Information under section 4 (1) (b) of The Right To Information Act, 2005

(i) The particulars of the organization, functions and duties;

a) Mission / Vision Statement of the public authority.

NHSRC is committed to facilitate the attainment of universal access to equitable, affordable and quality healthcare, which is accountable and responsive to the needs of the people. Mission of NHSRC is to render technical support and capacity building for strengthening public health systems.

b) Brief history of the public authority

The NHSRC was registered as a society in January 2007. A Governing Board was constituted with 21 members, 11 of whom were ex-officio government officials and 10 non-government public health experts. The Chairperson of the Governing Board is the Secretary, MoHFW and the Vice Chairperson is the Additional Secretary of the Ministry, and Mission Director of NRHM. The officials on the board were six senior officials from the central ministry and two secretaries and two mission directors from the High Focus states. The non-officials were selected from a list of public health experts forwarded by leading academic institutions which are active in public health systems development.

In the first governing board meeting, held in May 2007, the mandate of the NHSRC was explained and the Executive Director was directed to discuss with key stakeholders to suggest an organisational structure and an action plan that could fulfil such a mandate. This was done and approved by the second governing board meeting held in January 2008.

c) Duties of the public authority

NHSRC is committed to lead as a professionally managed technical support organisation to strengthen public health system and facilitate creative and innovative solutions to address the challenges that this task faces.

d) Main activities/functions of the public authority

NHSRC builds extensive partnerships and network with all those organisations and individuals to share the common values of health equity, decentralisation and quality of care to achieve its goals. NHSRC is set to provide the knowledge-centred technical support by continually improving its processes, people and management practices.

e) List of services being provided by the public authority with a brief write-up on them

The NHSRC currently consists of seven divisions - community processes, public health planning, human resources for health, quality improvement in healthcare, financing of healthcare, health informatics and public health administration. Brief write up on each is as follows:-

Community Processes:

Key components of NRHM that strengthen the community processes and promote public participation which NHSRC has worked upon include.

- The Accredited Social Health Activist (ASHA) and her support network at village, block, district and state levels. (8, 25, 525 ASHA's selected trained and deployed across the country)
- The Village Health and Sanitation Committee (VHSC). Untied funds to the Sub Centre and the VHSC helped increase avenues for public participation in monitoring and decision making at this level.
- Public Participation in District Health Societies and the district planning process as well as in Rogi Kalyan Samitis (RKSs).
- Community Monitoring Programme.
- Programmes for involving NGOs in the NRHM.

Public Health Planning:

Has under taken work in the fields of; policy and strategy development , capacity building for district health planning, support to state and district plan implementation, evaluations, studies, programme reviews for evidence based decision making , support to MoHFW for state plan appraisals and monitoring and building up of State Health Systems Resource Centres (SHSRC) or equivalent bodies

Quality Improvement:

The NHSRC's mandate is to make quality improvement an inherent part of public health facility management. The goal is that every single health facility would not only be certified by an external assessor for quality, but have in place a Quality Management System (QMS) that ensures that quality is continually improving. Given the nation's vastness and diverse level of objective development and subjective readiness in each state, such a QMS should follow national and international norms of quality management but at the same time be flexible enough to accommodate different standards of quality certification, i.e. IPHS or ISO or NABH or NABL or any other state or central government defined standard.

Health Management Information Systems:

NRHM envisaged a fully functional health information system facilitating smooth flow of information for effective decision making. Lack of indicators and local health needs assessment have been identified as constraints for effective decentralisation. Almost 50% of the monitoring and evaluation cost was envisaged to be expended at the district level and below. All this requires a robust health management information system that can provide good quality information which would be essential for decentralised health planning.

Human Resources for Health:

One of the major areas of NRHM intervention has been in the development of human resources for health. Across the states, over 1,06,949 additional skilled personnel have been added to public health system by NRHM. It has also undertaken a number of programmes leading to skill upgradation of those already in service and innovations that lead to retention of skilled professionals in rural areas. This changing environment along with active government encouragement and reform has spurred a major increase in nursing and medical education across the country.

Health Care Financing:

In order to ensure that the additional funds for the health sector are better and efficiently utilised for achieving the public health goals, NRHM adopts the following strategies on which

NHSRC has been doing its work:

- <u>Flexible Financing:</u> Utilising the "society" route of financing in a decentralised structure through state, district and block health societies and RKS (Rogi Kalyan Samities) at health facility level. In order to meet demand for funds, health facilities are also provided untied grants.
- <u>Public-Private Partnership (PPP):</u> To engage the private sector in a transparent and efficient way with better regulation to expand service delivery capacity.
- <u>Social Protection for Health:</u> Demand side financing addresses the problem of high out-of-pocket (OOP) expenses by the people, especially the poor and the marginalised groups by its health facilities and through improving demand side financing/health insurance scheme.

Public Health Administration:

The implementation framework and plan of action of NRHM stress on making the public health delivery system fully functional and accountable so that health indicators improve. The state capacity to plan, and implement the plan is limited, especially in the High Focus states of Bihar and UP, which are expected to benefit the most from NRHM. This division aims to support the High Focus states, especially Bihar and UP in planning and implementing what has been planned by the state, responsive to requests from the state or by the centre. It also helps to develop the plans.

f) Organizational Structure Diagram at various levels namely State, directorate, region district, block etc.

For the purposes of management, NHSRC has opted for a flat management structure. The 85 consultants at Delhi and in States. The consultants report to their division heads who may be advisors or senior consultants. These division heads in turn report to the Executive Director.

The NE RRC has the same objectives as NHSRC but with a focus on providing support to the eight states in the North-East. It is headed by a Director and has the same categories of Divisions working N/E states.

(ii) The powers and duties of its officers and employees;

NHSRC Staff composition.

- The Secretariat: The Executive Director and the senior advisers together are the secretariat of the board as envisaged under the rules. Additionally in the secretariat there is a principal administrative officer.
- The hierarchy of posts in the NHSRC is Executive director and Advisers constitute the first level, followed by a level of Sr. consultant and consultant. These are the two management levels. A third level of research assistants or fellows would assist on specific tasks or projects. The PAO is equivalent to the Advisors in rank.

- The NHSRC, in concomitance with its current work plan, has four advisors. The number of
 advisors are defined by the work on hand and the funds made available for the same.
 Further expansion is done with the approval of the executive committee. An advisor would
 usually heads a team or unit of one to three consultant or research assistant and as many
 programme or research assistants as is required.
- Consultants and research assistants are needed at the approximate ratio of one or two per advisor. Many of them are able to move after a couple of years to take on leadership roles in states, having got mentored by the secretariat over here. The consultants and research assistants have their headquarters located where it is most convenient for their assignment.
- Similarly there are one or two consultans/research assistants needed per senior consultant. These are graduates also where there is an exceptional candidate available.
 But most have two or three years of experience.
- One of the secretariat members is the Principal Administrative Officer who reports to the Executive Director. S/he is assisted by an Executive Secretary, a Human Resource Manager, one Accounts Manager and 2 Accounts Assistant along with IT Manager. The Executive Director is assisted by a full time executive secretary, and one office assistants.
- The NHSRC has a pool of 21 Administrative staff (consisting of Administration, Accounts, HR and IT) who are pooled to support 85 technical Staff. Other support services like local transports and security is outsourced.

(iii) The procedure followed in the decision making process, including channels of supervision and accountability;

In accordance with the office procedures all the cases are dealt with NHSRC

(iv) The Norms set by it for the discharge of its function;

As per Bye Laws of NHSRC. Proposals are implemented after obtaining approval of appropriate authority.

(v) The rules, regulations, instructions, manual and records, held by it or under its control or used by its employees for discharging its functions;

As per bye laws of NHSRC.

- Manual of Office Procedure
- GFR
- Delegation of Financial Power Rules.
- CVC Manual.

Working Hours and Holidays

- The working hours of the NHSRC Secretariat, New Delhi as well as those of its branches are same as observed by the Ministry of Health and Family Welfare, Government of India. However at the discretion of the reporting officers, concerned staff members can have considerable flexibility in work timings provided they are in a framework where they have individually assigned time bound deliverables that they are able to fulfil. Overtime as a rule is not admissible except for certain non management categories of support staff.
- The NHSRC Secretariat, New Delhi and branch (es) of the Society remains closed on all national and other gazetted holidays declared as such by the Government of India.

Name /Title of document	FR
Type of document Choose one of the types given below (rules	Rules
Regulation, Instructions, manual, Records other)	
Brief write-up on the document	Govt. Instructions issued from time to time regarding Fundamental Rules.
The NHSRC has been registered with the Registrar of Societies. The Memorandum of Association lays down the rules and regulations by which the functioning of the Society shall be determined. These shall be published In exercise of the powers conferred by clauses 5.4.1 and 5.4.2 of Article 5.4 of Rule 5 of these Rules and Regulations (Bye-laws) of National Health Systems Resource Centre (NHSRC) and all other powers enabling it in this behalf, the Governing Board of the society hereby approves the following draft byelaws for guiding day-to-day functioning of the Society. These draft byelaws are in line with the General Financial Rules 2005 of the Government of India. The NHSRC and NE-RRC follows the procedures as laid down by the GFR 2005.	
From where one can get a copy of rules, regulations, instructions, manual and records	Address NHSRC, NIHFW Campus, Baba Gang Nath Marg, Munirka, New Delhi-110067 Telephone No. 011-26108982,83,84,92,93
	FAX:011-26108994
	E-mail – nhsrcindia@gmail.com
	Others
Fee charged by the department for a copy of rules, regulations, instructions, manual and records (if any)	As per RTI Act.

The NHSRC has been registered with the Registrar of Societies. The Memorandum of Association lays down the rules and regulations by which the functioning of the Society shall be determined. These shall be published

In exercise of the powers conferred by clauses 5.4.1 and 5.4.2 of Article 5.4 of Rule 5 of these Rules and Regulations (Bye-laws) of National Health Systems Resource Centre (NHSRC) and all other powers enabling it in this behalf, the Governing Board of the society hereby approves the following draft byealws for guiding day-to-day functioning of the Society. These draft byelaws are in line with the General Financial Rules 2005 of the Government of India. The NHSRC and NE-RRC follows the procedures as laid down by the GFR 2005.

(vi)A Statement of the categories of documents that are held by it or under its control;

- Non Priced Publications
- CD's
- DVD's
- Annual Reports
- Annual Audit Reports.
- Official Files / Registers.

(vii) The particulars of any arrangement that exists for consultation with or representation by the members of the public in relation to the formulation of its policy or implementation thereof;

Not applicable.

(viii) A statement of the boards, councils, committees and other bodies consisting of two or more persons constituted as its part or for the purpose of its advice, and as to whether meetings of those boards, councils, commits and other bodies are open to the public, or the minutes of such meetings are accessible for public;

The following are the bodies and authorities of the National Health Systems Resource Centre.

Governing Board

The following are the members (official & non-official) of the Society. The official members listed at 1 to 6 and 20 in the table below are Ex-officio members of the Society. The official members are serving officials of the Central and State Governments while the non-official members shall be management or Public Health Experts from outside the Government.

S. No.	Address & occupation	Status in Executive Committee			
1.	Secretary (H&FW), Ministry of Health and Family Welfare, New Delhi Chairperson (or				
2.	Spl. Secretary and Mission Director, Ministry of Health and Family Welfare, New Delhi	Member (official)			
3.	Spl. Secretary and Financial Advisor, Ministry of Health and Family Welfare, New Delhi	Member (official)			
4.	Joint Secretary (Policy), Ministry of Health and Family Welfare, New Delhi	Member (official)			
5.	Joint Secretary (RCH), Ministry of Health and Family Welfare, New Delhi	Member (official)			
6.	Director, National Instt. Of Health and Family Welfare, New Delhi	Member (official)			
7.	Principal Secretary (Health), Bihar	Member (official)			
8.	Principal Secretary (Health), Uttar Pradesh	Member (official)			
9.	Secretary/Commissioner (Health and Family Welfare), Chattisgarh	Member (official)			
10.	Mission Director (NRHM) Health and Family Welfare, Rajasthan	Member (official)			
11.	NAC & Advisor (UNICEF), New Delhi	Member (non-official)			
12.	President, Public Health Foundation of India, New Delhi	Member (non-official)			
13.	Professor, IIM, Bengaluru	Member (non-official)			
14.	Nutrition, Health Advisor in Planning Commission, Nutrition Foundation of India, New Delhi	Member (non-official)			
15.	Professor, Indian Instt. of Management, Ahmedabad	Member (non-official)			
16.	Professor and Dean of Health Studies, TISS	Member (non-official)			
17.	Centre of the study of Regional Development, JNU, New Delhi	Member (non-official)			
18.	Professor & Head, Achuta Menon Centre for Health Science Studies, Kerala	Member (non-official)			
19.	Director, Indian Insttl.of Population Sciences, Mumbai				
20.	Executive Director, NHSRC, New Delhi	Member Secretary			

Executive Committee

The Governing Board constitutes an Executive Committee, which is responsible for acting for and doing all deeds on behalf of the Governing Board and for taking all decisions and exercising all the powers, vested in the Governing Board except those, which the Governing Board may specify to be excluded from the jurisdiction of by the Executive Committee.

S. No.	Address & occupation	Status in Executive		
		Committee		
1.	Spl. Secretary and Mission Director, Ministry of	Member		
	Health and Family Welfare, New Delhi			
2.	Spl. Secretary and Financial Advisor, Ministry of	Member		
	Health and Family Welfare, New Delhi			
3.	Joint Secretary (Policy), Ministry of Health and	Member		
	Family Welfare, New Delhi			
4.	Joint Secretary (RCH), Ministry of Health and	Member		
	Family Welfare, New Delhi			
5.	Director General of Health Services, Ministry of	Member		
	Health and Family Welfare, New Delhi			

Head of the Board

Head of Governing Board – Secretary, Health and Family Welfare.

Executive Committee - Mission Director, NRHM

Address and main office and its Branches

Ministry of Health and Family Welfare, Maulana Azad Road, Nirman Bhawan, New Delhi. NHSRC,RRC-NE, Bihar Office

Frequency of Meetings

Governing Board meetings are held six monthly. Executive Committee meeting are also held quarterly.

Can public participate in the meetings?

No

Are minutes of the meetings prepared?

Yes

(ix) A directory of its officers and employees;

S. No	Name	Designation	Div / Dept	Reporting Authority	Gen der	Contact Details
						011- 26108982 /
1	Dr. T. Sundararaman	Executive Director	ED	MD, HRHM	M	83 / 84 / 92 / 93
2	Dr. Rajani R. Ved	Advisor	CP	ED	F	Do
3	Mr. Arun Srivastava	Consultant	CP	Advisor	M	Do
4	Dr. Garima Gupta	Consultant	CP	Advisor	F	Do
5	Dr. Manoj Kumar Singh	Consultant	CP	Advisor	M	Do
6	Dr. Sajid Ishtiaque	Consultant	CP	Advisor	M	Do
7	Ms. Abha Tewary	Consultant	CP	Advisor	F	Do
8	Ms. Shalini Singh	Consultant	CP	Advisor	F	Do
9	Mr. Abhishek Soni	Regional ASHA Coordinator (UP)	CP	Advisor	M	Do
10	Mr. Balram Kumar Tiwari	Regional ASHA Coordinator (UP)	CP	Advisor	M	Do
11	Ms. Vandana Jakhmola	Secretarial Assistant	CP	Advisor	F	Do
12	Mr. Tushar C. Mokashi	Research Assistant	HCF	Advisor	М	Do
13	Ms. Manju Negi	Secretarial Assistant	HCF	Advisor	F	Do
14	Dr. Sandhya Ahuja	Senior Consultant	HMIS	Advisor	F	Do
15	Dr. Tanupriya Pal	Consultant	HMIS	Advisor	F	Do
16	Ms. Alia Kauser	Consultant	HMIS	Advisor	F	Do
17	Ms. Itisha Vasisht	Consultant	HMIS	Advisor	F	Do
18	Dr. Amit Mishra	Consultant	HMIS	Advisor	М	Do
19	Mr. Deepak Chandra Bhatt	Research Assistant	HMIS	Advisor	М	Do
20	Ms. Gunjan Pandey	Fellow	HMIS	Advisor	F	Do
21	Mr. Muzammil Ahmed Lone	Fellow	HMIS	Advisor	М	Do
22	Mr. Umar Anayat	Fellow	HMIS	Advisor	М	Do
23	Mr. Mirazuddin Ansari	Fellow	HMIS	Advisor	М	Do
24	Ms. Shahnaz Shah	Fellow	HMIS	Advisor	F	Do
25	Dr. Deepti Sharma	Fellow	HMIS	Advisor	F	Do
26	Dr. Reenu Bajpai	Fellow	HMIS	Advisor	F	Do
27	Mr. Sanjay Ray	Data Entry Assistant	HMIS	Advisor	М	Do
28	Dr. Dilip Singh Mairembam	Advisor	HRH	ED	М	Do
29	Dr. Suchitra Lisam	Senior Consultant	HRH	Advisor	F	Do
30	Mr. Prankul Goel	Consultant	HRH	Advisor	М	Do
31	Dr. Roli Srivastava	Fellow	HRH	Advisor	F	Do
32	Dr. P.Padmanaban	Advisor	PHA	ED	M	Do
33	Mr. Prasanth K. S.	Consultant	PHA	Advisor	М	Do
34	Mr. Ajit Kumar Singh	State Facilitator	PHA	Advisor	M	Do
35	Mr. Ankit Kumar Singh	Fellow	PHA	Advisor	M	Do
36	Mr. Mukesh Kumar Singh	Fellow	PHA	Advisor	M	Do
37	Ms. Suman Bely Lakra	OA Cum Data Entry Operator	PHA	Advisor	F	Do
38	Dr. Anuradha Jain	Senior Consultant	PHP	Advisor	F	Do
39	Mr. Padam Khanna	Senior Consultant	PHP	Advisor	М	Do
40	Dr. Shweta A. Saxena		PHP	Advisor	F	
41	Ms. Jhimly Baruah	Consultant Consultant	PHP	Advisor	F	Do Do
42		Consultant	PHP	Advisor	М	Do
	Dr. Abhilash Malik			1		
43	Ms. Saba Kaleem	Consultant	PHP PHP	Advisor	F	Do Do
44	Dr. Navneet Ranjan	Consultant	PHP	Advisor	M F	Do Do
45	Dr. Pragati Singh	Consultant		Advisor		Do
46	Mr. Prashant Pathak	Intern	PHP	Advisor	М	Do
47	Ms. Ashi Karke	Secretarial Assistant	PHP	Advisor	F	Do
48	Dr. Jag Narayan Sahay	Advisor	QI	ED Advisors	M	Do
49	Dr. J.N Srivastava	Senior Consultant	QI	Advisor	M	Do
50	Dr. Parminder Gautam	Senior Consultant	QI	Advisor	M	Do
51	Ms. Nidhi Jain	Consultant	QI	Advisor	F	Do
52	Ms. Rashmi Singh	Consultant	QI	Advisor	F	Do

53	Dr. Nikhil Prakash Gupta	Research Assistant	QI	Advisor	М	Do
54	Dr. Deepika Sharma	Research Assistant	QI	Advisor	F	Do
55	Ms. Indu Suryawanshi	Secretarial Assistant	QI	Advisor	F	Do
56	Dr. Abhay Dahiya	Fellow	QI	Advisor	М	Do
57	Dr. Ranjit Kumar Mandal	Fellow	QI	Advisor	М	Do
50	Dr. Satyasandipani	Fallerin		A aloria a n	_	D-
58	Pradhan	Fellow	QI	Advisor	F	Do Do
59	Dr. Santosh P Narwade	Fellow	QI	Advisor	M	Do Do
60	Mr. Sunil Kumar Banerjee	Principal Administrative Officer	Admn.	PAO	M	Do Do
61 62	Mr. Virendra Prasad Mr. Amit Kumar	Consultant - Admn. Admn. Assistant cum Driver	Admn. Admn.	PAO	M	Do Do
63	Mr. Padam Samal	Office Assistant	Admn.	PAO	M	Do
64	Mr. Amit Arora	Office Assistant	Admn.	PAO	M	Do
65	Mr. Girish Kumar	Pantry-Cum-Office Assistant	Admn.	PAO	M	Do
66	Mr. Prakash Chemjung	Pantry-Cum-Office Assistant	Admn.	PAO	M	Do
67	Mr. Ravi	Pantry-Cum-Office Assistant	Admn.	PAO	М	Do
68	Ms. Krishna Bose	Private Secretary	Admn.	PAO	F	Do
69	Mr. Gambhir Jain	Accounts Officer	Admn.	PAO	М	Do
70	Mr. Ashok Pathar	Consultant - Acs	Admn.	PAO	М	Do
71	Ms. Neha Rastogi	Account Assistant	Admn.	AO	F	Do
72	Mr. Vinit Goklani	Human Resource Manager	Admn.	PAO	М	Do
73	Mr. Subrata Kumar Patel	Consultant - HR	Admn.	HRM	М	Do
74	Mr. Mukesh Kumar	Data Entry Assistant	Admn.	HRM	М	Do
75	Mr. Mukesh Kumar	Executive - IT	Admn.	HRM	M	Do
70			MOUEN	Director,	_	5
76	Ms. Shraddha Masih	Consultant	MOHFW	NRHM Director,	F	Do
77	Ms. Asmita Jyoti singh	Consultant	MOHFW	NRHM	F	Do
				Director,		
78	Dr. Shahab Ali Siddiqui	Consultant	MOHFW	NRHM	M	Do
70	Dr. Abbiebels Comte	Canavitant	MOLIEW	Director,		De
79	Dr. Abhishek Gupta	Consultant	MOHFW	NRHM Director,	M	Do
80	Mr. Pradeep Tandon	Consultant	MOHFW	NRHM	М	Do
				Director,		
81	Dr. Arpana Kullu	Consultant	MOHFW	NRHM	F	Do
82	Mr. Rajiv kumar	Consultant	MOHFW	Director, NRHM	М	Do
02	Wii. Rajiv Railiai	Condition	WIGHT VV	Director,	141	50
83	Dr. Jayant Pratap Singh	Consultant	MOHFW	NRHM	М	Do
				Director,	_	_
84	Dr. Nitasha Manpreet Kaur	Consultant	MOHFW	NRHM Director,	F	Do
85	Dr. Rachna Parikh	Consultant	MOHFW	NRHM	F	Do
				Director,		
86	Dr. Salima Bhatia	Consultant	MOHFW	NRHM	F	Do
0.7	Dr. Carita Cinha	Conquitant	MOHEW	Director, NRHM	F	Do
87	Dr. Sarita Sinha	Consultant	MOHFW	Director,	F	Do
88	Mr. Sahil Chopra	Intern	MOHFW	NRHM	М	Do
	·			Director,		
89	Ms. Aseema Mahunta	Intern	MOHFW	NRHM	F	Do
90	Dr. Nikhil Pradeep Utture	Intern	MOHFW	Director, NRHM	М	Do
90	Dr. Nikilli i radeep ollule	intelli	IVIOLIEVV	Director,	IVI	DU
91	Dr. Faisal Shaikh	Intern	MOHFW	NRHM	М	Do
				Director,		_
92	Dr. Ashalata Pati	Intern	MOHFW	NRHM	F	Do
93	Dr. Anil Kashyap	Intern	MOHFW	Director, NRHM	М	Do
	57.7 min Naonyap		1010111100	Director,	141	50
94	Ms. Neha Kashyap	Intern	MOHFW	NRHM	F	Do
05	Ma Naha Culati	Intern	MOHENY	Director,	_	De
95	Ms. Neha Gulati	Intern	MOHFW	NRHM	F	Do

(x) The monthly remuneration received by each of its officer and employees including the system of compensation as provided in its regulations;

Designation	Consultancy Fee Band
Interns	10000 - 19000
Fellows	20000 - 29000
Research Assistant	30000 - 39000
Consultant	40000 - 69000
Senior Consultant	70000 - 99000
Advisor / PAO	100000 - 125000
Executive Director	126000 - 150000

Support Staff				
Designation	Consultancy Fee Band			
Pantry cum office Assistant	6000 - 12000			
Admin Assistant	14000 - 25000			
Personal Assistant	18000 - 35000			
Accounts Assistant	20000 - 30000			
Accounts Officer	30000 - 45000			
HR Manager	45000 - 69000			
Finance Manager	45000 - 69000			

(xi)The budget allocated to each of its agency, indicating the particulars of all plans, proposed expenditures and reports on disbursements made;

The corpus funds of Rs. 15 crore are available per annum to NHSRC. The budget is allocated to each divisions as per their work plan submitted for the year.

(xii)The Manner of Execution of Subsidy Programmes including the amounts allocated and the details of beneficiaries of such programmes;

Not applicable.

(xiii)Particulars of Recipients of concessions, permits or authorization granted by it;

Not applicable.

(xiv) Details in respect of the information, available to or held by it, reduced in an electronic form;

- Details of consultants working in NHSRC
- Annual Report
- Monthly Reports.
- Annual Budget
- List of Governing Body Members

(xv) The particulars of facilities available to citizens for obtaining information, including the working hours of a library or reading room if maintained for public use;

The information can be obtained through the web-site of the office at www.nhsrcindia.org

(XVI)The names, designations and other particulars of the Public Information Officers;

Name	Designation	RTI	Address/Contact	E – Mail
			No.	
Dr. T	Executive Director	Appellate	National Health	Sundarraman.t@gmail.com
Sundararaman		Authority –	Systems Resource	
		NHSRC	Centre, NIHFW	(T)+91-11-26108982 / 83 /
			Campus, Baba Ganga	84 / 92 / 93
			Nath Marg, Munirka,	
			New Delhi 110067	
Wg Cdr (Retd)	Principal Administrative	Public	do	Pao.nhsrc@gmail.com
Sunil Kumar	Officer	Information		
Banerjee		Officer		
Mr Vinit Goklani	Human Resource	Assistant	do	Vinit.goklani@gmail.com
	Manager	Public		
		Information		
		Officer		