services in Government Medical College Hospitals
ILEP will assist in establishing reconstructive surgery services at five Medical College hospitals in 5 states (Bihar, Madhya Pradesh, Uttar Pradesh, Orissa and Jharkhand) by building the capacity of the surgeons in doing reconstructive surgery through the visits of Core Surgical Teams (ILEP). (Annexure – 6).

Reconstructive surgeries will be continued in the ILEP supported hospitals, where facilities exist but without any reimbursement from Government of India. (Annexure – 7).

5. Special attention to urban leprosy control:
The ILEP Members will assist state Governments in implementing adequate urban leprosy services as per the guidelines issued by Government of India. The participation will include pioneering innovative approaches to leprosy control in the particular context of urban areas. The ILEP Members will play the role of facilitator in establishing an integrated approach with local health services, providing technical support and specialised services where referral centres are present.

6. Participation in community education and advocacy:
The ILEP Members will help to develop specific IEC materials in local languages and replicate them for effective dissemination of information to educate the community on the integrated approach of leprosy services. ILEP Members will also participate in advocacy meetings at appropriate levels, in defining suitable interventions and best practices to improve the quality of leprosy services.

7. Joint monitoring and evaluation:
The ILEP members will regularly conduct evaluations of their own supported project activities, in close collaboration with other partners and under agreed terms of references by Government of India. This will help to assess the performance of the projects and can be useful for developing strategies or bring changes to the programme.

8. Support to (operational) research:
Research may be taken up covering specific aspects of common concern related to leprosy with focus on clinical, epidemiological and applied research. Some of these research projects could be undertaken in collaboration with regional and central research institutes.

9. Support to Community Based Rehabilitation
ILEP agencies will participate in Community Based Rehabilitation activities to enable people affected by leprosy gain a sustainable and improved quality of life, following norms of specific rules and regulations of concerned Ministry of Government of India.

10. Supports to NGOs
ILEP will continue to support existing projects, which are functioning in accordance with GOI guidelines. No new NGO related projects under the SET scheme would be initiated.
D. Budget

The expected annual expenditure of the above activities will be Rs. 712762974/-
(Annexure – 9.)

E. Contribution of the Government of India

The Government of India shall take all measures, which are required to enable ILEP Members, their experts and other persons performing services on their behalf, to carry out the efficient execution of their projects which are providing assistance to the NLEP. The Government of India will ensure the following:

- GOI will inform the State Governments of the provisions of the present Memorandum of Understanding which will help implementation of activities in support of the integration of leprosy services in their states and ensure co-ordination among all concerned partners.

- GOI will exert its best efforts both at the national and state level to make the most effective use of the assistance provided by ILEP Members and shall use such assistance for the purpose for which it is intended.

- GOI will ensure adequate drug supply for the treatment of leprosy and management of complicated clinical conditions in leprosy cases.

F. Action Plan at State Level

State Governments would prepare annual action plan in consultation with all major partners including ILEP.

The training schedule will be prepared by State Governments in consultation with ILEP and the same submitted along with annual action plan.

G. Formalisation of Partnership 2005 - 2007

The Government of India through its representative and ILEP Members active in India through the ILEP Co-ordinator for India have agreed to the contents of this MoU will formally sign this document in duplicate.

In witness whereof the parties (GOI and ILEP) hereunto have set their respective hands to this Memorandum of Understanding on the ________ day of ________ 2005.

Dr. G.P.S Dhillon
Deputy Director General (Leprosy)
Ministry of Health
Government of India

Dr. C.S. Walter
ILEP Co-ordinator for India

Place : New Delhi
Date : February 2005

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