Guiding Note for Early Childhood Development (ECD) Call Center

Ministry of Health and Family Welfare
Government of India
There has been a felt need to nurture the cognitive capital of country through enabling all young children, to attain their fullest potential by ensuring their right to good health, good nutrition, and access to stimulating, loving and protective care in a nature-friendly environment. To make every child achieve their fullest potential, States / UTs had implemented various initiatives to reach every pregnant women and mothers of young children.

MoHFW through Early childhood development (ECD) initiative will try to complement existing initiatives by reaching out to every pregnant mother and parents of every child upto the age of 2 years through ECD Call Centre. These ECD Call Centres would focus on the first 1000 days of the child which consist of 270 days during pregnancy and the first 730 days or first 2 years after birth.

Under ECD call centre initiative, Ministry proposes to set up a call centre to provide information and counselling to parents, which will enable them to provide nurturing care to their children to ensure their optimal development. The information would be provided by trained resources in the field of early childhood development, which adds the credibility of the advices.

In view of this, a guiding note has been prepared that explains some key aspects of setting up and operationalization of ECD call centre. This document has broadly following three sections, Concept of ECD Call centre, Section, Model RFP and Technical Guidelines to assist ECD Call centre.

States / UTs are requested to go through these documents carefully and operationalization ECD call centres at the earliest. States / UTs may also customise the model RFP as per their requirements and prevailing procurement policies.

I thank Dr Arun Singh, National Consultant (RBSK) and officials of MMP Cell in preparing this guiding note, model RFP and technical guidelines. I would be grateful to users for providing their valuable suggestions for further improvement of these documents.

Yours Sincerely,

(Manoj Jhalani)

Special Chief Secretary/Addl. Chief Secretary/Principal Secretary (Health & Family Welfare)- All States/UTs
ABOUT THE DOCUMENT

The objective of Guiding Note for Early Childhood Development (ECD) Call Center is to assist States / UTs in operationalizing Early Childhood Development (ECD) Call Centre.

This document has broadly following three sections:
   a) Section A: Concept of ECD Call centre
   b) Section B: Model RFP for ECD Call centre
   c) Section C: Technical Guidelines to assist ECD Call centre

This document is intended as a reference for use by the States / UTs which can then be customized / modified to meet State / UT specific needs and priorities related to Early Childhood Development (ECD) initiative.

States / UTs are also requested to validate their prevailing procurement policies, State / UT orders & guidelines and legal opinion while selecting an appropriate Early Childhood Development (ECD) Call-centre Service Provider (ESP) or customizing their existing call centre contract based on the suggestion made in this document.
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## 1. DEFINITION OF KEY TERMS

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<thead>
<tr>
<th>S No</th>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>ECD Call centre Service Provider (ECSP)</td>
<td>The implementing agency responsible for implementing and managing the Early Childhood Development (ECD) call centre operations.</td>
</tr>
<tr>
<td>2.</td>
<td>Beneficiaries</td>
<td>People who are receiving or seeking ECD services through the call centre.</td>
</tr>
<tr>
<td>3.</td>
<td>Frontline Health workers</td>
<td>People who assist in and provide healthcare services to the beneficiaries at the community level including Accredited Social Health Activist (ASHA), and Auxiliary Nurse Midwife (ANM).</td>
</tr>
<tr>
<td>4.</td>
<td>Stakeholders</td>
<td>People seeking the services, managing the services or involved in the delivery of the project.</td>
</tr>
<tr>
<td>5.</td>
<td>Project</td>
<td>The work accomplished under the assignment of setting up and operationalization of ECD call centre.</td>
</tr>
<tr>
<td>6.</td>
<td>Call Centre Solution</td>
<td>A system that allows a Service Provider or organization to operationalize an ECD call centre.</td>
</tr>
<tr>
<td>7.</td>
<td>Call centre Cluster</td>
<td>The number of ECD cluster through which calling operation is carried out in a call centre.</td>
</tr>
<tr>
<td>8.</td>
<td>ECD Cluster</td>
<td>People / team including Medical Consultant, ANM equivalent who jointly talks to the beneficiaries over phone to provide them information and counselling and resolve their programme related queries. A typical composition of ECD cluster may include 2 Medical Consultant and 6 ANMs/ Counsellors and 2 call centre agents.</td>
</tr>
</tbody>
</table>
2. INTRODUCTION

1.1. Background

2.1.1. Ministry of Health and Family Welfare (MoHFW) is committed to nurture the cognitive capital of the country through enabling all young children to attain their fullest potential by ensuring their right to good health, good nutrition, and access to stimulating, loving and protective care in a nature-friendly environment.

2.1.2. To make every child achieve their fullest potential, MoHFW has implemented various initiatives like LaQshya, Homebased Care for Young Child, new MCP Card with ECD component, Comprehensive New Born Screening under RBSK, District Early Intervention Centre, ANM On Line (ANMOL), Mother and Child Tracking Facilitation Centre, Kilkari application, Reproductive and Child Health Portal, etc. to reach every pregnant woman and mothers of young children. But these messages need to be communicated to the families particularly the mother.

2.1.3. MoHFW through Early childhood development (ECD) initiative will try to complement existing initiatives by reaching out to every pregnant mother and parents of every child up to the age of 2 years through ECD Call Centre. These ECD Call Centres would focus on the first 1000 days of the child which consist of 270 days during pregnancy and the first 730 days or first 2 years after birth.

1.2. About ECD
2.1.4. The critical period of brain development includes 270 days of pregnancy and first two years of the child also known as the first 1,000 days. Early Childhood Development (ECD) interventions during this period will encompass physical, cognitive, social and emotional development of a child.

2.1.5. To make every child achieve their fullest potential, the health system needs to reach out to every pregnant woman and mother and other family members of each child up to the age of 2 years. As the mother is the key stakeholder in holistic development of her child, the health systems need to communicate with mother in simple, effective and personalised messages. The health systems need to make the family believe that simple efforts and steps on their part can go a long way in enhancing the overall development of their child.

2.1.6. These messages should also be reiterated by the other health providers like ASHA, ANM and medical officers so that all the caregivers are reinforcing the same messages.

2.1.7. The Ministry proposes to set up a call centre to provide information and counselling to parents, which will enable them to provide nurturing care to their children to ensure their optimal development. This information will be provided by trained resources in the field of early childhood development, which adds the credibility of the advices. Further, focus will be on providing personalised advice to the caregivers, with emphasis on enhancing their knowledge on ECD and boosting their confidence to do simple things for and with their children to promote their development. As call centre offers an interactive platform, the advice can be customised to the parent’s and their child’s needs, for which message and advice will build on what the caregivers are currently doing well to promote the development of their child and what more they can do.

1.3. **Call Centre for ECD initiative**

2.1.8. Call centres generally have agents that push some predefined script and messages. There is little emphasis on personal relationship and trust which is key to bring any behavioural change especially related to pregnant mother and child. To address this issue, apart from the call agents, there will be additional specialised manpower equipped with technical knowledge in medical sciences placed at the call centre. They would undergo a short training in early childhood development module before being placed at the call centres.

2.1.9. In the context of ECD, the call centres at States / UTs are proposed to function as convenient interactive communication channels with families. This is to address on
one hand, their queries, myths, fears and challenges in the form of a helpline and on the other hand, convey specific time bound messages at periodic intervals to enable the foetus and the child to develop to its fullest potential using the specialised manpower.

2.1.10. Additional specialised manpower would preferably consist of Medical Consultants and ANMs/ Counsellors, placed in a group or cluster at the call centres.

2.1.11. With ECD initiative, it is envisaged that the states/UTs will communicate with the pregnant women and mothers registered on the RCH portal to build their confidence and clarify their myths to nurture their child.

2.1.12. These messages from the call centre would be based on the prevailing ECD guidelines constructed in a simple, useful and effective manner to directly enhance the development of a child. These simple but critical messages are sometimes either trivialized or buried under the shadow of other medical messages that loses it importance, e.g. relaxing during pregnancy and avoiding stress, pregnant woman requires emotional support of family during pregnancy etc.

2.1.13. In ECD call Centre, any first time caller, either registered or unregistered can make a call. Subsequently the caller would be registered at the ECD call centre.

2.1.14. The subsequent calls would be routed to a pre-allocated ECD group or cluster of specialised manpower. Each ECD cluster would preferably consist of 2 Medical Consultant and 6 ANMs/ Counsellors and 2 call centre agents. Each ECD cluster will preferably serve 40000 to 50000 beneficiaries.

2.1.15. The allocated cluster model of ECD call centre will ensure trustworthy relation and partnership between government and beneficiaries during Early Childhood Development (ECD).

3. CALL CENTRE MODEL

1.4. About Call Centre

3.1.1. A call centre is broadly a specially designed centre duly equipped with necessary equipment, technologies, infrastructure and human resource to make, receive, manage and process large number of requests, queries or concerns of the callers. In public health sector, these call centres generally cover both inbound and outbound calls, covering a wide area that includes support, advocacy, counselling and consultation.

1.5. Call Centres for ECD

3.1.2. Call centres have come a long way in providing support to both urban and rural population in Indian public health sector. Their reach has also widened because of the availability of adequate and skilled resources and availability of infrastructure and technology for running and managing health based call centres. Some of these call centres are offering services even in regional languages to cater the targeted population across the nation. Call centres have broadly turned into contact centres, performing various roles and responsibilities beyond enquiry and validation like consultation, guidance and grievance redressal. Some of the call centres even handle other forms of correspondence or communication like remote diagnostics services. Some of these call centres are even operational 24 hours a day and 7 days a week.

1.6. Role of ECD Call Centre
3.1.3. To put things in general terms, the purpose of ECD call centres is to support the beneficiaries and in this case the expecting woman, who would be undergoing a lot of physical and mental changes including stress, but would not know whom to rely and communicate regarding her doubts. Subsequently after the birth of a newborn child, helping the mother to nurture her child in the best possible way by providing scientific knowledge regarding child raising practices through simple time bound messages at periodic intervals. The support can be further broken down into two ways. First way of supporting is through outbound calls at fixed intervals based on predictive analysis and provide simple information which would be useful at that point of time. The second way of support is through receiving inbound calls and addressing the issue through providing expert opinion telephonically, based on the requirement of the callers.

3.1.4. The role of ECD call centre is to bridge the gaps between the new scientific knowledge critical to the cognitive development of the young child which the government wishes to implement and the existing mistaken practices being followed in the community, largely due to ignorance. Thus the ECD cluster, placed at the call centre consisting of specialist, ANMs and call center agents would be the first point of contact and subsequently the ECD cluster would actively try to cultivate a trustworthy personal relationship with the callers by providing them genuine and authentic information including counselling and consultation.

3.1.5. Trust, satisfaction and advocacy should be high on the list of priorities, as this alone can ensure a trustworthy and lasting relationship between call center staff (ECD cluster) and beneficiaries and finally between government intent and the beneficiaries.

1.7. Components of Call Centres

3.1.6. Specialized management, system driven processes, skilled resources, overall ownership and administration by service providers.

3.1.7. Agents with specialized communication skills, subject matter expertise, command on language and continuous training.

3.1.8. Call Centre automated processes and technologies to ensure optimized functions and workflow. There are no standardized technologies or process, but anything meeting the expectations and field requirements should be considered.

3.1.9. Support and integration of the ECD services related to the activities provided collaboratively by the call centre service provider.

1.8. Types of Call Centres

Many call centre initiatives have successfully been implemented in various healthcare areas such as health awareness, health service delivery feedback, grievances, health counselling etc. Based on the scope of services and the requirement of the States and UTs, the model for call centre can be implemented and operated.

3.1.10. There are several types of call centres today, but these guidelines focuses only on the two types of call centres according to management and location: in-house and outsourced call centres.

3.1.11. In-House Call Centres: Many States / UTs have implemented call centres, within their premises, and staffed with people either on contract or through outsourced agency. In terms of advantages, the State / UT will have direct and full
control over the operations of the call call centre. Further, there are no change request and limitation to augmentation as every aspect is directly controlled and managed by the State / UT. Beneficiaries can relate and appreciate services if they are directly from the government having personal touch. In terms of disadvantage, this model has high initial investment and high operational expenditure. The challenge related to coordination with administration, technology, resource management and risk management would be most difficult aspect. The project further have high administration, overhead and maintenance costs. In most cases, the resource persons are outsourced, their individual involvement and commitment drives the success of the project. The in-house projects have low risk to exposure of data sharing as administration and policies are also managed by State / UT, however, if data sharing happens the implications are very high. Further, In-House Call Centres diverts the attention of the State / UTs from core services i.e. health service delivery to project management.

3.1.12. Outsourced Call Centres: Many States / UTs have outsourced their call centres to companies that are specialized in providing call centre services. In terms of advantages, this aspect ensures alignment of the project deliverables with project requirement within allocated financial budget. The arrangement has lower cost or ownership and in case of exigency the project can also be terminated based on contractual conditions. This model generally ensures adequate room for scalability, updated technology, infrastructure, etc. during the entire implementation phase of the project. The outsourced agency will be responsible for the optimization of productivity based on aspects like administration, technology, resource management and risk management, etc. This arrangement empowers State / UT to pay attention to their core works. The arrangement further empowers State / UT to pay for the actual services delivered under the project. In terms of disadvantage, the state / UT would have lesser control of on the overall service delivery of the project. The agents (Doctors, ANMs, agents, etc.) are contractually deployed and may lose connect and commitment for the project in long run. Further, project should have adequate security parameters embedded in the application as the data pertains to individuals.

4. IMPLEMENTATION APPROACH FOR ECD CALL CENTRE

1.9. Approach Model

4.1.1. ECD Call Centre needs to be implemented in all states and UTs with the aim to develop an effective personalized two-way communication services for pregnant women and parents of new-born. The services include personalized assistance on various aspects related to health information, quality healthcare services available and importantly query resolution etc. related to first 1000 days. Many states where other call centres have been adopted / implemented, the existing call centre model would then need to be considered for enhancement to include ECD functionalities as per the provision of the contract. The States / UTs based on their requirement may choose in-house and outsourced model of call centre. In any of the model, implementation of the call centre may further be taken up as Greenfield approach or Brownfield approach.

1.10. Greenfield vs brownfield

4.1.2. Greenfield approach development happens when you start the project from clean
slate, afresh without any restrictions. No legacy data and process, no old call centre to link or maintain. Brownfield approach happens when State / UT decides to develop / implement ECD on an existing call centre. As an upgrade is implemented into an existing solution, the development is said to be Brownfield.

4.1.3. In brownfield approach, State / UT may be restricted by the technology constraints of legacy product / application. An open consideration is required while selecting Greenfield approach or Brownfield approach for ECD call centre. It is broadly suggested that State / UT may start preferably with a Greenfield approach and think beyond the constraints for extending the capabilities to implement ECD practices.

4.1.4. Further, switching from an in-house call centre to an outsourced cloud-based call centre it is much more than physical relocation. This includes advance technology, different payment structure and greater choice of technology, resource, coverage and availability.

4.1.5. The call centre are living systems and continuous upgrades are required because of ever growing requirements and service level agreements (SLAs). The outsourced approach reduces pressure on internal administrators because call centre service providers are managing administration and technical challenges including upgradations.

4.1.6. The scope of the ECD Call Centre within a state / UT should be clearly defined before selection of any implementation model. The State / UT should accept and agree on the scope, timelines, costs and impact that call Centre would make. “ECD Steering Committee” would preferably be formed in every state / UT to oversee the successful implementation of Call Centre in the state/ UT.

4.1.7. In case of any large operational in-house call centre, State / UT must conduct an assessment of technology, assets and resources before its selection for brownfield approach. This assessment should not only covers the internal agents, technology, hardware and rent but also the department resources that are deployed or allocated for managing the call centre. The step will enable State / UT to decide what to insource and what to outsource.

4.1.8. Additional specialised manpower consisting of Medical Consultants i.e. medical doctors, specialist and ANMs/ Counsellors, who are supposed to be a part of the specific cluster/group at the call centres and provide quality technical knowledge to
the beneficiary are to be recruited separately.

4.1.9. States / UTs are suggested to recruit resources like ANMs and medical consultants separately and confirm that they are trained in ECD. Such interested manpower can be initially registered online and then recruited by the government or a technical group who are not directly related to the outsourced call center model and have no conflict of interest.

4.1.10. The technical group will select the specialised manpower after judging their attitude and understanding of ECD, including their expected salary and terms of reference. Once selected the Outsourced call center management would provide them with necessary support at the call center including assistance from the call center agents to enable them to contribute effectively.

4.1.11. Monthly salary of the specialised Manpower should be paid separately by the Outsourced call center management as per recommendation by the government or the technical committee through direct bank transfer.

4.1.12. In case of any misdemeanour committed by any of the member of the specialised manpower group or cluster, the independent technical committee needs to be informed and action taken only with their consent.

4.1.13. Since requirements, SLAs and project costs are correlated, it is suggested that the same should be clearly drafted and reviewed before entering into any contract with ECSP.

4.1.14. The implementation of Call Centre may be a phased approach. Defined below is the functionality of ECD Call Centre that should be considered by states and union territories. States / UTs need to conduct detailed assessment of the existing implementation to identify the gaps. All states would need to implement the critical features defined in the guidelines. The Call Centre needs to meet defined critical features which are mandatory for all states / UTs to comply with minimum necessary functions of ECD framework. Some of the features are described as desirable where decision would be left to states / UTs for adoption.

<table>
<thead>
<tr>
<th>Process</th>
<th>Features</th>
</tr>
</thead>
<tbody>
<tr>
<td>Draft requirements</td>
<td>Critical</td>
</tr>
<tr>
<td>✓ Model</td>
<td>✓ Linkage to RCH Portal</td>
</tr>
<tr>
<td>✓ Scope</td>
<td>✓ Allocation of Helpline Number – for inbound</td>
</tr>
<tr>
<td>✓ Number of beneficiaries to be covered –</td>
<td>✓ CRM / IVRS / Messaging</td>
</tr>
<tr>
<td>✔ (preferably high risk to start with)</td>
<td>✓ Reports &amp; Statistics – Monitoring and Evaluation</td>
</tr>
<tr>
<td>✓ Training needs (Subject Matter / Soft Skills)</td>
<td>✓ Maintain security of health records</td>
</tr>
<tr>
<td></td>
<td>✓ View Patient Reports and advice based on SoPs</td>
</tr>
<tr>
<td></td>
<td>✓ SMS and email integration</td>
</tr>
<tr>
<td></td>
<td>✓ Reminder and Alerts</td>
</tr>
<tr>
<td>Empanelment process of specialised Manpower</td>
<td>Desirable</td>
</tr>
<tr>
<td>✓ Specialist</td>
<td>✓ Grievances</td>
</tr>
<tr>
<td>✓ ANMs / Counsellors</td>
<td>✓ Suggest tests online</td>
</tr>
<tr>
<td></td>
<td>✓ Symptoms checker</td>
</tr>
<tr>
<td></td>
<td>✓ Healthcare Webinars</td>
</tr>
</tbody>
</table>
IEC of ECD Call Centre

- Rating of resources by beneficiaries
- Feedback, poll and surveys

| Selection of other manpower like call center agents | other manpowers: To be managed by ECD call centre service provider |

4.1.15. Following are the broad activities for implementation:

<table>
<thead>
<tr>
<th>Activities</th>
<th>Output</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Stage 1 – Project Initiation and Assessment</strong></td>
<td></td>
</tr>
<tr>
<td>Perform gap assessment</td>
<td>Initial Scoping</td>
</tr>
<tr>
<td>Based on the gaps identified, define the scope of implementation</td>
<td></td>
</tr>
<tr>
<td>Define Stakeholders, goals and expectations</td>
<td>Expectation setting</td>
</tr>
<tr>
<td>Orientation to steering committee on implementation approach and milestone</td>
<td></td>
</tr>
<tr>
<td>Infrastructure assessment and profiling to adopt newer ways of delivering health information and services</td>
<td>Assessment, vendor selection and contract management</td>
</tr>
<tr>
<td>Obtain funding approval</td>
<td></td>
</tr>
<tr>
<td>Request for tender, vendor evaluation and selection for ECD Call Centre service Provider (ECSP)</td>
<td></td>
</tr>
<tr>
<td>- Define scope of work</td>
<td></td>
</tr>
<tr>
<td>- Define acceptance criteria</td>
<td></td>
</tr>
<tr>
<td>- Define User Interface approach</td>
<td></td>
</tr>
<tr>
<td>- Define model and components</td>
<td></td>
</tr>
<tr>
<td>- Design interaction services</td>
<td></td>
</tr>
<tr>
<td>- Define conceptual data model</td>
<td></td>
</tr>
<tr>
<td>- Integrate the portal with other systems and websites as per the integration points including RCH portal</td>
<td></td>
</tr>
<tr>
<td>- Define third party integration for triangulation, if any</td>
<td></td>
</tr>
</tbody>
</table>

| **Stage 2 – Go-Live and Contract Management** | |
| Project review team for acceptance sign-off, Project Management and contract management | Go-Live |

5. SERVICES IN ECD CALL CENTRE

1.12. Call centre Services

5.1.1. ECD call centre may provide various set of services through various modes of communication that are best suited to the beneficiaries. These modes of communication form the basic functionalities of a call centre. Some of these modes of communication and functionalities of a typical call centre are as given below:

1.13. Inbound Calling

5.1.2. Beneficiaries may call the call centre for availing the desired service. Once, a call centre receives the call from the beneficiary, it will provide information related to
government schemes and programmes, healthcare services and other related areas. Interactive Voice Response System (IVRS) connects callers to a trained call centre agent for personalized assistance.

5.1.3. Some of the services and information which may be provided through inbound calling are as follows:
   a) query resolution
   b) promotion of government programmes and schemes
   c) healthcare consultation

5.1.4. An indicative broad process for the inbound call is given below:
   i. The call may be first handled by an IVR system wherein the IVRS provides the list of services that a caller can avail through the call centre.
   ii. This feature provides the caller a self-service option to get the desired information and services.
   iii. Based on the selection, IVRS will route the call to Specialist, ANMs, Counsellors, for personalized assistance. Resources will assist the caller in order to get the queries resolved.
   iv. In case where a specialized medical help is required, the call may be forwarded directly from IVR to the Specialist.

1.14. Outbound Calling

5.1.5. State / UT may desire to connect with the targeted beneficiaries for various purposes such as:
   a) Creating awareness about ECD services
   b) Getting feedback on the received healthcare services
   c) Validation of the services delivered by health workers

5.1.6. Outbound calls will be made to beneficiaries registered in the RCH portal for awareness generation, advocacy and counselling. Specialist, ANMs, Counsellors will make the calls to beneficiaries and health workers for data validation and spreading awareness of various government schemes and programmes. In case where a specialized medical help is required, the call may be provided directly by the medical consultant.

1.15. SMS Services

SMS can be effectively used for providing specific details to the relevant stakeholders. An integrated SMS solution will enable the call centre agents to send required information to the stakeholders. The indicative list of functionalities of SMS solution is given below:

5.1.7. Inbound SMS

Inbound SMS services may be used to get feedback from beneficiary / health worker on the calls made to them through call centre.

The beneficiary / health worker may also send SMS to get specific details such as services due, linked health worker details, information regarding government schemes and programme, etc.

5.1.8. Outbound SMS
   a) Outbound SMS solution may be used for following indicative activities:
i. To provide specific details to the beneficiary / health worker as desired by them
ii. To send relevant information to the beneficiary / health worker or the linked phone
    numbers in the database
iii. To broadcast health related information to the targeted group

5.1.9. Calling Matrix

<table>
<thead>
<tr>
<th>Risk Group (PW &amp; Child)</th>
<th>Agent</th>
<th>Paramedics</th>
<th>Doctor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Risk Group</td>
<td>Y</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>*High Risk Group</td>
<td>N</td>
<td>Y</td>
<td>Y</td>
</tr>
</tbody>
</table>

**High Risk Group for PW**
A pregnant woman would be considered in High Risk Group, if she has any of the ailment like diabetes, BP, hypertension, TB, asthma, anaemia, or complications in previous delivery like abnormal child or abortion, etc.

**High Risk Group for Child**
A child would be considered in High Risk Group, if he/ she has low birth weight i.e. weight below 2.5 kg.

_Low Risk Group for PW & Child is to be defined by the State for calling._

6. TECHNOLOGY COMPONENTS OF ECD CALL CENTRE

1.16. Technology Components

6.1.1. In case State / UT is not willing to invest on infrastructure (Civil, IT and non-IT) and
decides not to run the call centre from its own premises, it may choose to outsource
the call centre. In this case State / UT is not required to provide space or any other
infrastructure to the Call centre Service Provider (ESP). Call centre Service Provider
will develop the call centre application as per the requirements of State / UT,
establish, deploy and operate the call centre in its own premises.

6.1.2. Broadly, there are five types of technology that ECD contact centre should
consider:

a) Contact centre functionality: ACD functionality (including interaction routing and
queuing), CTI, IVR (routing), outbound dialling

b) Desktop applications: CRM, customer management systems, helpdesk
applications, agent desktop, knowledge bases, multichannel handling applications

c) Management applications: workforce management, call recording, interaction
analytics, reporting, MIS and business intelligence, workforce optimization,
customer experience feedback

d) Enabling technology: security, databases, payment technology, middleware, IP
networks and other common architecture or hardware

e) Other hardware: IP phones, PCs or desktop terminals, headsets, etc.
<table>
<thead>
<tr>
<th>S. No.</th>
<th>Call Centre Solution Component</th>
<th>Component Feature</th>
<th>Key Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Customer Relationship Management (CRM) solution</td>
<td>Call centre provides you the ability to contact your beneficiaries to provide them assistance and solve any challenge / query / support. It connects the beneficiaries through a single platform that automates the routing, ticket labelling, and processing of incoming / outgoing calls. Whenever anybody calls, CRM track each call and record the observations to provide a full 360-degree view of all the internal and external interactions. The resources can see all the information related to that beneficiaries along with call logs, previous tickets, cases, events, notes, chat transcripts, and more. This information will help the resources to be more organized, efficient, and effective.</td>
<td>• The customised CRM should be a web-based solution with seamless integration to the other tools such as IVRS, CTI, voice logger, SMS gateway etc. • It should have mechanism to integrate for fetching data for validation and pushing back the validated data to the data source. • Provide a single view to the State / UT for all the relevant functions as desired in the requirement document. • Complete management of service sets for both incoming and outgoing calls. • Customised call validation interface with all the necessary details on screen with a clear step-by-step validation steps and necessary pop ups for validation of key columns based on business rules. • Call back scheduling to ensure maximum coverage. • Should have customisable prompts for resources. The pop-up message that will be prompted to the CA while on call should be customizable as per requirements of MoHFW/State. • Skill based routing based on business rules like Data-driven</td>
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<tr>
<td>S. No.</td>
<td>Call Centre Solution Component</td>
<td>Component Feature</td>
<td>Key Requirements</td>
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<td>routing (based on information stored in database systems), skill or profile based, last relationship / interaction based, service priority based, compliant with overall service levels, etc.</td>
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<td></td>
<td>• Build and customize routing strategies through easy-to-use point-and-click GUI</td>
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<td></td>
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<td>• Uniform call distribution to various resources</td>
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<td></td>
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<td></td>
<td>• Conferencing and live-chat facility</td>
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<td></td>
<td>• Content management / knowledge repository (i.e. both standard and temporary question bank) with a robust search engine to ensure efficient retrieval of information availability to resource within seconds</td>
</tr>
<tr>
<td>2.</td>
<td>Interactive Voice Response (IVR) Menu System</td>
<td>An Interactive Voice Response also known as virtual receptionist would be the first voice beneficiaries will listen to while contacting the ECD call centre.</td>
<td>• Receive all inbound calls on the telephone number specified by the State / UT and prompt the callers to make their selection(s)</td>
</tr>
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<td></td>
<td>The IVR helps State / UT to instantly respond to beneficiaries and route call to best possible resource by greeting them with a personalized welcome message, and communicate with them in their local language.</td>
<td>• Identify the caller through Caller Line Identification (CLI) and support intelligent call routing based on past record or region</td>
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<td></td>
<td>• Update the IVRS usage details as the beneficiary traverses through the IVRS and reaches the resource</td>
</tr>
<tr>
<td>S. No.</td>
<td>Call Centre Solution Component</td>
<td>Component Feature</td>
<td>Key Requirements</td>
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<tr>
<td></td>
<td></td>
<td>The interaction happens through DTMF keypad tones.</td>
<td>• Programmes wise Interactive Voice Response (IVR) Menu</td>
</tr>
<tr>
<td>3.</td>
<td>Text to Speech (TTS)</td>
<td>Voice is the soul of IVR or any system assisted communication in call centre. An audio response closes to human voice optimized to correctly communicate the context should be used.</td>
<td>• Text-to-Speech (TTS) converts text into speech. The text may include some FAQs, emergency responses, etc.</td>
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<td></td>
<td>• Quality of text to speech should be comprehensible and understandable by the intended beneficiaries</td>
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<td></td>
<td></td>
<td>• The TTS should be able to integrate with the IVRS system as per the workflow.</td>
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<tr>
<td>4.</td>
<td>Automatic Call Distribution (ACD)</td>
<td>Automatic call distribution ensures calls are automatically routed to the right resources to ensure resource respond to the call at the earliest.</td>
<td>• Manages incoming calls and handles them based on the database and associated handling instructions.</td>
</tr>
<tr>
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<td></td>
<td>It is a prerequisite as it helps in the systematic handling of inbound calls.</td>
<td>• Validate callers, make outgoing calls, forward calls to the right resource, allow call centre to record messages, gather usage statistics, balance the use of phone lines, etc.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The ACD should be customisable and configurable enough to handle call volumes are varying caller requirements like routing calls to the idle system, least occupied resource, language based routing, location based routing, etc.</td>
<td>• Provide integration with IVRS menu system to intelligently route calls</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>• Provide configurable system for whitelisting / blacklisting users</td>
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<td></td>
<td>• Automated dialling modes with algorithm-based dialling, progressive dialling, rule-based dialling, least cost routing, etc.</td>
</tr>
<tr>
<td>S. No.</td>
<td>Call Centre Solution Component</td>
<td>Component Feature</td>
<td>Key Requirements</td>
</tr>
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</tbody>
</table>
| 5.    | Voice Logger                   | Voice Logger records all the incoming and outgoing calls. It is a must to monitor the call quality to enables listening to conversation logs of caller and resources and managing call quality. | - Queue optimization, allowing the caller the option to be called back  
- Abandoned call recovery, to determine the contact number of a missed / abandoned call  
- 100% automatic call recording  
- Optimal Compression Techniques should be used  
- Logger should support multiple format support (mp3, wav etc.)  
- Recording should be sharable amongst ESP personnel and MoHFW through email, bulk transfer for supervisory requirements  
- Ability to search through call details to locate specific calls as well as matching records |
| 6.    | Computer Telephone Integration (CTI) | Computer telephony integration, is a technology that allows computers to interact with telephone systems. CTI provides a centralized control over all of their means of communication through single interface. | - Should be able to integrate with call centre application / solution  
- Call events should be handled from the system such as hold, retrieve hold, conference, transfer etc.  
- Support relevant screen pop-ups based on CLI, ANI (Automatic Number Identification), DNIS (Dialled Number Identification Sequence)  
- The CTI shall seamlessly integrate with the application to take control of the call flow inside the Switch / EPABX and
<table>
<thead>
<tr>
<th>S. No.</th>
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<th>Component Feature</th>
<th>Key Requirements</th>
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</thead>
<tbody>
<tr>
<td>7.</td>
<td>Call centre MIS</td>
<td>MIS reports are required for monitoring and evaluating statistics like display call volume, peak hours, number of calls missed and received, resource utilization, traffic coming from different regions, new and repeat callers, and other important insights.</td>
<td>allocate the most appropriate resource</td>
</tr>
</tbody>
</table>

MIS reports are significant when making staffing decisions, scheduling resources and evaluating the performance of individual resource, teams, departments and overall call centre.

- Dashboard
- M&E Reports
- Performance Reports
- All other Reports to display the performance of various services rendered by call centre

1.17. Technology advancements

The technology advancement that additionally may be considered for implementation by the state / UTs at the ECD call centre are as follows:

6.1.3. Cloud based Call centre: These are network-based services in which a provider owns and operates call centre technology by providing its services remotely in a subscription model. They are increasingly becoming common because the solution is available as a service and there is no requirement of physical hardware which eliminates the problem of maintaining the equipment and its upgrades. These can be easily scaled for business operations and their implementation is also swift.

6.1.4. Virtual Call Centres: These centres do away with the need to have all agents in one physical location — instead combining the call centre infrastructure and geographically dispersed agents into a single, virtual entity.
7. WORKFLOW IN ECD CALL CENTRE

1.18. Proposed ECD call centre workflow

A broad process map detailing the tentative flow of ECD Call Centre is placed below:

a) Beneficiary Consent and Follow-up

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**ECD Call Centre Process Map**

<table>
<thead>
<tr>
<th><strong>Beneficiary Consent and Follow-Up</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Start</strong></td>
</tr>
</tbody>
</table>

- **Call Centre Agent**
  - Interacts with targeted beneficiary for validation, query resolution, grievance redressal
  - No need of calling

- **Beneficiary**
  - Hears the call and validate the data of targeted beneficiary
  - Consent
    - Yes: Need Advice from Medical Consultant (Based on Risk)
      - Low Risk: Nurse/Counsellor
      - High Risk: Resolve the health related queries/messages
    - No: Further Assistance
  - End

b) Outbound call to Beneficiary
c) Inbound call Beneficiary
ECD Call Centre Process Map

Beneficiary Inbound Flow

| Beneficiary | Start | Caller make call to ECD Call Centre | Call received at ECD dialer | Received call get disconnected at ECD dialer | The number gets searched in Internal RCH database | Registered | The dialer will initiate the call for the beneficiary from allocated cluster | Unregistered | Call Centre agent will register this caller in RCH portal | Allocation of cluster based on system generated rules | The allocated doctor will assist the caller | End |

The caller will get the call from the doctor
7.1.1. MCTS / RCH database will be used for calling the beneficiary through ECD call centre.

7.1.2. The first time caller will either be a registered beneficiary on RCH portal or an unregistered beneficiary on RCH portal.

7.1.3. In case of registered beneficiary on RCH portal, the dialer will pull the data from RCH portal through web services or API. The dialer will automatically retrieves the details of the targeted beneficiary based on the system preferences available in RCH portal and makes call to these beneficiary. After connecting the call, the Call Centre Agent will interacts with the caller and validate the basic details of the beneficiary. Subsequently, Call centre agent will take the consent of the beneficiary about their preference for avail the services if the beneficiary accords her consent, then the agent asks the beneficiary for preferences like preferable Language, preferable time, any risk factor, any concern of the family, any health challenges etc. The same would be stored in the dialer database for onward calling. If required, the call would also be transferred to the Nurse / Counsellor/ Medical Consultant and their ECD related queries may be resolved. If the beneficiary is not keen for availing services, then called number would be added to the list of uninterested callers and no calls would be made to such beneficiaries.

7.1.4. The caller can also make ECD call centre on centralised and toll free number registered by the State/ UT. In case, any unregistered beneficiaries try to access the services, the ECD call would be routed to helpdesk agent that will first register the beneficiaries and then forward the call to ECD cluster. In case of subsequent calls, the call would be routed directly to the allocated cluster.

7.1.5. ECD cluster would tentatively be consisting of 2 Medical Consultant (preferably MBBS) and 6 Nurses / Counsellors (preferably diploma in Nursing and Midwifery or graduation in social sciences or equivalent) and 2 call centre agents. Each ECD cluster will preferably have 40000 to 50000 allocated beneficiaries. ECD cluster will always make and receive the calls from allocated beneficiaries only.

7.1.6. The State / UT may also provision a missed call facility for implementation of the project. Once the call is received, it may be taken either as an inbound call or may be terminated at the dialer to consider as missed call. A missed call can be followed by an SMS, another call, or a combination of the two based on the functionality. Once the call is received at the dialer, the call will automatically get disconnected by the dialer and at the same time the number will get searched from the internal database. In case of registered number the call will be connected to the cluster preferably to consultant and specialist in case of inbound to provide consultancy and advisory services.

7.1.7. In case of unregistered beneficiaries, an ECD cluster will be allocated by the system based on predefined algorithm and call will be forwarded to the allocated ECD cluster. In case of outbound calls, predictive calling will be made by the ANMs and Medical Consultant based on predefined algorithms like high risk cases, etc. States / UT may choose physical call centre or hosted call centre 1 based on their

---

1 In **physical call centre**, the dialer will transfer the missed call data based on mapping of numbers to mapped cluster through predictive calling and data can be fetched through physical call centre.

In case of **hosted call centre**, system will generate two calls, initially to the cluster and subsequently to the beneficiary. This will enable the conferencing between cluster and beneficiary.
requirement.
7.1.8. The State / UT may define a mechanism for the empanelment of Counsellors, ANMs and Medical Consultants provided they are trained in ECD (short course of 1-2 days). It is suggested that state / UT should deploy qualified and trained resources for deployment in ECD call centre. It is suggested that State / UT may publish the advertisement for empanelment of Counsellors, ANMs and Medical Consultant. Any candidates may apply for the suitable positions based on the eligibility. Based on the result of test and interview, the shortlisted candidates may be selected for the position and accordingly cluster would be created.

7.1.9. The Cluster will interact with the allocated beneficiaries with periodic messages covering the first 1000 days based on critical periods in the life of a child beginning from conception to first two years of life. The beneficiaries include pregnant woman, child (0-1 year) and child (1-2 year) registered in RCH portal would be considered for making the 21 ECD calls. The pregnant woman will receive 9 outbound calls during her pregnancy period. Parents of child (0-1 year) and child (1-2 years) will receive 9 outbound calls and 3 outbound calls respectively from allocated cluster.

7.1.10. Based on the volume of calls, if calls volume of a cluster is unexpectedly low i.e. below 60 % of utilization, a report should go to state and call centre will be asked for explanation. If explanation is not satisfactory then state may take call to close the cluster.

7.1.11. It is estimated that 10% of the beneficiaries registered in RCH portal will be covered from ECD call centre. To start with, the calls may be routed to the high risk cases. The State / UT may extend the services to all the registered beneficiaries in phased manner.

7.1.12. It is estimated that the average call handling time (AHT) of ECD call centre for each inbound and outbound call will be 5 minutes. However, the same may vary during actual usage based on the services actually delivered from ECD call centre.

7.1.13. It is estimated that during initial phase, the utilisation of the call centre for outbound and inbound calling may vary from 80% to 20% respectively. However, after successful operation and IEC of the project, the utilisation for outbound and inbound calling may vary extensively.

7.1.14. It is suggested that opening hours for the call centre may be considered from 9:00 am to 6:00 pm. In case of excess utilization, multiple shift may be considered from 8:00 am to 4:00 pm and 11:00 am to 7:00 pm to cover peak time traffic hours. The State / UT may ascertain peak call, shifts, no. of clusters based on utilization, if necessary.

7.1.15. It is suggested that the platform should preferably be used only for ECD call centre. In case of rollout of other initiatives, State / UT may sign a separate contract with same / other service providers based on the model RFP.

8. EMPANELMENT OF RESOURCES

1.19. Empanelment of Specialised Resources for ECD Call Centre
8.1.1. Apart from technology, the success of the call centre equally depends on the Specialised Resources deployed for the ECD Call Centre. Therefore, specialised resources is the key to delivering exceptional experience.

8.1.2. The deployment of specialised resources should directly be managed and
monitored by the State/ UT to ensure quality of the manpower.

8.1.3. Further, these specialised resources needs to have a deep understanding of the subject and services if they’re to be trusted to represent the government for advocacy and consultation.

8.1.4. To determine that specialised resources have thorough understanding of the subject, the selection process and examination may be conducted online. The online selection process may also be conducted once a year with provision of keeping candidature of candidates on hold for up to two years to manage attrition during the tenure of the project.

8.1.5. The broad advantages of online selection process may include:
   a) Securely store data and questions in sets for exams and support automatic grading
   b) Remove the need for physical centres as resources can opt for examination based on their convenience.
   c) Eliminate the need to travel and logistic of resources and examiner.
   d) Variety of Questions can be included like MCQs, fill in the blank, true false, etc.
   e) Provide performance reports and assist in differential grading sections-wise
   f) Stop the exam browser and disables the use of other application on desktop / laptop to prevent unethical practices. Also record and monitor the activities of the candidate in real time for automated proctoring.
   g) Provide features like Aadhaar and OTP based authentication to avoid impersonation.

8.1.6. Roles and responsibilities of the specialised resources for operating a call centre may include the following:

<table>
<thead>
<tr>
<th>S No</th>
<th>Resource Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Project Manager</td>
<td>Will be responsible for day-to-day operations and supervising the calling operation. Will be responsible for managing the efficiency of calling operation. (Applicable in case of more than 2 clusters)</td>
</tr>
<tr>
<td>2</td>
<td>Nurse/ Counsellor</td>
<td>Will be responsible for receiving calls from callers or making calls to beneficiaries for resolution of queries, grievance and counselling.</td>
</tr>
<tr>
<td>3</td>
<td>Medical Consultant</td>
<td>Will provide necessary medical assistance to the caller / beneficiary over the phone for ECD related matter.</td>
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</tbody>
</table>

8.1.7. The deployment of Call centre Agents may be managed directly or may be through ECD call centre service provider.

<table>
<thead>
<tr>
<th>S No</th>
<th>Resource Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Call centre Agents</td>
<td>Will be responsible for making calls to beneficiary for validating details and setting preferences.</td>
</tr>
</tbody>
</table>
9. PAYMENT MODELS

1.20. Commonly used payment modes

9.1.1. License based payment mode: ESP may be engaged based on the number of licenses obtained for operation of ECD call centre. Unit rate for payment to the ESP will be based on per license, per agent, per seat for the call centre. ESP payment will be equal to the number of call centre licenses procured for the call centre X unit rate of license.

9.1.2. Time based payment mode: ESP may be engaged based on the time of actual calling made through the call centre. Unit rate for payment to the ESP will be based on per minute or per hour of actual calling made through the call centre. ESP payment will be equal to number of actual minutes or hours of calling made through call centre (considering number of seats in the call centre, working hours / minutes of call centre and actual number of operational days) X unit rate of calling.

9.1.3. Seat based payment mode: Seat based payment mode is considered when fixed number of call centre agent seats are envisaged for the call centre. In this case, the payment shall be made based on the per seat rate for the call centre. ESP payment will be equal to number of Call centre Seats in the call centre X unit rate per Call centre Seat.

10. PROJECT PLAN

State / UT needs to devise a detailed project plan for the call centre including implementation and operationalization of the call centre. Various factors that may be considered while devising the project plan are as follows:

10.21. Governance Structure

State / UT needs to plan a governance structure for the call centre project. This structure may broadly consist of a committee that will guide the project and an external agency that may be engaged to provide specialized and specific inputs to the project.

10.1.1. Committee for call centre management

State / UT needs to constitute a committee that will steer and guide the call centre project. This committee will take strategic and operational decisions for the call centre. The committee may comprise the following members:

a) Chairperson – Chairperson will preside over the committee and will be involved in the decision making process for the project.

b) Nodal officer – Nodal officer will oversee, manage and guide the entire project and take decisions related to day to day operations of the project.

c) Technical officer – Technical officer will oversee the technical aspects of the project.

d) Representatives from the Department – Representatives from the Department will provide the programme related inputs and requirements to the committee.

10.1.2. External agency

State / UT may hire an external agency for providing specialized assistance in RFP preparation, technical support, bidding process, preparation of contract, contract management, SLA monitoring and project management.
1.22. Selection of ECD Call Centre Service Provider (ESP)

10.1.3. State / UT needs to select ESP that will implement and operationalize the ECD call centre. State / UT needs to follow the relevant financial rules and procurement policies laid down by the Central / Government in selection of ESP.

10.1.4. Selection procedure typically consists of the following major activities:
   a. **Preparation of Request for Proposal (RFP)**
      State / UT needs to prepare an RFP to invite the prospective bidders for participation in the bidding process. The RFP should clearly mention the scope of the project and the relevant terms & conditions. The RFP should be based on the relevant financial rules and procurement policies laid down by the Government.
   b. **Bidding process for selection of the ESP**
      Bidding process will broadly include the following activities, Publication of RFP, Evaluation of bid proposals submitted by the bidders, Identification of successful bidder and Signing of contract.

1.23. Project Timelines

10.1.5. State / UT should formulate the project timelines. This shall consist of the activities that will be performed for the implementation and operationalization of the project.

10.1.6. An indicative project timelines for a call centre project are mentioned below:

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Activity</th>
<th>Timeline</th>
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<tbody>
<tr>
<td>1.</td>
<td>Project Report for Selection of ESP</td>
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</tr>
<tr>
<td>a.</td>
<td>Preparation of RFP</td>
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</tr>
<tr>
<td>b.</td>
<td>Publication of RFP</td>
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<tr>
<td>c.</td>
<td>Identification of successful bidder (ESP)</td>
<td>Indicative</td>
</tr>
<tr>
<td>d.</td>
<td>Signing of contract with the ESP</td>
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<tr>
<td>2.</td>
<td>Implementation of the project</td>
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<tr>
<td>a.</td>
<td>Go-live of the project</td>
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<tr>
<td>3.</td>
<td>Operationalization and maintenance of the project</td>
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</table>

11. **OTHER FACTORS STATE / UT NEEDS TO CONSIDER**

1.24. Intellectual Property Rights (IPRs)

State / UT should include IPR clause preferably based on the following:
Any pre-existing IPRs of ESP shall be owned by ESP. IPRs arising out of this project shall be owned by the State / UT. The source code of the call centre solution developed under this project shall be owned by the State / UT. State / UT can modify the application or source code for their own use. If required, State / UT can modify the call centre solution either by their own professionals or by third party professionals. The IPRs of the Third Party Software, Hardware, or System used by any party under this project shall rest with
the OEM / concerned party except for the customizations done over these software products for the project.

1.25. Standard Rules & Regulations
State / UT should follow the extant guidelines for setting up of a call centre, like:

11.1.1. Government rules for procurement
11.1.2. State / UT procurement guidelines if any
11.1.3. Compliance to the standards such as IPV6; IT Act 2008 (including amendment); recommended EHR standards; eGovernance policies as prescribed by the MeitY / MDDS, any other relevant standard prescribed by any other government organization.

1.26. Call Centre Utilization
Call centre Agents are crucial resources in a call centre. State / UT should strive for maximum call centre utilization. The calculation for sizing of the call centre and cluster may be done based on the envisaged call volume for the day rather than the envisaged call volume during peak hour (except when it is felt necessary by the State / UT as per the requirement of the programme). The call centre utilization may also be increased with a right mix of inbound and outbound calling process. Since the State / UT cannot ensure a minimum volume of inbound calls, it would be advisable to avoid setting up a call centre based only on inbound calls. Following mechanism may be considered for estimating clusters:

11.1.4. Assume 20 % beneficiaries have unique mobile number
11.1.5. Assume that after 6 months, there will be 10% increase in beneficiaries with unique mobile number
11.1.6. Assume 20 % beneficiaries out of 20 % beneficiaries with unique mobile number make outbound calls
11.1.7. Assume that 20% of total inbound and outbound calls would be escalated to medical consultant.
11.1.8. After one year the estimates should be reconsidered based on actual call volumes.

1.27. Monitoring and Evaluation
State / UT needs to continuously monitor the call centre operations and evaluate them vis-à-vis the desired outcome. An efficient reporting system helps in monitoring the key performance indicators of the call centre. State / UT may design a reporting system that will provide status of the call centre operations in terms of call quality, SLA performance, data quality and other related factors. Some broad parameters include:

11.1.9. Number of calls made
11.1.10. Number of calls answered
11.1.11. Number of calls missed / abandoned
11.1.12. Total minutes of calls answered
11.1.13. Total minutes of calls made
11.1.14. Number of repeat calls from beneficiaries
11.1.15. Amount of total time spent on calls
11.1.16. Distribution of calls through the day
11.1.17. Group-wise utilisation of each cluster
11.1.18. Individual utilisation of agent, ANM, counsellor, medical consultant

11.1.19. Customer satisfaction

1.28. **Calling Hour Efficiency**

11.1.20. It is observed that call centre works with 60-80% efficiency i.e. actual hours of calling may vary from 60 to 80% of the total call centre operational hours. State / UT will also need to consider factors like idle time between calls, lunch / tea breaks etc., wrap up time while designing the requirement of number of Call centre Seats.

1.29. **Other aspects for consideration**

State/UT may also consider following points for conceptualizing the scope of the ECD call centre and implementation / management of the call centre:

11.1.21. While conceptualizing an ECD call centre, States / UTs need to develop the scope of services to be offer to the beneficiaries through the call centre. Only the standard advice will be provided through the call centre. In case of critical or complex medical conditions, they will be guided to consult the nearest public healthcare facility. State / UT should exclude any clinical advice that would be in contravention to extant laws.

11.1.22. Standard operating procedure varies based on the initiatives and scope of the project from State to State. Hence, State / UT needs to devise a standard operating procedure specific to their call centre initiative and their administrative structure.

11.1.23. Cluster and resources of the cluster will provide services based on standard guidelines and standard operating procedure developed / approved by the State /UT.

11.1.24. While conceptualizing an ECD call centre, States / UTs may plan for appropriate IEC activities including advertisement and awareness of the initiative under appropriate scheme to ensure the optimal utilization.

11.1.25. States / UTs based on their requirements and expected milestones of the project may devise appropriate payment schedule for the call centre project.

11.1.26. States / UTs need to design a suitable governance structure for the call centre project. Also, corresponding roles and responsibilities may be defined for various levels of governance structure for envisaged call centre project.

11.1.27. States / UTs are suggested to use outsourced model for ECD call centre operationalization and management as it helps States / UTs in focusing on their core operation. The extent of outsourcing may be defined by State / UT.

11.1.28. States / UTs are suggested to devise a detailed Service Level Agreement (SLA) based on the requirement of call centre project. The SLA should cover all performance aspects of the envisaged call centre. Indicative list of SLA, which is applicable in a call centre operation has been provided in the model RFP document.

11.1.29. States / UTs are suggested to ensure that the ESPs will be overall responsible for the security, technology upgradation and maintenance activity for the call centre.

11.1.30. ESP should be selected based on their technical capability and financial strength to execute the call centre project. Accordingly State / UT is suggested to design appropriate pre-qualification and technical criteria for selection of CSP. Indicative evaluation/qualification criteria is provided in the model RFP document for reference.

11.1.31. Based on the complexities involved in the envisaged call centre project,
State / UT may also consider allowing consortium in the RFP for implementation and management of call centre project.

11.1.32. States / UTs are suggested to devise suitable mechanism for safeguarding the sensitive and personal identifiable information and preventing its misuse.

11.1.33. Suitable provision may be devised in the RFP to ensure CSP will maintain highest standard of professional conduct for managing privacy of data.

11.1.34. States / UTs are suggested to devise a mechanism to obtain consent from the beneficiaries to use beneficiaries’ personal identifiable information for calling purpose for health service delivery initiatives including feedback.

1.30. Flow of document

11.1.35. For ease of the States / UT, a template Model RFP for Outsourced Model has been provided in “Section A”. The section details the Model Request for Proposal (RFP) to be floated by the States / UT for selecting an ECD Call centre Service Provider (ESP). State / UT needs to insert text in space marked < >. Text given in << >> are explanatory comments.
SECTION B: MODEL RFP FOR ECD CALL CENTRE
REQUEST FOR PROPOSAL FOR SELECTION OF ECD CALL CENTRE SERVICE PROVIDER (ESP)

GOVERNMENT OF <......>
Date ___/____/______

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## 1. GLOSSARY

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<th>Description</th>
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<tbody>
<tr>
<td>ACD</td>
<td>Automatic Call Distribution</td>
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<tr>
<td>AHT</td>
<td>Average Call Handling Time</td>
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<td>CA</td>
<td>Call Centre agent</td>
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<td>CDR</td>
<td>Call Detail Record</td>
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<tr>
<td>CRM</td>
<td>Customer Relationship Management</td>
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<tr>
<td>ESP</td>
<td>Call centre Service Provider</td>
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<tr>
<td>CTI</td>
<td>Computer Telephone Integration</td>
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<tr>
<td>CV</td>
<td>Curriculum Vitae</td>
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<tr>
<td>DD</td>
<td>Demand Draft</td>
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<tr>
<td>DoT</td>
<td>Department of Telecom</td>
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<tr>
<td>EMD</td>
<td>Earnest Money Deposit</td>
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<tr>
<td>FAQ</td>
<td>Frequently Asked Questions</td>
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<tr>
<td>FRS</td>
<td>Functional Requirement Specifications</td>
</tr>
<tr>
<td>GoI</td>
<td>Government of India</td>
</tr>
<tr>
<td>GUI</td>
<td>Graphical User Interface</td>
</tr>
<tr>
<td>HDD</td>
<td>Hard Disk Drive</td>
</tr>
<tr>
<td>IEC</td>
<td>Information, Education and Communication</td>
</tr>
<tr>
<td>INR</td>
<td>Indian Rupee</td>
</tr>
<tr>
<td>IT</td>
<td>Information Technology</td>
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<td>IVR</td>
<td>Interactive Voice Response System</td>
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<td>LoA</td>
<td>Letter of Award</td>
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<td>LoI</td>
<td>Letter of Intent</td>
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<tr>
<td>MoHFW</td>
<td>Ministry of Health &amp; Family Welfare</td>
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<tr>
<td>OEM</td>
<td>Original Equipment Manufacturer</td>
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<tr>
<td>PBG</td>
<td>Performance Bank Guarantee</td>
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<tr>
<td>PoC</td>
<td>Proof of Concept</td>
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<tr>
<td>RFP</td>
<td>Request for Proposal</td>
</tr>
<tr>
<td>RoC</td>
<td>Registrar of Companies</td>
</tr>
<tr>
<td>SLA</td>
<td>Service Level Agreement</td>
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<td>SoW</td>
<td>Scope of Work</td>
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<tr>
<td>TSP</td>
<td>Telecom Service Provider</td>
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<tr>
<td>TTS</td>
<td>Text To Speech</td>
</tr>
<tr>
<td>UAT</td>
<td>User Acceptance Test</td>
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<td>UT</td>
<td>Union Territory</td>
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</table>
2. INTRODUCTION TO RFP

2.1. Important Dates for RFP

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Particular</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Start date of issuance i.e. Publication of RFP document</td>
<td>Tp</td>
</tr>
<tr>
<td>2.</td>
<td>Last date for submission of pre-bid queries</td>
<td>Tp + 7 days</td>
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<tr>
<td>3.</td>
<td>Pre-bid meeting</td>
<td>Tp + 10 days</td>
</tr>
<tr>
<td>4.</td>
<td>Last date for issuance / sale of RFP document</td>
<td>Tp + 20 days</td>
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<tr>
<td>5.</td>
<td>Last date and time for bid submission</td>
<td>Tp + 20 days</td>
</tr>
<tr>
<td>6.</td>
<td>Date and time of opening of technical bid</td>
<td>To be announced later</td>
</tr>
<tr>
<td>7.</td>
<td>Presentation by the bidders on their technical bid</td>
<td>To be announced later</td>
</tr>
<tr>
<td>8.</td>
<td>Date and time for opening of financial bids of qualifying bidders</td>
<td>To be announced later</td>
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2.2. Fact Sheet

<<Evaluation method which may be used for the selection of ECD Call centre Service Provider (ESP) is L-1 after qualifying in the Prequalification-cum-Technical bid. However, the State /UT may use any other evaluation method as per the General Financial Rules 2017/prevailing procurement guidelines and the same should be mentioned herein.>>

After evaluation of quality has been completed, the State / UT shall notify those bidders whose proposals did not meet the minimum qualifying standard or were considered non-responsive to the RFP and/or TOR, indicating that their financial proposals will be returned unopened after completing the selection process.

RFP may be collected from the following Nodal Officer on or before the date mentioned in the RFP:

Name: <>
Address: <>
Phone No: <>
Email: <>

by paying the tender Fee of Rs. <> by <<Demand Draft/ Banker's Cheque/any other as prescribed by the State/UT>> in favour of <> payable at <> from any of the scheduled commercial bank <<or as prescribed by the State/UT>>

OR

May be Downloaded from <<Name of Website>>
However, in this case the bidders are required to submit the tender fee in the form of a <<Demand Draft/ Banker's Cheque/any other as prescribed by the State/UT>> (details mentioned in above para) along with the proposal.

**Bid Security / Earnest Money Deposit**
The bidder shall furnish EMD in the form of <<Demand Draft/ Banker's Cheque/any other as prescribed by the State/ UT>> drawn in favour of <> for an amount of Rs. <> /- (Rupees <> Only) payable at <>. EMD should be valid for a period of <> days from the last date of submission of the bid. In case of validity of more than 90 days, other instruments may be considered by the State.

**Pre-bid meeting**
A pre-bid meeting will be held on date, time and venue mentioned in Important Dates for RFP table. All the queries should be sent to Nodal Contact Person mentioned above on or before date and time mentioned in Important Dates for RFP table either through post or e-mail.

**Language of bid**
Bid should be submitted in English language only.

**Bid validity**
Bid must remain valid for <> days from the last date of submission of the bid.

**Bid documents**
<<State/ UT needs to provide the details and order of bid documents that is to be submitted by the bidder.>>

**Bid submission**
The bid should be submitted to the Nodal Contact Person mentioned above.

### 2.3. Request for Proposal
Sealed tenders are invited from eligible, reputed, qualified entities with sound technical and financial capabilities for operating ECD call centre on outsourced model <<or any other activity as envisaged by the State/UT and to be specified by State/UT>> of a call centre as detailed out in the scope of work under this RFP document. This invitation to bid is open to all bidders meeting the minimum eligibility criteria as mentioned in the RFP document.

### 3. BACKGROUND INFORMATION

#### 3.1. Government of <>
State / UT government can give a brief description about the department and the activities carried out by the State / UT government in the department of health.

#### 3.2. About ECD

3.2.1. The critical period of brain development includes 270 days of pregnancy and first two years of the child also known as the first 1,000 days. Early Childhood Development (ECD) interventions during this period will encompass physical, cognitive, social and emotional development of a child.
3.2.2. To make every child achieve their fullest potential, the health system needs to reach out to every pregnant woman and mother and other family members of each child up to the age of 2 years. As the mother is the key stakeholder in holistic development of her child, the health systems need to communicate with mother in simple, effective and personalised messages. The health systems need to make the family believe that simple efforts and steps on their part can go a long way in enhancing the overall development of their child.
3.2.3. These messages should also be reiterated by the other health providers like ASHA, ANM and medical officers so that all the caregivers are reinforcing the same messages.
3.2.4. The Ministry proposes to set up a call centre to provide information and counselling to parents, which will enable them to provide nurturing care to their children to ensure their optimal development. This information will be provided by trained resources in the field of early childhood development, which adds the credibility of the advices. Further, focus will be on providing personalised advice to the caregivers, with emphasis on enhancing their knowledge on ECD and boosting their confidence to do simple things for and with their children to promote their development. As call centre offers an interactive platform, the advice can be customised to the parent’s and their child’s needs, for which message and advice will build on what the caregivers are currently doing well to promote the development of their child and what more they can do.

3.3. Call Centre for ECD initiative

3.3.1. Call centres generally have agents that pushes some predefined script and messages. There is little emphasis on personal relationship and trust which is key to bring any behavioural change especially in the health sector. In the context of ECD, the call centres at States / UTs are proposed as convenient interactive communication channels to address queries, myths, fears and challenges of mother and parents.
3.3.2. With ECD initiative, it is anticipated that government will communicate with the pregnant women and mothers registered on RCH portal to build their confidence and clarify their myths to nurture their child.
3.3.3. These messages from the call centre would be based on the prevailing ECD guidelines constructed in a simple, useful and effective manner to directly enhance the development of a child. These simple but critical messages are sometimes either trivialized or buried under the shadow of other medical messages that loses its importance, e.g. relaxing during pregnancy and avoiding stress, pregnant woman requires emotional support of family during pregnancy, etc.
3.3.4. In ECD call Centre, any caller, either registered or unregistered can make or receive a call. In case of both, registered or unregistered caller, the call would be routed to an allocated predefined ECD cluster. Each ECD cluster would preferably consist of 2 Medical Consultant and 6 ANMs/ Counsellors and 2 call centre agents. Each ECD cluster will preferably serve 40000 to 50000 beneficiaries.
3.3.5. The allocated cluster model of ECD call centre will ensure trustworthy relation and partnership between government and beneficiaries during Early Childhood Development
3.4. Reproductive Child Health (RCH)

3.4.1. A new web application called Reproductive Child Health (RCH) is being developed to track eligible couples and beneficiaries and to provide better service to them. It also intends to provide better support to health workers. In RCH Programme, the contour has broadened with major emphasis on:

   i. Maternal health services
   ii. Child health services
   iii. Tracking the usage of family planning methods
   iv. Adolescent health services

3.4.2. RCH has marked a shift in the approach towards monitoring health and family welfare programme as it is aimed at ensuring delivery of maternal and child health services to all pregnant women and new born in an effort to reduce maternal, infant and child mortality in the country. This system is being developed based on the new Reproductive and Child Health (RCH) register that is being implemented at the field level.

4. SCOPE OF WORK

4.1. General Conditions

4.1.1. State / UT is now planning the augmentation of the ECD call centre with enhanced features. The call centre will operate every day in a year except gazetted holidays between <> for service delivery through agents.

4.1.2. The call centre has a capacity of <> seats. The entire project would be executed on turnkey basis. This project on turnkey basis would be understood to mean that the ESP shall have the complete responsibility to design, establish, operate and maintain the complete setup of ECD call centre project. ESP shall have the complete responsibility of operationalization, maintenance, support and up-gradation of all components of the project.

4.1.3. In this context, State / UT through this RFP seeks to appoint a ESP for “Operationalisation of Early Child Development (ECD) call centre.” which would provide the necessary information exchange platform to pregnant woman for early child development for 9 months and to mothers after the child birth for 2 years. The ESP will be responsible for the establishment, operation and maintenance of ECD call centre project.

4.1.4. Through this RFP document State / UT invites interested parties who have expertise in the area to submit their bid. In order to implement the ECD, ESP needs to be selected that will implement and operationalize the ECD call centre operation.
4.1.5. Some of the key aspects of the project are as given below:
   a) ESP shall have a valid license for operating the call centre for the project.
   b) ESP shall make the arrangement of space for establishment of call centre.
   c) ESP shall procure, install, operate and maintain the complete IT and non IT infrastructure.
   d) ESP shall integrate call centre application provided by State / UT to develop and integrate application with MCTS application of Government.
   e) ESP shall earmark and mobilize call centre team.
   f) ESP shall maintain discipline of the office environment and safety of the call centre, agents and other support staff deployed at the call centre site.
   g) ESP shall establish and maintain the specified SLAs.
   h) ESP shall ensure Go-Live of the project within 90 days from the date of signing of the contract.

4.1.6. For various projects to be executed under this RFP, the scope of work for ESP has been broadly categorised as given below and detailed out subsequently.
   a) Call Centre space including ICT & Non-ICT Infrastructure
   b) Call Centre Solution
   c) Human Resource Requirement
   d) Operational Requirement of the Call Centre
   e) Other Requirements of the Project

4.2. Services in ECD Call centre

4.2.1. Call centre Services
   a) ECD call centre may provide various set of services through various modes of communication that are best suited to the beneficiaries. These modes of communication form the basic functionalities of a call centre. Some of these modes of communication and functionalities of a typical call centre are as given below:

4.2.2. Inbound Calling
   a) Beneficiaries may call the call centre for availing the desired service. Once, a call centre receives the call from the beneficiary, it will provide information related to government schemes and programmes, healthcare services and other related areas. Interactive Voice Response System (IVRS) connects callers to a trained call centre agent for personalized assistance.
   b) Some of the services and information which may be provided through inbound calling are as follows:
      d) query resolution
      e) promotion of government programmes and schemes
      f) healthcare consultation
   c) An indicative broad process for the inbound call is given below:
      v. The call may be first handled by an IVR system wherein the IVRS provides the list of services that a caller can avail through the call centre.
vi. This feature provides the caller a self-service option to get the desired information and services.

vii. Based on the selection, IVRS will route the call to Specialist, ANMs, Counsellors, for personalized assistance. Resources will assist the caller in order to get the queries resolved.

viii. In case where a specialized medical help is required, the call may be forwarded directly from IVR to the Specialist.

4.2.3. Outbound Calling

a) State / UT may desire to connect with the targeted beneficiaries for various purposes such as:
   i. Creating awareness about ECD services
   ii. Getting feedback on the received healthcare services
   iii. Validation of the services delivered by health workers

b) Outbound calls will be made to beneficiaries registered in the RCH portal for awareness generation, advocacy and counselling. Specialist, ANMs, Counsellors will make the calls to beneficiaries and health workers for data validation and spreading awareness of various government schemes and programmes. In case where a specialized medical help is required, the call may be provided directly by the medical consultant.

4.3. SMS Services

SMS can be effectively used for providing specific details to the relevant stakeholders. An integrated SMS solution will enable the call centre agents to send required information to the stakeholders. The indicative list of functionalities of SMS solution is given below:

4.3.1. Inbound SMS: Inbound SMS services may be used to get feedback from beneficiary / health worker on the calls made to them through call centre.

The beneficiary / health worker may also send SMS to get specific details such as services due, linked health worker details, information regarding government schemes and programme, etc.

4.3.2. Outbound SMS: Outbound SMS solution may be used for following indicative activities:
   i. To provide specific details to the beneficiary / health worker as desired by them
   ii. To send relevant information to the beneficiary / health worker or the linked phone numbers in the database
   iii. To broadcast health related information to the targeted group

4.4. Technology Components of ECD Call centre

4.4.1. Technology Components

a) In case State / UT is not willing to invest on infrastructure (Civil, IT and non-IT) and decides not to run the call centre from its own premises, it may choose to outsource
the call centre. In this case State / UT is not required to provide space or any other infrastructure to the Call centre Service Provider (ESP). Call centre Service Provider will develop the call centre application as per the requirements of State / UT, establish, deploy and operate the call centre in its own premises.
b) Broadly, there are five types of technology that ECD contact centre should consider:

i. Contact centre functionality: ACD functionality (including interaction routing and queuing), CTI, IVR (routing), outbound dialling

ii. Desktop applications: CRM, customer management systems, helpdesk applications, agent desktop, knowledge bases, multichannel handling applications

iii. Management applications: workforce management, call recording, interaction analytics, reporting, MIS and business intelligence, workforce optimization, customer experience feedback

iv. Enabling technology: security, databases, payment technology, middleware, IP networks and other common architecture or hardware

v. Other hardware: IP phones, PCs or desktop terminals, headsets, etc.

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Call Centre Solution Component</th>
<th>Component Feature</th>
<th>Key Requirements</th>
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<tr>
<td>8.</td>
<td>Customer Relationship Management (CRM) solution</td>
<td>Call centre provides you the ability to contact your beneficiaries to provide them assistance and solve any challenge / query / support. It connects the beneficiaries through a single platform that automates the routing, ticket labelling, and processing of incoming / outgoing calls. Whenever anybody calls, CRM track each call and record the observations to provide a full 360-degree view of all the internal and external interactions.</td>
<td>The customised CRM should be a web-based solution with seamless integration to the other tools such as IVRS, CTI, voice logger, SMS gateway etc. It should have mechanism to integrate for fetching data for validation and pushing back the validated data to the data source. Provide a single view to the State / UT for all the relevant functions as desired in the requirement document. Complete management of service sets for both incoming and outgoing calls. Customised call validation interface with all the necessary details on screen with a clear step-by-step validation steps and necessary pop ups for validation of key columns based on business rules. Call back scheduling to ensure maximum coverage.</td>
</tr>
<tr>
<td>S. No.</td>
<td>Call Centre Solution Component</td>
<td>Component Feature</td>
<td>Key Requirements</td>
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| 9.    | Interactive Voice Response (IVR) Menu System | The resources can see all the information related to that beneficiaries along with call logs, previous tickets, cases, events, notes, chat transcripts, and more. This information will help the resources to be more organized, efficient, and effective. | • Should have customisable prompts for resources. The pop-up message that will be prompted to the CA while on call should be customizable as per requirements of MoHFW/State.  
• Skill based routing based on business rules like Data-driven routing (based on information stored in database systems), skill or profile based, last relationship / interaction based, service priority based, compliant with overall service levels, etc.  
• Build and customize routing strategies through easy-to-use point-and-click GUI  
• Uniform call distribution to various resources  
• Conferencing and live-chat facility  
• Content management / knowledge repository (i.e. both standard and temporary question bank) with a robust search engine to ensure efficient retrieval of information availability to resource within seconds |

An Interactive Voice Response also known as virtual receptionist would be the first voice beneficiaries will listen to while contacting the ECD call centre.

The IVR helps State / UT to instantly respond to beneficiaries and route call to best possible resource by greeting them with a personalized welcome message, and

• Receive all inbound calls on the telephone number specified by the State / UT and prompt the callers to make their selection(s)  
• Identify the caller through Caller Line Identification (CLI) and support intelligent call routing based on past record or region  
• Update the IVRS usage details as the beneficiary traverses through the IVRS and reaches the resource  
• Programmes wise Interactive Voice Response (IVR) Menu |
<table>
<thead>
<tr>
<th>S. No.</th>
<th>Call Centre Solution Component</th>
<th>Component Feature</th>
<th>Key Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>communicate with them in their local language. The interaction happens through DTMF keypad tones.</td>
<td>Text-to-Speech (TTS) converts text into speech. The text may include some FAQs, emergency responses, etc. Quality of text to speech should be comprehensible and understandable by the intended beneficiaries. The TTS should be able to integrate with the IVRS system as per the workflow.</td>
</tr>
<tr>
<td>10.</td>
<td>Text to Speech (TTS)</td>
<td>Voice is the soul of IVR or any system assisted communication in call centre. An audio response closes to human voice optimized to correctly communicate the context should be used.</td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>Automatic Call Distribution (ACD)</td>
<td>Automatic call distribution ensures calls are automatically routed to the right resources to ensure resource respond to the call at the earliest. It is a prerequisite as it helps in the systematic handling of inbound calls. The ACD should be customisable and configurable enough to handle call volumes are varying caller requirements like routing calls to the idle system, least occupied resource, language based routing, location based routing, etc.</td>
<td>Manages incoming calls and handles them based on the database and associated handling instructions. Validate callers, make outgoing calls, forward calls to the right resource, allow call centre to record messages, gather usage statistics, balance the use of phone lines, etc. Provide integration with IVRS menu system to intelligently route calls. Provide configurable system for whitelisting / blacklisting users Automated dialling modes with algorithm-based dialling, progressive dialling, rule-based dialling, least cost routing, etc. Queue optimization, allowing the caller the option to be called back. Abandoned call recovery, to determine the contact number of a missed / abandoned call.</td>
</tr>
<tr>
<td>12.</td>
<td>Voice Logger</td>
<td>Voice Logger records all the incoming and outgoing</td>
<td>100% automatic call recording</td>
</tr>
<tr>
<td>S. No.</td>
<td>Call Centre Solution Component</td>
<td>Component Feature</td>
<td>Key Requirements</td>
</tr>
<tr>
<td>-------</td>
<td>--------------------------------</td>
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</tr>
</tbody>
</table>
|       |                                | calls. It is a must to monitor the call quality to enables listening to conversation logs of caller and resources and managing call quality. | • Optimal Compression Techniques should be used  
• Logger should support multiple format support (mp3, wav etc.)  
• Recording should be sharable amongst ESP personnel and MoHFW through email, bulk transfer for supervisory requirements  
• Ability to search through call details to locate specific calls as well as matching records |
| 13.   | Computer Telephone Integration (CTI) | Computer telephony integration, is a technology that allows computers to interact with telephone systems. CTI provides a centralized control over all of their means of communication through single interface. | • Should be able to integrate with call centre application / solution  
• Call events should be handled from the system such as hold, retrieve hold, conference, transfer etc.  
• Support relevant screen pop-ups based on CLI, ANI (Automatic Number Identification), DNIS (Dialled Number Identification Sequence)  
• The CTI shall seamlessly integrate with the application to take control of the call flow inside the Switch / EPABX and allocate the most appropriate resource |
| 14.   | Call centre MIS | MIS reports are required for monitoring and evaluating statistics like display call volume, peak hours, number of calls missed and received, resource utilization, traffic coming from different regions, new and repeat callers, and other important insights. MIS reports are significant when making staffing decisions, scheduling resources and evaluating | • Dashboard  
• M&E Reports  
• Performance Reports  
• All other Reports to display the performance of various services rendered by call centre |
<table>
<thead>
<tr>
<th>S. No.</th>
<th>Call Centre Solution Component</th>
<th>Component Feature</th>
<th>Key Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>the performance of individual resource, teams, departments and overall call centre.</td>
<td></td>
</tr>
</tbody>
</table>

4.5. **Technology advancements**

4.5.1. Cloud based Call centre: These are network-based services in which a provider owns and operates call centre technology by providing its services remotely in a subscription model. They are increasingly becoming common because the solution is available as a service and there is no requirement of physical hardware which eliminates the problem of maintaining the equipment and its upgrades. These can be easily scaled for business operations and their implementation is also swift.

4.5.2. Virtual Call Centres: These centres do away with the need to have all agents in one physical location — instead combining the call centre infrastructure and geographically dispersed agents into a single, virtual entity.

4.6. **Call Centre space including ICT and Non ICT Infrastructure**

4.6.1. The bidder shall have a fully functional call centre in Region. The Call centre proposed by the Bidder should have registration with Department of Telecom (DoT), Government of India, under OSP category for providing domestic call centre services with provision of scalability as per the requirement of State / UT.

4.6.2. The call centre to be provided should be equipped with the required ICT infrastructure for smooth calling operations for various programmes of State / UT in line with the requirements and service levels as stated in this RFP. Broadly this would include network infrastructure, hardware infrastructure and telecom infrastructure. The setup, operation and maintenance of this infrastructure will be the responsibility of the ESP. An indicative requirement for the required ICT infrastructure is as given below:

a) **Network Infrastructure:** The call centre should have properly laid out LAN infrastructure and other network equipment (such as routers, switches, firewalls etc.) along with required internet connectivity for connecting to required sites / applications of State / UT for integration /access purpose as required by State / UT.

b) **Hardware & Software Infrastructure:** Based on the requirement of the project the ESP at the call centre needs to provide hardware (servers, SAN storage etc.), PCs, and the software (operating system, application servers, web servers, database servers, load balancers, CRM, CTI, TTS, ACD, Dialler, voice logger, IVRS solution, active directory, antivirus & other security solutions etc.). The system architecture should be designed by the ESP in such a way so that it meets the requirements of the programme and the performance including service levels and other requirements as stated in this RFP.
c) **Telecom Infrastructure and codes:** Based on the requirement of the project, the ESP needs to provide and make the required telecom infrastructure integrated with the call centre. The ESP need to get a toll free number for the project. The same would need to be configured by the ESP for project calling operations at the call centre to be proposed by the ESP. Similarly, for other programmes State / UT may provide a separate number or short code; and ask ESP to integrate the programmes with a single long / short codes available with the State / UT. Based on the seat and call requirements, State / UT will provide additional PRI lines to the ESP, however, ESP should have adequate provision of scalability based on the call volumes. The payment to the Telecom Service Provider (TSP) shall be done by State / UT and the mechanism of inbound & outbound call shall also be defined by State / UT. However, ESP will maintain programme wise logs for all the calls made or received in the call centre. State / UT may ask ESP to analyse the data provided by the TSP vis-à-vis the data generated from the call centre applications for correctness of the bill.

d) The ESP may need to integrate with different TSPs with the same dialler / or may use multiple diallers for managing multiple projects of the State / UT. However, State / UT will provide unique PRI lines for each programme.

4.6.3. The call centre to be provided by the ESP should be equipped with the required non-IT infrastructure such as access control system, CCTV cameras, electricity, generator set, UPS, headsets / phones, air conditioning units, electrical grounding, furniture and fixtures, and any other civil infrastructure required for the operation of the project. ESP will record and manage the availability of CCTV recording, vice recordings access logs for the last 6 months to State / UT at any point of time.

4.7. **Call Centre Solution**

4.7.1. ESP will be required to design, develop, manage and maintain an integrated web-based customized solution as per the requirement of the project for the respective programmes of State / UT for the entire duration of the contract period. The requirements in this regard will be provided to the selected ESP during the FRS process. The requirement would broadly consist of a CRM solution, IVRS solution, Voice Loggers, TTS etc. with respect to the scope of work specified in this RFP and subsequently detailed out during the requirement stage of the assignment i.e. while preparation of the FRS for the respective programmes. ESP shall maintain adequate and appropriate licenses for the application and customize them after understanding the requirements of the project by interacting with key officials. ESP shall migrate the existing data of project with the solution developed by the ESP. The developed solution should provide an easy to configure IVR system that supports addition and deletion of menus without any financial implication. The system should have provision for scheduling of messages / calls and capture usage details of each caller for customized treatment and its unique identification. The indicative set of activities that would need to be undertaken by ESP as part of development and implementation are as follows:
a) Prepare the Functional Requirement Specifications (FRS), software requirements specification (SRS) and developing algorithms for the project: The ESP shall interact with the key officials of programme division or any of its nominated agency for understanding the requirements for the development of solution. The ESP shall document the functional requirements and get it signed off from the programme division.

b) Develop the GUI (Graphical User Interface) based on the FRS SRS and get it signed off from the respective programme division for the concerned project.

c) Based on the approval, the ESP would develop / customize the application which would provide a single interface to all the components of the solution

d) Test the Solution and ensure requisite support during audit of solution by programme division or its nominated agency

e) Once approved, ESP needs to operationalize the application in compliance with the service levels.

f) ESP will provide the requisite training to the operational staff on the developed application

g) ESP will define the Data Protection Standards & get these approved by the programme division and enforce the same to ensure protection and confidentiality of data.

h) Play programme details to caller through TTS in Hindi and English languages. The content will be developed by the ESP and approved by State / UT /programme division.

i) Support Ticket with all related data logging and tracking

j) Enable Administrators, Medical Specialists, Medical Counsellors, Supervisors, representatives to monitor the overall performance of the Call centre Agents and interact / barge in when needed

k) Must integrate with CTI and should be able to pull IVR usage details of the caller including all the options selected by the caller and all details entered by caller

l) Call centre Agent should be able to log and track each Ticket. Information of the escalated Tickets should be made available as and when required by the State / UT

m) Maintain 100% recording of calls for a period of last 6 months. The recording should contain detailed call information, feedback of analysed calls, updation in questionnaires etc.

n) The developed solution must provide advanced searching capabilities. The archived media will be provided by the ESP to the programme division

4.7.2. The envisaged inbound solution should also have a provision for missed call feature. Inbound calls from the callers would be terminated after few rings and dialer will automatically call back to those numbers within 90 seconds. The first point of interaction will be the IVRS menu. IVRS menu will provide them the option to either talk with the Call centre Agents or listen to pre-recorded or live text-to-speech messages. ESP needs to have provision for the same in the call centre solution, however the mechanism for
inbound call handling will be decided for the respective projects by the concerned programme divisions of State / UT and the same shall become part of the contract to be signed for the concerned project.

4.7.3. The system should have provision of the following:

a) State / UT may depute its representative for monitoring and evaluation of the project. ESP will be responsible for providing adequate physical seating space to them. State / UT may provide offsite / onsite training to the agents at its own cost on programmes and soft skills over and above the stated training in this RFP.

b) The development and audit of respective web services for integration at programme division’s end will be developed by the programme division and at ESP’s end will be developed by the ESP.

c) The ESP should have mechanism for managing Disaster Recovery Plan in case of disaster.

d) The ESP must provision for additional infrastructure that is required for scaling of application or adding new programme beyond the initial requirement for any other software application that needs to be developed / required for the project.

i. The system shall be a converged communication system and shall be based on industry standard Communication with Server & Gateway architecture for providing modularity and ease of expansion. The system shall be capable of supporting both IP based hard phones as well as PC based Soft phones.

ii. The call processing and signaling of the offered system shall be based on open standards.

iii. The application should have provision to send and receive SMS and email. The development of the gateway for the same along with the integration with the SMS service provider will be managed by the ESP. However, the arrangement of the e-mail id and financial cost for the telecom services in this regard will be on account of State / UT.

iv. The solution should have web-based GUI console for administration, configuration, operation & management of the system. Same interface should also provide support for viewing and generating reports (pre-generated /static as well as query based real time dynamic reports). State / UT should also be provided web based (internet based) access to this interface for viewing and generating reports.

v. The solution/platform should support call centre Routing based on Group/Queue, Service Levels, caller’s intent, caller’s data/caller’s profile

vi. System shall have priority handling, queue status indicator and multiple group support features as detailed in this RFP

vii. The caller must be provided announcement / music in case of queue/delay until the call is answered. If an agent is not available to handle a call, the call must queue for the next available agent.
viii. On transferring the call to Medical Specialists, Medical Counsellors and Supervisors the screen too should be transferred

ix. The system shall allow the Supervisor, Medical Specialists and Medical Counsellors to observe and monitor the agents. This facility shall be available in following ways:
   - Observe and listen only mode
   - Conferencing Mode

e) All components of call centre software (ACD, CRM, IVR, Dialer, call recording etc.) should be able to integrate with each other. Some of the key requirements / features expected from the components of the call centre solution is provided in the table below which needs to be adhered to by the ESP while developing / providing the call centre solution for the projects under this RFP.

4.8. Human Resource Requirement

a) ESP is expected to run the call centre services from its premises (i.e. call centre proposed by ESP) and deploy resources for implementation, operationalization and maintenance of call centre solution along with resources for maintaining and managing the calling operations at the call centre proposed for the project under this RFP. These resources would broadly include the operational & technical resource. For application development, a judicious mix of technical resources shall be deployed by the ESP based on the requirement of the project and as mutually agreed with the respective programme divisions of State / UT. However, for ECD, the ESP needs to provide the efforts of these resources to be deployed in their technical proposal and accordingly provide the required details in the financial formats. For all other programmes, these scope of work shall be provided by the State / UT and efforts will be estimated by the ESP based on requirement analysis. The effort analysis shall be mutually decided and agreed upon and entered into a contract to be signed with the respective programme divisions of the State / UT. However this requirement of efforts is only for one time application development and development of additional requirements post Go-Live pf the project as required and accepted by State / UT. All other cost of these technical resources including the maintenance of the call centre application /solution and the infrastructure shall be bundled in the operational resource cost by the ESP. For operational resources, the requirement shall be provided by the respective programme division and accordingly the resources / seats need to be made available at the call centre by the ESP. State / UT may depute its employees in Managerial positions either full time or part time, who will possess similar authority / powers to the one given to the human resources of ESP.

b) Broadly the technical & operational resource would consist of resources as given in the table below:

<table>
<thead>
<tr>
<th>Operational Resources</th>
<th>Technical Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Call Centre Agents</td>
<td>Application Developers (for software development, testing etc.)</td>
</tr>
<tr>
<td>ANMs</td>
<td>Database Administrator</td>
</tr>
<tr>
<td>----------------------</td>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td>Counsellor</td>
<td>Medical Specialist for drafting FAQs and workflow</td>
</tr>
<tr>
<td>Medical Specialist</td>
<td>Business Analyst</td>
</tr>
</tbody>
</table>

c) State / UT has the right to evaluate any member of ESP team deployed for the project at any stage and can reject them in case they are not found suitable. Under such circumstances, the ESP shall replace the resource within 2 weeks from the date of written intimation from State / UT. In case, a resource is replaced, ESP will ensure that the replaced resource should be as per the qualification / experience criteria specified in the RFP and necessary handover/ knowledge transfer and training has been provided to the resource being taken as the replacement.

d) State / UT reserves the right to decide on the gender of the operational resources to be deployed for a project, based on the specific requirement of the project.

4.9. **Operational Requirement of the Call Centre**

a) This section provides operational requirement of the call centre including the details of the shift and operational hours, calling operations, volume of calls, resource requirement etc.

i. **Shifts & Operational Hours:** The Call centre shall have a provision to operate on all 365 days a year except national holidays, in following shifts based on the requirement of the programme division:

<table>
<thead>
<tr>
<th>Shift Timing</th>
<th>Opening</th>
<th>Closing Hours</th>
<th>No. of working days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day Shift</td>
<td>XX:XX</td>
<td>XX:XX</td>
<td>N</td>
</tr>
<tr>
<td>Evening Shift</td>
<td>XX:XX</td>
<td>XX:XX</td>
<td>N</td>
</tr>
<tr>
<td>Night Shift</td>
<td>XX:XX</td>
<td>XX:XX</td>
<td>N</td>
</tr>
</tbody>
</table>

ii. Calling operations

- All the call recording and logs will be maintained by the ESP for 6 months for monitoring and assessment purpose. These recordings and logs will be provided by the ESP to State / UT in a portable usb based HDD (Hard Disk Drive). The HDD for the same will be provided by the State / UT. A system generated unique identifier will be generated by the call centre application as per the recommendation of EHR standards notified by the ESP to State / UT.

- **Inbound Calls:** Call centre Agents will act as a first point of contact. The agents will resolve the queries of the callers. The caller may be calling on toll free no or short code of State / UT as the case may be. CAs will provide complete and accurate information as approved by the State / UT to the caller. In case the Call centre Agent is unable to resolve the caller’s query, the call needs to be referred to the medical counsellor / specialist in conference mode. The medical counsellor / specialist will assist the agent in providing resolution to the caller. In case the medical counsellor /
specialist is also not able to resolve the query, the call centre will arrange a call back to the caller within 7 calendar days if the question is within the scope of the project.

- **Outbound calls:** Outbound calls will have to be made to caller whose queries have not been resolved on an incoming call because of the unavailability of the ready information and /or inability to provide complete information to the caller. State / UT may also ask the ESP to arrange a call back to all the callers who call and leave their contact details on the IVR outside the working hours of the call centre. Outbound calls can also be made to the beneficiaries based on their contact details available or provided by State / UT as per the requirement of the project.

- **IVRS design and support:** The details of the IVRS menu tree to be designed by the ESP will be provided to the ESP during the FRS stage. The menu of IVR will be in English and Hindi only and will support the clear Text-to-Speech (TTS) provision, Dual Tone Multi Frequency (DTMF) support to ensure easy key pad based navigation. The IVRS deployed by ESP should support easy customization based on the requirements of the project. State / UT may ask the ESP to configure the IVRS menu from time to time for special messages / campaigns etc. without any financial implication to State / UT.

- **Volume of calls:** ESP will ensure that the based on the number of channels, all inbound calls will be answered within 60 seconds after the call is logged into the application except for the calls received after working hours of the call centre. ESP will ensure the optimal utilisation of call centre agents through minimum 6 hours of actual calling (outbound and inbound together) per day per agent per shift on an average monthly basis.

- **Capacity Building of operational resource persons:** ESP will be required to provide the training to all the operational resources deployed at call centre. The operational resource persons should be well trained on the application before their deployment to the project including training on soft skills, domain knowledge and working knowledge of application. Refresher training courses for the operational resource persons will also be conducted on half-yearly basis for all existing operational resource persons. The broad training requirements for the same are provided below:
  - **Training on call centre solution:** ESP should train / retrain its team on call centre solution afresh or for any changes made later on. The training manuals and related material for the same would be prepared by the ESP. ESP will provide training to Call centre Agents, other members of team and select personnel of programme divisions nominated by State / UT. Arrangements and related activities for the training of ESP personnel will be the responsibility of ESP.
  - **Soft-skill Training:** ESP shall provide regular soft-skill training to the Call centre Agents for handling calls in an appropriate manner. The training
schedule should also include coverage of soft skills training on a periodic basis to maintain quality of service.

- Domain Training: ESP shall appoint domain experts / institutions for providing domain-specific knowledge training to the Call centre Agents. The appointed domain experts / institutions of ESP will develop intensive domain-specific training modules. It will be the responsibility of the ESP to ensure that all Call centre Agents receive appropriate domain training. ESP shall bear all expenses incurred for this activity.

4.10. Other Requirements of the Project

This section provides details on other requirements of the project which is in the scope of the ESP under this RFP. These requirements are as given below:

4.10.1. Language Requirements: The call centre solution should support Hindi, English and other regional languages as desired by the programme division. The questionnaire along with the content for the same shall be provided by State / UT along with the required translation into regional languages. In case State / UT desires the content to be developed / translated by the ESP, the efforts for the same shall be mutually agreed and paid to the ESP as per the rates quoted by the ESP for the content writer / Content translator in their financial bid.

4.10.2. Maintenance & on-going support for project: ESP will be required to operate and maintain the on-going operations for the project for entire duration of the contract. Ongoing support during the project may also include any additional developments in the call centre application/solution required post Go-Live of the project. In case of any additional development the efforts for technical resources shall be mutually discussed and decided between ESP and v and the ESP shall be paid accordingly based on the man-month rates quoted by them in their financial bid as per the financial formats provided in this RFP.

4.10.3. Information Ownership: All information processed, stored, or transmitted by ESP for the project belongs to State / UT. By having the responsibility to operate the proposed call centre, the ESP does not acquire implicit access rights to the information or rights to redistribute the information. The ESP understands that civil, criminal, or administrative penal actions may apply for failure to protect information appropriately. The ESP must agree to and sign a non-disclosure agreement with State / UT that all the information of callers as well as data will be protected using appropriate security measures. Any legal issues due to leak or disclosure of information of the caller or data will be ESP’s liability and any cost incurred for resolution of the issue will be borne by the ESP.

4.10.4. Security and Privacy:

i. ESP shall ensure that information collected directly from the caller should only be used for the specific purpose for which it was collected.
ii. Privacy of caller information guidelines must be adhered to by everyone including the Call centre Agents to ensure security of data.

iii. Maintain logs including date, time, mac ID, number of Call centre Agents, attendance record, application logs, Call Detail Record (CDR) of PRI lines, etc.

iv. Ensure complete and comprehensive security from unauthorized access and misuse. ESP should ensure for
   a. Physical Security: Security Guards, CCTV camera with recording upto 6 months, Restricted physical entry through biometric / Access-based for data centre, Employee Verification and NDAs etc.,
   b. Data Security: Information security measures like no USB / Mobile access.
   c. IT Infrastructure: Logs of transactional data, Hardware details, Application details including encryptions, Network Systems, etc.

v. ESP should give an undertaking that all the Data security measures as per Government of India Information Security guidelines being followed for this project.

4.10.5. **Access & Audit:** State / UT may depute an agency or on its own carry out inspection or audit of the call centre. State / UT may also depute an agency for getting the application audit done on security parameters. The observations of these inspections & audits will be incorporated by the ESP. Further security audit of the web services for sending and receiving the data from ESP end will be the responsibility of the ESP.

4.10.6. **Knowledge Bank Management by ESP:** ESP will devise a knowledge bank management plan indicating the following:
   
   i. Creation, management and updating the knowledge bank for the project content.
   
   ii. Initial standard question bank (question bank developed by the ESP will be approved by the programme division before operationalization).
   
   iii. Identifying the knowledge gaps for domain specific areas and collaborate with the domain experts to develop appropriate content.
   
   iv. Maintaining the database of Frequently Asked Questions (FAQs) by callers. ESP will ensure that validated and updated information is available within the system for answering the FAQs and updating FAQs question bank on a regular basis. The response to new question will be approved by the programme division before being incorporated into the FAQs.

4.10.7. **Call Centre Access Numbers:** Programme division will either provide its own Toll-Free / Short Code numbers based on the requirement or may ask ESP for integration with the existing number. In such a case, ESP will have to map such toll-free numbers to the PRI lines. ESP will ensure that these lines will be accessible across India via multiple telephony networks on a single toll – free access number.

4.10.8. **Support Services:** ESP will be responsible for providing support services required for the project such as:
   
   i. Pantry Services: ESP will have the provision of the pantry along with the day-to-day eatables / consumables required at the project site.
ii. Physical Security: ESP will ensure the security of the call centre for the entire project duration in order to ensure safety and security of the physical location, manuals, records infrastructure etc. State / UT will not be responsible for any damage or loss at the Project site.

iii. Housekeeping Activities: Housekeeping activities related to cleanliness of the site (which includes the desks, chairs, porch area, the windows / doors of the allocated premise), pest control which includes using ultrasonic machines etc. along with the day-to-day consumables required for the project.

4.10.9. **Publicity:** Any publicity of the project by the ESP should be done only with the prior written permission of the State / UT.

4.10.10. **Reporting Requirement:** Based on the operations, periodic reports will be submitted to the programme division to assess the performance of system/manpower/project including details on questionnaire, standard operating scripts, and revision thereof. Requirement for the reports with reference to call centre performance, data quality, service level performance, calling operation etc. shall be clearly defined by the programme division in the FRS / SRS. Web (internet) based access should also be provided to State / UT for viewing and generating reports (pre-generated /static as well as query based real time dynamic reports). Tentative set of reports that may be required by the programme division are given below:

i. System performance report
   - Application availability
   - Dialer availability
   - Network availability

ii. Manpower performance report
   - Availability of Call centre Agents
   - Call centre Agents attendance report
   - Number of hours of call handling & Number of calls handled

iii. Project performance report
   - Reports generated based on the feedback of caller
   - Call status report
   - Reports containing details such as number of calls, wrong numbers, correct numbers and duration of calls etc.

4.10.11. **Complaint Handling Mechanism**

i. ESP needs to design a detailed escalation matrix for resolving the complaints raised by the stakeholders. The escalation matrix will be approved by the State / UT at the time of kick-off meeting and as desired by the State / UT to ensure compliance with the SLAs defined in the RFP.

ii. Any complaint regarding provision of services (covered under the Project) from the stakeholder shall be taken very seriously by the v. Onus to prove such complaint is invalid, would lie with the ESP. In case any such complaint is found true and reasonable, the ESP may be penalized by the State / UT (depending on
the facts and seriousness of complaint). Remedial action may also be taken by the State / UT which can even include termination of contract.

5. PROJECT TENURE
5.1.1. State / UT intends that the contract / work order shall be for a period of <> year(s). The contract / work order may be extended for another<> year(s) on the sole discretion of the State / UT on the rates, terms and conditions provided in RFP.

6. DELIVERABLES AND TIMELINES
Outsourced model will require ESP to design and develop application and customize the call centre software and deploy resources for calling operation at their own premise. The call centre will be operated at the outsourced location and ESP will own and manage all the resources. An indicative set of deliverables and timelines is given below:

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Activities</th>
<th>Deliverables</th>
<th>Timelines</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Project Kick-off date</td>
<td>Work Order</td>
<td>To</td>
</tr>
<tr>
<td>2.</td>
<td>Requirement gathering</td>
<td>FRS / SRS</td>
<td>To + 15 days</td>
</tr>
<tr>
<td>3.</td>
<td>Develop the application</td>
<td>Application</td>
<td>To + 45 days</td>
</tr>
<tr>
<td>4.</td>
<td>UAT sign-off</td>
<td>Approval Report</td>
<td>To + 50 days</td>
</tr>
<tr>
<td>5.</td>
<td>Onsite training and handholding of the resource persons</td>
<td>Training manual and questionnaire</td>
<td>To + 55 days</td>
</tr>
<tr>
<td>6.</td>
<td>Go-Live of the project</td>
<td>Go-Live Certificate</td>
<td>Tg (To + 61 days)</td>
</tr>
<tr>
<td>7.</td>
<td>Operation and maintenance phase</td>
<td>Periodic reports</td>
<td>Post Tg as per the requirement</td>
</tr>
<tr>
<td>8.</td>
<td>Exit management phase (at the time of exit for handholding)</td>
<td>Completion certificate</td>
<td>As per RFP</td>
</tr>
</tbody>
</table>

7. INSTRUCTIONS TO THE BIDDER
7.1. General
7.1.1. The information contained in this RFP document or subsequently provided to the bidders, whether verbally or in documentary or any other form by or on behalf of State / UT or any of its employees or advisers, is provided on the terms and conditions set-out in this RFP, and such other terms and conditions subject to which, such information is provided.

7.1.2. This RFP is not an agreement and is neither an offer nor invitation by State / UT to the prospective bidders or any other person. The purpose of this RFP is to provide interested parties with information that may be useful to them in the formulation of their proposals pursuant to this RFP. This RFP includes statements, which reflect various assumptions and assessments arrived at by State / UT in relation to the project. Such assumptions, assessments and statements do not purport to contain all the information that each bidder may require. This RFP may not be appropriate for all persons, and it is
not possible for State / UT, its employees or advisers to consider the objectives, technical expertise and particular needs of each party who reads or uses this RFP. The assumptions, assessments, statements and information contained in this RFP, may not be completely accurate, adequate or correct. Each bidder should, therefore, conduct its own investigations and analysis and should check the accuracy, adequacy, correctness, reliability and completeness of the assumptions, assessments and information contained in this RFP and obtain independent advice from appropriate sources.

7.1.3. Information provided in this RFP to the bidders is on a wide range of matters, some of which depends upon interpretation of law. The information given is not an exhaustive account of statutory requirements and should not be regarded as a complete or authoritative statement of law. State / UT accepts no responsibility for the accuracy or otherwise for any interpretation or opinion on the law expressed herein.

7.1.4. State / UT, its employees and advisers make no representation or warranty and shall have no liability to any person including any bidder under any law, statute, rules or regulations or tort, principles of restitution or unjust enrichment or otherwise for any loss, damages, cost or expense which may arise from or be incurred or suffered on account of anything contained in this RFP or otherwise, including the accuracy, adequacy, correctness, reliability or completeness of the RFP and any assessment, assumption, statement or information contained therein or deemed to form part of this RFP or arising in any way in this selection process.

7.1.5. State / UT also accepts no liability of any nature whether resulting from negligence or otherwise however caused arising from reliance of any bidder upon the statements contained in this RFP.

7.1.6. State / UT may in its absolute discretion, but without being under any obligation to do so, update, amend or supplement the information, assessment or assumption contained in this RFP.

7.1.7. The issue of this RFP does not imply that State / UT is bound to select a bidder or to appoint the selected bidder, as the case may be, for the project and State / UT reserves the right to reject all or any of the proposal without assigning any reasons whatsoever.

7.1.8. The bidder shall bear all its costs associated with or relating to the preparation and submission of its proposal including but not limited to preparation, copying, delivery fees, expenses associated with any demonstrations or presentations which may be required by State / UT or any other costs incurred in connection with or relating to its proposal. All such costs and expenses shall remain with the bidder and State / UT shall not be liable in any manner whatsoever for the same or for any other costs or other expenses incurred by a bidder in preparation of submission of the proposal, regardless of the conduct or outcome of the selection process.

7.1.9. While every effort has been made to provide comprehensive and accurate background information and requirements and specifications, bidders must form their own conclusions for the execution of the project to meet the requirements as stated in the RFP. Bidders and recipients of this RFP may wish to consult their own legal advisers in relation to this RFP.

7.1.10. All information supplied by bidders may be treated as contractually binding
on the bidders, on successful award of the assignment by the State / UT on the basis of this RFP.

7.1.11. No commitment of any kind, contractual or otherwise shall exist unless and until a formal written contract has been executed by or on behalf of State / UT. Any notification of preferred bidder status by State / UT shall not give rise to any enforceable rights by the bidder. State / UT may cancel this public procurement at any time prior to a formal written contract being executed by or on behalf of State / UT.

7.1.12. This RFP supersedes and replaces any previous public documentation and communications and bidders should place no reliance on such communications.

7.2. **Compliant bids / Completeness of Response**

7.2.1. Bidders are advised to study all instructions, forms, terms, requirements and other information in this RFP document carefully. Submission of the bid shall be deemed to have been done after careful study and examination of the RFP document with full understanding of its implications.

7.2.2. Failure to comply with the requirements of this RFP may render the bid non-compliant and the bid may be rejected.

7.2.3. Bidders must:

i) Include all documentation specified in this RFP;

ii) Follow the format of this RFP and respond to each element in the order as set out in this RFP;

iii) Comply with all requirements as set out within this RFP.

iv) Failure to comply with the requirements of this paragraph may render the bid non-compliant and the bid may be rejected.

7.3. **Pre-Bid Meeting and Clarifications**

7.3.1. Pre-bid Meeting

a) State / UT shall hold a pre-bid meeting with the prospective bidders on the date, time and venue mentioned in Important Dates for RFP table. The bidders will have to ensure that their queries for pre-bid meeting should reach Nodal Contact Person mentioned in the Fact Sheet by e-mail or in person, on or before date and time mentioned in Important Dates for RFP table.

b) The queries should necessarily be submitted in the following format:

<table>
<thead>
<tr>
<th>S. No.</th>
<th>RFP document reference(s) [Section, clause and page number(s)]</th>
<th>Content of RFP requiring clarification(s)</th>
<th>Points of clarification</th>
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</table>
c) State / UT shall not be responsible for ensuring that the bidders’ queries have been received by State / UT. Any requests for clarifications received after the indicated date and time may not be entertained by State / UT.

7.3.2. Responses to Pre-Bid Queries and Issue of Corrigendum

a) State / UT will endeavor to provide timely response to all queries. However, State / UT makes no representation or warranty as to the completeness or accuracy of any response made in good faith, nor does State / UT undertake to answer all the queries that have been posed by the bidders.
b) At any time prior to the last date for receipt of bids, State / UT may, for any reason, whether at its own initiative or in response to a clarification requested by a prospective bidder, modify the RFP document by a corrigendum.
c) The corrigendum (if any) and clarifications to the queries from all bidders will be posted on the State / UT website. Any such corrigendum shall be deemed to be incorporated into this RFP.
d) In order to provide prospective bidders reasonable time for taking the corrigendum into account, State / UT may, at its discretion, extend the last date for the receipt of bids.

7.4. Key Requirements of the Bid

7.4.1. RFP Document Fees

a) RFP can be purchased at the address and dates and in the manner as mentioned in the Fact Sheet.

7.4.2. Right to Terminate the Process

a) State / UT may terminate the RFP process at any time and without assigning any reason. State / UT makes no commitments, express or implied, that this process will result in a business transaction with anyone.
b) This RFP does not constitute an offer by State / UT. The bidder's participation in this process may not result in State / UT selecting the bidder to engage towards execution of the contract.

7.5. Preparation of Bids

7.5.1. Language of the Bid

The bid prepared by the bidder, as well as all correspondence and documents relating to the bid exchanged by the bidder and State / UT shall be written in English language only.

7.5.2. Documents Constituting the Bid

The bid submitted by the bidder shall comprise of the following documents:
a) Prequalification bid in the formats specified in the RFP.
b) Technical bid in the formats specified in the RFP.
c) Financial bid in the formats specified in the RFP.
d) Any other information that is to be submitted during the course of bidding process.

7.6. Prequalification-cum-Technical Criteria

If there is a change in the status of the bidder which may lead to non-compliance to the pre-qualification-cum-technical criteria mentioned in Annexure of this volume of the RFP, at any stage during the bid process till the award of the contract, the bidder should immediately bring the same to the notice of State / UT. In this case the State / UT may take appropriate steps which may also lead to rejection of bid.

7.7. Consortium

Consortium, Joint Venture, subcontracting and outsourcing may not be required for the project.

7.8. Prequalification-cum Technical Bid

a) Prequalification-cum-Technical bid shall comprise of the cover letter, details and documents of the bidder meeting the prequalification criteria and an undertaking, (for contents and formats kindly refer Annexures). Further, bidder has to submit Prequalification-cum-Technical bid in a single envelope as prescribed in this RFP.
b) It may be noted that any reference / mention of the financial quote or price schedule in the prequalification bid shall be at the bidder's risk and may result in rejection of the bid.

7.9. Financial Bid

a) The financial bid should comprise of the price schedule in accordance with Annexure. Bidders may ensure that the financial bid is in the same format as provided in the RFP and non-adherence to these formats shall be at the bidder's risk and may result in rejection of the bid.

7.10. Bid Price

7.10.1. Prices in the Price Schedule

a) As part of its quote, the bidder shall provide each line item wise break-up of the financial bid, separately stating the taxes payable thereon, as per the format provided in Annexure of the RFP. In case the break-up is not given separately as per the formats provided, the bidder would run the risk of being disqualified.
b) The financial bid should strictly conform to the formats to enable evaluation of bids. A special care must be taken to ensure that the bid does not have any hidden costs or conditional costs, as this shall make the bid liable for outright rejection.

7.10.2. Separation of Price Components

a) The price components furnished by the bidder in accordance with Annexure of the RFP, will be solely for the purpose of facilitating the comparison of bids by the State / UT. This will not in any way limits the right of State / UT to contract on any other terms specified in the RFP.
b) Prices quoted by the bidder shall be fixed and no variation will be allowed under any circumstances. No open-ended bid shall be entertained and the same is liable to be rejected straightaway.

7.11. **Bid Currencies**

Prices shall be quoted in Indian Rupees (INR).

7.12. **Bid Security / Earnest Money Deposit (EMD)**

7.12.1. **Amount of EMD**

The bidder shall furnish, as part of its bid, EMD for the amount and in the manner as mentioned in the Fact Sheet.

7.12.2. **Currency of Bid Security / EMD**

The bid security shall be furnished in Indian Rupees (INR).

7.12.3. **Requirement of Bid Security / EMD**

The bid security / EMD is required to protect State / UT against the risk of bidder's conduct, which would warrant the security's forfeiture, pursuant to section Error! Reference source not found.

7.12.4. **Discharge of Bid Security / EMD of Unsuccessful Bidder**

Unsuccessful bidder's bid security / EMD will be discharged / returned as promptly as possible on award of the project to successful bidder.

7.12.5. **Discharge of EMD of Successful Bidder**

The successful bidder's bid security / EMD will be returned subsequent to receipt of the Performance Bank Guarantee from the bidder pursuant to section <>.

7.12.6. **Forfeiture of EMD**

The EMD can be forfeited if a bidder

i) Withdraws its bid during the period of bid validity or

ii) Does not accept the correction of errors as provided in this RFP.

iii) In case of the successful bidder, if the bidder fails

a. To sign the contract in accordance with the conditions of the RFP.

b. To furnish performance security as per the conditions provided in this RFP.

7.13. **Rejection of Bid**

Any bid not secured in accordance with the RFP, shall be rejected by State / UT, without any further correspondence, as non-responsive.

7.13.1. **Period of Validity of Bids**

1.1.1.1. **Validity Period**
i. Bids shall remain valid for for the period mentioned in the Fact Sheet. State / UT holds the right to reject a bid valid for a period shorter than this period as non-responsive, without any correspondence.

ii. In exceptional circumstances, State / UT may solicit the bidder's consent to an extension of the period of validity. The request and the response thereto shall be made in writing. Extension of validity period by the bidder should be unconditional. The bid security shall also be suitably extended. A bidder may refuse the request without forfeiting the bid security. A bidder granting the request will not be permitted to modify its bid.

7.13.2. Format and Signing of Bid

   a) Number of Copies of Bid

      The bidder shall submit the bid documents as per the details given below:

   b) Original copy of the bid: This would consist of the following:

      i) Original copy of prequalification-cum-technical bid in hard copy format, duly stamped and signed by the authorized signatory on every page in ink.

      ii) Original copy of financial bid in hard copy format, duly stamped and signed by the authorized signatory on every page in ink.

      iii) Soft copy of prequalification-cum-technical bid in a CD.

   c) Duplicate copy of the bid: This would consist of the following:

      i) Duplicate copy of prequalification-cum-technical bid in hard copy format, duly stamped and signed by the authorized signatory on every page in ink.

      ii) Soft copy of the duplicate copy of the prequalification-cum-technical bid in a CD.

   **Note:** The original and duplicate copies should be exactly same. Any deviations / discrepancies found in the content of the two may lead to rejection of the bid. The bidder should submit its bid in the prescribed pro-forma only. If any bidder fails to submit its bid in the prescribed manner, the bid shall be summarily rejected.

7.13.3. Enclosing of Bid

   The original and duplicate copies of bid should be enclosed in envelopes and marked 'Envelope A – Original' and 'Envelope B – Duplicate' respectively and sealed. Both these envelopes should be enclosed in another envelope indicating the title of the RFP. The envelope should also indicate the name and address of the bidder to enable the bid to be returned unopened in case it is declared "late".

7.13.4. Mailing Address for Bids

   The inner and outer envelopes shall be addressed to the Nodal Contact Person as mentioned in the Fact Sheet.

7.13.5. Responsibility of State / UT
If the outer envelope is not sealed and marked as required by section <> above, State / UT will assume no responsibility for the bid's misplacement or premature opening.

7.13.6. Authentication of Bid

The original / duplicate copies of the bid shall be type written and shall be signed in ink by a person or persons duly authorized to bind the bidder to the bid. The letter of authorization shall be supported by a valid written power-of-attorney or Board resolution, accompanying the bid. Scanned or digitized signatures are not permitted. Non-adherence to this clause would make the bid liable for rejection.

7.13.7. Validation of interlineations in Bid

Any interlineations, erasures or overwriting shall be valid only if the person or persons signing the bid have authenticated the same with signature.

7.13.8. Rejection of Bid

The bid has to be submitted in the form of printed document. The bids submitted by Telex, fax or e-mail shall not be entertained. Any condition put forth by the bidder non-conforming to the bid requirements shall not be entertained at all and such bid shall be rejected.

7.13.9. Deadline for Submission of Bids

a) Last Date for Submission

The bids (prequalification, technical and financial) must be received by Nodal Contact Person mentioned in 'Fact Sheet' not later than date and time mentioned in 'Important Dates for RFP' table. In the event of the specified date for the submission of bids being declared a holiday for State / UT, the bids will be received up to the appointed time on the next working day.

b) Extension for Last date for Submission

State / UT may, at own discretion, extend the deadline for submission of bids by amending the bid document in which case all rights and obligations of State / UT and bidders previously subject to the deadline, will thereafter be subject to the deadline as extended.

c) Late Bids

Any bid received by State / UT after the deadline for submission of bids prescribed by State / UT will be summarily rejected and returned unopened to the bidder. State / UT shall not be responsible for any postal delay or non-receipt / non-delivery of the documents. No further correspondence on this subject will be entertained.

7.13.10. Modification and Withdrawal of Bids

a) Written Notice
The bidder may modify or withdraw its bid after the bid submission provided that the State / UT receives written notice of the modification or withdrawal before the expiration of deadline prescribed for submission of bids.

b) Authentication and Submission

The bidder’s notice shall be duly authenticated and submitted to the Nodal Officer mentioned in Fact Sheet before the expiration of deadline for submission of bids.

c) Last Date for Notice

No bid may be modified subsequent to the deadline for submission of bids. No bid may be withdrawn in the interval between the deadline for submission of bids and the expiration of period of bid validity. Withdrawal of a bid during this interval may result in the forfeiture of bidder’s EMD.

7.13.11. Bid Opening and Evaluation of Bids

a) Opening of Prequalification-cum-Technical bids

State / UT will open all Prequalification-cum-Technical bids in the presence of bidders’ representatives who choose to attend the Prequalification bid opening at the date and time mentioned in Important Dates for RFP table above at a venue that will be communicated by the State / UT. The bidders’ representatives who are present shall sign a register evidencing their attendance. Firstly Prequalification-cum-Technical bid envelopes will be opened by a committee. The committee will check whether the following documents are present in the Prequalification-cum-Technical bid envelop:

i) Bid cover letter
ii) Tender fee
iii) EMD
iv) Prequalification criteria checklist
v) Prequalification-cum-Technical bid

The committee will only check whether these documents are present in the Prequalification-cum-Technical bids. Bids which have any of the above mentioned documents missing will not be considered for further evaluation. In the event of the specified date of bid opening being declared a holiday for the State / UT, the bids shall be opened at the appointed time and location on the next working day.

b) Evaluation of Prequalification-cum-Technical bids

Prequalification-cum-Technical bids will be evaluated in detail by State / UT in subsequent days. Evaluation of bids by State / UT shall not be questioned by any of the bidders. State / UT may ask bidder(s) for additional information, visit to bidder’s site and / or arrange discussions with their professional, technical faculties to verify claims made in the bid document by the bidder. If any bidder does not provide the information sought by the State / UT or denies access to the sites / personnel, the State / UT will make its own assumptions for evaluation. The bidder will have no right to question these assumptions.

c) Clarification on Prequalification-cum-Technical bids
During evaluation of bids, State / UT may, at its discretion, ask the bidder for a clarification of its bid. The request for clarification and the response shall be in writing. If the response to the clarification is not received before the expiration of deadline prescribed in the request, State / UT reserves the right to make its own reasonable assumptions at the total risk and cost of the bidder which may also lead to rejection of the bid.

d) Completeness of Prequalification-cum-Technical bids

State / UT will examine the bids to determine whether they are complete, whether they meet all the conditions of the RFP and whether any computational errors have been made, whether required security and tender fee have been furnished, whether the documents have been properly signed and whether the bids are generally in order.

e) Rejection of Prequalification-cum-Technical bid

If a bid is not responsive and not fulfilling all the conditions it will be rejected by State / UT and shall not subsequently be accepted.

f) Opening of Financial bids

The Financial bids of the eligible bidders will be opened in the presence of bidders' representatives who choose to attend the financial bid opening on date and time to be communicated to all the eligible and qualified bidders. The bidders' representatives who are present shall sign a register evidencing their attendance. The name of bidder, bid prices, discount, etc. will be announced at the meeting. In the event of the specified date of bid opening being declared a holiday for the State / UT, the bids shall be opened at the appointed time and location on the next working day. The bidders whose bids do not qualify Prequalification-cum-Technical evaluation may collect their un-opened financial bids from the Nodal Officer after intimation from the Nodal Officer.

g) Rectification of errors

Arithmetical errors will be rectified on the following basis. If there is a discrepancy between the unit price and the total price that is obtained by multiplying the unit price and quantity, the unit price shall prevail and the total price shall be corrected. If there is a discrepancy between words and figures, the amount in words shall prevail. If the bidder does not accept the correction of errors, its bid will be rejected and its bid security may be forfeited.

Note:

a) Information relating to the examination, clarification, evaluation and comparison of bids and recommendations for the signing of a contract shall not be disclosed to bidders or any other persons not officially concerned with such process until the award to the successful bidder has been announced. Any attempt by a bidder to influence the State / UT processing of bids or award decisions may result in the rejection of its bid.

b) No bidder shall contact State / UT on any matter relating to its bid, from the time of the bid opening to the time the work order is issued / contract is awarded. If the
bidder wishes to bring additional information to the notice of State / UT, it should be done in writing and addressed as mentioned earlier in the RFP.
c) Any effort by a bidder to influence the employees of State / UT / members of evaluation committee in the process of examination, clarification, evaluation and comparison of bids and in decisions concerning issuance of work order / award of contract, shall result in the rejection of its bid.

7.14. **Award of Contract**

7.14.1. **State / UT’s right to accept any bid and to reject any bid or all bids**

State / UT reserves the right to accept or reject any bid and to annul the bidding process and reject all bids at any time before the project is awarded, without thereby incurring any liability to the affected bidder or bidders, with or without assigning any reason.

7.14.2. **Notification of Award**

a) **Notification to Bidder:** Before the expiry of the period of validity of the bid, State / UT shall notify the successful bidder in writing by registered letter or by e-mail or by fax, that its bid has been accepted. The bidder shall acknowledge in writing the receipt of the notification of award and will enter into agreement with the respective programme divisions based on their requirement. The date and time for the same shall be notified to the ESP in writing by the respective programme divisions of State / UT.

b) **Signing of Contract:** The contract shall be signed on all the pages by the person(s) duly authorized to bind the successful bidder to the contract. The stamp of the organization shall also be affixed on each page of the contract. State / UT may discuss certain terms with successful bidder before signing of the contract. The bidder with whom the contract is signed will be the ‘Call Centre Service Provider (ESP).

c) **Discharge of EMD:** Upon the successful signing of the contract, State / UT shall promptly request the ESP to provide performance bank guarantee. On receipt of the performance bank guarantee, State / UT shall discharge / return the EMD to ESP.

d) **Expenses for the Contract:** The incidental expenses of execution of agreement / contract shall be borne by the ESP.

e) **Failure to Abide by the Contract:** The conditions stipulated in the contract shall be strictly adhered to and violation of any of these conditions will entail termination of the contract without prejudice to the rights of State / UT to impose penalties as specified in the bidding document and the contract.

7.14.3. **Performance Bank Guarantee**

a) The successful bidder (i.e. ESP) shall at his own expense deposit with State / UT, within thirty (30) working days for the date of notice of award of the contract or at the time of signing of the contract whichever is earlier, an unconditional and
irrevocable performance Security from a scheduled Commercial bank, acceptable to State / UT payable on demand, for the due performance and fulfilment of the contract by the ESP.

b) The PBG shall be denominated in the currency of the RFP and shall be payable by bank guarantee.

c) This PBG will be for an amount equivalent to 10% of Project Price, and is payable by the successful bidder, before signing the contract.

d) The PBG shall be valid till the end of three months after the completion of exit management phase. This additional three months is required for facilitating closure of the project.

e) The PBG may be discharged / returned by the State / UT upon being satisfied that there has been due performance of the obligations of the ESP under the work order / contract. However, no interest shall be payable by State / UT on the PBG.

f) In the event of the ESP being unable to honour the work order / contract for whatever reason, the State / UT would evoke the PBG. Notwithstanding and without prejudice to any rights whatsoever of the State / UT under the work order / contract in the matter, the proceeds of the PBG shall be payable to the State / UT as compensation for any loss resulting from the ESP’s failure to fulfil its obligations under the work order / contract. The State / UT shall notify the ESP in writing of the exercise of its right to receive such compensation within 14 days of occurrence of default by ESP, indicating the contractual obligation(s) for which the ESP is in default.

g) State / UT shall also be entitled to make recoveries from the ESP’s bills, PBG or from any other amount due to ESP, the equivalent value of any payment made to ESP due to inadvertence, error, collusion, misconstruction or misstatement. Any such occurrence should be brought to the notice of State / UT.

7.14.4. Annulment of Award

Failure of the successful bidder to comply with the requirements of the RFP shall constitute sufficient ground for the annulment of the award and forfeiture of the EMD.

8. KEY TERMS & CONDITIONS

State / UT may add, modify or delete any or all the terms and conditions as per the requirement of the project. Some of the terms that may be covered in the RFP are listed below for reference only.

8.1. Changes to the Project

The State / UT and the ESP recognize that for providing better and improved services changes are an inevitable part of delivering services and that a significant element of this change can be accomplished by re-organizing processes and responsibilities without an effect on the cost. A change may involve, but is not restricted to the submission of updated
information technologies and related services. The ESP will endeavor, wherever reasonably practicable, to manage change without any change in the terms of payment as stated in the Payment Schedule mentioned in RFP and the State / UT will work with the ESP to ensure that all changes are discussed and managed in a constructive manner.

8.2. Termination of Project

8.2.1. Termination for default

State / UT may, without prejudice to any other remedy for breach of RFP, by written notice of default sent to ESP, terminate the contract / work order in whole or in part if:

a) The ESP fails to deliver any or all of the obligations within the time period(s) specified in the RFP or any extension thereof granted by the State / UT

b) The ESP fails to perform any other obligation(s) under the work order / contract.

c) However, the disputes if any, may be referred to Arbitration.

8.2.2. Termination for insolvency, dissolution etc.

State / UT may at any time terminate the contract / work order by giving written notice to the ESP without compensation to the ESP, if the ESP becomes bankrupt or otherwise insolvent or in case of dissolution or winding up of company, and such termination will not prejudice or affect any right of action or remedy which has accrued thereafter to the State / UT.

8.2.3. Termination for convenience

State / UT reserves the right to terminate by prior written notice, the whole or part of the contract / work order. The notice of termination shall specify that termination is for State / UT’s convenience, the extent to which performance of work under the contract / work order is terminated and the date on which such termination becomes effective.

8.2.4. No claim certificate

The ESP shall not be entitled to make any claim, whatsoever, against State / UT under or by virtue of or arising out of the contract / work order nor shall State / UT entertain or consider any such claim after ESP shall have signed a “no claim” certificate in favor of State / UT in such form as shall be required by State / UT after the works are finally accepted.

8.2.5. Suspension

State / UT may by a written notice of suspension, suspend all payments to ESP under the contract / work order, if the ESP fails to perform any of its obligations under the contract / work order, (including carrying out of the services) provided that the notice of suspension:

a) Shall specify the nature of the failure and

b) Shall request the ESP to remedy such failure within a specified period from the date of issue of such notice of suspension.

8.2.6. Consequences of termination
a) In the event of termination of the contract / work order due to any cause whatsoever, whether consequent to the stipulated term of the contract / work order or otherwise, the State / UT shall be entitled to impose any such obligations and conditions and issue any clarifications as may be necessary to ensure an efficient transition and effective Business Continuity of the project which the ESP shall be obliged to comply with and take all available steps to minimize loss resulting from that termination / breach and further allow and provide all such assistance to State / UT and / or the successor ESP, as may be required to take over the obligations of the erstwhile ESP in relation to the execution / continued execution of the scope of the project.

b) Nothing herein shall restrict the right of the State / UT to invoke the PBG and other guarantees furnished hereunder and pursue such other rights and / or remedies that may be available to the State / UT under law.

c) The termination of contract / work order shall neither affect any accrued right or liability of either party nor affect the operation of the provisions of the contract / work order that are expressly or by implication intended to come into or continue in force on or after such termination.

8.2.7. Withdrawal by the ESP

Withdrawal of ESP from the project at any point of time during project duration shall constitute sufficient grounds for the termination of contract / work order. If State / UT gets the work done from elsewhere, the difference in the cost of getting the work done will be borne by the erstwhile ESP.

8.3. Indemnity

The ESP shall indemnify the State / UT in respect of any costs or damages howsoever arising out of or related to breach of warranty or representation, contract / work order or statutory duty, or tortious acts or omissions by the ESP or the ESP’s personnel or any claims made against the State / UT by third parties in respect thereof.

8.4. Mechanism for Complaint Handling

ESP will submit a detailed escalation matrix in its proposal for resolving complaints raised by the State / UT. The escalation matrix will be approved by the State / UT. Any complaint regarding provision of services (covered under the project) from the stakeholder shall be taken very seriously by the State / UT. Onus to prove such complaint is invalid, would lie with the ESP. In case where any such complaint is found true and reasonable, the ESP may be penalized by the State / UT (depending on the facts and seriousness of complaint). Remedial action may be taken by the State / UT which may include termination of contract / work order.

8.5. Dispute Resolution

8.5.1. If any dispute of any kind whatsoever shall arise between the State / UT and the ESP in connection with or arising out of the project, including without prejudice to the generality of the foregoing, any question regarding its existence, validity, or termination,
or the operation of project (whether before or after Go-Live and whether before or after the termination, abandonment, or breach of the contract / work order), the parties shall seek to resolve any such dispute or difference by mutual consultation. If the parties fail to resolve such a dispute or difference by mutual consultation within <> days, upon expiry of which either party may move to the notification of arbitration described in Section 6.5.1.

8.5.2. In case of any doubts about a section of the RFP, the interpretation given by the State / UT shall be final and binding, till the time any other interpretation is ordered in pursuance to the RFP.

8.5.3. Notwithstanding anything stated in the RFP, and while the process of resolution of differences as stated above is underway, the ESP shall continue to provide services for this project, without any disruption or dilution in accordance with the Service Level Agreement.

8.6. Arbitration

In the event of any dispute relating to the import or meaning of any terms and conditions which could not be solved amicably by the parties, the parties may refer the matter to the Arbitrator, agreeable to both the parties, to be appointed by State / UT on the request of either of the parties for arbitration in consonance with the provisions of the Arbitration and Conciliation Act, 1996 (Act 26 of 1996), on the designated reference in dispute. All legal proceedings shall lie to the jurisdiction of courts situated in <>.

8.7. Limitation of Liability

Provided the following does not exclude or limit any liabilities of ESP in ways not permitted by applicable law:

8.7.1. The ESP shall not be liable to the State / UT, whether in contract or otherwise, for any indirect or consequential loss or damage, loss of use, loss of production, or loss of profits or interest costs, provided that this exclusion shall not apply to any obligation of the ESP to pay liquidated damages to the State / UT

8.7.2. There shall be no limitation of liability in case of any damages for bodily injury (including death) and damage to real property, tangible personal property, intangible personal property and intellectual property rights.

8.7.3. However, where there has been misconduct, gross negligence, dishonesty or fraud on behalf of the ESP, the ESP’s liability under the contract / work order shall be subject to the amount of its financial limit of this project.

8.8. Force Majeure

8.8.1. Event of Force Majeure

A Force Majeure event means any event or circumstance or a combination of events and circumstances, which:

a) Is beyond the reasonable control of the affected Party;

b) Such Party could not have prevented or reasonably overcome with the exercise of reasonable skill and care;
c) Does not result from the negligence of such Party or the failure of such Party to perform its obligations under the contract / work order;

d) Is of an incapacitating nature and prevents or causes a delay or impediment in performance;

e) May be classified as all or any of the following events:

i. Non-political Events

1. Act of God, including earthquake, flood, inundation, landslide, exceptionally adverse weather conditions, storm, tempest, hurricane, cyclone, lightning, thunder, volcanic eruption, fire or other extreme atmospheric conditions;

2. Radioactive contamination or ionizing radiation or biological contamination except as may be attributable to the ESP's use of radiation or radio-activity or biologically contaminating material;

3. Strikes, lockouts, boycotts, labour disruptions or any other industrial disturbances as the case may be not arising on account of the acts or omissions of the ESP and which affect the timely implementation and continued operation of the project; or

4. Any event or circumstances of a nature analogous to any of the foregoing.

ii. Political events

1. Change in law, other than any change in law for which relief is provided under the RFP / contract / work order;

2. Any judgment or order of any court of competent jurisdiction or statutory authority in India made against the ESP in any proceedings for reasons other than failure of the ESP to comply with applicable laws or required consents or on account of breach thereof, or of any contract, or enforcement of the contract / work order or exercise of any of its rights under the contract / work order;

3. Expropriation or compulsory acquisition by the ESP or any of their nominated agencies of any material assets or rights of the ESP;

4. Unlawful or unauthorized revocation of, or refusal by any authority other than the State / UT or any of their nominated agencies to renew or grant any consents required by the ESP to perform its obligations without valid cause, provided that such delay, modification, denial, refusal or revocation did not result from the ESP's inability or failure to comply with any condition relating to grant, maintenance or renewal of such required consents applied on a non-discriminatory basis;

5. Any requisition of the project by any other authority;

6. Any requisition of the project by the State / UT or any of their nominated agencies.
7. For the avoidance of doubt, suspension of the project in accordance with the provisions of the contract / work order shall not be considered a requisition for the purposes of Force Majeure event.

iii. Other events

1. An act of war (whether declared or undeclared), hostilities, invasion, armed conflict or act of foreign enemy, blockade, embargo, prolonged riot, insurrection, terrorist or military action, civil commotion or politically motivated sabotage, for a continuous period exceeding seven (7) days.

2. If either party is prevented, hindered, or delayed from or in performing any of its obligations under the contract / work order by an event of Force Majeure, then it shall notify the other in writing of the occurrence of such event and the circumstances of the event of Force Majeure within <> days after the occurrence of such event.

3. For the avoidance of doubt, it is expressly clarified that the failure on the part of the ESP to implement any disaster contingency planning and backup and other data safeguards in accordance with the terms of contract / work order against natural disaster, fire, sabotage or other similar occurrence shall not be deemed to be a Force Majeure event. For the avoidance of doubt, it is further clarified that any negligence in performance of services which directly causes any breach of security like hacking would not qualify under the definition of “Force Majeure”. In so far as applicable to the performance of services, ESP will be solely responsible to complete the risk assessment and ensure implementation of adequate security hygiene, best practices, processes and technology to prevent any breach of security and any resulting liability there from (wherever applicable).

8.8.2. Notification procedure for Force Majeure

a) The affected Party shall notify the other Party of a Force Majeure event within <> days of occurrence of such event. If the other Party disputes the claim for relief under Force Majeure it shall give the claiming Party written notice of such dispute within <> days of such notice. Such dispute shall be dealt with in accordance with the dispute resolution mechanism in accordance with the relevant Section.

b) Upon cessation of the situation which led the Party claiming Force Majeure, the claiming Party shall within <> days hereof notify the other Party in writing of the cessation and the Parties shall as soon as practicable thereafter continue performance of all obligations under the contract / work order.

c) Allocation of costs arising out of Force Majeure

i. Upon the occurrence of any Force Majeure event prior to the Effective Date, the Parties shall bear their respective costs and no Party shall be required to pay to the other Party any costs thereof.
ii. Upon occurrence of a Force Majeure event after the Effective Date, the costs incurred and attributable to such event and directly relating to the project (‘Force Majeure costs’) shall be allocated and paid as follows:

1. Upon occurrence of a Non-Political Event, the Parties shall bear their respective Force Majeure costs and neither Party shall be required to pay to the other Party any costs thereof.
2. For the avoidance of doubt, Force Majeure Costs may include interest payments on debt, operation and maintenance expenses, any increase in the cost of the services on account of inflation and all other costs directly attributable to the Force Majeure event.
3. Save and except as expressly provided in this Section, neither Party shall be liable in any manner whatsoever to the other Party in respect of any loss, damage, costs, expense, claims, demands and proceedings relating to or arising out of occurrence or existence of any Force Majeure event or exercise of any right pursuant thereof.

8.9. Access and Audit

8.9.1. The ESP shall keep accurate and systematic accounts, files and records (‘the Records’). The Records shall clearly identify, among other things, the basis upon which invoices have been calculated and the ESP shall keep the Records throughout the duration of the contract / work order and for <> years following the termination of contract / work order.

8.9.2. The ESP shall upon request provide the State / UT or its representatives or audit officials unrestricted access to the Records in order that the Records may be inspected and copied. The ESP shall co-operate fully in providing to the State / UT or its representative’s answer to such enquiries as may be made about the Records.

8.9.3. Where it is found by the State / UT that any overpayment has been made to the ESP, the ESP shall reimburse the State / UT such amount within 30 days of the date of the State / UT’s written demand.

8.10. SLA Measurement and Penalties

8.10.1. ESP would have the responsibility to escalate issue, if any, which is required to be discussed and resolved for the smooth operation of the project well in time. Any low performance as reflected in the SLA performance of the ESP would be the sole and complete responsibility of the ESP.

8.10.2. The key service level requirements for project, which need to be ensured by the ESP during the operations and maintenance period, are given in Annexure - 3. These performance requirements shall be strictly adhered to by the ESP. The SLA monitoring shall be done/ reviewed on a monthly/quarterly basis. During the project, it is envisaged that there could be changes to the SLA, in terms of addition, alteration or deletion of certain parameters based on mutual consent of both the parties i.e. State / UT and ESP.

8.10.3. Penalties: ESP will attract penalties in case of delay in completion of
activities. In case the overall penalty exceeds <> % of the Project Price, State / UT may terminate the contract / work order. Penalties applicable per week of delay in completion of the activities will be based on the payable amount of respective milestone mentioned in Section <>.

8.11. Terms of Payment

ESP will have to setup and operationalize the project conforming to the scope mentioned in the RFP. After the Go-Live of the project, ESP shall be paid based on the actual utilization on quarterly basis. Additional cost and other operational expenses as mentioned in the RFP for implementation of other requirements of State / UT, shall be paid additionally based as per contract / work order.

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Payment Milestones</th>
<th>Time of Payment</th>
<th>Payable Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Payment for Go-Live of application</td>
<td>Successful application development</td>
<td>Payment based on the financial quotes provided by the ESP less penalties (if any)</td>
</tr>
<tr>
<td>2.</td>
<td>Periodic payment for operation and management after Go-Live</td>
<td>After Go-Live during project</td>
<td>Quarterly invoice raised based on the actual number of calling / seat as mentioned in the financial quote provided by the ESP less penalties (if any)</td>
</tr>
</tbody>
</table>

Note:

a) Applicable SLA deductions and other penalties for the quarter shall be deducted from the respective invoices raised by the ESP.

b) ESP will be paid additionally for additional resource cost and other operational expenses to meet additional requirements of State / UT as per the rates mentioned in the contract / work order.

c) All taxes, duties etc. shall be payable by the ESP. However, in case of change or revision of service tax or its equivalent in any new tax structure, the payment will be made as applicable. The documentary evidences for payment of applicable tax will be submitted by the ESP.

d) The mandatory taxes / duties etc. as applicable shall be deducted by State / UT.
1. ANNEXURE 1: PREQUALIFICATION-CUM-TECHNICAL CRITERIA
   *(Indicative – To be finalised by the State)*

State / UT may design its own Prequalification-cum-Technical criteria to screen the capable bidders for the bidding process. State / UT may refer the following table for identifying and designing the Prequalification-cum-Technical criteria for their RFP. Some sample forms are also attached below that are related to the suggested Prequalification-cum-Technical criteria. State / UT may like to hold discussion with prospective bidders to firm up the Prequalification-cum-Technical criteria to ensure sufficient participation in the bidding process.

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Prequalification-cum-Technical Criteria</th>
<th>Proof Required</th>
<th>Check List (Yes/ No)</th>
<th>Page Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Cover letter with undertaking Form 1</td>
<td>Yes / No</td>
<td>Page No.</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>The bidder should have an average annual turnover of not less than Rupees &lt;&gt; Crores from business operations for last three financial years Form 2</td>
<td>Audited financial statements (reflecting overall turnover) / annual report containing financial statements for the last three financial years and A certificate duly certified by the statutory auditor of the bidder clearly mentioning the average annual turnover of the bidder for last three financial years</td>
<td>Yes / No</td>
<td>Page No.</td>
</tr>
<tr>
<td>3.</td>
<td>The bidder should have an average annual turnover of at least Rupees &lt;&gt; Crores from call centre operations, for last three financial years Form 3</td>
<td>A certificate duly certified by the statutory auditor of the bidder clearly mentioning the average annual turnover of the bidder from call centre operations for last three financial years</td>
<td>Yes / No</td>
<td>Page No.</td>
</tr>
<tr>
<td>S. No.</td>
<td>Prequalification-cum-Technical Criteria</td>
<td>Proof Required</td>
<td>Check List (Yes/ No)</td>
<td>Page Reference</td>
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<tr>
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<tr>
<td>4.</td>
<td>The bidder should have a fully functional multilingual call centre facility with at least &lt;&gt; operational seats in &lt;location&gt; Form 4</td>
<td>An undertaking from the authorized signatory of the bidder, certifying the same along with a copy of a valid OSP license</td>
<td>Yes / No</td>
<td>Page No.</td>
</tr>
<tr>
<td>5.</td>
<td>The bidder should be a company registered in India under Companies Act 1956 (as amended from time to time) for a period of at least 3 years as on the date of submission of the bid Form 5</td>
<td>Copy of Certificate of Incorporation / Registration</td>
<td>Yes / No</td>
<td>Page No.</td>
</tr>
<tr>
<td>6.</td>
<td>The bidder should submit valid authorisation details of the person(s) signing the bid document Form 6</td>
<td>Power of Attorney OR Certified copy of Board Resolution</td>
<td>Yes / No</td>
<td>Page No.</td>
</tr>
<tr>
<td>7.</td>
<td>The bidder (each member in case of consortium) should have a positive Net Worth (Paid up Share Capital plus Free Reserves after deducting accumulated Losses / Fictitious Assets) as on date of submission of the bid. Form 7</td>
<td>Statutory Auditor’s certificate mentioning net worth</td>
<td>Yes / No</td>
<td>Page No.</td>
</tr>
<tr>
<td>8.</td>
<td>As on the date of submission of the bid, Bidder (each member in case of consortium) should not have any undisputed statutory</td>
<td>No statutory dues certificate signed by authorised signatory</td>
<td>Yes / No</td>
<td>Page No.</td>
</tr>
<tr>
<td>S. No.</td>
<td>Prequalification-cum-Technical Criteria</td>
<td>Proof Required</td>
<td>Check List (Yes/ No)</td>
<td>Page Reference</td>
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<tr>
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<td>-------------------------------------------------------------------------------</td>
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<td>----------------</td>
</tr>
<tr>
<td></td>
<td>liability outstanding for more than 6 months from the date such dues had become payable for payment as on date of submission of the bid. Form 8</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Experience of bidder in managing call centre operations with minimum of 3 projects involving inbound or outbound calling process of at least &lt;&gt; seats or &lt;&gt; Lakh call in an year each on outsourced model for any Government entity / PSU / Banks within the last 5 years in India Form 9</td>
<td>Relevant client certificate for managing call centre operations Or Work order/LOI along with the project completion certificate or equivalent document establishing the said criterion</td>
<td>Yes / No</td>
<td>Page No.</td>
</tr>
<tr>
<td>10.</td>
<td>As on date of submission of the bid, the bidder should not be blacklisted by any Government entity in India. Form 10</td>
<td>Certificate duly signed by authorised signatory</td>
<td>Yes / No</td>
<td>Page No.</td>
</tr>
<tr>
<td>11.</td>
<td>Bidder should not have withdrawn from similar government projects or should not have any contract termination from similar project with Government entities on account of non-performance in the last 3 years. Form 11</td>
<td>Certificate duly signed by authorised signatory</td>
<td>Yes / No</td>
<td>Page No.</td>
</tr>
<tr>
<td>S. No.</td>
<td>Prequalification-cum-Technical Criteria</td>
<td>Proof Required</td>
<td>Check List (Yes/ No)</td>
<td>Page Reference</td>
</tr>
<tr>
<td>--------</td>
<td>----------------------------------------</td>
<td>----------------</td>
<td>----------------------</td>
<td>----------------</td>
</tr>
<tr>
<td>12.</td>
<td>The bidder should have submitted the tender fee (non-refundable) and the EMD as mentioned in the RFP. Form 12</td>
<td>a. Tender Document Fee: Demand Draft or proof of payment b. EMD: Bank guarantee / Fixed Deposit receipt</td>
<td>Yes / No</td>
<td>Page No.</td>
</tr>
</tbody>
</table>

The details for the above along with the documentary proofs as required should be provided in the formats as provided subsequently in this part of the Annexure 1.

2. **ANNEXURE 2: FORMS**

Form 1: Cover Letter
[On the letterhead of the organization]
To
Nodal Officer (As per fact sheet)
Address
Sub: “Selection of Call-centre Service Provider (ESP)”

Dear Sir,

1. Having examined the RFP, Annexures, addenda and pre-bid clarifications, thereto, we, the undersigned, in conformity with the said RFP, offer to provide the said services on terms of reference to be signed upon the award of contract/ work order for the sum indicated as per our financial bid.
2. We acknowledge having received all the addenda / pre-bid clarifications to the RFP:
3. We have read the provisions of the RFP and confirm that these are acceptable to us. We further declare that additional conditions, variations, deviations, suggestions if any, found in our bid shall not be given effect to.
4. We undertake, if our bid is accepted, to provide the services comprised in the RFP within time frame specified, starting from the date of receipt of notification of award from State / UT.
5. We agree to abide by this bid for a period of < > days from the date of bid submission and it shall remain binding upon us and may be accepted at any time before the expiration of that period.
6. We agree to execute a contract or accept a work order in the form to be communicated by State / UT, incorporating all terms and conditions with such alterations or additions thereto as may be necessary to adapt such contract/ work order to the circumstances of the standard and notice of the award within time prescribed after notification of the acceptance of this bid.
7. We agree that if any day during the entire project duration, our act breaches the RFP terms and conditions or we express our inability to execute the project, State / UT reserves all the rights to terminate the contract / work order and appropriate penalty will be borne on us.
8. We hereby confirm that we do not have any conflict of interest in accordance with the RFP.
9. We confirm that we will be responsible for the security of all the data captured or shared with our system. We further undertake that both our company (including subsidiaries and parent companies) and directors are directly or indirectly not managing hospitals, health insurance, pharmacy and related work which as conflict with the operations of call centre. Further, after termination of the contract / work order or at the end of Project, we will not enter into any similar field that may raise a conflict with the operations specified in the contract / work order.
10. Unless and until a formal contract / work order is prepared and executed, this bid together with your written acceptance thereof shall constitute a binding agreement.
11. As security for the due performance of the undertaking and obligation of the bid, we submit herewith a Bank guarantee or Fixed Deposit Receipt bearing number ____________ dated __________ drawn in favour of <> for an amount of <> (Rs in words) payable at <>.
12. We understand that if the details given in support of claims made above are found to be untenable or unverifiable, or both, our bid may be rejected without any reference to us. We also understand that if there is any change in our prequalification-cum-technical criteria status till the date of award of contract to the ESP, it is our responsibility to inform State / UT of the changed status at the earliest.
13. We further clearly understand that State / UT is not obliged to inform us of the reasons for rejection of our bid.

Dated this
Signature
(Bidder Seal)
__________________
In the capacity of
Duly authorized to sign bids for and on behalf of:

Form 2: Annual Turnover

[On the letterhead of the Statutory Auditor]

We hereby certify that total annual turnover and average turnover from business operations of M/s ________________ (name of the bidder) for the last three years are as given below:
Form 3: Annual Turnover from call centre operations

We hereby certify that the total annual and average turnover of M/s ____________________ (name of the bidder) for the last three years are as given below:

<table>
<thead>
<tr>
<th>Year 1 (&lt;&gt;</th>
<th>Year 2 (&lt;&gt;</th>
<th>Year 3 (&lt;&gt;</th>
<th>Average</th>
</tr>
</thead>
</table>

(Signature of Statutory Auditor)
Name of Statutory Auditor:
Name of Statutory Auditor Firm:
Seal of Statutory Auditor Firm:

Form 4: Experience of multilingual call centre of minimum <> operational seats

This is to certify that ---------------------------- (name of the organization), having registered office at ---------------------------- (address of the registered office) is operating a call centre with capacity of more than <> operational seats from ---------------------------- (location of call centre) with valid OSP license as on date of submission of the bid.

Signature of the Authorized Signatory:
Name of the Authorized Signatory:
Form 5: Certificate of Incorporation

Bidder Name:

Incorporated as ____________________ in year __________ at ____________________.

Registration Number

Signature of the Authorized Signatory:

Name of the Authorized Signatory:

Name of the Bidder:

Seal of the Bidder:

Supporting Documents: Please enclose copy of Certificate of Incorporation.

Form 6: Format of Power of Attorney for bid

POWER OF ATTORNEY

(On Stamp Paper of relevant value)

Know all men by these presents, we ____________________ (name of the company and address of the registered office) do hereby appoint and authorize Mr / Ms. ____________________ (full name and residential address) who is presently employed with us and holding the position of ____________________ as our attorney, to do in our name and on our behalf, all such acts, deeds and things necessary in connection with or incidental to our bid document for this project, in response to the < tender no > invited by the State / UT, including signing and submission of all documents and providing information / responses to State / UT in all matters in connection with our bid.

We hereby agree to ratify all acts, deeds and things lawfully done by our said attorney pursuant to this Power of Attorney and that all acts, deeds and things done by our aforesaid attorney shall and shall always be deemed to have been done by us.

Dated

For ____________________

(Signature)

(Name, Designation and Address)

Accepted

(Signature)
(Name, Title and Address of the Attorney)
Seal of the Bidder:

Note:
1. The mode of execution of the Power of Attorney should be in accordance with the procedure, if any, laid down by the applicable law and the charter documents of the executants and when it is so required the same should be under common seal affixed in accordance with the required procedure.
2. Also, wherever required, the bidder should submit for verification the extract of the charter documents and documents such as a resolution / power of attorney in favor of the person executing this Power of Attorney for the delegation of power hereunder on behalf of the bidder.
3. In case the bid is signed by an authorized Director / Partner or Proprietor of the bidder, a certified copy of the appropriate resolution / document conveying such authority may be enclosed in lieu of the Power of Attorney.

Form 7: Format for statutory auditor’s certificate (to be submitted by both lead bidder and consortium member in case of consortium)

[On the letterhead of the Statutory Auditor]

We hereby certify the net worth of M/s____________________ (name of the bidder) as per balance sheet of last three years are as given below:

<table>
<thead>
<tr>
<th>Particular</th>
<th>Year 1 (&lt;&gt;</th>
<th>Year 2 (&lt;&gt;</th>
<th>Year 3 (&lt;&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paid Up Share Capital (A)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Free Reserves after deducting accumulated losses/ fictitious assets (B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total (A+B)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Signature of Statutory Auditor)
Name of Statutory Auditor:
Name of Statutory Auditor Firm:
Seal of Statutory Auditor Firm:
Form 8: Format for providing no default for statutory and liability payments

[On the letterhead of the organization]

This is to certify that ---------------------- (name of the organization), having registered office at ---------------------- (address of the registered office), should not have any undisputed statutory liability outstanding for more than 6 months from the date such dues had become payable for payment as on date of submission of the bid.

Dated:
Signature:
Name of the Authorized Signatory:
Name of the Bidder:
Seal of the Bidder:

Form 9: Format for experience of bidder in managing call centre operations

Project Title:
(Attach separate sheet for each project)

<table>
<thead>
<tr>
<th>Name and type (Government / Private) of client:</th>
<th>Approximate value of services provided:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>Referrals (Client side):</td>
</tr>
<tr>
<td></td>
<td>Name:</td>
</tr>
<tr>
<td></td>
<td>Designation:</td>
</tr>
<tr>
<td></td>
<td>Role in the project:</td>
</tr>
<tr>
<td></td>
<td>Contact number:</td>
</tr>
<tr>
<td></td>
<td>Email Id:</td>
</tr>
</tbody>
</table>

Start Date (month / year):
End Date (month / year):
Status of the assignment (successfully implemented, complemented, ongoing, under support / maintenance phase):

Number of seats provided by the bidder:
Number of resources deployed by the bidder:
Number of call centre agents deployed by the bidder:

Narrative description of project: (in not more than 500 words)

Description of actual services provided by your staff within the assignment: (in not more than 500 words)

Form 10: No blacklisting certificate

[On the letterhead of the organization]
This is to certify that ------------------------ (name of the organization), having registered office at ------------------------ (address of the registered office), as on date of submission of the bid, is not blacklisted by any Government entity/ PSU in India.

In case our organisation get blacklisted by any Government entity, even during contract period, we will inform the same to the State /UT in writing within 15 days.

Date:
Signature:
Name of the Authorized Signatory:
Name of the Bidder:
Seal of the Bidder:

Form 11: Non termination certificate

[On the letterhead of the organization]

This is to certify that ------------------------ (name of the organization), having registered office at ------------------------ (address of the registered office), as on date of submission of the bid, has not withdrawn and nor have been terminated from similar government projects with Government entities on account of non-performance in the last 3 years from the date of submission of the bid.

Date:
Signature:
Name of the Authorized Signatory:
Name of the Bidder:
Seal of the Bidder:

Form 12: Format for bank guarantee for EMD

Whereas ________________________________________(hereinafter called “the bidder") has submitted its bid offer dated __________ for Request for Proposal (RFP) for “Selection of Call centre Service Provider (ESP)” (hereinafter called “the bid") KNOW ALL MEN by these presents that WE __{Bank name}__ having head office at __{ head office Address}__ (hereinafter called “the Bank”) are bound upto __{date till bid validity}__ to Department of <> , Government of <> (hereinafter called “Department”) in the sum of Rs <>/- (Rupees, in word) for which payment will and truly to be made to the Department the Bank binds itself, its successors and assigns by these presents. Sealed with the common seal of the said Bank this __________ day of __________20<>.

THE CONDITIONS of this obligation are:

If the bidder withdraws its bid during the period of bid validity specified by the bidder on the bid; or if the bidder, having been notified of the acceptance of its bid by State / UT
during the period of bid validity: fails or refuses to execute the contract / work order if required; or fails or refuses to furnish the Performance Bank Guarantee, in accordance with the instruction given in Request for Proposal; we undertake to pay the State / UT up to the above amount upon receipt of its first written demand, without the State / UT having to substantiate its demand, provided that in its demand the State / UT will note that the amount claimed by it is due it owing to the occurrence of one or both of the two conditions, specifying the occurred condition or conditions. This guarantee will remain in force up to and including and any demand in respect thereof should reach the Bank not later than the above date.

Date:
Place:
(Signature/ seal of the Bank)

3. ANNEXURE 3: SERVICE LEVEL AGREEMENTS AND PENALTIES
   (Indicative – To be detailed by the State)

3.1. Service Level Agreements (SLAs)

3.1.1. For measuring the compliance of the project to the envisaged requirement, certain Service Level Agreements (SLAs) related to expected levels of service (i.e. baseline service level) must be ensured by the ESP. Payment to the ESP may be linked to the SLA metrics defined in the RFP based on the requirement of the project.

3.1.2. The SLAs may consist of some parameters for ensuring the desired performance level of the project and may be summarized in a metrics with clearly defined measurable methodology. Below is a sample SLA which may be referred by the State / UT while preparing their own RFP.

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Metric</th>
<th>Weightage (in % out of 100)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Beneficiaries Contacted</td>
<td>A%</td>
</tr>
<tr>
<td>i.</td>
<td>Percentage of beneficiaries validated in a defined periodicity by Agents for calling.</td>
<td></td>
</tr>
<tr>
<td>ii.</td>
<td>Percentage of beneficiaries contacted in a defined periodicity by ANMs, counsellor and Medical Specialist (or cluster wise) for counselling.</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Question bank / content creation</td>
<td>B%</td>
</tr>
<tr>
<td>i.</td>
<td>Creation of standard question bank and revised question response in case of any additional query.</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Availability</td>
<td>C%</td>
</tr>
<tr>
<td>i.</td>
<td>Project application uptime (% of time for which the project application was available during the operational</td>
<td></td>
</tr>
</tbody>
</table>
hours excluding scheduled maintenance as agreed by State / UT, if any). It will be total cumulative uptime of application and calculated as ‘Total uptime of application in minutes ÷ Total minutes of operations in a day’.

| ii. Percentage availability of manpower: SLA will be calculated based on the number of resource persons present against the number of days of presence required for the resource persons on site. |

4. Feedback on call centre performance D%
   i. SLA will be calculated based on the feedback received / ascertained about the performance.
   ii. Reports / statistical analysis of data individual wise, team-wise, district wise, module wise, etc.

5. Key call centre parameters E%
   i. Average call handling time (including talk time as well as time on which the call was on hold). SLA will be monitored based on the Average Handling Time (AHT) of the project.
   ii. Agent occupancy rate: The SLA will be monitored based on the time that the Call centre Agents spend on actual calling. The unit of measurement for this metric is percent average time in minutes spent by all Call centre Agents per hour speaking on calls.
   iii. Quality ratings of calls
   iv. Voice recordings / CCTV recordings/ Access card details
   v. Ratings based on feedback and sentiment analysis, (if any)

The ESP will get lesser payment in case of a lower performance on any defined parameter. The aforementioned SLA parameters shall be measured on periodic basis as per the SLA parameter requirements, through appropriate SLA measurement tools.

3.2. Penalties
3.2.1. ESP will attract penalties in case of delay in completion of assigned activities. Penalties applicable for delay per < week / day> in completion of the following indicative activities will be:
   a) N1% of <periodic> payment for failing to ensure average minimum <> hours of actual calling per < week / days> per Call centre Agent / Medical Specialist.
b) N2% of <periodic> payment for failing to ensure audio recordings of the calls as per contract / work order.

c) N3% of <periodic> payment for failing to ensure adequate training of resource persons on <monthly / quarterly> basis.

d) N3% of <One Time Cost> payment for delay in go-Live of the project

**Note:** State / UT needs to define the value of N1, N2, N3 etc. based on the severity of each failure.

## 4. ANNEXURE 4: MANPOWER REQUIREMENT FOR PROJECT

*(Indicative – To be finalised by the State)*

<table>
<thead>
<tr>
<th>Manpower requirement</th>
<th>Eligibility criteria</th>
<th>Roles and responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Operational Resources</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Call centre Agents (English &amp; Hindi)</td>
<td>✓ At least Graduate ✓ Should have minimum 1 year of experience in call centre ✓ Should have excellent communication skills in Hindi and English ✓ Should be below 40 years of age</td>
<td>• Will be responsible for resolution of inbound / outbound calls as per workflow • Will be responsible for validation of records &amp; registration of beneficiaries • Will assist in resolution of queries • Will be responsible for transferring the calls of beneficiaries to ANMs, Counsellors, Medical Specialist etc.</td>
</tr>
<tr>
<td>ANMs</td>
<td>✓ At least Graduate ANM with minimum 2 years of experience ✓ Should have excellent communication skills in Hindi and English ✓ Should be below 40 years of age</td>
<td>• Will be responsible for resolution of inbound / outbound calls as per workflow • Will be responsible for transferring the calls of beneficiaries to Counsellors, Medical Specialist etc.</td>
</tr>
<tr>
<td>Counsellor</td>
<td>✓ At least Graduate in social sciences or equivalent with minimum 1 years of counselling experience</td>
<td>• Will be responsible for resolution of inbound / outbound calls as per workflow • Will be responsible for transferring the calls of beneficiaries to Counsellors, Medical Specialist etc.</td>
</tr>
</tbody>
</table>
Manpower requirement | Eligibility criteria | Roles and responsibilities
--- | --- | ---
✓ Should have excellent communication skills | • Will be present on the floor during the operating hours to provide the necessary medical assistance required for addressing queries of the callers/beneficiaries | 
✓ Should be below 40 years of age | • Will be responsible for providing medical expertise to formulate responses to health queries posed by callers/beneficiaries | 
Medical Specialist | ✓ At least MBBS degree with minimum 2 years of work experience | • Will evaluate the quality of health advice offered to the callers/beneficiaries by Call centre Agents based on the knowledge/question bank. | 
✓ Should be eligible for practicing in India and registered with MCI | | 
✓ Should be below 65 years of age | | 
✓ Technical Resources | ✓ At least BE / B Tech / MCA with minimum 3 years of experience in IT with atleast 1 year of experience in relevant field in call centre solution as per their profile | • Will be responsible for assessment of the functional requirements of State/UT and translate the same into technical requirements for the project. Further, also provide technical inputs to State/UT | 
✓ Should be below 40 years of age | • Will be responsible for development of project solution and changes in the application including updation of forms and questionnaire | 
Application Developers (software developer/tester/, etc.) / Database Administrator /Business Analyst | | • Will be responsible for resolution, up-gradation and bug fixing of technical issues |

5. ANNEXURE 5: FINANCIAL FORMAT
(Indicative – To be finalised by the State)
This annexure presents the methodology for calculation of ‘Lowest Financial Quote (FL)’ which would be used for the purpose of award of work order/signing of contract of the technically qualified bidders. The numbers used herein for resource persons, man-months etc. are only for the purpose of evaluation and may not depict the actual
requirement of the State / UT as the same may vary during the operation phase of the project.

**Financial Cost Operational**

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Resource Type</th>
<th>Unit rate per month (Rs) (A)</th>
<th>Number of resources (B)</th>
<th>Number of months (C)</th>
<th>Amount (Rs) (D) = A X B X C</th>
<th>Taxes (Rs) (E)</th>
<th>Total Cost (Rs) (F) = D + E</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Call centre Agents (Hindi and English or regional language)</td>
<td>To be provided by the State / UT before publishing RFP</td>
<td>To be provided by the State / UT before publishing RFP</td>
<td></td>
<td></td>
<td></td>
<td>F1</td>
</tr>
<tr>
<td>2.</td>
<td>ANM Nurse</td>
<td>To be provided by the State / UT before publishing RFP</td>
<td>To be provided by the State / UT before publishing RFP</td>
<td></td>
<td></td>
<td></td>
<td>F2</td>
</tr>
<tr>
<td>3.</td>
<td>Medical Specialist</td>
<td>To be provided by the State / UT before publishing RFP</td>
<td>To be provided by the State / UT before publishing RFP</td>
<td></td>
<td></td>
<td></td>
<td>F3</td>
</tr>
<tr>
<td>4.</td>
<td>Counsellor</td>
<td>To be provided by the State / UT before publishing RFP</td>
<td>To be provided by the State / UT before publishing RFP</td>
<td></td>
<td></td>
<td></td>
<td>F4</td>
</tr>
</tbody>
</table>
5. Project Manager

To be provided by the State / UT before publishing RFP

6. **ANNEXURE 6: PROJECT PRICE**

Project Price would be calculated based on the following formula:

\[
P = (F_O + F_A) + FL \times (1+r\%) + FL \times (1+r\%)^2 + \ldots + T \times (1+r\%)^n
\]

Where:

- FL and FA are the Financial Quote (FL) derived in the Annexure 5 of this RFP.
- \( r \): is the percentage annual increase on the previous year price (and the same will be defined by the State / UT. The value of \( r \) is generally from 5% to 15% in case of manpower)
SECTION C: TECHNICAL GUIDELINES TO ASSIST ECD CALL CENTRE
Technical Guidelines to assist ECD Call centre
पहला कॉल : विषय परिचय

शुरूआत : नमस्कार मेरा नाम.................................................................है, मैं भारत सरकार/राजस्थान सरकार के स्वास्थ्य मंत्रालय के अंतर्गत राष्ट्रीय बाल स्वास्थ्य कार्यक्रम से बात कर रही हूं, ये कॉल गर्मवती महिला/नवजात शिशु के स्वास्थ्य से संबंधित जानकारी के लिए की जा रही है।

समापन : आपका कीमती समय देने के लिए धन्यवाद, आशा करते हैं आपका परिवार सदा स्वस्थ्य रहे।

हॉल्ड : क्या मैं आपका कॉल को कुछ समय के लिए हॉल्ड पे रख सकती हूं ताकि इस विषय से संबंधित आपको सारी जानकारी दीया जा सके।

ऑनहॉल्ड : कॉल पर बने रहने के लिए आपका धन्यवाद।

पहला कॉल : विषय परिचय

शुरूआत : नमस्कार मेरा नाम.................................................................है, मैं डॉ ............................................................ मैं भारत सरकार/राजस्थान सरकार के स्वास्थ्य मंत्रालय के अंतर्गत राष्ट्रीय बाल स्वास्थ्य कार्यक्रम से बात कर रहा हूं। ये कॉल गर्मवती महिला/नवजात शिशु के स्वास्थ्य से संबंधित जानकारी के लिए की जा रही है।

समापन : आपका कीमती समय देने के लिए धन्यवाद, आशा करते हैं आपका परिवार सदा स्वस्थ्य रहे।

हॉल्ड : क्या मैं आपका कॉल को कुछ समय के लिए हॉल्ड पे रख सकती हूं ताकि इस विषय से संबंधित आपको सारी जानकारी दीया जा सके।

ऑनहॉल्ड : कॉल पर बने रहने के लिए आपका धन्यवाद।
पहला कॉल: विषय परिचय
बधाई हो आप माँ बनने वाली है, अगले 9 महीने के यात्रा में आपका स्वागत हैं, हमें ये पता है कि यह क्षण आपके जीवन में बहुत ही महत्वपूर्ण है और कई बार इसको लेकर आप चिंतित भी रहती होगी और इस अवस्था में आप वे बदलाव से आप घबराती भी होगी, आप अपने मित्रों व परिजनों से सलाह भी लेती होगी और कई बार आप सोच में पड़ जाती होगी कि इस सलाह पर विश्वास किया जाए या नहीं। हमारा लक्ष्य है कि हम आपको सही परामर्श देकर आपकी सहायता करे और आपको चिंता से मुक्त करे ताकि आपका होने वाला बच्चा एक उज्ज्वल भविष्य की ओर पहला कदम बढ़ा सके।

बच्चा आपका सपना है, सभी माता पिता की तरह, आप भी चाहेंगे कि आपका बच्चा आप से भी जीवन में बहुत बेहतर करे। बच्चा आपका भविष्य है, आपकी आशा है। यदि आप चाहते हैं कि आपका सपना सच हो, तो आपको यह विश्वास करने की आवश्यकता है कि आप इसे कर सकते हैं, यह आपके और आपके परिवार के हाथ में है। लेकिन आपको उस महत्वपूर्ण अवसर के बारे में जानना होगा जिसमें आपको बच्चे के विभाग का 90 प्रतिशत हिस्सा बनता है। यह अवधि आपकी गर्भवती के 9 महीने और आपके बच्चे के जीवन के पहले दो साल है, यानी पहले 1000 दिन।

क्या आप हमें सुनना पसंद करेगी। क्या आप चाहेंगे कि समय-समय पर हम आपको यह दिलाते रहे कि आप ऐसा क्या कर सकती है जिससे आप अपने बच्चे के उज्ज्वल भविष्य के लिए मदद कर सकती है, कोई ऐसा व्यक्ति जिससे आप बात कर सके और वो आपके दुःखों एवं परेशानियों से आपको राहत दे सके, अगर आप ऐसा चाहते हैं तो आप बताए, हम आपका फोन नंबर रजिस्टर करेंगे और नियमित अंतराल पर हम आप से संपर्क बनायेंगे, जब तक आपका बच्चा 2 साल का नहीं हो जाता है।
जीवन के प्रथम हजार दिन हैं आपके बच्चे के लिए सबसे खास! यह वही समय है जब आपके बच्चे का शारीरिक एवं मानसिक विकास बहुत तेजी से होता है। यह समय प्रत्येक मां एवं बच्चे के लिए सूचना भविष्य का आधार बनाने का एक अवसर है जो बीतने पर वापस नहीं आता। इसलिए इन हजार दिनों में आपको अपने बच्चे का रखना है उदाहरण ध्यान। हजार दिनों से ताल्पर्व है गर्भावस्था के 9 महीनों या 270 दिन एवं जन्म से 2 साल बाद 730 दिन।

कुल 1000 दिन और इसकी यात्रा हमारे सुझावों और आपके कार्यान्वयन के साथ पहले 1000 दिनों की कुल यात्रा। हमें इस यात्रा में साथ चलने की जरूरत है।

क्यों हैं ये 1000 दिन खास?
क्योंकि इन हजार दिनों में बच्चे का दिमाग सबसे तेजी से विकसित होता है। लगभग 8600 करोड़ न्युरोन या मस्तिष्क के तार, गर्भावस्था के इस 9 महीनों या 270 दिनों में बनते हैं। मस्तिष्क की तारों की संख्या को समझने के लिए यह सोंच सकते हैं कि इस देश की आबादी का यह 86 गुना है और यह आपके बच्चे की बुद्धिमत्ता का आधार है। गर्भावस्था के 40 सप्ताह में से 39 सप्ताह इन तारों के विकास के लिए समर्पित हैं। उनके विकास के लिए मां को आरम्भ करने, रात को अच्छी नींद लेने, तनाव से बचने, भरपूर पानी, मौसमी फल और हरी सब्जियाँ लेने की आवश्यकता होती है।

जन्म के समय बच्चे के दिमाग का आयतन एक वयस्क के मुकाबले केवल मात्र 20-25 प्रतिशत होता है लेकिन एक साल में बढ़कर यह 72 प्रतिशत और 2 साल में यह 83-85 प्रतिशत तक होता है।

कुछ ऐसी बातें हैं जिनका सम्पूर्ण गर्भावस्था में रखना है ध्यान।
गर्भावस्था के 9 महीनों को तीन तिमाही में बांटा जा सकता है, जिनमें से प्रत्येक तिमाही में, आपके विशिष्ट बदलाव होता है और आपके गर्भ में पल रहे शिशु का विकास भी हो रहा होता।
हाँ, इस पूरे अन्वेषण के दौरान, यह महत्वपूर्ण है कि अपने डॉक्टर/स्वास्थ्य कर्मी से परामर्श करे और अपने स्वास्थ्य का ध्यान रखे।

1. तनाव से बचें।
   जो महिलाएं गर्भवती के दौरान बहुत तनाव में रहती हैं, उनमें असमय डिलीवरी का जोखिम 25-60 प्रतिशत अधिक होता है। बच्चा का वजन कम हो सकता है। कम वजन वाले बच्चों में विकास के मौल्न का खतरा बढ़ जाता है। घर वालों से साझा करे कि वे गर्भवती महिलाओं के साथ झगड़ा न करें, बल्कि ही उस्ने गलती की हो। जब आप किसी गर्भवती महिला पर उसकी गलतियों की ओर इशारा करते हैं, तो आप वास्तव में माँ के अंदर के निर्देश शिशु पर गुस्सा दिखा रहे हैं, यह परामर्श की जिम्मेदारी बनती है कि बुरी खबर को रोका जाए और गर्भवती महिला तक न पहुँचे।

2. गर्भवती की पुष्टि अभी तक अपने कर ली होगी। महावारी (पीपिरियड) का न आना गर्भवती का एक आम संकेत है। पुष्टि के लिए गर्भवती जॉच कार्ड का उपयोग करें। एक बार गर्भवती की पुष्टि हो जाने पर एनएम डी के पास पंजीकरण करवाएं।

3. बच्चे के जन्म की तिथि का अनुमान आपने कर ली होगी। गर्भवती लगभग 280 दिनों की होती है। आपका बच्चा कब पैदा होगा वाला है, यह जानने के लिए, वह तिथि जब आपका अंतिम मासिक शुरु हुआ जैसे अक्टूबर 10, 2018, उसमें सात रोज जोड़े लें या उसके आगे के 7 दिन गिनें, अब यह अक्टूबर 17, 2018 हुआ। इससे बाद तीन महीने पीछे जाएं अब यह जुलाई 17, 2018, अंत में एक वर्ष जोड़े और आप पहुँच जाएंगे बच्चे के जन्म की अनुमानित तारीख अब यह जुलाई 17, 2019। यदि रखें कि अनुमानित तिथि हमेशा एक अनुमान होती है।
   बच्चे आमतौर पर अनुमानित तिथि के 1-2 सप्ताह के भीतर पैदा होते हैं। कृपया इसे अपने कैलेंडर में साधनीपूर्वक अकिंत करें।

4. क्या आप एक बच्चे के लिंग का चयन कर सकते हैं? क्या गर्भ में लिंग बदलने के लिए कोई दवा या उपचार गौरव है? क्या मां एक लड़की या लड़के को जन्म देने के लिए जिम्मेदार है?
   नहीं, आप किसी बच्चे के लिंग का चयन नहीं कर सकते। बल्कि ही पिता बच्चे के लिंग को निर्धारित करता है, लेकिन पिता का इस पर कोई नियंत्रण नहीं होता। पिताओं के हजारों शुक्राणुओं में से कोई सा माँ के अंडाणु को निर्धारित करेगा, इसका निर्णय, माता या पिता, कोई नहीं कर सकता। ऐसी कोई दवाएं या उपचार नहीं हैं, जो आपके बच्चे के लिंग को बदल सकती हैं। ऐसी कोई भी दवाइयां, जो ऐसा करने का दावा करती हैं, वो वास्तविकता में बच्चे के मस्तिष्क एवं अन्य अंगों को नुकसान पहुँचाए हैं। इनसे बचें।

5. कई बार नवजात शिशु विभिन्न जन्म दोषों के साथ पैदा होते हैं, माता पिता के रूप में उन्हें कैसे रोक सकता हूं?
   • हानिकारक रसायनों एवं विशाल पदार्थों से बचें।
6. गर्भवती महिला के लिए खाने पाने एवं खाना पकाने संबंधी सलाह:
• गर्भधारण के लिए सही एवं सतीक मात्रा में भोजन आवश्यक है।
• गर्भ में मौजूद बच्चा, शारीरिक, मानसिक और भावनात्मक रूप से मां पर निर्भर होता है। इसलिए, गर्भवती होने से पहले भी, मां की पौष्टिक स्थिति, शिशु के प्रारंभिक विकास के लिए महत्वपूर्ण होती है।
• मां को 2 व्यक्तियों के लिए खाने की आवश्यकता नहीं है। आमतौर पर लोग कहते हैं कि मां को अपने लिए और अपने अंदर के विकासशील बच्चे के लिए खाना है। लेकिन उसे मुख्य रूप से भोजन की गुणवत्ता पर ध्यान देने की आवश्यकता है, जैसे अपने भोजन में गौरस्मी फल, हरी सब्जियाँ, बाजरा आदि शामिल करें। प्रतिदिन कम से कम 10 गिलास पानी का सेवन करें।
• प्रतिदिन तीन बार भोजन लें और 2-3 बार हल्का नाश्ता करें।
• भोजन में चीनी और नमक की मात्रा कम रखें।
• सुनिश्चित करें कि मां के भोजन में प्रत्येक पोषक समूह में से एक शामिल हो।--अनाज (गेहूं, चावल, रागी, बाजरा, ज्वार), दूध एवं दुध उत्पाद, सब्जियाँ एवं फल, मछली/मांस या सोयाबीन/मशरूम/दाल, में से प्रत्येक प्रकार का भोजन लें।
• आपके आहार में ओमेगा 3 एवं ओमेगा 6 कैफी एसिड की पर्याप्त मात्रा शिशु के प्रारंभिक मानसिक विकास के लिए महत्वपूर्ण होती है।
• इसे सुनिश्चित करें कि किसी एक तेल के साथ खाना पकाने के बजाय पहले दो अलग अलग प्रकार के तेल का मिश्रण करें और फिर मिलिट मिश्रण के साथ खाना पकाए जो शिशु के लिए बेहतर होता है। उदाहरण के लिए सरसों के तेल एवं चावल की भूसी के तेल का मिश्रण या फिर सरसों के तेल एवं मूंगफली तेल का मिश्रण।
• खाना पकाने के बाद ही आयोडीनियुक्त नमक डालें या पकाते समय आवश्यक में डालें।
• आयोडीन गुक्त नमक को एक एयर टाइट कंटेनर में रखें क्योंकि खाना पकाने के दौरान चूले से निकलती सीधी गर्मी नमक के भीतर का आयोडीन नष्ट कर देती है विशेष रूप से अगर नमक की शीशी पास में रखी हो। इसलिए नमक की शीशी को चूले से दूर रखें।
• साथी तरीकों से खाना पकाने की विधि न मानने पर आयोडीन की हानि 70 प्रतिशत तक हो सकती है। उदाहरण के लिए जब आप प्रेशर कुकर में पहले नमक डालते हैं तो आयोडीन की अधिकतम हानि होती है।
• यदि रखें। माताओं के गर्भ में पल रहे शिशु के मस्तिष्क के विकास के लिए आयोडीन बेहद जरूरी है।
• आयोडीन की दैनिक आवश्यकता को पूरा करने के लिए – 1 चमच आयोडीनियुक्त नमक प्रतिदिन लें। 2 गिलास दूध/2 कटोरी दही/2 उबले हुए अंडे, साथ में एक कटोरी पालक प्रति दिन लें।
7. व्यायाम का महत्व, व्यायाम संबंधी सलाह:
आपको अपनी रुद्रियों एवं डॉक्टर की सलाह के आधार पर व्यायाम करने की कोशिश करनी चाहिए। प्रतिदिन 30 मिनट योग, तैराकी एवं ट्यूलने जैसे व्यायाम गर्भवती महिला के लिए लाभदायक होते हैं। आप पार्क में 5-मिनट ट्यूलने से शुरू कर सकते हैं। यदि आप अच्छा महसूस करते हैं तो इसे बिना थोड़े-धीरे तीस मिनट तक बढ़ाया जा सकता है।
8. आराम का महत्व, आराम संबंधी सलाह:
गर्भवती महिला को गर्भवस्था के प्रारंभ में ही करवट लेकर सोने की आदत ढाल लेनी चाहिए।
करवट लेकर सोने से बच्चे के हृदय में रक्त प्रवाह आसान हो जाता है। तीसरी तिमाही में घुटनों
को हलका सा मोड़कर करवट लेकर लेटना मां के लिए सबसे आरामदायक होता है। रात में 8
घंटे की नींद लें और दिन के दौरान कम से कम 2 घंटे आराम करें। अपनी बाहीं करवट पर
लें, क्योंकि इससे गर्भ में पलने वाले शिशु का रक्त प्रवाह बनाये रखने में मदद करता है।
कई महत्व, जैसे भारी वजन उठाने से बचें। अपने आप को ज्यादा न थकाएं और कुछ कार्य
दूसरों को करने दें। जब भी संभव हो, दोपहर में एक हल्की सी झपकी ले लें।

9. दौँत संबंधी स्वास्थ्य:
मसूदों एवं दांतों के रोगों से पीड़ित गर्भवती महिलाओं में समय से पहले या कम वजन वाले
बच्चे को जन्म देने का जोखिम अधिक होता है। इसलिए दांतों की जांच कराएं pregnancy
के दौरान। सुबह एवं रात को सोने से पहले – दिन में दो बार कम से कम 2 मिनट के लिए
अपने दांतों को नियमित रूप से ब्रश करके अपने दांतों के स्वास्थ्य को बेहतर बनाएं। यदि आप
मसूदों एवं दांतों की बीमारी से पीड़ित हैं, तो अपने दौँतों के स्वास्थ्य पर ध्यान दें और डॉक्टर
से सलाह लें।

10. मानसिक व भावनात्मक स्वास्थ्य:
घरेलू हिंसा का विरोध करें
आपके गर्भ में पलने वाले शिशु के मर्यादक पर नकारात्मक प्रभाव ढाल सकता है। इससे बचें।

11. प्लेएव्र ब्रिज की अवधारणा:
वैज्ञानिकों ने पाया है कि बच्चे उन खाद्य पदार्थों को ज्यादा पसंद करते हैं, जो उनकी मां ने
स्वयं खाना खाया था, क्योंकि उस खाने की खुशशुंग कोख में पनपते हुए बच्चे के दिमाग पर एक
न मिटने वाली पहचान बना लेती है, इसी कम में आगे चल कर स्वस्थ पान करते बचत भी ऐसा
देखा जा सकता है। जैसे गर्भवस्था के दौरान हरी सहजियों का उपयोग करें जो गोठ में पनपते
हुए बच्चे को स्वाद प्राप्त करते में मदद करता है और बाद के जीवन में वह उन्हें आसानी से
स्वीकार करता है। गर्भवस्था के दौरान विभिन्न आवश्यक पोषक तत्त्वों से गुप्त कई प्रकार के
खाद्य पदार्थ खाएं, ताकि आपका बच्चा बाद में उन्हें अपना सके और सब तरह का भोजन खाए।
इससे यह भी सुनिश्चित होगा कि विकास के सभी चरणों में आपका बच्चा स्वस्थ रहेगा।

12. मोबाइल फोन का न्यूनतम उपयोग:
मोबाइल फोन को अपने शरीर के संपर्क में लाने, और अपने पेट या पेट के आस पास रखने से
परेहज करें। जकसी पड़ने पर स्पीकर पर बात करें। मोबाइल फोन का विकिरण आपके शिशु
को गर्भ में प्रतिकूल रूप से प्रभावित कर सकता है।
13. कल्पना में अपने बच्चे को देखने एवं समझने की कोशिश करें:
पहले तीन महीने में:
पहली तिमाही आपके बच्चे के लिए तीव्र वृद्धि और विकास का समय है। इस अवसर में, आपके
बच्चे की शारीरिक संरचना एवं अंग विकसित होने शुरू हो गए हैं। दिल धड़कने लगा है। चेहरे
की बनावट उभर आती है। नाक और बाहरी कान बन जाते हैं। बच्चा हलचल करना शुरू कर
dेता है पर अभी आपको यह महसूस नहीं होता। अब आप इसकी कल्पना कर सकती हैं और
अपने गर्भाशय में पल रहे बच्चे को महसूस कर सकते हैं।

14. इस अवसर में किए जाने वाले कुछ महत्वपूर्ण जोँच:
• अपने खून में आरएच फेक्टर, सिक्वेंस (उपर्दश) एचआईवी, हेपेटाइटिस बी, थायरोइड, मलेशिया,
  भैलेसिमिया और सिकल सेल एनिमिया सहित हीमोग्लोबिन एवं रक्त समूह की जाँच कराएं।
• मधुमेह की जोँच या ग्लुकोज टॉलरेंस परीक्षण अवश्य किया जाना चाहिए। ग्लुकोज टॉलरेंस
  परीक्षण के लिये 300 मिली जाने में 75 ग्राम ग्लुकोज घोलकर पिएं और 2 घंटे के बाद खून की
  जोँच कराएं। यदि खून में ग्लुकोज 140 मिलीग्राम या उससे अधिक हो, तो टूर्ना डाक्टर से
  परामर्श करें।
• नियमित रूप से ब्लड प्रेशर एवं वजन की जाँच कराएं।

15. गर्भवत्स्था की पहली तिमाही के दौरान सामान्य समस्याएँ:
• उलटी एवं मतली रुखदे आपकी मतली का अनुभव हो रहा हो तो, यह होमिनों में बदलाव के
  कारण हो सकता है। कुछ गंभीर और चलने—फिरने से भी अवरुद्धता रह जाती है। अच्छी
  खबर यह है कि आमिर पर पहली तिमाही के बाद मतली बंद हो जांती है।
  • खाली पेट रहने से बचें।
  • खूब ताजी हवा में रहें।
  • लाज करें नींद की गंध लेने की कोशिश करें।
• इस समय बहुत सी महिलाएं थकान का अनुभव करती हैं। आपका शरीर इस समय बच्चे के
  लिए एक घर (लेसेंटा) का निर्माण कर रहा है। यह कठिन काम है। इसमें आपकी बहुत सी
  ऊर्जा खर्च होती है। यदि आपका थकान और मतली का अनुभव होता है तो अच्छी तरह मानें
  और अच्छी नींद लें।

आशा है आप हमारे द्वारा बताये सुझाव को अपना कर अपने बच्चे के भविष्य निर्माण में मदद
करेंगी। अगले मह की जानकारी आपको अगले मह के शुरुआत में देने के लिए में पुनः कॉल
करूंगी। धन्यवाद।

तीसरा कॉल : प्रथम तिमाही का तीसरा मह
नमस्कार में डॉ. ..............आपके बच्चे के जीवन के प्रथम हजार दिनों की सलाहकार बौल रही
हूं, कैसी है आप?
अब सबसे पहले आपके अनुरोध है की अपना फोन स्पीकर मोड में एवं परिवार के अन्य सदस्यों
को भी इस महत्वपूर्ण जानकारी को सुनाएं जिससे यो आपकी इस जीवन के प्रथम हजार दिन
की यात्रा को आसान बनाने में आपकी मदद कर सकें।

उम्मीद है कि जीवन के प्रथम 1000 दिनों के महत्व को समझते हुए हमारे द्वारा बताये सलाह
का गर्भवत्स्थिता के प्रथम विमानी में आप उसका अनुरोध कर रही हैं। आशा है अपने गर्भवत्स्थिता
के इन दिनों को आप, खुशी-खुशी बिता रही होंगी और इसमें आपके परिवार का पूरा सहयोग
मिल रहा होगा। आपका खुश रहना और तनाव मुक्त रहना, आपका अच्छा पौष्टिक आहार, साफ
सफाई का ख्याल, दाताओं एवं मसूदों का ख्याल, उद्धित व्यायाम एवं आराम, एक गोली आइसन
एवं फॉटिक एरिस्ट की रोज, आपके बच्चे के लिए इस समय है सबसे खास। साथ ही हमें
उम्मीद है कि आप के अनुमान अपना पत्रीकोरण अपने नजदीकी स्वास्थ्य केंद्र की ए एन एम
दीदी के पास कर लिया होगा एवं गर्भवत्स्थिता की पहली स्वास्थ्य जैच भी करा ली होंगी तथा
साथ में आपना बजन, बाल प्रेशर और आपने खुन में आहर फैक्टर, सिफिलिस, एसथ्रा, क्षेत्रीय,
हेपेटाइटिस ए, थायरॉइड, मलरिया, थाळेसीमिया और सिकल सेल एनीमिया सहित हीमोग्लोबिन
एवं रक्त समूह की जांच के साथ साथ मधुमेह की जांच करा ली होंगी। साथ ही उम्मीद है की
अभी तक आपके टेस्टिंग के दोनों डोज लगा लिये हैं।

अब यह समय आ गया है की आपको अपना गर्भवत्स्थिता स्वास्थ्य जैच कैम्पेनियन (साधी) चुनना
है जो आपके पुरे गर्भकाल एवं प्रसव के बाद तक की आपकी स्वास्थ्य जैच की जिम्मेदारी
निभायेगा।

आपकी सुचिवा के लिए, में आपके और आपके बच्छों के स्वास्थ्य के हित में अनुरोध करने के
लिए प्रमुख संदेश दोहराना चाहूँगी:

1. मधुमेह की पहचान होने पर तुरंत इसका अपचार करें।
2. बाल प्रेशर बढ़े होने पर तुरंत इसका उपचार करें।
3. धूम्र द्राक्ष और कैफोन से बचें।
4. नियमित हल्के पीढ़े के व्यायाम करें, जैसे कि पैदल चलना या टैक्स।
5. अत्यधिक गर्मी से बचें। आग के करेब लंबे समय तक न बैठें।
6. दंत चिकित्सक द्वारा अपने दाताओं एवं मसूदों की स्वच्छता की जांच करवाएं।
7. गर्भवत्स्थिता के दौरान बिल्डियों के संपर्क से बचें और अघपकों या बासी (संक्रमित) मास के सेवन
से बचें।
8. अपने हाथ को साफ रखें। खाना बनाने एवं खाने के पहले एवं बाद में, शौचालय के प्रयोग करने
के बाद, काम से घर वापस लौटने पर अपने हाथ जरूर साफ बनाने से ठगें।
9. पन्त, सास एवं परिवार के अन्य सदस्यों से घर के छोटे बड़े कार्यों में एवं भावनात्मक सहयोग
अपेक्षित है।
10. मोबाइल फोन को रखें अपने से दूर। अगर बात करना हो जससी तो स्पीकर फोन का प्रयोग
करें।
इस अवधि में, आपके बच्चे की शारीरिक संरचना एवं अंग विकसित होने शुरू हो गए हैं। दिल धड़कने लगा है। बच्चे की बनावट उमर आई है। नाक और बाहरी कान बन गये हैं। बच्चे ने हलचल करना शुरू कर दिया है पर अभी आपको यह महसूस नहीं होता। अब आप इसकी कल्पना कर सकती हैं और अपने गर्भावस्था में पल रहे बच्चे की अनूठीति कर सकती है।

अंत में अगर आपका आपकी गर्भावस्था से सम्बंधित कोई समस्या या कोई प्रश्न है तो उसकी चर्चा कर सकती हैं। मुझे आपकी मदद कर हार्दिक प्रसन्नता होगी।

आशा है आप हमारे द्वारा बताये सुझाव को अमल में लेकर अपने बच्छे के भविष्य निर्माण के मदद करेंगी। अगले माह आपका हालचाल एवं आप की जानकारी देने के लिये पुनः कॉल करेंगी। धनयवाद!

चौथा कॉल : दूसरा तिमाही का चौथा माह/पंचवा माह/छठा माह

नमस्कार मे डी... ……………..आपके बच्छे के जीवन के प्रथम हजार दिनों की सलाहकार बोल रही हैं, कैसी है आप?

गर्भावस्था के प्रथम तिमाही को सफलता पूर्वक पार करने के लिये आपको बधाई! उम्मीद है कि जीवन के प्रथम 1000 दिनों के महत्व को समझते हुए हमारे द्वारा बताये सलाह का गर्भावस्था के प्रथम तिमाही में आप उसका अनुसरण कर रही हैं। आशा है अपने गर्भावस्था के इन दिनों को आप खुशी—खुशी बिता रही होंगी और इसमें आपके परिवार का पूरा सहयोग मिल रहा होगा। अब आप गर्भावस्था के दूसरी तिमाही में प्रवेश कर गयी हैं।

मेरा मानना है कि आप बढ़ने से पहले, हमें यह सुनिश्चित करने की आवश्यकता है की क्या आप सबमुख में जीवन के प्रथम 1000 दिनों के विज्ञान को समझते हुए अपने रोजमर्रा के किया कार्य को अनुसार गर्भ में पल रहे शिशु के बेहतर भविष्य का निर्माण करने की दिशा में आगे बढ़ रही हैं?

इसके लिये अब में आपसे कुछ प्रश्न पूछूँगी। यदि आप इन प्रश्नों का उत्तर हां में देते हैं तो आपकी एवं आपके परिवार की सराहना की जाती है।

- आपने पिछला तिमाही खुशी—खुशी एवं तनाव मुक्त होकर बिताया और आप के परिवार में सभी लोग खुश हैं।
- आपके पर में परिवार के सदस्यों के बीच में बेटा है या बेटी को लेकर कोई चर्चा नहीं होती।
- आपने अपने पोषण का ख्याल रखते हुए उपयुक्त मात्रा में विविध पोषक समूहों को शामिल करती है। अपनी खाना बनाने के उपयुक्त विधि मालूम है।
- आपने अपना पंजीकरण करवाया है एवं आपकी पहली प्रसव पूर्व स्वास्थ्य जांच हो चुकी है।
- आपने अपना प्रसव न्यू स्वास्थ्य जोच करवाया कि लिये कम्पैनियन (साथी) का चुनाव कर लिया है।
• आप संक्रामक रोगों से बचने के लिए सावधानी एवं साफ सफाई का ख्याल रखती है।
• आप विभिन्न प्रकार के हानिकारक रसायनिक, मोबाइल से निकलने वाली विकिरण, से अवगत हैं जो आपके बच्चे को गर्म में प्रभावित कर सकते हैं और आप छुट्टियाँ पाने के लिए अनुशसित उपायों का अनुसरण करती हैं।

अब इस अवधि में इन बातों का रखना है विशेष ध्यान।
• आपको अपने दौं एवं मसूड़ों की साफ-सफाई का रखना है विशेष ध्यान।
• इस अवधि में कब्ज एवं एसिडिटी होना सामान्य बात है।
• बिना डाक्टरी सलाह के कोई भी दवाई न लें एवं डाक्टर को अपनी गर्मावस्था की जानकारी जरूर दें।
• योगी से रक्त रसाव हो सकता है लेकिन खुजली एवं जलन होने पर तुरंत अपने डाक्टर से सम्पर्क करें।

इस अवधि में अब इन सुझावों का पालन करें
• प्रतिदिन कैल्शियम की गोलियां लेना शुरू करें। प्रतिदिन दोपहर एवं रात्रि के भोजन के साथ-साथ 1-1 टैबलेट लेना शुरू करें। प्रत्येक कैल्शियम टैबलेट में 500 मिलीग्राम कैल्शियम और 250 आईयू विटामिन डी3 होना चाहिए।
• यदि पहले न लगवाया हो, तो टिटनेस का दूसरा टीका लगवाएँ।
• पेट के कीड़ों से बचने के लिए 400 मिलीग्राम आइपी अल्बेंडाजोल की एक खुराक लें।
• यदि हीमोग्लोबिन 11 से अधिक है, तो प्रतिदिन, भोजन के 2 घंटे बाद आयरन और फोलिक एसिड की 1 गोली लें। यदि हीमोग्लोबिन लेवल 11 से कम है, तो प्रति आयरन और फोलिक एसिड की 2 गोलियां लें।
• दूसरी प्रसव पूर्व जाँच के लिए डाक्टर या प्र. एन. एम. डी के सम्पर्क करें।

अब आप कल्याण कर सकती हैं की गर्म में बच्चा तेजी से बढ़ रहा है। नाखून और बाल बढ़ गए हैं। बच्चा मुस्कुरा सकता है और माथे पर बल डाल सकता है।

अंत में अगर आपका आपकी गर्मावस्था से सम्बंधित कोई समस्या या कोई प्रश्न है तो उसकी चर्चा कर सकती हैं। मुझे आपकी मदद कर हार्दिक प्रसन्नता होगी।

आशा है आप हमारे द्वारा बताये सुझाव को अभी में लेकर अपने बच्चे के भविष्य निर्माण के मदद करेंगी। अगले माह आपका हालचाल एवं आगे की जानकारी देने के लिये पुनः कॉल करेंगी। धन्यवाद!
पांचवां कोल : दूसरा तिमाही का पांचवां माह/छठा माह

नमस्कार मे डॉ. .......................... आपके बच्चे के जीवन के प्रथम हजार दिनों की सलाहकार बोल रही हूँ, कैसी हैं आप?

इस समय तक आपने अपने गर्भावस्था का आधा सफर तय कर लिया है। अब इस बात को दुहराने की जरूरत है कि अगले 4–5 महीने तक गर्म में पल रहे बच्चे का 8600 करोड़ न्युरोन (तार) बनने हैं।

मेरा यह मानना है की अभी तक आपने जीवन के प्रथम हजार दिन के विज्ञान और उसकी संभावना को समझते हुए, अपने बच्चे के उज्ज्वल भविष्य का निर्माण करने में आप एक अहम जिम्मे महत्व का सफलता पूर्वक निभा रही हैं।

आपका खुश रहना और तनाव मुक्त रहना, आपका अच्छा पौष्टिक आहार, सफर सफाई का ख्याल, दाताओं एवं मरुद्धों का ख्याल, उचित व्यायाम एवं आराम, एक गोली आइसन एवं फोलिक एसिड की रोज, आपके बच्चे के लिए इस समय है सबसे खास।

• आयरन न केवल आपके खून के लिए महत्वपूर्ण है, बल्कि आपके बच्चे के मस्तिष्क के विकास के लिए भी आवश्यक है।
• आयरन की कमी से समयपूर्व डिलिवरी एवं बच्चे के जन्म के समय कम वजन होने का जोखिम बढ़ सकता है। यह बच्चों में, विकास में देरी और व्यवहार संबंधी समस्या का कारण बन सकता है।

बहुत सी माताओं की एक आम समस्या होती है की उनका बच्चा हरी साग सब्जियां पसंद नहीं करता। प्रेक्षण ब्रिज के विज्ञान को समझते हुए यह मान लें की गर्भावस्था में जो भोजन आप ग्रहण करेंगी आपका बच्चा भी उसे पसंद करेगा। आप अपने आहार में सभी मौसमी सब्जियां एवं फलों को शामिल करें ताकि आपके बच्चे के साथ ये समस्या न आये।

आशा है की आपने अभी तक
• दूसरा स्वास्थ्य जांच करा लिया होगा।
• आयरन एवं फोलिक एसिड की गोली और कैल्शियम की गोली रोज याद से ले रही होंगी इसे आगे भी जारी रखना है।
• पेट के कीड़े मारने वाली अलबेडोजोल की एक गोली ले ली होंगी।

इस चरण में आप इन बदलावों का अनुभव कर सकती हैं।
• आपको अधिक पसीना आ सकता है।
• आपको अपने या कर्म में कभी अच्छा हो सकते हैं।
• सबसे अच्छी विश्लेषण करने की दक्षता से गर्भवती महिलाओं के लिए सुरक्षित नहीं होती। उन्हें लेने से पहले अपने डॉक्टर से पूछ लें।
• आपको मूल रूप से रास्ता हो सकता है। लेकिन, खुला या जलन आम बात नहीं है। ऐसा होने पर अपने डॉक्टर से जाँच करवाएं।

इस समय आपकी अधिक पसीना आ सकता है और आप अपने पेट्रों में एंडन महसूस कर सकती हैं।

गर्भस्थ बच्चे के स्वास्थ्य एवं विकास की जाँच के लिए 18-19 में सप्ताह के बीच कम से कम एक बार अल्ट्रासूडंड करवाएं। अल्ट्रासूडंड के दौरान आप अपने बच्चे को अंगूठा चूसते हुए देखने का सीमांत प्राप्त कर सकते हैं।

अब आप कल्याण कर सकती हैं की गर्भ में बच्चे में अब हाथों व पैरों की रेखाएं बन जाती हैं। बच्चे गर्भ में पैर हिला सकता है और मुझे एवं पलट सकता है। जब आप बेबी रहती हैं तो वह अधिक सक्रिय हो सकता है। 20 हफ्तों तक बच्चे का मस्तिष्क और स्नायु तंत्र इतना विकसित हो जाता है कि ध्वनि और प्रकाश के प्रति वह प्रतिक्रिया कर सके।

अंत में अगर आपका आपकी गर्भवत्ता से सम्बंधित कोई समस्या या कोई प्रश्न है तो उसकी चर्चा कर सकती हैं। मुझे आपकी मदद कर हार्दिक प्रसन्नता होगी।

आशा है आप हमारे द्वारा बताये सुझाव को अमल में लेकर अपने बच्चे के भविष्य निर्माण के मदद करेंगी। अगले माह आपका हालचाल एवं आप की जानकारी देने के लिए पून: कॉल करेंगी। धनयवाद!

छठा कॉल : दूसरा भिक्षुक का छठा माह
नमस्कार मैं डॉ. ... आपके बच्चे के जीवन के प्रथम हजार दिनों कि सलाहकार बोल रही हूं, कैसी हैं आप?

आशा है की आपने अभी तक
• दूसरा स्वास्थ्य जाँच कर लिया होगा।
• आयरन एवं फोलिक एसिड की गोली और कैल्शियम की गोली रोज याद से ले रही होंगी इसे आगे भी जारी रखना है।
• पेट के कीड़े मारने वाली अल्मेडाजेल की एक गोली ले ली होगी।

इस अवधि में यह जरूरी है की आप
• बार-बार खाएं और अच्छी तरह से खाएं।
• अगर पहले न हुई हो तो दूसरी प्रसव-पूर्व जोत बनाएं।
• अगर पहले न किया गया हो तो अगरफा फैक्टर सहित रक्त ग्रुप टेस्ट कराएं।
• यदि आपका ग्लूकोज टोलरेंस शुरू में नकारात्मक था तो इस Jॉच को 24 से 28 हफ्ते के बीच दोबारा करें।

ये चीजें हमेशा अपने पास रखें
• अपने बच्चे की डिलीवरी करवाने वाले डॉक्टर या नर्स का नाम, फोन नंबर।
• अस्पताल जाने का सबसे तेज और सबसे आसान मार्ग की जानकारी।
• एम्बुलेंस सेवा का फोन नंबर (102 / 108)

फिर से आपको यह दिला दूं की आपका खुश रहना और तनाव मुक्त रहनावे आपका अच्छा पौष्टिक आहार, साफ सफाई का ख्याल, दवाएं एवं मसूदों का ख्याल, उचित व्यायाम एवं आराम, एक गोली आइरन एवं फॉलिक एसिड की रोज, एक गोली कैल्शियम की रोज, आपके बच्चे के लिए इस समय है सबसे खास।

अब आप कल्याण कर सकती हैं की गर्भ में अब आपका बच्चा आपकी आवाज और संगीत सुन सकता है। उसकी आंखें खुली होती हैं। आपका बच्चा चारों ओर घूमता है। जब वह आपके पेट में सीधा या कोश में नीचे होता है तो आप उसे महसूस कर सकती हैं। आपका बच्चा अब चुने और जाने लगा है।

यदि अब आपका बच्चा चुने लगा है, आप उससे खुश बातें करें, यह न समझ रहा है, आप ऐसा करने से उसके बेन के तारी को जोड़ने में उसकी मदद कर रही हैं जो आगे चलकर उसके समझ को बिकसीत होने में मदद करेगा।

आपकी दूसरी लिमाई की समाप्ति पास आने पर, अप अनुभव करेंगे कि आपके गर्भाशय में मांसपेशियां सख्त या कठोर होने शुरू हो जाती हैं और फिर धीरे-धीरे ढीली होती हैं। इन्हें ब्रेकसन-हिक्स संकुचन कहा जाता है और ये सामान्य होते हैं। ये संकुचन प्रसव पीड़ा नहीं हैं। ये संकुचन आपके गर्भाशय को प्रसव के लिए तैयार करते हैं। ये संकुचन नियमित नहीं होते और इनसे आमतौर पर दर्द भी नहीं होता। ये कभी भी और कभी भी हो सकते हैं और कुछ सेकंड से 2 मिनट तक होते रहते हैं। गर्भवस्था के अंतिम कुछ हफ्तों में ये संकुचन अधिक हो सकते हैं और प्रसव तक ऐसा चल सकता है।

अंत में अगर आपका आपकी गर्भवस्था से संबंधित कोई समस्या या कोई प्रश्न है तो उसकी चर्चा कर सकती हैं। मुझे आपकी मदद कर हार्दिक प्रसन्नता होगी।

आशा है आप हमारे द्वारा बताये सुझाव को अमल में लेकर अपने बच्चे के भविष्य निर्माण के मदद करेंगी। अगले माह आपका हालचाल एवं आप की जानकारी देने के लिये पुनः कॉल करूंगी। धन्यवाद!
सातवां कॉल : तीसरा तिमाही का सातवां/आठवां/नवम माह
नमस्कार मे डॉ. ..........................आपके बच्चे के जीवन के प्रथम हजार दिनों की सलाहकार बोल रही हूँ. कैसी है आप?

गर्भावस्था के दूसरी तिमाही को सफलता पूर्वक पार करने के लिए आपको बदाई!

उम्मीद है कि जीवन के प्रथम 1000 दिनों के महत्व को समझते हुए हमारे द्वारा बताये सलाह का गर्भावस्था के प्रथम तिमाही में आप उसका अनुसरण कर रही हैं। आशा है अपने गर्भावस्था के इन दिनों को आप खुशी-खुशी बिता रही होंगी और इसमें आपके परिवार का पूरा सहयोग मिल रहा होगा। अब आप गर्भावस्था के तीसरी तिमाही में प्रवेश कर गयी हैं।

तीसरी तिमाही 28 सप्ताह से शुरु होती है और 40 सप्ताह तक चलती है। यह अतिम चरण है जहां शिशु का अधिकतम वनज, ऊंचाई और सिर परिधि बनती है। कॉर्टिकल मस्तिष्क का 50 प्रतिशत विकास 37–39 सप्ताह के बीच होता है। तीसरी तिमाही के दौरान, बच्चे का विकास, वनज बढ़ना जारी रहता है, और बुनियाद प्रक्रिया की तैयारी शुरू हो जाती है। पूर्ण अवधि या 40 सप्ताह के करीब बच्छ का जन्म होने से वह प्रसव क्रय और भू के शरीर के बाहर के वातावरण का सामना करने के लिये आपने आप में ज्ञान सजाम होता है। इसलिए यह जरूरी है की आप प्राकृतिक तौर पर प्रसव होने से तक इंतजार करें।

इस अवधि में आपको इन बातों का रखना है ध्यानः
• तीसरी प्रसव पूर्व जौंच के लिए डॉक्टर या पै. एन. एम. वीटियो से सम्पर्क करें।
• कैलिशाम और आयरन व फोलिक एसिड की गोली लेती रहें।
• जैसे-जैसे आपका बच्छा विकसित होता है, आपको बच्छे की अधिक हलचल महसूस होगी।

आमतौर पर दोपहर और शाम के समय, आपके बच्छे की हलचल सर्वाधिक होती है। जब आपका बच्छा सोता है तो आपको उसकी हलचल महसूस नहीं होगी।

अपने बच्छे से बातचीत करने रहें। आपको अपने बच्छे के कहानियों में सुनाने से न केवल आपका बच्छा अच्छी तरह से विकसित होगा, अनिता उससे आपका लगाव भी बढ़ेगा। पिता को भी अपने बच्छे से बातचीत करनी चाहिए।

अब आप कल्पना कर सकती हैं की गर्भ में अब आपका बच्छा अपनी ओरिङ्ग खोल सकता है और बंद कर सकता है। जब आप अपने बच्छे से बात करने हैं या गाते हैं तो उसके मस्तिष्क के विकास में सहायता करने हैं।

तीसरी तिमाही में आपके पैरों और टॉक्यों में सूजन आ सकती है। सूजन को कम करने के लिए, आपने पैरों को ऊपर रखें। पैरों को एक दूसरे के ऊपर न चढाएं, ठीले कपड़े पहनें और खूब आराम करें।
आंत में अगर आपका आपकी गायबवस्था से सम्बंधित कोई समस्या या कोई प्रश्न है तो उसकी चर्चा कर सकती हैं। मुझे आपकी मदद कर हार्दिक प्रसन्नता होगी।

आशा है आप हमारे द्वारा बताये गुज़ार को अमल में लेकर अपने बच्चे के भविष्य निर्माण के मदद करेंगी। अगर माह आपका हालचाल एवं आप की जानकारी देने के लिये पुनः कॉल करेंगी। धन्यवाद!

आउटां कॉल : तीसरा तिमाही का आउटां माह/नवम माह
नमस्कार मैं डॉ. ............आपके बच्चे के जीवन के प्रथम हजार दिनों की सलाहकार बोल रही हूँ , कैसी हैं आप?

आशा करती हूँ की अभी तक पिछली सलाहों को ध्यान में रखकर उनका अनुसरण कर रही होंगी। यह मेरे लिए बहुत महत्वपूर्ण है की मैं आपको समयबंद तरीके से आपका मार्गदर्शन करता रहूँ जिससे आपका बच्छा बड़ा होकर अपने परिवार, समाज और देश के प्रति अपनी जिम्मेदारियों को पूरा करने में समर्थ बन सके। अभी तक आप समझ गयी होंगी की जीवन के हजार दिन हैं उसके लिए बेहद महत्वपूर्ण जिससे आपकी जिम्मेदारी है बेहद खास।

इस अवधि में आपको इन बातों का रखना है ध्यान:
• अगर अभी तक आपकी प्रसव पूर्व तीसरी जॉच नहीं हुई है तो इसके लिए डॉक्टर या ए.एन. एम. दीदी से सम्पर्क करें।
• कैदियाम और आयरन व फोटिक एसिड की गोली लें रहें।
• अपने बच्चे की हलचल का ध्यान रखें। सामान्य हलचल की कोई विशेष संख्या नहीं है। यदि आपको लगता है कि आपके बच्चे की हलचल में विशेष कमी या परिवर्तन हो रहा है, तो आपको अपने बायीं करवट पर लेंटें और अगर 2 घंटों तक अपने बच्छे की हलचल पर ध्यान देने की आवश्यकता है। यदि आपको इन 2 घंटों के दौरान 10 बार या इससे अधिक, अलग-अलग हलचल का अनुभव नहीं होता, तो आपको तत्काल किसी डॉक्टर से परामर्श लेना चाहिए।

यदि आपको सीने में जलन या एसिडिटी का अनुभव होता हो तो
• खाना खाने के तुरंत बाद लें नहीं।
• जब आप लेंटे, अपने सिर और कंठों को उंचा रखें।
• तरल पदार्थ भोजन के साथ न लेकर, बाद में लें।
• बीच-बीच में हलके नाश्ते का सेवन करें।

इस अवधि में आप कल्पना कर सकती हैं की अब आपके बच्छे की कोमल लच्छा पर झुरियां भरने लगी हैं। अधिकांश बच्छे, उल्टी स्थिति में, अर्थात “सिर नीचे – पॉव्व उपर” होकर जन्म के
लिए तैयार हो जाते हैं। अब आपके शरीर में सुनियोजित बदलावों के साथ प्रसव की तैयारी शुरू हो जाती है।

याद रखें
35 सप्ताह तक एक बच्चे का मस्तिष्क, 39–40 सप्ताह की अपेक्षा दो तिहाई बार होता है। इसलिए यदि आपकी गर्भवत्ता सामान्य है, तो कम से कम 39 सप्ताह तक गर्भवती रहना सर्वोत्तम है।

अंत में अगर आपका आपकी गर्भवात्स्थ सम्बंधित कोई समस्या या कोई प्रश्न है तो उसकी चर्चा कर सकती हैं। मुझे आपकी मदद कर हार्दिक प्रसन्नता होगी।

आशा है आप हमारे द्वारा बताये सुझाव को अमल में लेकर अपने बच्चे के भविष्य का निर्माण कर मदद करेंगी। अगले माह आपका हालचाल एवं आगे की जानकारी देने के लिये यहाँ कॉल करेंगी। धन्यवाद!

नवम कॉल : तीसपद तिमाही का नवम माह
नमस्कार मैं डॉ. .................आपके बच्चे के जीवन के प्रथम हजार दिनों की सलाहकार बोल रही हूँ। कैसी हैं आप?

अब आप बहुत ही महत्वपूर्ण समय में हैं जिसमे आपको आपके बच्चे के जन्म की तैयारी करनी है। उसकी जरूरत के समान इकट्ठे करने हैं।

इस अवधी में आप इन बातों का रखें ख्याल।
- चौथी प्रसव पूर्व जांच के लिए प. एन. एम. दूंदी या डॉक्टर से सम्पर्क करें।
- अपने रक्त एवं मूत्र (प्रोटीन, शुगर, पस सेल के लिए) की जांच कराएं।
- गर्भवात्स्थ के किसी भी संकुचन का बयारा रखें। प. एन. एम. दूंदी या डॉक्टर से बच्चे के जन्म को तैयारी के बारे में परमार्श दें।
- कैल्शियम और आयरन व फोलिक एसिड की गोली लेती रहें।
- प्रसव पीज़ा को अपने आप शुरू होने दें। शीघ्र या दर्दरहित प्रसव या सिजेंरियन के लिए अनुरोध न करें। 39 हफ्तों तक गर्भवात्स्थ को जारी रखें।
- अब आप अपने प्रसव साथी का चुनाव कर लें। प्रसव साथी उन्हीं को बनायें जिनपर आपको और पूरा विश्वास क्योंकि इनकी भूमिका अहम होगी।

बच्चे के जन्म की तैयारी
- अपने प. एन. एम./डॉक्टर के साथ एक विस्तृत जन्म योजना तैयार करें।
• प्रस्तुत के दौरान अपने साथ रहने के लिए एक साथी की व्यवस्था करें।
• अपने कपड़े लेंगे तैयार रखें। कपड़े मुलायम और ठीक होने चाहिए, ताकि इसे आसानी से निकाला जा सके या ठीक किया जा सके।
• बच्चे के लिए धुले, मुलायम और 100 प्रतिशत सुगुन्धित कपड़े तैयार करें।
• जन्म के 30 मिनट के भीतर ही अपने बच्चे को स्तनपान कराने के लिए मानसिक रूप से तैयार रहें।
• किसी भी प्रकार के तनाव से बचें।

अब आपका बच्चा पूर्ण रूप से जन्म लेने की तैयारी कर रहा है। यहाँ रखें बच्चे को खुद उसका जन्म दिन निर्धारित करने वें। अपनी या अपने पति या किसी धार्मिक मान्यताओं की वजह से ये अधिकार उससे ना छीने।

अंत में अगर आपका आपकी गर्भावस्था से सम्बंधित कोई समस्या या कोई प्रश्न है तो उसकी चर्चा कर सकती है। मुझे आपकी मदद कर हार्दिक प्रसन्नता होगी।

आशा है आप हमारे द्वारा बताये सुझाव को अमल में लेकर अपने बच्चे के भविष्य निर्माण के मदद करेंगी। अगले माह आपका हालचाल एवं आगे की जानकारी देने के लिए पुनः कॉल करूंगी। धन्यवाद!

दसवां कॉल : तीसरा हिमारी का नवम माह में अनुमानित प्रसव तिथि के एक सप्ताह पहले नमस्कार में डॉ. ..................�पके बच्चे के जीवन के प्रथम हजार दिनों की सलाहकार बोल रही हूं। कैसी है आप?

आपका अनुमानित प्रसव तिथि अब नजदीक आ गया है और अब आपकी प्रसव पीड़ा कभी भी शुरू हो सकती है। आप अपना प्रसव जहाँ करना चाहती हैं एवं आपका प्रसव साथी या कम्पनियों जो होगा उसका निर्धारण अभी तक आपने कर दिया होगा।

प्रस्तुत क्या है?
प्रस्तुत बच्चे के जन्म की पूरी प्रक्रिया है। आमतौर पर इस प्रक्रिया की आवश्यकता प्रसव पीड़ा से लेंगे फलसेटा के बाहर निकलने तक होती है। प्लेसेटा वह अंग है जो माँ के गर्भ से भूरी को जोड़ता है। यह गर्भावस्था के दौरान बच्चे को आक्सीजन और पोषण प्रदान करता है। बच्चे के जन्म के 10-15 मीनट बाद प्लेसेटा भी बाहर आ जाता है। आमतौर पर 9 महीने की समाप्ति पर प्रसव शुरू होता है, जब गर्भ संकुचित होकर बच्चे को बाहर आने में मदद करता है। पहले बच्चे के प्रसव 12 से 20 घंटे तक चलता है। ऐसे में धीरज रखना चाहिए और प्रसव की प्रक्रिया को तेज करने की कोशिश नहीं करनी चाहिए। क्योंकि माँ के शरीर के हार्मोन यह प्रक्रिया सुयोग्य व सुरक्षित तरीके से नियंत्रित करते हैं।
प्राकृतिक प्रसव और जन्म की प्रक्रिया की रचना बहुत ही अद्भुत की है। प्राकृतिक प्रसव या डिलीवरी न केवल सुरक्षित होता है अपितु बच्चों के लिए अच्छा भी होता है। हमें प्रकृति और इसके तरीकों का समान करना चाहिए।

अगर आप सोच रही होंगी की प्रसव के पहले, प्रसव के दौरान एवं प्रसव के बाद ऐसी कौन सी बातें हैं जिनका रखना है आपको ख्यात:
सबसे पहले आपको समझना है की प्रसव के इस चरण में आपको अपने आप को बिलकुल सहज बनाये रखना है। आपकी सहजता एवं आपके विश्वास से आपको प्राकृतिक डिलीवरी में मदद मिलेगी एवं प्रसव सम्बन्धित जटिलता से बचा जा सकता है। यह याद रखना है की इस समय का धैर्य या आपकी पीढ़ी बच्चे को जीवन भर आपसे जोड़ने एवं उसकी बौद्धिक एवं भावनात्मक विकास में सहायक होगा।

प्रसव के पहले:
- प्रसव के पहले और दौरान तनाव से बचें
- प्रसव को प्राकृतिक रूप से शुरू होने दें। एकदम आवश्यक न होने पर या डॉक्टर के बताए बिना प्रसव में तेजी लाने के लिए दवा न लें।
- अपने या डॉक्टर की आसानी के लिए इलेक्ट्रिक प्रसव प्रक्रिया का चुनाव न करें।
- प्रसव एवं जन्म की प्रक्रिया में एपीड्यूल निश्चयक की मांग न करें।

प्रसव के दौरान
- सहारे के लिए एक भरोसेमंद साथी को साथ रखें: प्रसव कक्ष में गर्भवती महिला का देखभाल किए जाने पर, विनाशकारक ख्यात रखें जाने पर तथा प्रोत्साहित किए जाने पर बेहतर महसूस करती है। ये साथी प्रसवकाल महिला को साधारण कितु महत्वपूर्ण तरीकों से सहारा प्रदान कर सकते हैं, जैसे- उसकी निजता की सुरक्षा करना, उसे आरामदेह महसूस कराना, उसे पानी देना, उसे पकड़ना तथा चलने-फिरने के लिए प्रोत्साहित करना तथा उसे सुरक्षित एवं संरक्षित महसूस कराना। इससे माता को महसूस होती है तथा ऐसे प्राकृतिक हामी का उत्साहन होता है जिससे डिलीवरी की प्रक्रिया आसान हो जाती है। इससे सिंजेरियन डिलीवरी की आवश्यकता नहीं पड़ती।
- प्रसव का अवधि को कम करने एवं आसान बनाने के लिए सुझाव: प्रसव के दौरान चलते-फिरते रहने व टहलने से संकुचन की पीड़ा से आराम मिल सकता है। इससे बच्चे को बाहर आने में भी आसानी होती है। इस तरह बैठें या करवट से लें जिसमें आपको आराम महसूस हो।
- प्राकृतिक ऑल्टेडोसिस या बर्थ हार्मोन गर्भाशय को संकुचित करने में तथा धीरे-धीरे बच्चे को बाहर धकेलने में मदद करने के लिए माता के मस्तिष्क द्वारा उत्सर्जित किया जाता है। जन्म
के समय माता को होने वाले दर्द में राहत पहुँचाने के लिए यह माता के शरीर से ही एक प्राकृतिक दर्द निवारक उत्पन्न करने में मदद करता है। यह माता एवं बच्चे दोनों के मस्तिष्क के लिए अच्छा है। यह उन्हें खुशी महसूस कराने तथा आपसी जुड़वां स्थापित करने में मदद करता है। प्रसव शुरू करने या उसकी अवधि को कम करने के लिए चिकित्सक को तब तक क्रू मेस्री ऑक्सीटोसिन या प्रोस्ट्रागलेंडिन का इस्तेमाल न करने का अनुरोध करें, जब तक ऐसा करना आवश्यक न हो।

प्रसव के बाद:

• मां और बच्चे को एक साथ रखें: यह स्तनपान शुरू करने तथा जारी रखने और नवजात शिशू के तनाव को दूर रखने तथा अनुभूति को बढ़ाने में मदद करता है। मनोवैज्ञानिक रूप से माता एवं बच्चे एक दूसरे को समझने लगते हैं। आपके बच्चे को गर्महार मिलती है तथा उसकी हड़प्पा मति स्थिर रहती है। बच्चे के उसके जन्म के तुरंत बाद उसे मां की छाती पर रखें। नाल काटने से पहले उसका स्पंदन रक जानी की प्रतीक्षा करें। बच्चे को मां से अलग न करें।

• जन्म के 30 मिनट के भीतर स्तनपान शुरू करें। ऐसा माना जाता है कि छाती से लगाकर कोलोस्ट्रम युक्त दूध पिलाने से नवजात बच्चे की बौद्धिक शक्ति (आई क्या) बेहतर हो जाती है। यदि रखें की 90 प्रतिशत महिलाओं में सामान्य बूटीकरी समझती होती है। प्रत्येक गर्भवती महिला को यह पता चलाना चाहिए कि जन्म सामान्य एवं आसानी से होने वाली प्रक्रिया है।

जन्म के बाद सुनहरा पहला घंटा

जन्म के बाद पहला घंटा बच्चे एवं मां के लिए बहुत महत्वपूर्ण होता है। इस अवधि को स्वर्णिम घंटा या समय भी कहा जाता है। इस पहले घंटे में याद रखने योग्य बातें:

• जन्म के तुरंत बाद बच्चे को मां के छाती पर रखें। यह बच्चे की मां का पहला गाढ़ा पीला दूध पीने के लिए अवसर प्रदान करता है साथ ही यह मां के प्रसव उपरांत रक्त स्त्राव को रोकने में मदद करता है। आपका पहला गाढ़ा पीला दूध (कोलोस्ट्रम) बच्चे को पोषण प्रदान करने के साथ-साथ उसे संक्रमण से बचाने के लिए एक टीकी की तरह सुरक्षा प्रदान करता है। पहले दो दिनों में कोलोस्ट्रम और दूध कि माता बहुत कम हो सकती है लेकिन आप घिंता ना करें यह आपके बच्चे के लिए पर्याप्त होगा।

• बच्चे को दूध पिलाना मां एवं बच्चे को एक दूसरे को जानाने समझने, एक दूसरे से भावनात्मक लगाव का अवसर होता है। दूध पिलाने समय बच्चे के ऑक्सीकोड में ऑक्सीकोड मिलाकर रखें। ऐसा करने से बच्चा एवं मां दिमागी तौर पर जुड़वां लगते हैं जो बच्चे के इस समय के मानसिक विकास के लिए एक टॉपिक से कम नहीं है।

• जन्म के समय बच्चे के पेट का आकार लगभग एक अंगूर के दाने के बराबर होता है, जो दिन प्रतिदिन तेजी से बढ़ने लगता है और दसवें दिन यह करीब एक अल्फाक्स के जिजना बड़ा हो जाता है। मां का दूध भी उसी मात्रा में दिन प्रतिदिन बढ़ता रहता है। इसलिए इसे समझना है कि बच्चे को एक बार युद्धा दूध पिलाने की चेता करने के बजाय उसे थोड़ी थोड़ी देर में दूध पिलाएँ इस समय 24 घंटे में 8-12 बार दूध पिलाएँ।

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• यदि रखे हर बार दूध पिलाने के बाद बच्चे को डकार दिलाए।
• क्रूर्याओं के दूध के अलावा जन्म घट्टि या कोई अन्य चीज भुल से भी 6 माह तक ना दे।
• बच्चे के डायपर गील करने की यह आवृत्ति यह दर्शाता है कि वह पर्याप्त दूध पी रहा है कि नहीं। पहले दिन, वह केवल एक डायपर गीला करता है लेकिन सातवें दिन वह सामान्यतः 6 या इससे भी अधिक बार डायपर गीला कर सकता है और कम से कम तीन बार लीले रंग का मल ल्याने कर सकता है।
• बच्चे को नहाने की आवश्यकता नहीं है, उसे सिफर नस्स तौलिया से पोछ लें।
• गर्भनाल काटने में जलदबजी न करें क्योंकि गर्भ में अभी तक आपके बच्चे तक इसी नाल के माध्यम से आक्षेपन की आपूर्ति हो रही थी। बाहर आने पर उसे फेफड़े से आक्षेपन लेना होता है जिसकी प्रक्रिया उसके रोने से शुरु होती है। इसे काटने का उपयुक्त समय जब गर्भनाल में स्पंदन बंद हो जाए या जेवेटा (जड़ी) बाहर आ जाए।
• आपके बच्चे की त्वचा एक मोटी सफेद पर्वत जिसके वर्मिक्का कहा जाता है, से ढकी हो सकती है। यह बच्चे की त्वचा में नम बनाये रखने में मदद एवं संक्रमण से सुक्ष्म प्रदान करती है। इसे हटाएं नहीं।
• मौसम के अनुसार बच्चे के लिए साफ़, सुविधी उपलब्ध कराने के लिए ठंडे तौलिया, दस्ताने, डायपर तैयार रखें। कम से कम 8—10 डायपर रखें। इसे बार—बार बदलने की जरूरत होगी।
• आपका बच्चा लगभग जन्म के एक घंटे बाद सो जाएगा। यह वह समय है जब आप भी अपनी श्रद्धा को दूर करने के लिए आराम कर सकते हैं। अचानक एवं निर्धारण नीद उसकी मानसिक विकास के लिए अति आवश्यक है। पहले कुछ हफ्तों में आपका बच्चा एक अनोखी निद्रा चक का पालन करेगा। वह दिन के समय सोना चाहेगा और रात में जागेगा। जब वह सो रहा हो तो आपको आराम करना चाहिए। वह सुबह अंधेरा में 16 से 18 घंटे सोना जो धीरे धीरे घंटी जाएगी। उससे आप नीद चक को बनाए रखने दें। सोते समय कमरे में अंधेरा कर दें एवं शांति बनाए रखें।
• बच्चे के सिर को सोते समय सिर के पिछले भाग को चिपटा होने से बचाने के लिए सरसों या राई से बने पारंपरिक तकिये का इस्तेमाल करें।

टीकाकरण—
जन्म के दिन बच्चे को विटामिन के, बी सी जी, हेपटाईटिस बी के टीके एवं पोलियो की दवा पिलाई जानी चाहिए।
• बच्चे के जन्म के बाद कम से कम 48 घंटे तक उसी अस्पताल में रहें, जहां आपने अपने बच्चे को जन्म दिया है। यह महत्वपूर्ण है, क्योंकि मां और बच्चे में अधिकांश समस्याएं इसी अवधि के दौरान उत्पन्न होती हैं।
• आप और आपके बच्चे की जांच डिलीवरी के दिन, डिलीवरी से तीसरे दिन और सातवें दिन तथा डिलीवरी के छह सतारे बाद स्वास्थ्यकर्मी द्वारा की जानी चाहिए।
• अस्पताल में रहने के दौरान आपको नाल की देखभाल, बच्चे को गर्म रखने, सांप के संक्रमण, अतिसार, पोषण एवं परिवार नियोजन के बारे में भी सलाह दी जाएगी।
• स्तनपान की आवश्यकताओं की पूर्ति करने के लिए अतिरिक्त भोजन एवं पेय पदार्थ लें।
• पर्याप्त आराम करें।
• आपके या आपके बच्चे में कोई भी समस्या उत्पन्न होने पर तुरंत डॉक्टर की सलाह लें।

## जन्म के बाद पहला कॉल

नमस्कार मे डॉ। ..............आपके बच्चे के जीवन के प्रथम हजार दिनों की सलाहकार बोल रही हैं कौन हैं आप?

• जब आपके बच्चे का जन्म होता है, तो आपको उसकी देखभाल करने में धोखा सी थाकावट का अनुभव हो सकता है। यहां तक कि नियमित काम, जैसे कि डायर पहनाना और कपड़े पहनाना, भी आपके तनाव दे सकता है। चिंता न करें। जल्दी ही आप में एक अनुभवी माता की तरह आताविश्वास पैदा हो जाएगा।

• सर्वाधिक महत्वपूर्ण जानकारी आपको बच्चा आपको देगा कि उसे कैसा व्यवहार पसंद है, कैसे तात करना पसंद है और किस प्रकार उठाएं जाने में उसे सबसे ज्यादा आराम महसूस होता है।

• यह कॉल यह समझने में आपकी मदद करेगा कि नवजात बच्चे की देखभाल कैसे की जानी चाहिए तथा उसकी आवश्यकताओं को कैसे पूरा किया जाना चाहिए।

## अपने बच्चे की देखभाल करना सीखें

• जन्म के पहले घंटे से लेकर बच्चे 6 महीने का होने तक अपने बच्चे को नियमित स्तनपान करना जरूरी रखें। अपने बच्चे को छाती से चिपका रखें, जिससे आपको दूधपिलाना शुरू करने में मदद मिलेगी।

• माया जितना तनावमुक्त एवं आत्मविश्वास से परिपूर्ण महसूस करेगी, उतना ही जल्दी दूध आना शुरू हो जाएगा।

• आपका बच्चा अपने रोने के तरीके से आपको अपनी जरूरतों से अवगत कराता है। एक कुशल माया अपने बच्चे के रोने के तरीकों से उसकी जरूरत का सटीक अनुमान लगा लेती है। उदाहरण के लिये,
  o भूख की वजह से रोना प्रायः धोखा अवधि का तथा धीमी आवाज में होता है और यह घटता बढ़ता रहता है।
  o एक गुस्से से रोता हुआ बच्चा उग्र होता है।
  o दर्द की वजह से रोता हुआ बच्चा एक लंबे अंतराल के बाद अचानक और तेजी से रोना शुरू करता है और उसके बाद फिर धीरे-धीरे रोता रहता है।

• फलस्वरूप से लेकर उसके 2 से 4 सप्ताह का होने तक बच्चा एक अनोखे निद्रा चक्र का पालन करेगा। यह दिन के समय रोना चाहेगा और रात के समय जागेगा। जब आपका बच्चा सो रहा हो, तो आपको आराम करना चाहिए। जब बच्चा सो रहा हो तो उसके कमरे में तेज प्रकाश न
यह बच्चा इससे कम बार पेशेवर करता है, तो माता को यह समझ लेना चाहिए कि वह कम दूध पीला रही है। बच्चे को स्तनपान कराए जाने के दौरान वह प्रायः अर्ध-तोस मल ल्याग करता है और कभी-कभी विल्कुल भी मल ल्याग नहीं करता। जब तक बच्चा दूध नहीं पीता, उल्टी नहीं करता या असहजता के कोई भी संकेत प्रदर्शित नहीं करता, तब तक चिंता करने की कोई बात नहीं है।

• हर बार अपने बच्चे का डायरेक्ट बदलने के बाद अपने हाथों को साफ करें एवं पानी से धो लें। बच्चे के कपड़े एवं डायरेक्ट की पर्याप्त मात्रा की व्यवस्था करें। प्रतिदिन 8 से 12 बार बच्चे के कपड़े बदलने की आवश्यकता हो सकती है।

• डायरेक्ट बाला हिस्सा अतिरिक्त गीलेपन, अन्तर्शोध, घर्षण एवं भीगने की स्थिति में रहता है। डायरेक्ट बाले अपने को साफ करने के लिए पानी और गीला कपड़ा सवारित है। शरीर के इस हिस्से को सूखा रखना महत्वपूर्ण है।

• एक सामान्य वजन बच्चे को जन्म के 48 घंटे बाद से गुटगुटे पानी से नहलाना शुरू कर सकते हैं एवं उसे रोज नहलाया जा सकता है। ध्यान रखें, उसे 5 मिनट से ज्यादा देर तक न नहलाएँ।

• बच्चे जो अनुभव करते हैं उनसे सीखें तक आपके बच्चे का खेलना, सीखना, बोलना और काम करना आपके बच्चे के विकास के बारे में महत्वपूर्ण जानकारी प्रदान करता है। प्रत्येक उम्र में जाँच करें कि क्या आपको बच्चा वह गतिविधि करने लगा है। इसके अलावा यह जान लें कि बच्चे को इन पढ़ायों तक पहुँचने में मदद करने के लिए आपको क्या करना चाहिए।

• माताओं को इत्र (बंदी खंड़े) से बच्चा चाहिए क्योंकि बच्चे गंध से मां को पहचानते हैं। नवजात बच्चे को साफ सूती कपड़े में लपेटें, जो मां के पुराने कपड़े से तैयार किया गया हो, क्योंकि इससे मां की गंध आती है जिससे बच्चा सुरक्षित महसूस करता है।

• मां को अपना बाल बनाने का तरीका नहीं बदलना चाहिए, क्योंकि बच्चे अपनी मां को बालों की छाया से पहचानते हैं।

• जन्म के बाद बच्चे को कसकर लपेटने से बचे उसे बल्कि फैला कर रखें क्योंकि यह कूलें के जन्मजात विश्वासन (सीडीएच) से बचाता है।

• सामान्य नापने की टेप का उपयोग करते हुए, समय-समय पर सिर की परिधि को मापकर अपने बच्चे के मर्मर्क के विकास पर ध्यान दें।

• इस कॉन में मैं आपको आपे बाले 2 से 3 महीनों में आपके बच्चे के बुनियादी विकास के बारे में बताऊँगा।
  o दूध पिलाते, नहलाते और कपड़े पहनते समय बच्चे से बात करें एवं खेलें
  o बच्चे के रोने पर तुरंत ध्यान दें और उसे गोद में उठाकर सुरक्षित महसूस कराएं
अपने बच्चे को खुद ही शांत होने में मदद करें। यदि वह अंगूठा चूसता है तो उसे ऐसा करने

दें।

जब आपका बच्चा आवाजें निकालता है तो उत्साहित होकर आप भी मुस्कुराएं।

अपने बच्चे के अलग-अलग तरीकों से रोने को पहचानकर यह समझें कि वह क्या चाहता है।

अपने बच्चे से बात करें, उन्हें कहानियां एवं गीत सुनाए।

बच्चे को पेट के बल लिटाकर उसके पास खिलोने रखें।

अंत में अगर आपका कोई सवाल है तो हमें आपकी मदद कर के खुशी होगी। धन्यवाद!

जन्म के बाद दूसरा कॉल

नमस्कार मैं डॉ. .................आपके बच्चे के जीवन के प्रथम हजार दिनों की सलाहकार बोल रही

हूं कैसी है आप?

आपका बच्चा अब लगभग 3 महीने का हो गया है और अब तक वह गर्दन सम्हालना, लोगों को

dेखकर मुस्कुराना, खुश होने पर आवाज निकालकर खुशी जाहिर करना सीख चुका होगा।

अब उसकी आगे की समग्र विकास के लिये इन बातों का रखें ख्याल।

• बच्चे से खुश होकर बात करें।
• शीशा दिखाकर पूछें ‘मेरा बेबी कहाँ है?'
• रोने एवं खाने का नियत समय तय करें।
• तुला-छिटी का खेल जैसे खेल खेलें।
• तस्तीरें एवं विभिन्न चीजें दिखाकर उनका नाम बताएं।
• कहानियां सुनाए लेकिन अक्षर ज्ञान न दें।
• अपने बच्चे के साथ ज्यादा से ज्यादा बातचीत करें। अपने बच्चे को बहुत सारा प्यार दें एवं

उसका ख्याल रखें। प्रेमपूर्ण बातचीत बच्चों को सुरक्षित व सक्षम महसूस करता है।
• बच्चे घर में रखी चीजों से खेलकर सीखें तो इसलिए उनके खेलने के लिए सूदर एवं सुरक्षित

खिलोने फर्श पर रखें। बच्चों के लिए चमकदार रंग एवं पेटर्न और मस्तर संगीत बाले खिलोने

अच्छे होते हैं।
• बच्चे को बाहर ले जाएँ एवं उन्हें बाहर की दुनिया से परिचित कराएं।
• बच्चे इस उम्र में अंगूठा चूसते हैं, उन्हें अंगूठा चूसने से न रोकें। यह उनके तनाव को कम करने

में मदद करता है।
• बच्चे से बात करें उनकी आवाजों की नकल करें, अगर वे भी आपकी नकल करें तो उन्हें

प्रोत्साहित करें।

अंत में अगर आपका कोई सवाल है तो हमें आपकी मदद कर के खुशी होगी। धन्यवाद!
जन्म के बाद तीसरा कॉल
नमस्कार मैं डॉ. .................आपके बच्चे के जीवन के प्रथम हजार दिनों की सलाहकार बोल रही हूं कैसी है आप?

आपका बच्चा अब लगभग 6 महीने का हो गया है और अब तक वह चेहरे के भावों की नकल करना, जैसे मुस्कुराना या थेरी चश्मा, दोनों हाथों और आँखों का उपयोग करते हुए खिलाने लेकी पहुँचे और पढ़ने का प्रयास करना, सिर को बिना सहारे के सीधा संभाल पाना, स्वयं को शीशे में देखने में रुचि, जोर से हंसना और खिलखिलाना सीख चूका होगा।

अब उसकी आगे की समग्र विकास के लिये इन बातों का रखें ख्याल

छ: माह की आयु के बाद से बच्छे को स्तनपान के अलावा ऊपरी आहार देना चाहिए। अधिकांश स्वस्थ बच्छे 6 महीने की उम्र तक ऐतिहासिक हो जाते हैं कि उन्हें घर में बने हलके और पतले आहार का ग्रहण करने में कोई समस्या नहीं आती। हालाँकि कुछ बच्छों में इस कौशल में थोड़ा ज्यादा समय लग सकता है। ऊपरी आहार देने के पहले हम ये जाँच लें कि बच्चा पूरक आहार ग्रहण करने की क्षमता रखता है या नहीं। आवश्यक है कि कम से कम दो साल तक बच्छे को माँ का दूध देते रहें। माँ के दूध के साथ-साथ ही हलके और पतले पूरक आहार देने शुरू करें।

- बच्छे को बार-बार वस्तुएं गिराने, टकराने और फेंकने दें।
- बच्छे द्वारा शोर मचाने पर नमस्ता एवं धैर्य दिखाएं।
- अपने बच्छे को खेलने के लिए साफ-सुधेरे एवं सुरक्षित बर्तन दें।
- लुका-छिपी जैसे खेल खेलें।
- बच्छे के पसंदीदा खिंचौने को छुपा दें और देखें कि क्या बच्छा उसे खोज पाता है या नहीं।
- “मेरी बाई, तुम्हारी बाई” , खेल खेलें।
- अपने बच्छे को पढ़कर कहानियों सुनाएं एवं उससे बातें करें। आमने-सामने बातें करना और कहानी सुनने-सुनना भाषा के विकास के लिए महत्वपूर्ण हैं।
- बच्छे को हवा में हिलाए या उछाले नहीं, क्योंकि यह गंभीर शक्ति नुकसान बेली सिंड्रोम का कारण बन सकता है, जिससे शारीरिक और मानसिक क्षतियों हो सकती है।
- 3 वर्ष से छोटे बच्छों को व्यस्त रखने के लिए और खाना खिलाने में मदद के लिए, टीवी, वीडियो गेम, स्मार्टफोन और कंप्यूटर का उपयोग न करें।

अंत में अगर आपका कोई सवाल है तो हमें आपकी मदद कर दें। धन्यवाद!

जन्म के बाद चौथा कॉल
नमस्कार मैं डॉ. .................आपके बच्छे के जीवन के प्रथम हजार दिनों की सलाहकार . बोल रही हूं कैसी है आप?
आपका बच्चा अब लगभग 9 महीने का हो गया है और अब तक वह दोनों दिशाओं में करवट बदलता रहा है। खिलौने उठाने के लिए सभी ऊंगलियों का प्रयोग करना, आवाज की दिशा को पहचानना, परिचित चेहरे या खिलौने को देखने के लिए सिर घुमाना, अपने सामने छुपाए हुए खिलौनों का दूर देखना, उठाए जाने के लिए बांहों को फैलाना, चीजों को मुंह में डालना, चीजें आसानी से एक हाथ से दूसरे हाथ में ले जाना सीख चौका होगा।

अब उसकी आगे की समग्र विकास के लिये इन बातों का रखें ख्याल
• बॉडी का प्रयोग करने से बच्चे और पारंपरिक धर्मनिष्ठ बच्चे खिलौने का उपयोग करें।
• हिंसा को बढ़ावा देने वाले खिलौने जैसे बन्दूक न दें।
• खिलौनों को बच्चे की पहुंच से ठोंक डूर रखें, ताकि उसे खड़े होने का या चलने का बढ़ावा मिल सके।
• खेलते समय बच्चे अनजाने में दूसरों को चौट पहुँच सकते हैं, ऐसे में उन्हें प्यार से समझाएं।
• अपने बच्चे को चित्र पुस्तिका से जोर से पढ़कर कहानियाँ सुनाएं।
• बच्चे में स्वाभाविक रूप से कोईहुल होता है। उन्हें अपनी निगरानी में खेलने दे एवं वातावरण को
• समझाने दें।
• बच्चे आपको देखकर और नकल करके सीखते हैं।
• बच्चे चीजों को गिराकर पटकर देखते हैं कि आप व्यस होता है। उन्हें इस तरह खेलने दें।
• उनके आस-पास की चीजों को दिखाए और उनके नाम बताएं।
अंत में अगर आपका कोई सवाल है तो हमें आपकी मदद कर के खुशी होगी। धन्यवाद!

जन्म के बाद पांचवीं कॉल

नमस्कार मैं डॉ. ………………..आपके बच्चे के जीवन के प्रथम हजार दिनों की सलाहकार। बोल रही हैं, क्योंकि हैं आप?

बच्चा अब लगभग 12 महीने का हो गया है और अब तक वह आपका बिना सहारे के बैठना और बिना गिरे खिलौने को पकड़ना, घुट्टों पर चलकर जाना, सरल इशारों का प्रयोग करना, जैसे कि सिर हिलाना, गोद में जाने के लिए हाथ बढ़ाना, अपने सामने छुपाए हुए खिलौनों का दूर देखना, उठाए जाने के लिए बांहों को फैलाना, सामान्य निर्देश जैसे कि नहीं या यहां, आओ पर प्रतिक्रिया देना, इशारों की नकल करना एक या दो शब्द अपनी मातृभाषा में बोलना, सीख चौका होगा।

अब उसकी समग्र विकास के लिये इन बातों का रखें ख्याल
• बच्चे को एक ऐसा वातावरण मिलाना चाहिए, जो खिलौना, समस्या को हल करने और सीखने के लिए प्रोत्साहित करता हो।
• बच्चों का पालन पोषण एक प्रेमपूर्ण, सोहार्दपूर्ण एवं सम्मानपूर्ण वातावरण में करने से उनके अन्तर्दृष्ट्य आत्म-सम्मान एवं आत्म विश्वास प्रपन्ध है।
• अपने आसपास एक “समुदाय” का गठन करें। चूँकि अकेले रहकर बच्चों की परवरिश कर पाना एक कठिन कार्य है। परिवार के अन्य सदस्यों, दोस्तों एवं पड़ोसियों से सहयोग लें। दूसरे अभिमानों से बात करें।
• माता पिता के रूप में, यह जानें कि आपके कार्य आपके बच्चे को प्रभावित करते हैं। आप अपने बच्चे की दुनिया का केंद्र होते हैं। सतत दिशानिर्देश एवं नियम बनाएं। सुनिश्चित करें कि आप और अन्य देखभाल करने वाले लोग उन्हीं नियमों का पालन करें। सुनिश्चित करें कि आपके बच्चे की बढ़ने की क्षमता को ध्यान में रखते समय आपके नियम एवं दिशानिर्देश एक जैसे हों।
• धकेलने वाले खिलोंने बच्चे को दें, जिससे वह चलना सीख सके।
• बच्चे को कुछ फल, खिलों, इत्यादि दें। उन्हें वस्तुओं की पहचान करने के लिए कहें। डिब्बे में बालने व निकालने के लिए कहें।
• अपने बच्चे से सरल प्रश्न पूछें। उनको बात करने के लिए प्रोत्साहित करें।
• एक सुरक्षित, प्यार भरा वातावरण प्रदान करें।
• आप बुरे व्यवहार को दंडित करने की बजाय अच्छे व्यवहार की सराहना अधिक कीजिए।
• सहानुभूति को प्रोत्साहित करें। उदाहरण के लिए, जब बच्चे को कोई दूसरा दुखी दिखे तो, उसे दूसरे बच्चे को गले लगाने या अपहरण के लिए प्रोत्साहित करें।
• पुत्रों को पढ़े और सरल शब्दों का उपयोग करके चिट्ठों के बारे में बात करें।
• ऐसे खिलोंने प्रदान करें, जो दिखावा खेल को प्रोत्साहित करें, जैसे गुड़िया, टेलीफोन आदि।
• उसे कप से पीने के लिए और चमच का उपयोग करने के लिए प्रोत्साहित करें। यदि उससे खाना या पानी गिर जाए, तो धैर्य रखें।
• बुलबुले बनाकर उनसे खेलने दें।

अंत में अगर आपका कोई सवाल है तो आपकी मदद कर के खुशी हारी। धन्यवाद!

जन्म के बाद छठा कॉल

नमस्कार मे डॉ. ..................आपके बच्चे के जीवन के प्रथम हजार दिनों की सलाहकार . बोल रही हूँ कैसी हैं आप?

अब आपका बच्चा बहुत तेजी से भाषा सीखने के साथ—साथ बहुत ही जिज्ञासु हो गया है। माता पिता के रूप में आपका फर्ज है कि इसकी जिज्ञासाओं को पूरा करके इसे सीखने में मदद करें। साथ ही अब समय आ गया है की कुछ महत्वपूर्ण जानकारियों का इस्तेमाल कर अपने बच्चे के विकास में भागीदार बनें।
• माता-पिता को बच्चे के सामने एक—दूसरे को नीचा नहीं दिखाना चाहिए। बच्चे के सामने उसकी परवरिश को लेकर आपस में न उलझें। यह बच्चे के लिए हानिकारक सिद्ध हो सकता है क्योंकि
इससे बच्चे का अभिव्यक्ति पर से भरोसा और माता–पिता का प्राथिकार खत्म हो जाता है। इससे बच्चे भ्रमित होते हैं और उनको किसी एक का पक्ष लेना पड़ता है।

• बच्चे का दूसरे के सामने अपमान न करें। इससे बच्चे की भावनाओं को ठेस पहुँचती है। वे निराशाग्रस्त हो सकते हैं जिसका दीर्घकालीन प्रभाव उनके जीवन पद सकता है।
• अपने बच्चे की तुलना उसके भाई–बहन या अन्य बच्चों से न करें। हर बच्चा विशेष होता है, यह बात हरेन माता–पिता को समझनी चाहिए। अधिकतर माता–पिता यह मानते हैं कि तुलना करने से शरारती बच्चे में सुधार आएगा परंतु ऐसा करने से बच्चे अपने आप को बेकार महसूस करते हैं।
• कुछ माता–पिता अपने बच्चों को सर्वोत्तम देखना चाहते हैं। वे व्यक्तिगत विशेषताओं को कमियों मानकर उन्हें सुधारन चाहते हैं। परंतु ऐसा करने पर बच्चे अपनी ही नजर में गिर सकते हैं।
• बच्चों की गलतियों की बार–बार चर्चा न करें। गलती करने सीखना बच्चों के विकास का अभिन्न अंग है। यदि रखें कि बचपन स्वयं को और अपने वातावरण को जानने का समय है और इसमें गलतियाँ होना स्वाभाविक है।
• अभिव्यक्ति द्वारा आलोचना, विशेषता माता से, बच्चों में निराशावाद का कारण बन सकता है। सदा आलोचना से बच्चों में रोष और अवस्था की प्रवृति पैदा होती है और यह उद्देश्यीन और दिशाहीन हो सकता है। हमें बच्चों को इस प्रकार की नकारात्मक प्रवृतियों से बचाना चाहिए।

अंत मे अगर आपका कोई सवाल है तो हमें आपकी मदद कर के खुशी होगी। धन्यवाद!