National Health Mission
State Health & Family Welfare Society
Palace Compound, Agartala, Tripura (W)

No. F. 3 (5-3152)-FWPM/SHFWS/HRIS/2016/1769-1804

To
The Executive Secretary cum Chief Medical Officer
District Health & Family Welfare Society
(West/ Sepahijala/ Gomati/ South/ Khowai/ Dhalai/ North/ Unakoti)

To
The State Programme Officer
(RNTCP/ NTCP/ NVBDCP/ NLEP/ NPCB/ NPCDCS/ IDSP/ NMHP
To
Medical Superintendent
(AGMC & GBP Hospital/ IGM Hospital/ Regional Cancer Hospital/ Gomati District Hospital/ Unakoti District Hospital/ Dhalai District Hospital/ Khowai District Hospital/ North District Hospital/ South District Hospital

Subject: Regarding Inclusion of HRIS employee code in the Appraisal format of NHM Staffs

Sir,

In reference to the subject cited above, all CMOs, State Programme Officers & Medical Superintendent were requested to ensure the all staffs performance appraisal format to be filled in the new format which is available in the NHM website (www.tripuranhm.gov.in) circular section.

In this connection it is to mention here that Office-wise User Id & password has also been communicated to all Districts & Sub-District and individual online generated employee code of all NHM staffs are available in the HRIS portal (www.tsu.trp.nic.in/tripurapis).

Now, hereby instructed to all CMOs, Programme Officers and Medical Superintendent to ensure supply the employee code to the all NHM staffs by the nodal person of HRIS portal District & Sub-District level.

Therefore, you are hereby requested to ensure that continuation order of all contractual staffs under your control should be published in the NHM website time to time positively.

(Dr. Shailesh K. Yadav, IAS)
Mission Director, National Health Mission
Government of Tripura

Copy to:-

1. The Secretary, Health & Family Welfare, Government of Tripura for information to the Secretary, Health & Family Welfare.
2. The Director of Health Services, Government of Tripura for information.
3. The Director of Family Welfare & PM, Government of Tripura for information.

Copy also forwarded to:-


Mission Director, National Health Mission
Government of Tripura
Performance Appraisal Format

For the period ending 10th Month on ..............................................

Name of Employee  
(In Capital Letter) ..............................................................

Employee Code (As per HRIS) : .............................................

Designation : ...........................................................................

Place of Posting : ......................................................................
(If Posted in Sub-Centre, mention Controlling PHC/CHC/SDH)

Date of Commencement of Present Contractual Term  
(Enclose Order Copy) ..............................................................

Assigned Job  
(Enclosed Separate Sheet It required) ....................................

Evaluation of Performance .........................................................

<table>
<thead>
<tr>
<th>Assessment Level</th>
<th>Evaluation Rate * (as Per Rate indicated Below the table)</th>
<th>Signature with Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Self</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. District Magistrate &amp; Collector (for the staff Posted in DM’s office) OR Medical Superintendent (for the staff posted in State &amp; District Hospitals) OR Chief Medical Officer (for all staff posted in CMO’s office) OR Sub-Divisional Medical Officer (for the staff Posted in SDHs/SCs under his control) OR Branch Officer, AYUSH (for the staff of Programme Management unit of AYUSH OR Medical Officer In-charge (for the staff posted in N. S. S Homeopath Hospital OR Medical Officer In-charge (for the staff posted in CHCs/PHCs/SCs under his control)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Outstanding-1, Very Good-2, Good-3, Average-4, Poor-5 (Rating Scale: 1-5)

Comments with specific recommendation of Member Secretary, State Health & Family Welfare Society, Tripura in regard to continuation/engagement for next terms as the case may be:

Contd...... P/2
Instruction:

1. Performance Appraisal Report (PAR) to be submitted by each of the contractual staff during existing contractual period of 11 (eleven) months to his controlling Officer within 5 (five) days after completion of 10th month of the current tenure.

2. Respective Controlling Officer (Assessing Authority) that is District Magistrate & Collector/ Medical Superintendent/ Member Secretary, SHFWS, Tripura/Chief Medical Officer/ Branch Officer, AYUSH/ Sub-Divisional Medical Officer/ Medical Officer, In-Charge, NSS Hospital and FHC & CHC should record his/ her evaluation rate and submit the same to the next Assessing Authority in the below mentioned way within 10 (ten) days of completion of 10th month as the case may be:

<table>
<thead>
<tr>
<th>Sl. No</th>
<th>Staff Posted in</th>
<th>PAR Should be Routed Through</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>O/o the District Magistrate &amp; Collector</td>
<td>Self→ District Magistrate &amp; Collector→ Mission Director, NHM</td>
</tr>
<tr>
<td>2.</td>
<td>State &amp; District Hospitals</td>
<td>Self→ Medical Superintendent→ Member Secretary, SHFWS, Tripura</td>
</tr>
<tr>
<td>3.</td>
<td>O/o the Chief Medical Officer</td>
<td>Self→ CMO→ Member Secretary, SHFWS, Tripura</td>
</tr>
<tr>
<td>4.</td>
<td>Sub-Divisional Hospitals/ SCs (run under SDHs)</td>
<td>Self→ SDMO→ Member Secretary, SHFWS, Tripura</td>
</tr>
<tr>
<td>5.</td>
<td>Staff posted in CHCs/PHCs/SCs</td>
<td>Self→ MO I/c→ Member Secretary, SHFWS, Tripura</td>
</tr>
<tr>
<td>6.</td>
<td>Staff posted in the O/o the Mission Director, NHM, Tripura</td>
<td>Self→ Member Secretary, SHFWS, Tripura</td>
</tr>
</tbody>
</table>

3. This way the PAR to reach the Mission Director within 15 (fifteen) days of completion of 10th month of the current tenure as the case may be.

4. Member Secretary, State Health & Family Welfare Society, Tripura (NHM) will record his rating & give recommendation in the PAR regarding the fitness for continuation/engagement for the next term of the staff and submit the same to MD, NHM, Tripura within 20 days of completion of 10th month of consideration of MD, NHM, Tripura.