



## MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding (MOU) signed on  
24<sup>th</sup> day of April, 2023

Between

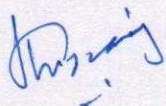
MINISTRY OF COAL

And

Ministry of Health and Family Welfare  
Government of India

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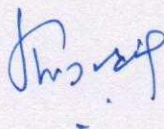


## Introduction

India has the world's highest Tuberculosis (TB) burden, with an estimated 28 lakh people contracting the disease and 4.2 lakh people dying from the disease every year. Moreover, there are almost a million missing patients every year in India who are unregistered or undetected and need to be brought under the public health system to ensure quality diagnosis and treatment.

The economic burden of TB in terms of lives, income and workdays is also substantial. TB usually affects the most economically productive age group of the society resulting in a significant loss of working days and pushing the TB patients further into the vortex of poverty. Therefore, the absence of welfare support and mounting catastrophic out-of-pocket expenditures result in patients leaving the treatment prematurely. This jeopardises not only patients' lives but also the community's health at large. As per the global estimate, reducing TB incidence could generate benefits of \$43 per dollar spent. Therefore, it's in the country's interest to provide quality care to those with or affected by tuberculosis.

TB is not only a medical disease but a social problem. Even though anyone can be affected by TB, the worse hit is the vulnerable population battling poverty, malnutrition, poor hygiene, stigma, loss of wages, poor housing and working conditions, occupational hazards etc. Such multi-faceted issues are beyond the ambit of the health system alone. It calls for a comprehensive solution by meaningful involvement of non-health sectors. Convergent actions by various Government Ministries are imperative for realising the country's goal of ending TB by 2025.



This Memorandum of Understanding is executed at New Delhi on

24<sup>th</sup> April, 2023

By and Between

Ministry of Coal, Government of India ('First Party')

And

Ministry of Health and Family Welfare, Government of India ('Second Party')

(The First Party and Second Party are hereinafter collectively referred to as 'Parties' and individually as 'Party', where the context so permits)

**WHEREAS** the Parties are interested in collaborative working for realising the country's goal of ending Tuberculosis by the year 2025; and,

**WHEREAS** this Memorandum of Understanding ('MOU') sets out the initial relationship between the Parties as well as the respective rights and responsibilities of each Party; and,

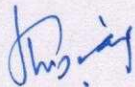
**WHEREAS** Parties are expected to act in good faith in accordance with this Memorandum.

**NOW THEREFORE IN CONSIDERATION OF** the premises and the mutual covenants set forth herein for achieving the common objective of this MOU the Parties hereto covenant and agree to as follow:

## **Article 1: Description of Parties**

### **1.1 Ministry of Coal**

- (a) The Ministry of Coal is concerned with exploring and developing coal and lignite reserves in India. Coal is the most essential and abundant fossil fuel in India. It accounts for 55% of the country's energy needs. These essential functions are exercised through Public Sector Undertakings ('PSU') under the administrative control of Ministry of Coal, namely Coal India Limited (CIL) and NLC India Limited (NLCIL) and Singareni Collieries Company Limited (SCCL).



- (b) Coal India Limited (CIL), a Maharatna PSU is responsible for investment planning, workforce management, purchase of heavy machinery, financial budgeting etc., on behalf of all its subsidiaries. CIL has seven producing subsidiaries and one subsidiary for mine planning and development, namely
- i. Bharat Coking Coal Limited (BCCL), Dhanbad, Jharkhand
  - ii. Central Coalfields Limited (CCL), Ranchi, Jharkhand
  - iii. Eastern Coalfields Limited (ECL), Sanctoria, West Bengal
  - iv. Mahanadi Coalfields Limited (MCL), Sambalpur, Orissa
  - v. Northern Coalfields Limited (NCL), Singrauli, Madhya Pradesh
  - vi. South Eastern Coalfields Limited (SECL), Ballarpur, Chhattisgarh
  - vii. Western Coalfields Limited (WCL), Nagpur, Maharashtra
  - viii. Central Mine Planning & Design Institute (CMPDI), Ranchi, Jharkhand; and *(for mine planning and development)*
- (c) NLC India Limited (NLCIL), a Navaratna PSU is responsible for production of lignite and, generation of thermal and renewable energy.
- (d) Singareni Collieries Company Limited (SCCL) is a coal mining company under joint ownership of Government of Telangana and Government of India on a 51:49 equity basis.
- (e) CIL, its subsidiaries, NLCIL and SCCL are hereinafter collectively referred to as 'Coal Companies'. References to 'coal' shall also bear reference to 'lignite' unless the context otherwise requires.

## 1.2 Central TB Division (CTD)

- (a) Central TB Division (CTD) under The Ministry of Health & Family Welfare (MoHFW) is the nodal agency for coordinating a response concerning tuberculosis in India. It implements National Tuberculosis Elimination Programme (NTEP) across the country.
- (b) The Ministry of Health & Family Welfare has developed a National Strategic Plan (2017-25) to eliminate TB in the Country by 2025.

- (c) Through Inter-Ministerial Coordination, MoHFW aims to reach key populations served by various ministries such as workers, miners, migrants, tribal people, women and children etc.

## **Article 2: Objective of MOU**

To forge convergence at policy, programme and implementation levels across various offices of Ministry of Coal and Coal Companies for a multi-sectoral and accelerated response towards a TB-Free India.

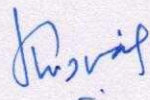
## **Article 3: Scope of Collaboration**

3.1 The thematic areas for collaboration are listed below –

- a) Awareness generation to boost the TB-Free India campaign.
- b) Adoption of TB workplace policy and workplace intervention (TB Free Workplace) by the Ministry of Coal and Coal Companies.
- c) Adoption of Corporate TB Pledge (CTP)
- d) Airborne infection control in the workplace, including social distancing, masks, sanitization etc.
- e) Socio-economic support to TB patients.
- f) TB screening and linkages for diagnosis and treatment of TB for workers engaged in coal mining sectors, their families and communities nearby coal mining areas in collaboration with the Coal Companies.

3.2 Activities to be carried out at the workplaces to address Tuberculosis among workers engaged in coal mining and other activities in various units/establishments under the purview of Ministry of Coal and the Coal Companies.

3.3 Activities further to be extended beyond the workplace to promote TB Free India Campaign, adoption of clusters/ villages/ block/ town towards TB elimination.



- 3.4 Nodal Officers nominated by the Parties under Article 5: Joint Roles and Responsibilities of the Parties herein may expand the scope of collaboration.

## **Article 4: Role of Parties**

### **4.1 Role of Ministry of Coal**

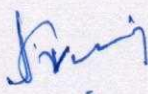
#### *4.1.1 Issuance of Directives*

- a) Issuance of advisory/ directives to Coal Companies and other institutions/ offices/ establishments under the purview of Ministry of Coal for prioritising TB awareness, prevention and control activities.
- b) Issuance of the directives for deputing a nodal officer to implement various TB interventions, adopt TB workplace policy, and intervention for TB Free Workplace.
- c) Issuance of advisory/ directive to integrate TB related services in the existing health infrastructure of PSUs and coverage of vulnerable population at workplace and communities for TB awareness, prevention, screening and treatment.

### **4.2 Role of Coal Companies**

#### *4.2.1 Information Education and Communication*

- a) Awareness generation among workers engaged in coal mining and other related occupation by various offices under the purview of Ministry of Coal and Coal Companies
- b) Inclusion of information on TB prevention & services in printed materials for dissemination wherever possible.
- c) Promotion of awareness & prevention activities, Active Case Finding (ACF) and management of TB in vulnerable communities through Corporate Social Responsibility (CSR)



#### 4.2.2 Capacity Building

- a) Capacity building of officials identified as nodal officers, master trainers, & peer educators to strengthen activities related to TB awareness, prevention, diagnosis, treatment, and treatment adherence. Capacity building on TB workplace intervention.
- b) Training of medical and paramedical experts on various topics related to TB, Treatment and treatment adherence as per national guidelines.

#### 4.2.3 Integration of Service

- a) Integration of TB related services in the existing health infrastructure (hospitals and dispensaries) of Coal Companies wherever possible.
- b) Promotion of screening & diagnosis of Tuberculosis on the regular basis for workers.

#### 4.2.4 Workplace Policy and Intervention

Adoption of Workplace policy and intervention to address tuberculosis and TB related co-morbidities at the workplace and community level.

#### 4.2.5 Social Protection

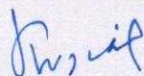
Provision of social protection schemes or welfare schemes for people/ communities infected and affected by Tuberculosis.

#### 4.2.6 Sharing of Information

Sharing the progress on activities carried out with CTD and State TB Cell (STC) in States/UTs.

### 4.3 Role of Central TB Division

- 4.3.1 Provide technical assistance to the Ministry of Coal, Coal India Limited, and Subsidiaries to develop an annual work plan for TB-related activities.
- 4.3.2 Provide support for the implementation of activities under the scope of collaboration.





- 4.3.3 Provide technical support for capacity building of nodal officer/ concerned officials/ officials of Coal India Limited and subsidiaries and other key institutions under the purview of Ministry of Coal.
- 4.3.4 Share relevant IEC material /training modules/ NTEP Guidelines with the Ministry of Coal, Coal India Limited and Subsidiaries.
- 4.3.5 All services and incentives as per NTEP and guidelines are applicable when service is availed by any patient engaged by various establishments, units of Ministry of Coal, Coal India Limited, and their subsidiaries.
- 4.3.6 NTEP will provide drugs, diagnostics, patient support and monitoring support to all patients referred by departments, autonomous institutions, and units of Coal Companies

## **Article 5: Joint Roles and Responsibilities of the Parties**

- 5.1 Both Parties shall nominate one Nodal Officer each for representing their respective Ministries. Nodal Officers shall act as a focal point for their respective Ministries.
- 5.2 A Joint Working Group would be constituted to provide guidance and support for work plan and intervention.
- 5.3 The Nodal Officers nominated by the Parties shall be responsible for –
- a) Finalization of the scope of collaboration between the parties and any subsequent modification to it
  - b) Development of implementation plan/strategies and indicators
  - c) Facilitation for the effective execution of the implementation plan
  - d) Regular monitoring of the indicators and course correction
  - e) Periodic reporting of outputs and outcomes

f) Any other relevant activity agreed upon by both parties

5.4 The Nodal Officers nominated by the Parties may decide the modalities for operationalisation of this MoU.

5.5 Nodal Officers would meet at least bi-monthly for the first three meetings, quarterly for subsequent four meetings and bi-annually thereafter. The parties can prescribe any modification or extension to the frequency or period of meetings.

## **Article 6: Term, Termination and Consequences of Termination of MOU**

6.1. The existence of this MOU shall commence from the date of execution of this MOU.

6.2. The Parties may terminate this MOU by mutual agreement.

6.3. Either Party may terminate this MOU forthwith by providing immediate notice in writing to the other Party.

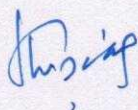
6.4. In the event that this MOU is terminated:

(a) Neither Party will, under this MOU, incur any financial liability to the other Party; and,

(b) Notwithstanding the preceding sub-clause hereof, either Party may incur liability towards the other Party in connection with matters outside of this MOU, which may include but are not limited to liability in relation to breach of contract, tort, or equity.

## **Article 7: Amendments**

Any change, alteration, amendment, or modification to this MOU must be in writing and signed by authorized representatives of both Parties.



## Article 8: Dispute Resolution

Any dispute(s) arising out of this MOU shall, as far as possible, be settled amicably between the Parties.

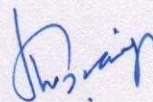
The Parties herein being in agreement of the covenants set herein appended their respective signatures on 24<sup>th</sup> day of April month of the year 2023.

**SIGNED FOR AND ON BEHALF OF  
CENTRAL TB DIVISION, MINISTRY OF  
HEALTH AND FAMILY WELFARE**



**DR. RAJENDRA P. JOSHI  
DEPUTY DIRECTOR GENERAL (TB)  
MINISTRY OF HEALTH & FAMILY  
WELFARE  
GOVERNMENT OF INDIA  
NEW DELHI  
DATE: 24TH APRIL, 2023**

**SIGNED FOR AND ON BEHALF OF  
MINISTRY OF COAL**



**SHRI HARA KUMAR HAJONG  
ECONOMIC ADVISOR  
MINISTRY OF COAL  
GOVERNMENT OF INDIA  
NEW DELHI  
DATE: 24<sup>TH</sup> APRIL, 2023**

## Acronyms

ACF	Active Case Finding
BCCL	Bharat Coking Coal Limited
CCL	Central Coalfields Limited
CIL	Coal India Limited
CMPDI	Central Mine Planning & Design Institute
CSR	Corporate Social Responsibility
CTD	Central Tuberculosis Division
CTP	Corporate TB Pledge
DOTS	Directly observed treatment, short-course
DR-TB	Drug Resistant Tuberculosis
ECL	Eastern Coalfields Limited
IEC	Information, Education and Communication
MDR-TB	Multi Drug Resistant Tuberculosis
MCL	Mahanadi Coalfields Limited
MoU	Memorandum of Understanding
MoH&FW	Ministry of Health & Family Welfare
NCL	Northern Coalfields Limited
NLCIL	Neyveli Lignite Corporation Limited India Limited
NTEP	National Tuberculosis Elimination Programme
PMEGP	Prime Minister's Employment Generation Programme
SCCL	Singareni Collieries Company Limited
SECL	South Eastern Coalfields Limited
STC	State Tuberculosis Cell
TB	Tuberculosis
UT	Union Territories
WCL	Western Coalfields Limited

