



Annual Activity Report 2021-2022



Bella Health Care Charitable Trust



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Message from Our Founder

Bella has completed Ten years of service to our communities in Uttarakhand. I want to thank Mr. Atul Negi, Dr. Preeti Deoli, Miss. Sunmala Rawat, Mr. Kailash Chandra and all other staff members for keeping my dream alive through their leadership, hard work and commitment to Bella. I want to acknowledge the support and encouragement provided by Chief Medical Officer and Director of Education.



Dr. Vijay P. Agarwal,
Founder Member of Bella Health.

primary healthcare as well as educational services to the women, children and adolescents in our communities. We will also continue to find new partners to help deliver our services to more communities.

Our goals for the next two years are to:

- 1) provide direct health care services to over 1 lac women and children and educate more than 2 lakh adolescents through our Adolescent Health Education Program in 70 Schools;
- 2) continue our collaboration with Vitamin Angles and Departments of Health and Education of Govt of Uttarakhand.
- 3) Specially thanks to DKD (Daliyo ka Dagadiya), Srinagar NGO to collaborate with Bella and provide the new target area's in Tehri Garhwal.

Thanks to our Donors

Bella Health has been supported for the past Nine years through the generous donations of **Dr. Vijay P. Agarwal**. A native of Mumbai, he has dedicated his life to medicine and helping people indiscriminately to achieve health and well-being. He is a dedicated physician and admired by all of his patients and colleagues. Dr. Agarwal has supported Bella Health with his firm belief in our mission and vision to improve the lives of women in India.

Thanks to our Donors

- ❖ Vitamin Angles
- ❖ Prabha Memorial trust
- ❖ Adarsh Medicos
- ❖ Doon Surgical
- ❖ Chandan Laboratory

About Bella Health

VISION: To enhance the health and quality of life of all, whom we serve and address health disparities in our communities.

Bella Health Charitable trust is an NGO based in Dehradun, Uttarakhand working tirelessly since 2011 for the enhancement of women health and quality of life, by empowering women to increase their ability to make informed family planning and reproductive health choices. The activities include health care services that address maternal, child and reproductive health issues.



Dr. Preeti, Treating Patients.

Bella Health has been a pioneer in the provision of Reproductive Health care services in North India. Through our community-focused and mobile approach, including our highly skilled and dedicated team, we have broken down the barriers to access within these communities. The health care services we provide are supplemented with health education; this health education not only empowers women and their communities but sets them on a path to continuous health maintenance by encouraging them to prevent, and sustain positive health behaviors. The knowledge we impart stays in the villages and fosters a healthy life-course amongst beneficiaries and their communities even when our programs are not there.

We have given a detailed table explaining the number of beneficiaries we have provided service to, in the past 9 years.

Bella Clinics



Krishna Clinic, Village - Dhakrani, Vikasnagar, Dehradun.



Mala Clinic, Village – Rampur, Sahaspur, Dehradun.



Varsha Clinic, Village - Jeevangarh, Vikasnagar, Dehradun.



Rekha Clinic, Village – Kunja Grant, Vikasnagar, Dehradun.

The team that makes it all happen!

ALL

Name	Position on Governing Body	Qualifications	No. Years as Board	Other Offices
Dr. Vijay P. Agarwal	Founder	MD, MBBS	9	Practicing Physician in USA.
Mr. Atul Negi	President	MSW	2	NA
Dr. Preeti Deoli	Board Member	BAMS	3	NA
Miss. Sunmala Rawat	Board Member	MSW, B. Pharma	3	NA
Mr. Kailash Chandra	Board Member	MSW	12 Month	NA



Bella Health is so blessed to have such dedicated, passionate, hardworking and talented team members.

- **Operations Manager:** Mr. Atul Negi
- **Health Care Provider:** Dr. Preeti Deoli, Dr Kritiki Butola.
- **Health Educators:** Miss. Sunmala Rawat, Mr. Kailash Chandra.
- **Clinical Support staff :** Miss. Manju Bidlan, Miss. Divya Sharma.
- **Nurse:** Mrs. Leela Devi, Mrs. Anuradha Suyal.
- **Driver:** Mr. Som Bahadur.

Overview

While the underlying causes of these Reproductive Health morbidities are complex and multifaceted, much can be done by providing direct health services and education at the primary and community care level. We focus exclusively on reproductive health - there is a huge need to go back to basics and teach people about proper menstrual hygiene, dismantle common misconceptions about reproductive health and teach accurate and relevant topics on family planning, pre/post natal care, menstrual hygiene, sexually transmitted infections, respiratory tract infections, infertility.

Our programs address the aforementioned problems by providing high quality health services supplemented with health education. We empower women with education, so they can have a healthier life. We also want this education to begin young, so that a healthy life course approach is adopted early in order to be better maintained throughout the different stages of life and health. In light of this, the adolescent program, which was piloted in 2013, has been a major success. **The community feedback has been positive and we are leaving adolescents with knowledge that will shape their attitudes, decisions and lead to healthier behaviors.**

These tools will not only make the new generation healthier, but their families and communities healthier too.

Our Objectives

- Provide Health Care Services to 1,50,000 beneficiaries.
- Expand operations to Tehri Garhwal and more interior places in Uttarakhand.
- Triple the number of women who access to quality reproductive health and family planning services in our target areas by 2021.
- Provide modern contraception to all women in reproductive age who desire to space a family in our target area by 2021.
- Decrease the prevalence and increase the awareness of Sexually Transmitted Infections' and Reproductive tract Infections by 50% in our target areas by 2022.
- Decrease the amount of unsafe abortions by 50% in our target areas by 2023.
- Ensure there is not any UNMET need for contraception in our target areas by 2024.
- Decrease the amount of adolescents who are pregnant in our target area by 2022
- Decrease the rates of infertility by actively treating and educating women on Pelvic Inflammatory Disease in our target area by 50% in our target areas by 2022.

Impact to the community

Reproductive Health

Beneficiaries of Bella Health services have increased awareness of reproductive health issues and have better health outcomes. Beneficiaries have no UNMET needs for contraception. The rates of modern contraception use is 25% higher in patients using our services than baseline. The rates of unsafe abortion have decreased, as they have safe abortions. Pregnant patients receive an average of 5 antenatal visits and 3 prenatal visits, which is 200% increase from baseline data. The beneficiaries are also more likely to have an institutionalized delivery. Additionally, they are more aware of dangerous conditions during pregnancy that will lead to early treatment, which in turns protects the health of both mother and infant. Obstetric and gynaecological emergency situations are identified early and respective interventions were sought immediately. Dangerous conditions for the mother and the baby have been reduced through these early interventions, knowledge and proper counselling for the mother and family.

Maternal Health

There have not been any maternal ,child deaths and pregnant patients in our target area. The majority of sexually transmitted disease/reproductive track infection and pelvic inflammatory disease infections have been treated and the patients remain infection free, by having adopted some form of modern contraception. Most importantly, the beneficiaries perceive that woman's health is important. There have been 75-100% increase in the perception of indicators such as: the importance of woman's health, feeling empowered to seek treatment, feeling empowered to know what is wrong with their health and feeling comfortable talking to their health care providers about family planning.

Health Education

Knowledge has increased 70-100% in health topics. Beneficiaries are educated and have increased their knowledge on contraception, HIV/STI's, abnormal vaginal discharge and other reproductive health focused topics. They gained knowledge about Covid-19 Disease and It's prevention. They have increased awareness in the prevention, transmission and treatment for sexually transmitted infections and reproductive tract infections. This increased knowledge is an indicator that beneficiaries feel a greater sense of empowerment regarding their health, health care decisions and in their interactions with providers. To summarise- The beneficiaries are empowered!

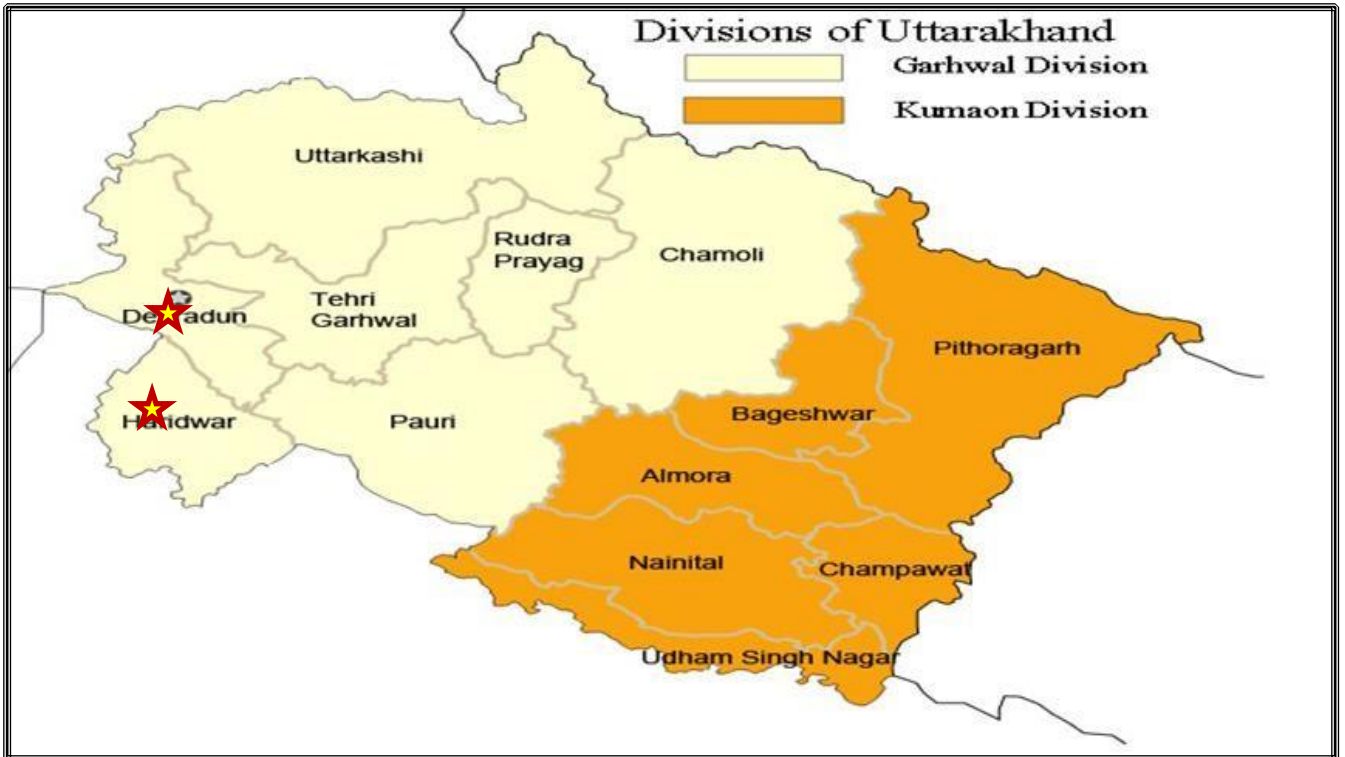
Bella Health Number

Year	Patient-s	Health Education	ARH Education	Total Beneficiaries	Labs	Medicines Dispend	ANC/PNC Reproductive Health
2012	6,964	7,912	-	14,876	3,553	281,632	484
2013	9,665	20,279	4,629	34,573	4,861	147,945	876
2014	21,522	10,221	14,036	45,779	3,660	241,954	533
2015	5,976	10,222	8,921	25,119	1,673	178,411	335
2016	7,365	13,301	22,168	42,834	1,830	124,284	414
2017	7,704	11,546	16,898	36,148	1,976	157,000	332
2018	7,873	11,393	22,765	42,031	2,010	216,809	360
2019	9,360	12,168	23,450	44,978	2,496	2,19,336	624
2020	7,597	8,564	-	16,161	1,465	2,15,102	426
2021	3,440	7,890	-	11,330	9,045	2,14,203	325
Total	87,466	1,13,496	1,12,867	3,13,829	32,569	17,996,676	4,809



Dated 2 January 2022, Prabha Memorial Trust Dehradun and Bella Health Care Charitable Trust Dehradun, combination of both (Memory of Late Smt. Prabha Arora) One day free health checkup camp was organized in (Milan Kendra Shastri Nagar Dehradun).

Geographic Scope



District – Dehradun

Block: Doiwala

Villages - Majri Grant, Raiwala, Balawala, Ajabpur Kalan, khadri, Markham Grant, Majri Mafi, Miyanwala, Mothrowala, Bullawala, Majri Grant, Shergarh, Badowala, Barkot, Dudhali

Block: Vikas Nagar

Villages - Dhakrani, Kunja Grant, Jeevan Garh, Haripur.

Block: Raipur

Villages - Lakhibagh, Maldevta, Bhagwanpur, Mehuwala, Majara, Nalapani, Raipur, Patel Nagar

Block: Sahaspur

Villages - Premnagar, Panditwari, Garhi Cantt., Mussorie Road, Guniyal Gaon, Ballupur Chowk, Selaqui, Kunja Grant, Hariyawala, Charba, Paundha, Rampur kalan, Kaulagarh ,Bada Rampur

District – Haridwar

Block: Bhagwanpur

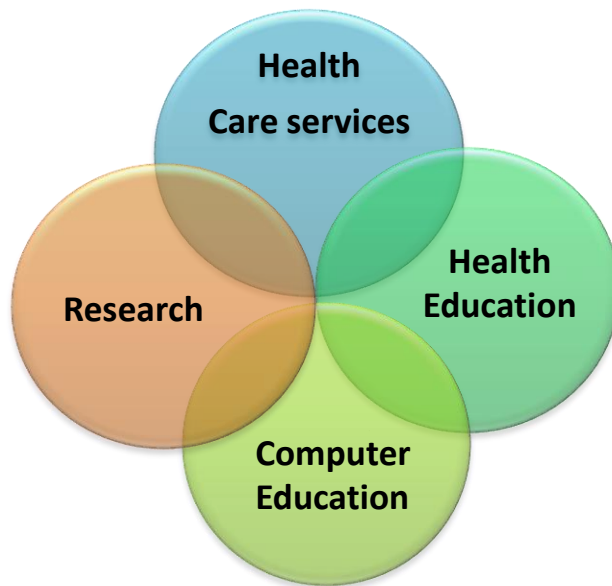
Villages – Shirchandi, Sikandarpur, Khubbanpur, Chapur

Villages – Shirchandi, Sikandarpur, Khubbanpur, Chapur

Villages- Gaddarjuda, Baswakheri

We have operations in 4 blocks of Dehradun District and in 2 districts of Uttarakhand. In time, we will scale operations to reach 4 districts of Uttarakhand.

Programs



'APNA GHAR' HEALTH CAMP

Bella Health Care Charitable Trust organized health camp (screening and health education) on 06 October, 2021 at 'Apna Ghar' orphanage, Badripur, Dehradun, uttarakhand.

Programs

Gynaecological Services

Treatment and diagnosis of menstrual cycle problems, reproductive tract infections, sexually transmitted infections, pelvic inflammatory disease, infertility, pelvic pain etc.

Maternal And Infant Health

Ante-natal care visits, post-natal care visits, with comprehensive and quality treatment.

Contraceptive Services

Family planning counselling, provision of contraception, referral for sterilization.

Lab Services

Rapid labs available for 10 tests. Other labs are sent outsourced for testing.

Medications

Formulary Medicines are given as per doctor's prescription for 7-14 days.

HIV Related Services

Counselling for sexually transmitted infections and family planning methods.

Acute CARE

Basic non-emergent health conditions are treated on a primary health level.

Pandemic Situation

Awareness, counselling and Social Distancing.

Services for Men

Awareness, testing and counselling.

Computer Education Program for Women's and Girls

Awareness, testing and counselling.

Health Care Services

It is defined as the ability of a woman to live through the reproductive years and beyond, with reproductive choice, dignity and successful childbearing, and to be free of gynecological diseases and risk. Reproductive choice is a concept that allows a woman to exert control of her reproductive process and dignity which refers to the social and psychological well being, which a woman derives from the process of reproduction. A woman's health is not only a state of physical being, but it is an expression of many roles she performs as a wife, mother, care-giver and wage earner, as well as her interaction with the social, cultural and economic world which influences her daily life.

The Problem

Quality and affordable reproductive health services are non-existent in our communities leading to poor health outcomes. Lack of health awareness leads to poor health outcomes and health education is practically nil within the communities we serve. There are many misconceptions concerning reproductive health and it is often seen as a taboo. The confluence of lack of services and misconceptions or lack of awareness in these communities leave the population vulnerable to greater morbidity and mortality from preventable causes, particularly in regards to reproductive health. In India, 1 woman is dying every 2 hours from unsafe abortions, even though India has one of the most liberal MTP laws. Unsafe abortions continue to outweigh safe abortions. Within our communities many women seek unsafe methods of abortion due to lack of access and lack of education, putting their lives and health at risk. RTI's are rampant causing PID and in some cases infertility. RTI's causing PID are seen in adolescents- even before they are sexually active and are seen in the majority of women after they deliver or undergo an abortion.

Our Solution

To bring high quality reproductive healthcare services to these under served and impoverished slums and interior villages using our state of the art diagnostic mobile health center. Health care services are provided at the doorstep by dedicated and highly skilled staff. The van is staffed with 3 doctor, 3 nurses, 3 educational specialists, and support staff. All Clinics are fully equipped to perform pelvic exams, draw labs, conduct screenings, and dispense medicines. We follow a schedule and visit 2 clinic on daily bases and 2 clinics in alternate bases. We have the latest diagnostic equipment including fetal heart monitor, rapid tests for pregnancy, blood glucose, hemoglobin, UA, blood type, Rh, syphilis, HIV, Malaria, Hepatitis B and Hepatitis C. These rapid tests allow our doctors to diagnose and subsequently treat them on the spot. We give the patient enough medicines, to last 2 weeks or until we return.

1.) Maternal and Child Healthcare Services

The Problem

India has higher maternal mortality and morbidity rates than many neighboring countries, even though its economy is booming. But this development has not equally benefited all parts of India, and in some places health indicators are actually regressing. The government has the policies in place to provide maternal health, but they are not implemented effectively. The government has failed when it comes to providing adequate health care facilities, trained medical staff, safe sterilization services, essential medicines, and an effective and timely facility referral system. Uttarakhand has some of the worst health indicators for maternal and child mortality rates in India. Antenatal care (ANC) and postnatal care (PNC) visits are essential to decreasing maternal and child mortality rates because they lead to early treatment and prevention of mother/child deaths. The WHO suggests that a minimum of 4 ANC visits and 3 PNC visits are required for women going through pregnancy.

Our innovation is to bring maternal and child health care to these underserved and impoverished slums using our state of the art diagnostic mobile health van. Health care services will be provided at patients' doorsteps by a dedicated and highly skilled staff. The program provides ANC/PNC visits at the urban slums in and around Dehradun. Our programs address primary and preventative health of the mother and baby in order to foster better overall health of mother and baby.



Dr. Kritiki, Treating a Patient at Bella health camp in Maithana Village, Chamoli District, Uttarakhand

2.) Reproductive Health Patients for 2020

Diseases treated	Number
Birth Control/ Family Planning	1,422
Reproductive Tract Infection/ Sexually Transmitted Infection	3
Pelvic Inflammatory Disease	215
Anaemia	330
ANC/ PNC	325
Dysfunctional Uterine Bleeding	295
Urinary Tract Infection	120
Infertility	12
Uterus Prolapsed	42
TOTAL	2,764

The table shows the number of patients seen in each quarter of 2015 for reproductive health issues. **Approximately 45% of total patients in 2021 were seen exclusively for reproductive health issues.**

Patients seen exclusively for reproductive health issues	Numbers of Patients
1 st Quarter 2020	705
2 nd Quarter 2020	510
3 rd Quarter 2021	878
4 th Quarter 2021	900
TOTAL	2,993

3.) Health Education

The Problem

Low health awareness leads to poor health outcomes. One study found that 200 million women in India have NO understanding of menstrual hygiene and the associated healthcare. 88% of menstruating women do NOT have access to sanitary napkins and use alternatives such as cloth, dried leaves, ash, hay or plastic and the incidence of Reproductive tract infections is 70% more common in women who use unhygienic materials during menstruation. If we invest for improved menstrual hygiene education, it will enable the millions of girls to have healthier and more dignified lives.

Health education is our passion at Bella Health. Health education empowers our participants by giving them the knowledge necessary for adopting healthy behaviours specially in Covid - 19. Health education Helps in improving lives, families and entire communities. Bella Health provides health education through classes for adults and children, through our Adolescent Reproductive Health Program and through our health camps and screenings. Health Education classes are provided to all patients who access our health care services. We encourage patients to return for health classes even when they are feeling better. Health education sets Bella health apart from other organizations. We hope this education will sustain the health of the community! The education we impart on them, will stay with them, encourage them to adopt healthy behaviour, take a proactive approach towards their health and have an intergenerational impact making families healthier. When we “exit“ we hope people will be empowered with the tools and resources to adopt a healthy life and be able to advocate for their health and the health of their families.

Health Education Numbers, 2021

Total Number of Health Education Classes	300
Number of Child Education Classes	125

Health Education Classes for Females

Bella Healthcare provides education to women and children who avail health care services. The majority of patients who receive treatment also complete a health education class. Many women return to take health education classes, after their treatment is over, to learn more. Participants are awarded a gift and certificate when they complete 6, 12, or 18 classes.

Our health educators have their Masters in Social Work and are trained at Bella Health to conduct health education classes. Depending on the sensitivity of the topic, classes are taught by male or female educators.

Classes are supplemented with videos, posters, handouts to make it interesting, interactive and relevant. The number of classes that the participants attend is also tracked to ensure that the participants of 6/12/18 classes receive the awards/ certificates. To measure the effectiveness of the education we ask the participants pre-/post-test questions. We ask the participants the “pre” questions before the class to measure their baseline information and then ask the “post” questions after the class to ensure that the objectives of the class were met. This allows our team to evaluate the effectiveness of the education and endorse a more participatory learning environment. We also track the number of classes the participants attend. After the participants attend 6 classes they receive a certificate and present from Bella Health.

Month	Class 1	Class 2
April	Covid - 19	Covid - 19
May	Thyroid	Unsafe Abortion
June	Diabetes	Nutrition
July	Pregnancy	Unsafe Abortion
August	Blood Pressure	Anemia
September	First Aid	Environmental Health
October	Back Pain	Breast Cancer
November	Menstrual Cycle & Menstrual Hygiene	Vaginal Discharge
December	Thyroid	Nutrition
January	Hypertension	Breast Cancer
February	Menstrual Cycle & Menstrual Hygiene	Pregnancy
March	-	-

Health Education Camps for Kids

Bella healthcare conducts 'Health Camps' in various villages/slums to provide health promotion and education to large number of people. Our outreach also targets children. We utilize multimedia learning such as DVDs, songs and activities to engage them on the issues listed below:

**Hand
washing**



Nutrition



**Personal
Hygiene**



First Aid



Health Education Class for Kids

Adolescent Reproductive Health (ARH) Program

Adolescents form a special group in society and have their own specific needs. Adolescence has become a more clearly defined developmental stage in human life and there is currently a greater recognition of this group's biological, psycho-social and health needs than before. Exploration and experimentation, the hallmark of adolescent behaviour, often propel adolescent towards risk taking, exposure to unwanted pregnancy, sexually transmitted disease/infections, substance abuse and unintended injuries. At the same time adolescents often face constraints in seeking services including their own misconceptions about their needs, having to deal with shame and embarrassment in disclosing their problems and provider's attitudes. To overcome these constraints to care seeking behaviour, it is imperative to develop specially designated services for adolescents.

The Problem

India is home to one of the highest concentration of young people in the world, with over 300 million youth and adolescents under the age of 25. Adolescents do not receive any sort of sex education in school and have little access to quality and confidential reproductive health counselling. Adolescent girls in India are a largely invisible population and extremely vulnerable with prevailing socio-cultural customs that leaves them powerless to decide their future.. Misogynistic and ageist attitudes about adolescent girls are fairly universal across India and are manifested in key aspects of their lives: gender- based discrimination, early marriage and pregnancy, lack of education, and a dearth of formal employment opportunities. Adolescent reproductive health is nonexistent in this community. Parents, family members, peers, community and religious leaders, and politicians are either ignorant or choose to ignore the complex issues pertaining to adolescents, their sexuality, education, and the consequences of depriving them of this information. When adolescents do not receive accurate information, their knowledge instead derives from friends, media, porn, and other outlets that perpetuate unhealthy or unrealistic ideas about their reproductive and sexual health. Poor reproductive health indicators show that a lack of this kind of education directly affects physical health through high rates of unsafe abortions, STIs, and RTIs, early marriage and pregnancy, and unmet needs for contraception. Many adolescents lack autonomy and they are extremely vulnerable – they are often forced into marriage, suffer from violence at home, lack education and proper health services. . 22% of girls aged 15-19 in India face physical or sexual violence, the majority within their own homes. 43% of all women aged 20-24 are married before the age of 18.

Our Solution

The program offers age and culturally appropriate female reproductive health information in a safe environment to adolescents who come from poor and middle-income families in North India. The classes cover topics ranging from puberty, anatomy, pregnancy, STIs and RTIs, unhealthy habits, violence and sexual assault. Adolescents receive unbiased and research-based information and counselling that is culturally appropriate. Youth develop skills in communication, refusal, and negotiation. Information that is medically accurate will be provided with clear goals for preventing HIV, STIs and early pregnancy. These classes have been developed in cooperation with members of the target community and respect community values.

Bella Health Computer Education program for Women's & Girls.

Bella health is established on 2011. Starting From health we are going to take step ahead for empowering women by providing them basic computer knowledge. We are also running our computer classes from November 2021. In these classes we are providing a 6 months certification course which include 3 months basic and 3 months advance course. Women are still underrepresented in the entire science and technology. We have seen that girls tend to pull away from Stem subjects including computer science while the rates of boys in these classes are stay good.

So BELLA HEALTH CHARITABLE TRUST is also taking a small initiative to give basic knowledge of computer to the women and girls. We are running this computer center in backward or village areas of Uttarakhand so that even in backward area women got to know about new technology. BY learning computer they can work in any sector and got to know about each and everything.



Bella Computer Training Centre
Village – Dhakrani, Vikasnagar Block, Dehradun, Uttarakhand

Students Feedbacks



My name is Ashmat.

I am from Harbatpur. I love to learn new skills, Due to some financial problems I was unable to learn computers, But thanks to Bella computer center for making my dream come true, Bella computer center is very beneficial for computer lovers as they are teaching us basic knowledge of computer, Me and my co learner's learned allot, as we don't get opportunity before this center is very helpful for us.

Thanks Bella computer center and his team.



My name is Meenu.

Resident of Dhakrani village. I had done BA, I am a teacher, And I had taken admission in Bella computer center on 16th June 2012 has going to complete 2 months here, Here I learned English typing, Ms word, Paint PowerPoint etc, I had never used computer before, but when I got information about Bella I have come to the computer center and got a lot of information about computer, There were no facilities for girls and women in this village, but since Bella computer has been opened in Dhakrani village. Then Girls got to learn about computer, I want to thanks Bella computer center for this great initiative.

Thanks.



My name is Khushi.

I live in Herbertur, I want to learn how to use computer but due to home condition it is not possible, I am in class 8th my father work in company and my Mother is a Housewife, So one day my Father send me to Bella Computer Training Center, Computer center Staff is vary polite, and they treat us like a friend, I learned a let by coming here, I have completed these 6 Months, I have gained by basic knowledge in 6 months, I am very thankful to Bella Computer training Center and the staff, I say that Bella brings us more such opportunities.

Monitoring and evaluation of Bella Health programs

Bella health has created numerous surveys to monitor and measure the outcomes and impact the services have. Below are the tools we use to measure the impact and outcomes. They are a mix of quantitative and qualitative tools. Some are measured continuously while others are measured at certain points in the year.

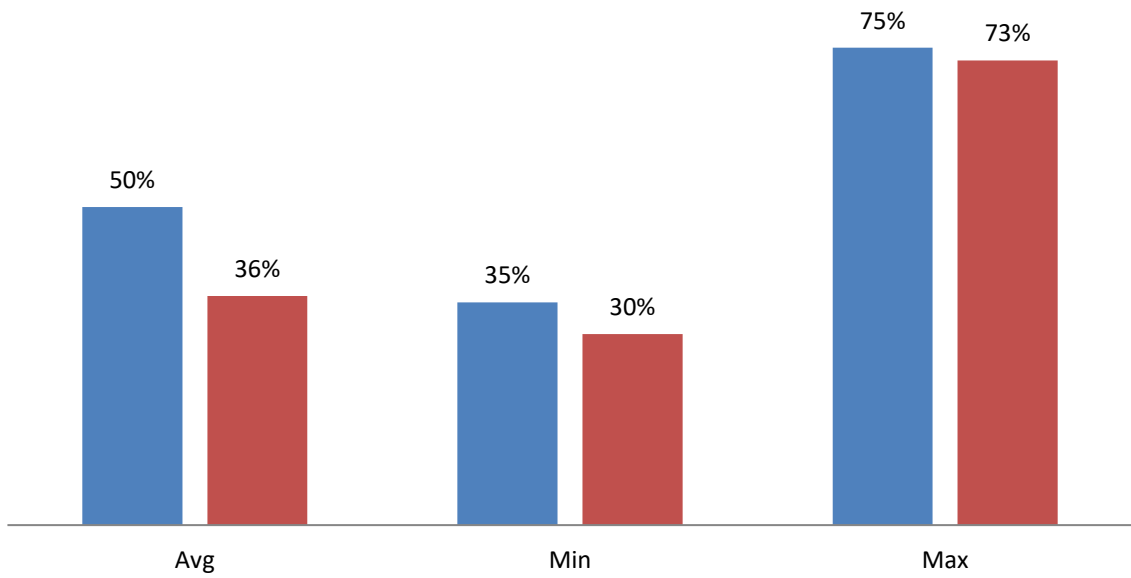
Tool	Frequency	Methodology
Baseline of key indicators for health care services.	Before Intervention	Quantitative
Patient Satisfaction of health care services	Annually	Quantitative
Program Monitoring of health care services.	Annually	Quantitative

The graphs below compare the indicators in the baseline data which is collected before any intervention is launched and the indicators collected at the program monitoring mark of 18 months. This program is monitored with this indicators yearly. See the graphs below.

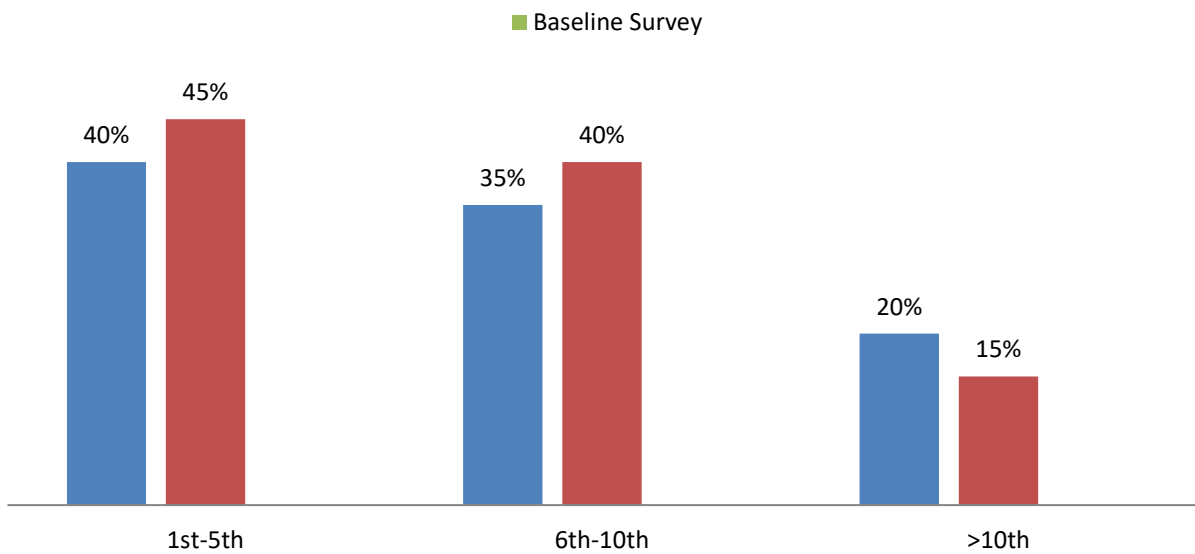
- a) Are you using Birth Control, If yes type
- b) The last time you gave birth, where did you delivery and who assisted you?
- c) Number of ANC/PNC visits in the last pregnancy
- d) Perception of the importance of Woman's Health (5 questions)
- e) Knowledge of selected Reproductive health topics (12 topics)

Demographics: The average age and educational level of the respondents are further presented graphically.

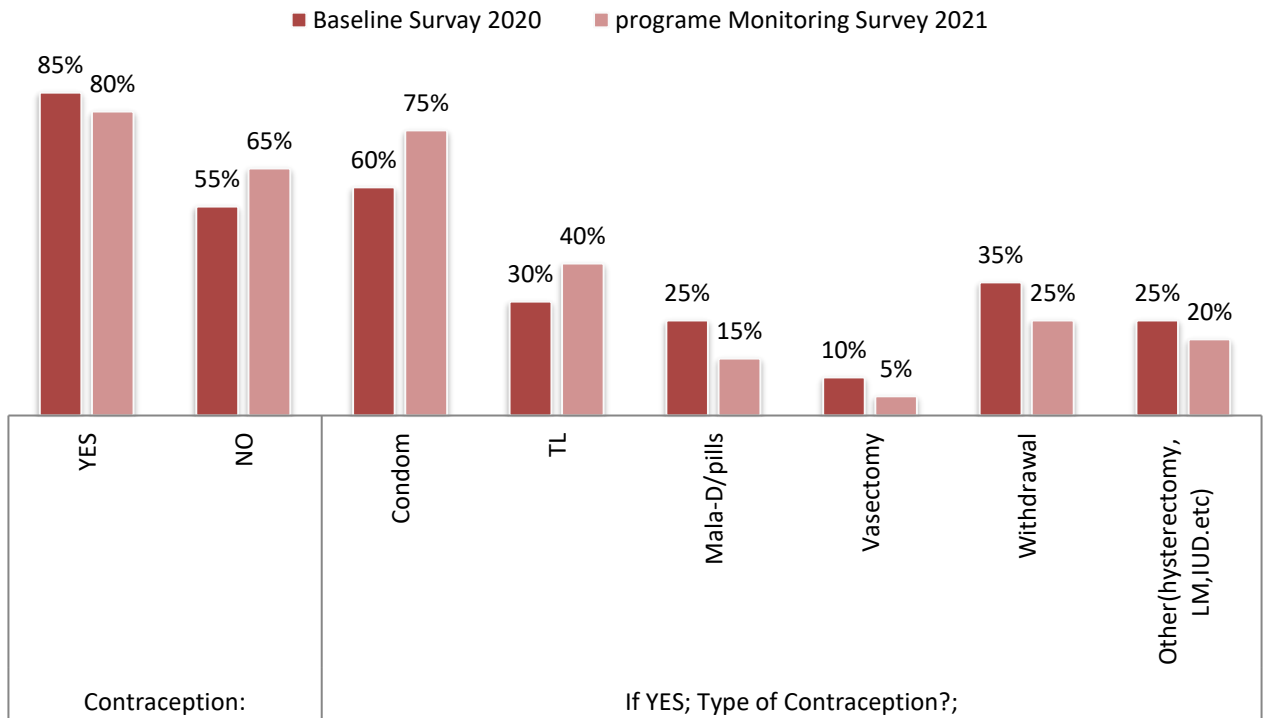
AGE: BASELINE SURVEY AND 2021



EDUCATION LEVEL: BASELINE SURVEY AND 2021



Indicator 1: Are you Currently using a Method Of Contraception and Type of Contraception Used?

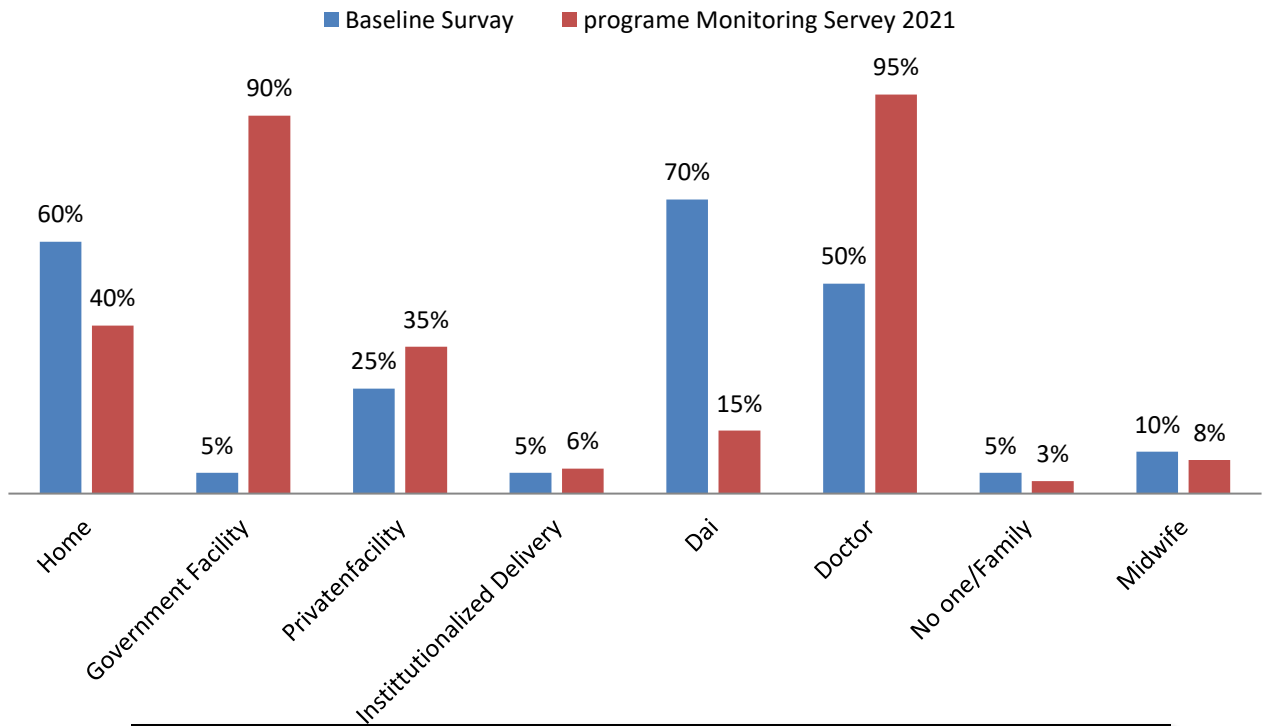


Mrs . Lila Devi (ANM) dispensing medicine to a patient at Bella health camp



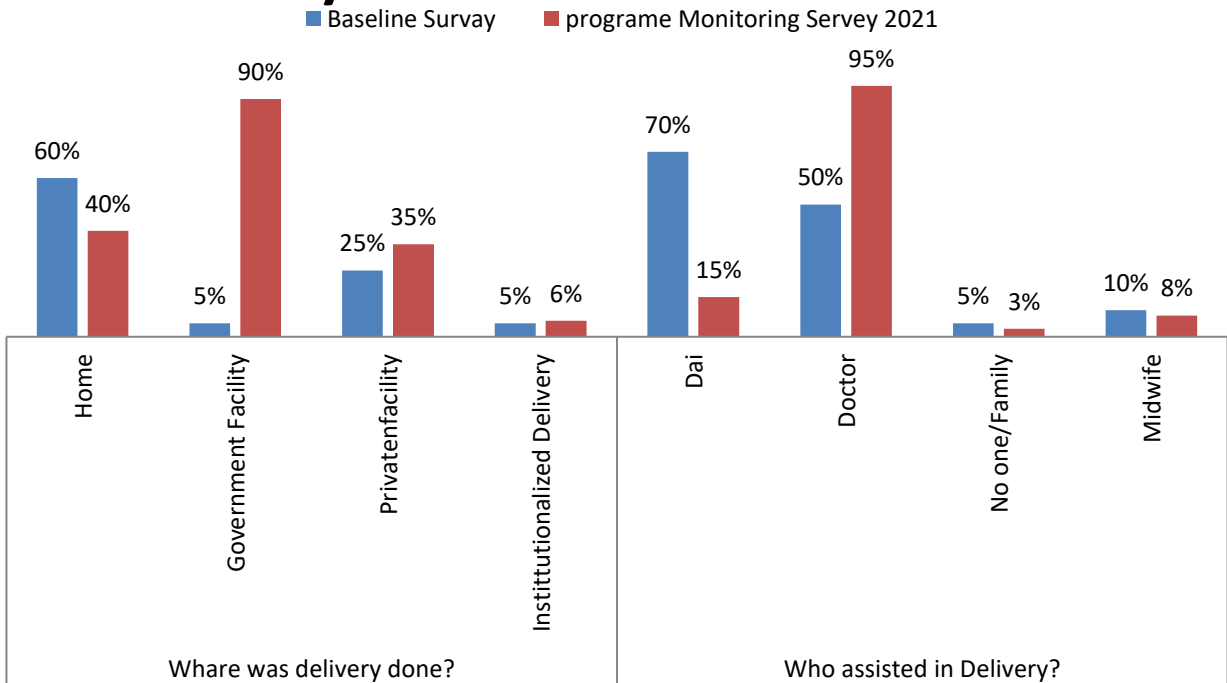
Sunmala Rawat (MSW) Providing health Education Class.

Indicator 2: Are you Currently using a Method Of Contraception and Type of Contraception Used?



Miss . Poonam Dhayani doing Registration to a patient .

Indicator 3: The Last Time You Gave Birth, Where Did You Deliver, Who assisted You In The Delivery?



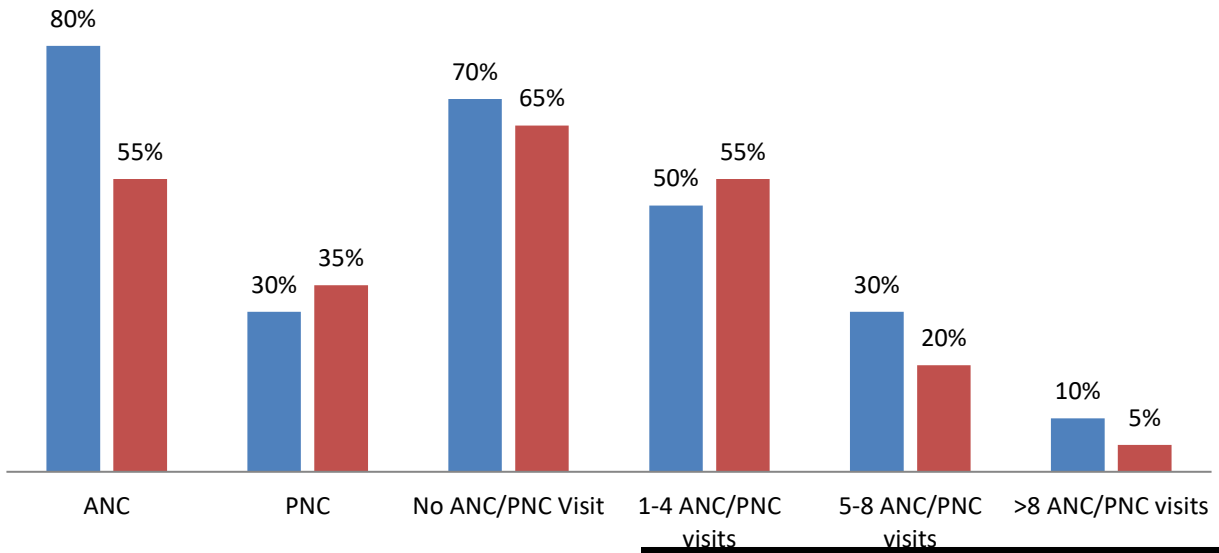
Mrs. Lila (ANM) doing lab Test.



Dr. Preeti, Treating Patients.

Indicator 4: During Your Last Pregnancy, Did You Have ANC/PNC Visits?

■ Baseline Survey 2021 ■ programme Monitoring Survey 2021



Bella health Patients



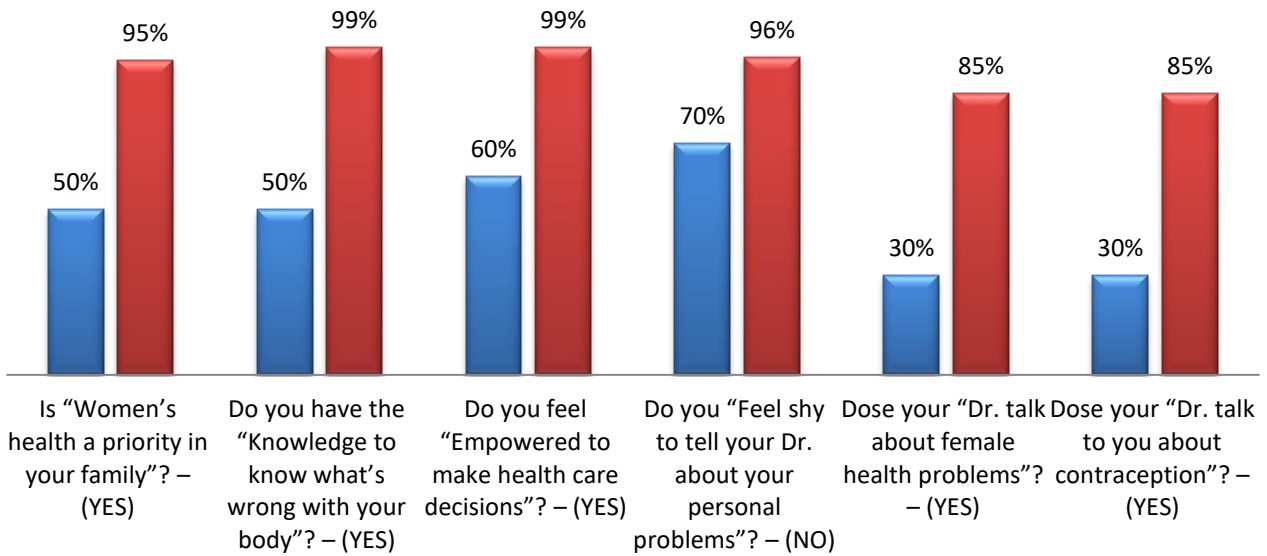
Mrs . Lila Devi (ANM) dispensing medicine to a patient



Mrs . Sunmala Rawat (MSW) Taking vital signs .

Indicator 5: Perception On Woman's Health Care

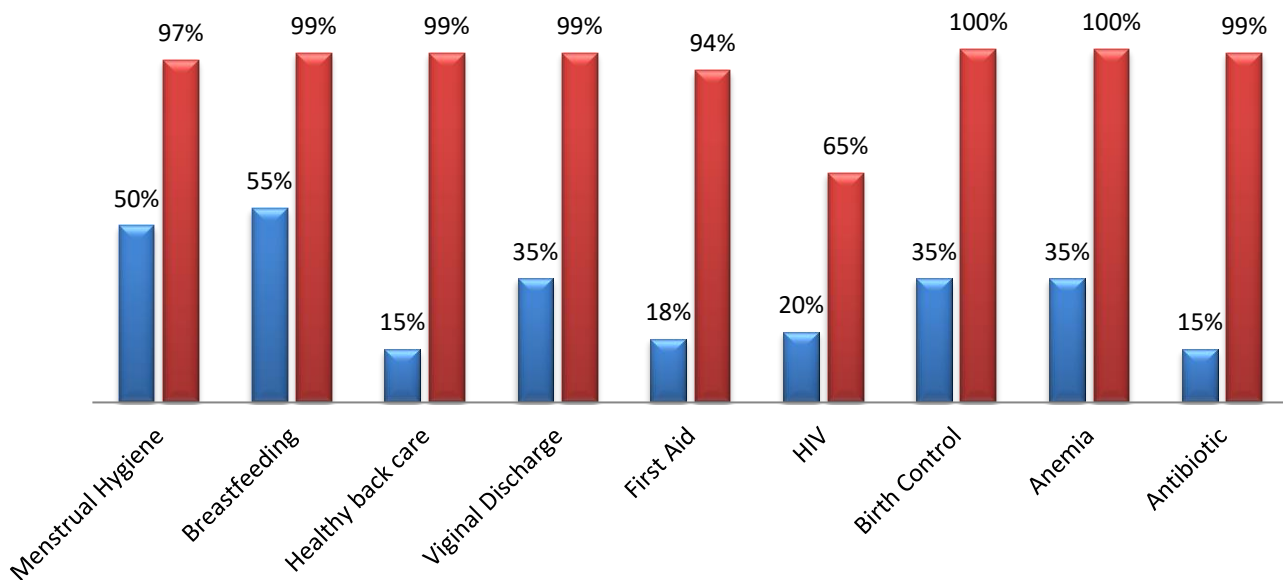
■ Baseline Survey 2021 ■ programe Monitoring Survey 2021



Sunmala Rawat (MSW) Providing health Education Classes for the girls on menstrual hygiene at "Apna Ghar" Orphanage, Dehradun.

Indicator 6: Measurement of Knowledge/ Understanding.

■ Baseline Survey 2021 ■ programe Monitoring Survey 2021



Mrs . Lila Devi (ANM) dispensing medicine to a patient at Bella health Camp.

Success Stories

Sarita w/o Pankaj Kumar, Jeevangarh, Vikasnagar.

Age- 48 years

Matluban came to Bella health camp around 8 months back when she was suffering with hypertension, diabetes and fungal infection. She had been to various doctors but there was no improvement.

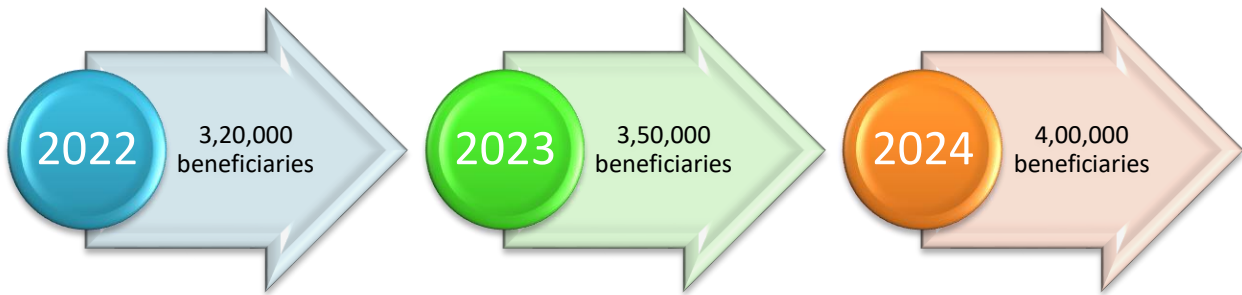
She heard about Bella Health care through another patient. When she came to our camp she had very high sugar and blood pressure. Though she had been to various doctors no one ever told her that she has diabetes.

All the tests were done and she was recommended medicines to buy from outside and few were given at camp only. She was counselled by our health educator about diet and exercises to improve the situation faster.

She has improved a lot and is very thankful to Bella health Care the services.



Future Plans



Year 2022

- Provide Health Care Services to 35,000 beneficiaries.
- Expand operations to Chamoli.

Year 2022:

- Provide Health Care Services to 45,000 beneficiaries.
- Expand operations to Tehri Garhwal and Chamoli
- Expand our new programs-
 - A) Computer Education program for Women's and Girls.
 - B) Village Adoption Program
 - C) Rehabilitation Program

Year 2023:

- Provide Health Care Services to 50,000 beneficiaries.
- Expand operations to Himachal Pradesh.
- Expand new programs-
 - A) Computer Education program for Women's and Girls.
 - B) Village Adoption Program
 - C) Rehabilitation Program

Legal Documents.

722

PPNO-53 254-IV-291

भारतीय नैर न्यायिक भारत INDIA

रु. 500 FIVE HUNDRED RUPEES

पाँच सौ रुपये Rs. 500

INDIA NON JUDICIAL

उत्तरांचल UTTARANCHAL A 603465

21 JUL 2011 TRUST DEED

THIS DEED of trust is made in the city of Rishikesh on 27th Day of July, 2011 by DR. VIJAY PREMCHAND AGARWAL S/O SH. PREMCHAND SHAMLAL AGARWAL R/O KEMPTY FALL VIA MASSOURIE, UTTARAKHAND, Aged 58 years hereinafter refer to as Founder & Settler which expression shall mean and include his heirs, legal representative and assignees.

WHEREAS the executants named above is desirous of creating a charitable trust by setting apart Rs. 1100/- (Rupees One Thousand One Hundred) only for charitable purposes and which have been acquired by his out of his personal savings and which belong to his entirely and absolutely.

AND WHEREAS, the executants has himself appointed as Founder-Cum-Life Trustee along with -

DEVENDER BERRY
S/o SH. NARAYAN DAS BERRY
R/o LAKEMIST BUNGLOW KI KANDI KAMPTY
TEHRI GARHWAL

MANAGING TRUSTEE

Hereinafter jointly called "THE TRUSTEES" which expression shall, unless excluded by & repugnant to the context or meaning thereof be deemed to include them and trustees, for the time being for these presents and their survivor or survivors and successor or successors in office.

Digitally signed by RAKESH SAHAI
Date: 2015.03.11 16:56:47 IST
Reason: Online FCRA Services
Location: Ministry of Home Affairs, New Delhi

Rakesh Sahai
Section Officer
Tel. 01123438245

No. 0100027782018
Government of India
Ministry of Home Affairs
Foreigners Division
(FCRA Wing)

NDCC-II Building, Jai Singh Road,
New Delhi-110001
Dated: 11-03-2019

To,
The Chief Functionary,
Bella Health Care Charitable Trust
C-3 MEHRU COLONY, DEHRADUN, Uttarakhand, Dehradun, 248001

Subject: Registration under Foreign Contribution (Regulation) Act, 2010.
Sir/Madam

With reference to your application dated 05-11-2018 requesting registration under the Foreign Contribution (Regulation) Act, 2010, I am directed to say that your Association has been registered under Section 11 (1) of the Act as follows:-

Registration Number : 347900217

Nature : Educational, Social

- The association shall receive foreign contribution only in its designated/exclusive bank account number 37448860599 in STATE BANK OF INDIA, 4, CONVENT ROAD, DEHRADUN, Uttarakhand, Dehradun, 248001 as mentioned in its application for grant of registration.
- In terms of section 18 of the Foreign Contribution (Regulation) Act, 2010 read with Rules 17 of the Foreign Contribution (Regulation) Rules, 2011, as amended from time to time, you are advised to furnish information received by you, the source and the manner in which the foreign contribution was used, as per the provisions of the Act and the Rules. An association is required to furnish the return even when the particulars are 'Nil'. The FC-4 form is required to be submitted online on this Ministry's website <https://fcraonline.nic.in> using the user name bellahealth@me123 for online submission. The Bank Account mentioned in your application should be used for receiving foreign contribution and no other amount should be credited to this account. The Association should immediately intimate online, within 15 days, in Form FC-6 to this Ministry regarding any change in the name of the Association, aims and objects, its address and Bank/Bank Account.
- The association cannot bring out any publication (registered under PRB Act, 1987) or act as correspondent, columnist, editor, printer or publisher of a registered newspaper or engage in the production or broadcast of audio news or audio visual news or current affairs programmes through electronic mode or any other electronic form or any other mode of mass communication at a later stage thereby attracting provisions of the Section 3(1) (g) and (h) of the FC(R) Act, 2010. In addition to this, the association is forbidden from getting involved in any activity of political nature.

- You are requested to note the provisions of Section 7 of FC(R) Act, 2010 and Rule 24 of FC(R) Rules, 2011 and ensure that before any funds are passed on to any person/association in India that the recipient is (i) eligible to accept foreign contribution under the Act, i.e., recipient association is registered under the Act, or has obtained Prior Permission of the Government under Section 11 of the Act, and (ii) the person/association is not prohibited under the Act.
- Physical inspection of the activities done by the Association may be carried out at any time by this Ministry.
- You are requested to familiarize yourself with the provisions of Foreign Contribution (Regulation) Act, 2010 and Foreign Contribution (Regulation) Rules, 2011, as amended from time to time, available at this Ministry's website <https://fcraonline.nic.in> to ensure strict compliance of the Act/ Rules. Failure to comply with any of the provisions of said Act/ Rules will make you liable for action under the relevant provisions of the Foreign Contribution (Regulation) Act, 2010.
- This certificate of Registration is valid for a period of five years from the date of registration under the Act.
- The email containing the registration letter may be sent immediately to the Bank mentioned above.
- This is a digitally signed certificate to be validated digitally using the signature panel using Adobe Acrobat Reader (Ver 5.0 or above). The digital intimation is authenticated by a digital signature obtained from a certifying authority under the Information Technology Act 2008.
- Banks are requested to verify online the validity of the certificate using fcraonline.nic.in.

Yours faithfully

Digitally signed by RAKESH SAHAI
Date: 2015.03.11 16:56:47 IST
Reason: Online FCRA Services
Location: Ministry of Home Affairs, New Delhi

Rakesh Sahai
Section Officer
Tel. 01123438245

भारत सरकार
(वित्त मंत्रालय)
कार्यालय आयकर आयुक्त
13-ए, सुभाष रोड, देहरादून

सेवा में,

बेसा हेल्थ कोयर चैरिटेबल ट्रस्ट,
PAN - AABTB447M
119, मगिराम रोड, ऋषिकेश,

विषय - आयकर अधिनियम 1961 की धारा 12-कक में निबन्धन हेतु।

भ्यास/संस्था का नाम एवं पता बेसा हेल्थ कोयर चैरिटेबल ट्रस्ट, PAN - AABTB447M 119, मगिराम रोड, ऋषिकेश, दिनांक 27.07.2011 को भ्यास/संस्था कापन द्वारा गठित उपरोक्त भ्यास/संस्था में आयकर अधिनियम 1961 की धारा 12-कक के अन्तर्गत निर्धारित धर्म में संशोधन हेतु आवेदन दिनांक 10.10.2011 को प्रस्तुत किया है। संस्था को आयकर अधिनियम 1961 की धारा 12-कक (1) प्रक्याप्तों के अन्तर्गत दिनांक 10.10.2011 से निबन्धन स्वीकृत किया जाता है।

2. यह प्रमाण पत्र निम्नलिखित शर्तों के अधीन प्रदान किया जाता है :-
(क) भ्यास/संस्था आयकर अधिनियम के अन्तर्गत निर्धारित अर्थों के भीतर प्रत्येक वर्ष संबंधित कर निर्धारण अधिकारी के समक्ष आयकर रिटर्न दाखिल करे।

(ख) भ्यास/संस्था द्वारा कार्यालय में ऑडिटेड एकाउन्ट्स की प्रति प्रत्येक वर्ष रिटर्न दाखिल करने की अंतिम निर्धारित तिथि से पहले प्रस्तुत करे।

(ग) यदि भ्यास/संस्था के उद्देश्यों में कमी परिवर्तन किया जाता है तो भ्यास/संस्था को फिर से धारा 12-क-के अन्तर्गत आवेदन इस कार्यालय को प्रस्तुत करना होगा।

(घ) ट्रस्ट/सोसायटी आयकर अधिनियम की सभी धारणाओं का पालन करने के साथ-साथ यह सुनिश्चित करेगी कि आयकर अधिनियम में उल्लिखित पूर्ण प्रयोजन की परिभाषा का उल्लंघन न हो।

(ङ) प्रौद्योगिक रिपोर्ट जो विभाग में दी गयी है उससे लगाता है कि यह संस्था मुख्यतः महिलाओं की गर्भावस्था सम्बंधित बीमारियों और जन्म के समय महिलाओं की जान को खतरे से बचाने के लिये काम करेगी। अगर ऐसा पाया कि यह नाम किताबी काम है और मात्र कर्तुवित के लिए संस्था सम्बन्धी काम का तर्क है तो यह निबन्धन वापस ले लिया जायेगा। सम्बंधित निर्देशन अधीनस्थ संस्था के चैरिटेबल होने के लिये जो मुख्यतः निम्नलिखित कार्य ले जायेगा: महिलाओं के स्वास्थ्य के लिये क्या काम किया जा रहा है, किाने अक्सर पर जन्म के समय महिलाओं को डाक्टरों से उपलब्ध कराई गयी और उनकी जान को सुरक्षित रखने के प्रयत्न में क्या खर्चा किया गया और उनके स्वास्थ्य परीक्षण के लिए किाने दुरुध्व गोशो में संस्था पहुँची, इन उद्देश्यों की पूर्ति न होने पर निबन्धन निरस्त की सिफारिश की जायेगी।

यदि उपरोक्त पाचो शर्तों में से किसी एक का भी उल्लंघन भ्यास/संस्था के द्वारा किया जाता है तो यह प्रमाण-पत्र रिटर्न दाखिल करने आध्या ऑडिटेड एकाउन्ट्स दाखिल करने की अंतिम निर्धारित तिथि अथवा भ्यास/संस्था के उद्देश्यों में परिवर्तन की तिथि से निरस्त करने हेतु कार्यवाही की जाएगी।



3. आवेदन की प्रविष्टि कार्यालय में रखे गये धारा 12-कक के आवेदन रजिस्टर में प्रपत्र संख्या 84/20010-11 पर की गई है।

(श्री. पी. सेनवाल)
आयकर आयुक्त, देहरादून

मोहर
प्रतिष्ठित प्रेषित :-
1. भ्यास/संस्था उपरोक्त को सूचनाई
2. आयकर अधिकारी-सहायक आयकर आयुक्त/उपायुक्त आयकर/ धार्ड-1, ऋषिकेश को सशोधित कार्यवाही हेतु प्रेषित।
3. अपर आयकर आयुक्त, हरिद्वार को सूचनाई एवं आवश्यक कार्यवाही हेतु प्रेषित।
मुख्य आयकर आयुक्त, देहरादून को सूचनाई प्रेषित

(श्री. सिंह)
आयकर अधिकारी (तकनीकी)
फूले आयकर आयुक्त, देहरादून



3790



भारत सरकार
(वित्त मंत्रालय)
कार्यालय आयकर आयुक्त
13-ए, सुभाष रोड, देहरादून

सेवा में,

बेला हेल्थ केयर चैरिटेबल ट्रस्ट,
PAN - AABTB8447M
119, मनिराम रोड, ऋषिकेश,

विषय : आयकर अधिनियम की धारा 80 जी के अधीन कर मुक्ति प्रमाण पत्र।
उपर्युक्त विषय पर आपकी याचिका जो कि इस कार्यालय में 10.10.2011 को प्राप्त हुई के सन्दर्भ में आपको सूचित किया जाता है कि बेला हेल्थ केयर चैरिटेबल ट्रस्ट, PAN - AABTB8447M 119, मनिराम रोड, ऋषिकेश, को दिया गया संदान आयकर अधिनियम 1961 की धारा 80 जी के अन्तर्गत दानदाता के पक्ष में कर मुक्ति के लिए दिनांक 10.10.2011 से वैध है।

(डी०पी० सेमवाल)
आयकर आयुक्त, देहरादून

नोट :-

- दानदाता को जारी की जाने वाली रसीद में इस आदेश की संख्या और दिनांक लिखा होना चाहिए और स्पष्ट रूप से यह भी लिखें कि यह प्रमाण पत्र दिनांक 10.10.2011 से वैध है।
 - प्राप्तियों और खर्चों के हिसाब का वार्षिक विवरण आयकर अधिकारी के पास अवश्य प्रस्तुत करें।
 - यदि भविष्य में यह पाया जाता है कि सोसायटी/ट्रस्ट अपने उद्देश्यों के अनुरूप कार्य नहीं कर रही है तो ऐसी स्थिति में सोसायटी/ट्रस्ट को जारी किये गये इस कर मुक्ति प्रमाण पत्र को कभी भी इस कार्यालय द्वारा निरस्त किया जा सकता है।
- सोसायटी आयकर अधिनियम की सभी धाराओं का पालन करने के साथ-साथ यह सुनिश्चित करेगी कि आयकर अधिनियम में उल्लिखित पूर्ण प्रयोजन की परिभाषा का उल्लंघन न हो।



संख्या और दिनांक

प्रतिलिपि प्रेषित :-

- आयकर अधिकारी/सहायक आयकर आयुक्त/आयकर उपायुक्त/वाई -1 ऋषिकेश को सूचनार्थ एवं आवश्यक कार्यवाही हेतु। यदि कोई न्यास/संस्था अपने जन कल्याण उद्देश्य के विपरीत फण्ड का दुरुपयोग करता है तो उसकी सूचना इस कार्यालय को भेजना सुनिश्चित करें।
- अपर आयकर आयुक्त रेंज - हरिद्वार को सूचनार्थ एवं आवश्यक कार्यवाही हेतु।
- मुख्य आयकर आयुक्त, देहरादून को सूचनार्थ प्रेषित।
- निर्धारित तिथि

(अर्जुन सिंह)
आयकर अधिकारी (तकनीकी)
कृते आयकर आयुक्त, देहरादून

CMO Letters for Clinic Registration.

पंजीकृत

कार्यालय—मुख्य चिकित्सा अधिकारी, देहरादून
106, चन्दर नगर, देहरादून, पुराण संख्या-0135) 2724506, फ़ैस-2726256, ईमेल-cmodehradoon@gmail.com

पत्रांक : 70 / सीएमओ / नैदानिका/2020-21 / 4738 देहरादून-दिनांक 29 जनवरी, 2021
सेवा में,

अतुल नेगी,
रक्षा क्लीनिक,
C/O बुकम सिंग, हाई नं०-9 उकरानी
विकासनगर देहरादून।

विषय- नैदानिक स्थापन (रजिस्ट्रीकरण और विनियमन) अधिनियम 2010 (Clinical Establishment Registration & Regulation Act 2010) व उत्तराखण्ड शासन की अधिसूचना 1889/XXVIII-2/04(81)2007 दिनांक 31 अक्टूबर, 2015 के अन्तर्गत स्थाई एवं अस्थाई पंजीकरण निर्गत किये जाने व अधिनियम का अनुपालन किये जाने के संबंध में।

महोदय,

उपरोक्त विषयक नैदानिक स्थापन (रजिस्ट्रीकरण और विनियमन) अधिनियम 2010 व उत्तराखण्ड शासन की अधिसूचना 1889/XXVIII-2/04(81)2007 दिनांक 31 अक्टूबर, 2015 के अन्तर्गत आपको अस्थाई नवीनीकरण पंजीकरण DRA/CEA/PVT/1366/NOV/2020 निम्न प्रतिक्रियाओं के साथ निर्गत किया जाता है-

1. धारा 10(क) में नैदानिक स्थापनों को रजिस्ट्रीकरण प्रदान करना; नवीनीकरण निलम्बन अथवा निरस्त करना है।
- (i) धारा 10(ख) नैदानिक स्थापन (रजिस्ट्रीकरण और विनियमन) अधिनियम 2010 के अन्तर्गत निर्धारित नियमों का किमान्यमान सुनिश्चित करना।
- (ii) धारा 10(ग) अधिनियम की शर्तों या इसके अन्तर्गत नियमों के उल्लंघन की शिकायतों का परीक्षण त्वरित कार्यवाही करना।
2. धारा 13(5) आवेदक स्थाई रजिस्ट्रीकरण के लिए जिला रजिस्ट्रीकरण अधिकारी को व्यक्तिगत रूप से डाक से या ऑनलाईन द्वारा आवश्यक सूचनाओं एवं नैदानिक स्थापन के विभिन्न प्रयोगों के लिए कर्मियों और न्यूनतम मानकों को पूर्ण करने के उपरान्त साक्ष्यों सहित प्रारूप-1 पर आवेदन करेगा।
3. धारा 18(1) में नैदानिक स्थापन अनन्तिम रजिस्ट्रीकरण प्रमाण पत्र जारी होने की बारह मास की वैधता समाप्त होने के एक माह पूर्व प्रारूप-5 में उपबन्धित शुल्क सहित स्थाई रजिस्ट्रीकरण हेतु आवेदन करेगा। यदि नवीनीकरण के लिए आवेदन समय सीमा के भीतर नहीं किया जाता है तो प्राधिकारी नियत नवीनीकरण शुल्क की दोगुनी धनराशि एवं रुपये 100/- प्रतिदिन शासित की दर से विलम्ब शुल्क के भुगतान के बाद अधिनियम की धारा 22 के अनुसार आवेदन स्वीकार करेगा।
- (ii) धारा 18(2) में अधिनियम की धारा 30 की उपधारा (4) के अन्तर्गत स्थाई रजिस्ट्रीकरण के नवीनीकरण के लिए स्थाई रजिस्ट्रीकरण प्रमाण पत्र की पांच वर्ष की विधिमाम्यता की समाप्ति से पूर्व छः मास की अवधि के भीतर प्रारूप-5 में उपबन्धित शुल्क सहित आवेदन किया जायेगा।
- (iii) धारा 18(5) यदि नवीनीकरण का आवेदन निर्धारित अवधि के भीतर प्रस्तुत नहीं किया जाता है तो प्राधिकरण नियम नवीनीकरण शुल्क की दोगुनी धनराशि एवं ₹ 100/- प्रतिदिन विलम्ब शुल्क और शासित का सदाय प्रारूप-5 में उपबन्धित के अनुरूप रजिस्ट्रीकरण का नवीनीकरण प्राप्त कर सकेगा।
4. धारा 20(1) में जिला रजिस्ट्रीकरण प्राधिकरण अनन्तिम रजिस्ट्रीकरण जारी किये जाने की तारीख से पैंतालिस दिन की अवधि के भीतर इस प्रकार अनन्तिम रूप से पंजीकृत नैदानिक स्थापन का नाम, पता, स्वामित्व, उत्तरदायी व्यक्ति का नाम किस चिकित्सा विद्या की सेवायें की जा रही हैं सेवा का प्रकार एवं प्रकृति जो प्रदान की जा रही हो स्वास्थ्य कर्मियों तथा चिकित्सक नर्स आदि का विवरण उसी कि अधिनियम की धारा 16 की उपधारा (2) में उपबन्धित है को दो स्वामीय समन्वय पत्रों तथा जिला रजिस्ट्रीकरण प्राधिकरण की वेबसाइट पर प्रकाशित करवाएगा।
- (ii) धारा 20(2) में जिला रजिस्ट्रीकरण प्राधिकरण अधिनियम की धारा 26 में उपबन्धित नैदानिक स्थापन की विशिष्ट वर्ग में न्यूनतम मानकों के संकलन की सूचनाओं को सात दिन की अवधि के भीतर जनसंचारण की जानकारी के लिए दो स्वामीय समन्वय पत्रों तथा प्राधिकरण की वेबसाइट पर नैदानिक स्थापन का नाम, पता, स्वामित्व, प्रभारी व्यक्ति का नाम किस चिकित्सा विद्या में सेवायें प्रदान की जा रही हैं प्रदत्त सेवाओं की प्रकृति एवं उनके लिए निर्धारित शुल्क प्रारूप-8 के अनुसार और स्वास्थ्य कर्मियों (चिकित्सक, नर्स आदि) का विवरण प्रदर्शित करेगा।
- (iii) धारा 20(4) यदि किसी व्यक्ति को नैदानिक स्थापन के संबंध में प्रकाशित सूचना पत्र कोई आपत्ति हो तो वह कारण और साक्ष्य सहित आपत्ति लिखित रूप में जिला रजिस्ट्रीकरण प्राधिकारी को देगा।

पंजीकृत

कार्यालय—मुख्य चिकित्सा अधिकारी, देहरादून
106, चन्दर नगर, देहरादून, पुराण संख्या-0135) 2724506, फ़ैस-2726256, ईमेल-cmodehradoon@gmail.com

पत्रांक : 70 / सीएमओ / नैदानिका/2020-21 / 4738 देहरादून-दिनांक 29 जनवरी, 2021
सेवा में,

सुनमाला रावत,
बर्न क्लीनिक,
C/O नुमा राग, ग्राम- जीवगढ़,
विकासनगर देहरादून।

विषय- नैदानिक स्थापन (रजिस्ट्रीकरण और विनियमन) अधिनियम 2010 (Clinical Establishment Registration & Regulation Act 2010) व उत्तराखण्ड शासन की अधिसूचना 1889/XXVIII-2/04(81)2007 दिनांक 31 अक्टूबर, 2015 के अन्तर्गत स्थाई एवं अस्थाई पंजीकरण निर्गत किये जाने व अधिनियम का अनुपालन किये जाने के संबंध में।

महोदय,

उपरोक्त विषयक नैदानिक स्थापन (रजिस्ट्रीकरण और विनियमन) अधिनियम 2010 व उत्तराखण्ड शासन की अधिसूचना 1889/XXVIII-2/04(81)2007 दिनांक 31 अक्टूबर, 2015 के अन्तर्गत आपको अस्थाई नवीनीकरण पंजीकरण DRA/CEA/PVT/1366/NOV/2020 निम्न प्रतिक्रियाओं के साथ निर्गत किया जाता है-

1. धारा 10(क) में नैदानिक स्थापनों को रजिस्ट्रीकरण प्रदान करना; नवीनीकरण निलम्बन अथवा निरस्त करना है।
- (i) धारा 10(ख) नैदानिक स्थापन (रजिस्ट्रीकरण और विनियमन) अधिनियम 2010 के अन्तर्गत निर्धारित नियमों का किमान्यमान सुनिश्चित करना।
- (ii) धारा 10(ग) अधिनियम की शर्तों या इसके अन्तर्गत नियमों के उल्लंघन की शिकायतों का परीक्षण त्वरित कार्यवाही करना।
2. धारा 13(5) आवेदक स्थाई रजिस्ट्रीकरण के लिए जिला रजिस्ट्रीकरण अधिकारी को व्यक्तिगत रूप से डाक से या ऑनलाईन द्वारा आवश्यक सूचनाओं एवं नैदानिक स्थापन के विभिन्न प्रयोगों के लिए कर्मियों और न्यूनतम मानकों को पूर्ण करने के उपरान्त साक्ष्यों सहित प्रारूप-1 पर आवेदन करेगा।
3. धारा 18(1) में नैदानिक स्थापन अनन्तिम रजिस्ट्रीकरण प्रमाण पत्र जारी होने की बारह मास की वैधता समाप्त होने के एक माह पूर्व प्रारूप-5 में उपबन्धित शुल्क सहित स्थाई रजिस्ट्रीकरण हेतु आवेदन करेगा। यदि नवीनीकरण के लिए आवेदन समय सीमा के भीतर नहीं किया जाता है तो प्राधिकारी नियत नवीनीकरण शुल्क की दोगुनी धनराशि एवं रुपये 100/- प्रतिदिन शासित की दर से विलम्ब शुल्क के भुगतान के बाद अधिनियम की धारा 22 के अनुसार आवेदन स्वीकार करेगा।
- (ii) धारा 18(2) में अधिनियम की धारा 30 की उपधारा (4) के अन्तर्गत स्थाई रजिस्ट्रीकरण के नवीनीकरण के लिए स्थाई रजिस्ट्रीकरण प्रमाण पत्र की पांच वर्ष की विधिमाम्यता की समाप्ति से पूर्व छः मास की अवधि के भीतर प्रारूप-5 में उपबन्धित शुल्क सहित आवेदन किया जायेगा।
- (iii) धारा 18(5) यदि नवीनीकरण का आवेदन निर्धारित अवधि के भीतर प्रस्तुत नहीं किया जाता है तो प्राधिकरण नियम नवीनीकरण शुल्क की दोगुनी धनराशि एवं ₹ 100/- प्रतिदिन विलम्ब शुल्क और शासित का सदाय प्रारूप-5 में उपबन्धित के अनुरूप रजिस्ट्रीकरण का नवीनीकरण प्राप्त कर सकेगा।
4. धारा 20(1) में जिला रजिस्ट्रीकरण प्राधिकरण अनन्तिम रजिस्ट्रीकरण जारी किये जाने की तारीख से पैंतालिस दिन की अवधि के भीतर इस प्रकार अनन्तिम रूप से पंजीकृत नैदानिक स्थापन का नाम, पता, स्वामित्व, उत्तरदायी व्यक्ति का नाम किस चिकित्सा विद्या की सेवायें की जा रही हैं सेवा का प्रकार एवं प्रकृति जो प्रदान की जा रही हो स्वास्थ्य कर्मियों तथा चिकित्सक नर्स आदि का विवरण उसी कि अधिनियम की धारा 16 की उपधारा (2) में उपबन्धित है को दो स्वामीय समन्वय पत्रों तथा जिला रजिस्ट्रीकरण प्राधिकरण की वेबसाइट पर प्रकाशित करवाएगा।
- (ii) धारा 20(2) में जिला रजिस्ट्रीकरण प्राधिकरण अधिनियम की धारा 26 में उपबन्धित नैदानिक स्थापन की विशिष्ट वर्ग में न्यूनतम मानकों के संकलन की सूचनाओं को सात दिन की अवधि के भीतर जनसंचारण की जानकारी के लिए दो स्वामीय समन्वय पत्रों तथा प्राधिकरण की वेबसाइट पर नैदानिक स्थापन का नाम, पता, स्वामित्व, प्रभारी व्यक्ति का नाम किस चिकित्सा विद्या में सेवायें प्रदान की जा रही हैं प्रदत्त सेवाओं की प्रकृति एवं उनके लिए निर्धारित शुल्क प्रारूप-8 के अनुसार और स्वास्थ्य कर्मियों (चिकित्सक, नर्स आदि) का विवरण प्रदर्शित करेगा।
- (iii) धारा 20(4) यदि किसी व्यक्ति को नैदानिक स्थापन के संबंध में प्रकाशित सूचना पत्र कोई आपत्ति हो तो वह कारण और साक्ष्य सहित आपत्ति लिखित रूप में जिला रजिस्ट्रीकरण प्राधिकारी को देगा।

Provisional Certificate For Registration of Clinical

Establishment

**PROVISIONAL CERTIFICATE
FOR REGISTRATION OF CLINICAL ESTABLISHMENT**

Provisional Regi. No.:- DRA/CEA/PVT/1366/NOV/2020
Date of issue:- 28/11/2021


Valid up to:- 05-11-2020 TO 04-11-2021

1-Name of the C.E.:- KRISHNA CLINIC
2-Address:- c/o HUKKAM SINGH, WARD NO-9, VILL-
DHARRANI, VIKASNAGAR DEHRADUN

3-Owner of the C.E.:- ATUL NEGI
4-Name of person in charge:- DR. PREETI
5-System of Medicine:- AYURVEDIC
6-Type of Establishment:- AYURVEDIC CLINIC

Is hereby provisionally registered under the provisions of Clinical Establishment (Registration & Regulations) Act 2010 and the Rules made there under.

This authorization is subject to the condition as specified in the rules in force under the Clinical Establishment (Registration & Regulations) Act 2010 and the Rules made there under.


District Magistrate/ Chairman
District Registration Authority
Dehradun

Place:- DEHRADUN
Date:- 28/11/2021
District Registration Authority
Court Road, Dehradun
Ph. 0135-2726256

**PROVISIONAL CERTIFICATE
FOR REGISTRATION OF CLINICAL ESTABLISHMENT**

Provisional Regi. No.:- DRA/CEA/PVT/1365/NOV/2020
Date of issue:- 28/11/2021


Valid up to:- 05-11-2020 TO 04-11-2021

1-Name of the C.E.:- VARSHA CLINIC
2-Address:- c/o GUNTA RAM, VILL- JEWANGAD
VIKASNAGAR DEHRADUN

3-Owner of the C.E.:- SUNMALA RAWAT
4-Name of person in charge:- DR. KRITIKI BUTOLA
5-System of Medicine:- AYURVEDIC
6-Type of Establishment:- AYURVEDIC CLINIC


Is hereby provisionally registered under the provisions of Clinical Establishment (Registration & Regulations) Act 2010 and the Rules made there under.


This authorization is subject to the condition as specified in the rules in force under the Clinical Establishment (Registration & Regulations) Act 2010 and the Rules made there under.



District Magistrate/ Chairman
District Registration Authority
Dehradun

Place:- DEHRADUN
Date:- 28/11/2021
District Registration Authority
Court Road, Dehradun
Ph. 0135-2726256

Medical Pollution Control Committee Certificates

 **MEDICAL POLLUTION CONTROL COMMITTEE**
(M.P.C.C.)
ISO : 14001:2015


[Registration No. 203-2000-2001]
H.O.: 21, E-BLOCK, PANKI, KANPUR • MOB.: 9235659305, 9235659306
CBWTF : 242-244, Mandavar, NH-73, Roorkee, Haridwar (U.K.) • Mob. 8726049732, 9761899653
E-mail : mpckkanpur@gmail.com • Website : mpckkanpur.com

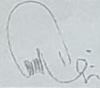




S.No. **MPCC/KNP/2020-21/1658** **CERTIFICATE OF MEMBERSHIP**

This is to certify that


M/s. KRISHNA CLINIC, DEHRADUN


is a member of Medical Pollution Control Committee which is authorized by
Uttarakhand Environment Protection and Pollution Control Board, in terms of M.O.E.F.
directives & "Bio-Medical Waste Management Rules, 2016 amended in 2018 & 2019."




Secretary
(M.P.C.C.)


President
(M.P.C.C.)

Date of Issue : 30.10.2020 **Valid Upto : 31st March 2025**

 **MEDICAL POLLUTION CONTROL COMMITTEE**
(M.P.C.C.)
ISO : 14001:2015


[Registration No. 203-2000-2001]
H.O.: 21, E-BLOCK, PANKI, KANPUR • MOB.: 9235659305, 9235659306
CBWTF : 242-244, Mandavar, NH-73, Roorkee, Haridwar (U.K.) • Mob. 8726049732, 9761899653
E-mail : mpckkanpur@gmail.com • Website : mpckkanpur.com

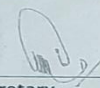




S.No. **MPCC/KNP/2020-21/1657** **CERTIFICATE OF MEMBERSHIP**

This is to certify that

M/s. VARSHA CLINIC, DEHRADUN

is a member of Medical Pollution Control Committee which is authorized by
Uttarakhand Environment Protection and Pollution Control Board, in terms of M.O.E.F.
directives & "Bio-Medical Waste Management Rules, 2016 amended in 2018 & 2019."


Secretary
(M.P.C.C.)


President
(M.P.C.C.)

Date of Issue : 30.10.2020 **Valid Upto : 31st March 2025**