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GOVERNMENT OF INDIA
MINISTRY OF SOCIAL JUSTICE AND EMPOWERMENT
DEPARTMENT OF SOCIAL JUSTICE AND EMPOWERMENT

(Senior Citizens Division)

ATAL VAYO ABHYUDAY YOJANA – CS

Centre Sector Scheme
Duration: Financial Year 2021-26

6th Floor, A- Wing, Shastri Bhawan, New Delhi-110001

1. Introduction and Background:

1.1 There has been a steady rise in the population of senior citizens in India. The number of elderly persons increased from 7.6 crore in 2001to 10.38 crore in 2011. As per the Report of the Technical Group on Population Projections for India and States (2011-2036) submitted to National Commission on Population, Ministry of Health and Family Welfare, the population of senior citizens in India is projected to increase from 10.38 crore in 2011 to 23 crores in 2036. The total population of India is projected to increase from 121.10 crore in 2011 to 152.20 crore in 2036. Therefore the percentage of senior citizens against total population is expected to increase from 8.4% to 14.9%.

1.2 General improvement in the health care facilities over the years is one of the main reasons for continuing increase in proportion of population of senior citizens. Ensuring that they not merely live longer, but lead a secure, dignified and productive life is a major challenge. The traditional norms and values of the Indian society laid stress on showing respect and providing care for the aged. However, in recent times, society is witnessing a gradual but definite decline of the joint family system, as a result of which a large number of parents are being neglected by their families exposing them to lack of emotional, physical and financial support. These older persons are facing a lot of problems in the absence of adequate social security. This reveals that ageing has become a major social challenge and there is a need to provide for the economic and health needs of the elderly and to create a social milieu, which is conducive and sensitive to the emotional needs of the elderly.

1.3 The challenge is to devise ways so that Senior Citizens across the nation can live actively engaged, self-reliant and productive life with dignity by involving all the following stakeholders: -

a. Senior citizens themselves and their informal caregivers/families (unpaid care givers) in the community.
b. Formal Care-Givers (paid)

c. Government- be it in Elderly Care or Social Welfare departments, Health or State Government in general especially people at grass-root/ cutting edge level
d. Care Institutions
e. Health Care Institutions
f. Local Bodies/ Corporates
g. The Non-Profit or Non-Governmental Associations
h. The Think Tanks
i. The Media and finally the Public at large.

2. Vision & Mission of the Scheme:

2.1 Vision:

A society in which Senior Citizens live a healthy, happy, empowered, dignified and self-reliant life along with strong social and inter-generational bonding.

2.2 Mission:

Building an envisioned society by providing access to all Indian Sr citizens adequate food, water, shelter, clothing, health care, financial and social security, recreation, required opportunities and resources for their self-fulfillment and empowerment with development of a formal and informal social support system. Further by generation of awareness about the Act and policies of the Government, bring an attitudinal change amongst the people to establish the enlightened society in which senior citizens are enabled to lead active, protected and productive lives with strengthening intergenerational bonding through easy access to trusted information, opportunities and social support services.

3. Rationale of the Scheme:

This Scheme lays down in one document, the vision, mission and the immediate plan of action of the Government of India for welfare and well-being of senior citizens of the country. All the issues of relevance to

older persons have been taken into account in the scheme in order to ensure that older persons are not left behind and they can live a long and healthy life. It brings together articulation of each of the current schemes, future strategic plans and maps it with schemes/programmes, accountabilities and clear outcomes. This Plan takes care of needs of the senior citizens viz. financial security, shelter, food, health care and human interaction / life of dignity. It also includes the facets of safety/protection and general wellbeing of the elderly beginning by generation of awareness and sensitization of the society

4. Applicability of the Guidelines:

The revised Atal Vayo Abhyuday Yojana (AVYAY) – Central Sector Scheme-CS (2021-26) supersedes the provisions prescribed in the guidelines for implementation of the umbrella scheme Atal Vayo Abhyuday Yojana (AVYAY) 2021-26, except those prescribed for implementation of the Integrated Programme for Senior Citizens (IPSrC) and State Action Plan for Senior Citizens (SAPSrC).

5. Atal Vayo Abhyuday Yojana (AVYAY):

Sr. No.	Components	Source of fund
1.	Integrated Programme for Sr. Citizens (IPSrC)	GBS/SCWF
2.	State Action Plan for Sr. Citizens (SAPSrC)	GBS/SCWF

5.1 The two components funded under GBS/SCWF:

(a) Integrated Programme for Senior Citizens (IPSrC):

Maintenance of Senior Citizen Homes (Sr.CH) to improve the quality of life of the Senior Citizens, especially indigent senior citizens by providing basic amenities like shelter, food, medical care and entertainment opportunities and by encouraging productive and active ageing.

(b) State Action Plan for Senior Citizens (SAPSrC):

(i) The Government of India perceives a major and critical role of all State/ UT Governments in partnering and implementing this Action Plan for welfare of senior citizens. Appreciating the critical and significant role of States/UTs, each State/UT is expected to plan and strategize taking into account their local considerations and frame their own State Action Plans for the welfare of their senior citizens. This State Action Plan may comprise a long term strategy for five years as well as Annual Action Plans. The Union Ministry of Social Justice and Empowerment shall

release funds to the States/UTs for formulation and implementation of their State Action Plans.

(ii) The States/ UTs are expected to put in their own funds to augment the resources available for this purpose. While the States/ UTs are free to include their own strategies and programmes as a part of their State Action Plans, the design of the SAPSrC for which funding will be admissible under this sub scheme has been finalized, which should be implemented on priority by all the States/UTs out of the funds released under AVYAY.

6. Atal Vayo Abhyuday Yojana (AVYAY) –CS:

Sl. No.	Components	Source of fund
1.	Rashtriya Vayoshri Yojana (RVY)	SCWF
2.	National Helpline, Awareness, Training and Capacity Building	SCWF
3.	Senior-care Ageing Growth Engine (SAGE)	SCWF
4.	Training of Geriatric Care Givers	SCWF
5.	Other Initiatives for Senior Citizens	SCWF

Note: SCWF (Senior Citizen Welfare Fund)

6(i) **Rashtriya Vayoshri Yojana (RVY):**

A Scheme for providing Physical Aids and Assisted Living Devices for Senior Citizens below poverty line or with the family income not exceed to Rs. 15,000/- per month.

6(ii) ELDER LINE (National Helpline for senior citizen):

Registration of grievances, redressal of Grievances and Monitoring of the performance of States /UTs are done through the website of Elderline for Senior citizens (elderline.dosje.gov.in). The National Helpline for Sr Citizens is to generate awareness about the Act, schemes & programmes being executed by different Central & State Governments and to provide

platform to redress grievances of Sr Citizens across the country. The Helpline also enables Government to understand the challenges faced by the senior citizens, and thereby work towards bringing new policies or effecting necessary policy changes and improving implementation as required.

6(iii) **Senior-care Ageing Growth Engine (SAGE):**

(a) In accordance with the Govt policy to promote out-of-the-box and innovative solutions for the commonly faced problems, innovative start-ups would be identified and encouraged for developing products, processes and services for the welfare of the elderly.

(b) The selection of the start-ups would be made through a transparent process and the fund would be provided as equity, subject to the Govt investment not exceeding 49% of the total equity of the Firm.

(c) The initiative would be implemented by IFCI Venture Capital Funds Ltd. (Investment Manager) in consultation with MoSJE.

6(iv) **Training on Geriatric Care Givers:**

Creating a pool of trained personnel to bridge the gap in supply and increasing demand of geriatric caregivers so as to provide more professional services to the senior citizens.

6(v)Other initiatives for Senior Citizens:

In order to solve the problems of healthy and productive ageing, several experiments are being done across the country. These initiatives are aimed at involving the elders in building up knowledge which can be useful for the society as a whole.

7. Monitoring methodology:

(i) Progress reports on the portal

(ii) Inspections carried out by representatives of the Project Monitoring unit (PMU);

(iii) Observation of performance through live tracking of projects (CCTV)/Web portal of the Department/ Website of implementing agencies.

(iv) Monitoring through Project Management Committee

(v) Annual progress monitoring by the Minister of Social Justice and Empowerment.

(vi) Third party evaluation will be conducted on regular intervals through a reputed Agency working in accordance with Government of India instructions issued from time to time.

(vii) The Department of Social Justice and Empowerment would formulate and establish any further monitoring mechanisms for effective implementation of various activities under the Scheme.

CHAPTER - 1

Rashtriya Vayoshri Yojana (RVY): A scheme for providing physical Aids and Assistive living devices to Senior Citizens

1. Background:

1.1 The well-being of senior citizens is mandated in the Constitution of India under Article 41.

1.2 In the Budget Speech of the year 2015-16, reference was made to put in place a Central Sector Scheme to provide physical aids and Assistive Devices for such senior citizens suffering from age related disabilities/infirmities, who belong to BPL category. Accordingly, a scheme named 'Rashtriya Vayoshri Yojana' (RVY) was formulated. The scheme was launched on 1st April, 2017.

2. Objectives:

The objective is to provide physical aids and Assistive Devices to the Senior Citizens who are suffering from age related disability / infirmity, enabling them to improve their Social and Economic life.

3. The Scheme aims to address following types of disability/infirmity:

(i) Low Vision;
(ii) Hearing impairment;
(iii) Loss of teeth; and
(iv) Locomotor disability.

4. Types of Physical Aids and Assistive-Living Devices:

The following Aids and Assistive-Living Devices shall be provided to eligible elderly beneficiaries, depending upon their physical impairment: -

(a) **Generic Items: -**

(i) Walking sticks
(ii) Elbow crutches
(iii) Walkers / Crutches
(iv) Tripods / Quadpods
(v) Hearing Aids
(vi) Artificial Dentures
(vii) Spectacles

(b) **Special Items:**

(i) Wheelchairs
(ii) Wheel Chairs with Commode
(iii) Chair/Stool with Commode
(iv) Silicon Foam Cushion
(v) Knee Brace
(vi) Spinal Support
(vii) Cervical Collar
(viii) Lumbosacral Belt (LS)
(ix) Walker/Roalator with Brakes
(x) Walking Stick with Seat

(c) **Any demand for aids and assistive devices, in addition to the items listed above, beneficial for the senior citizens, shall be considered with the approval of the Competent Authority.**

5. Extent of Support:

5.1 The component will be fully financed (100% funded) by the Central Government from 'Senior Citizens' Welfare Fund'.

5.2 The extent of support will comprise of free of cost distribution of "Physical Aids and Assistive-Living Devices" commensurate with the extent of disability/infirmity that is manifested among the eligible senior citizens. In case of multiple disabilities/infirmities, the assistive devices will be given in respect of each disability/impairment that is manifested in the same person.

5.3 The Implementing Agency shall provide one-year free maintenance of the aids & assistive living devices supplied by them. The maximum cost of generic devices will not exceed Rs. 7000/-per beneficiary. However, for the cases where the distribution of wheel chair and hearing aids are required, the ceiling may be fixed at Rs. 12,000/- per beneficiary. The monetary limit of the devices shall be as under: -

Type of Assistive Device	Monetary Limit
(a) Generic Items: - (i) Walking sticks (ii) Elbow crutches (iii) Walkers / Crutches (iv) Tripods / Quadpods (v) Hearing Aids (vi) Artificial Dentures (vii) Spectacles	Cost as notified by ALIMCO or actuals whichever is less.
(b) Special Items: - (i) Wheelchairs (ii) Wheel Chairs with Commode (iii) Chair/Stool with Commode (iv) Silicon Foam Cushion (v) Knee Brace (vi) Spinal Support (vii) Cervical Collar (viii) Lumbosacral Belt (LS) (ix) Walker/Roalator with Brakes (x) Walking Stick with Seat	Cost as notified by ALIMCO or actuals whichever is less.

5.4 The Central Government may, in accordance with guidelines of the Department of Expenditure on fund flow procedure to be followed where CNA module is adopted. Release 25% of the project cost to the implementing agencies in advance for commencing the project. Subsequent instalment of 25% each shall be released only after utilization of 75% of the funds released.

5.5 A maximum of one per cent of the total expenditure of the Scheme shall be used for monitoring and evaluation. 10% administrative charges shall be given to ALIMCO in case the number of beneficiaries exceeds 1000 and 5% in case the number of beneficiaries is less than 1000 for organising camps in the Districts under RVY.

5.6 Administrative cost under the RVY, DoSJE and ADIP scheme of Department of Empowerment of Persons with Disabilities shall be shared for organizing joint camps for implementation of the schemes.

6. Mode of Implementation:

6.1 Ministry of Social Justice and Empowerment, Government of India is the nodal Ministry to oversee the implementation of the Scheme. The Ministry provides financial resources and ALIMCO shall provide the technical guidance including specifications for each of the devices that are proposed to be procured. The Govt. of India reserves the right to re-allocate the districts as and when necessitated to do so. Identification of the districts where the Scheme is to be implemented should focus on backward and rural areas.

6.2 The Scheme will be implemented by the 'Artificial Limbs Manufacturing Corporation (ALIMCO)', a Public Sector Undertaking under the Ministry of Social Justice and Empowerment, who will also function as the Central Nodal Agency (CNA).

6.3 Beneficiaries in each district will be identified by the State Governments/UT Administrations through the Committee chaired by the Deputy Commissioner/District Collector. The State Government/UT Administration/District Level Committee may utilise the data of BPL beneficiaries receiving Old Age Pension under the NSAP or any other Scheme of the State/UT for identification of senior citizens belonging to BPL category. The devices will be distributed in the camp mode.

6.4 The ALIMCO shall publish a price list of each device mentioned in para 5.3 above, along with specifications and standards as applicable. The said price list shall be provided by ALIMCO to the Ministry of Social Justice and Empowerment who shall also publish the list on its website. The assistive devices shall be of high quality and conforming to the standards laid down by the Bureau of Indian Standards, wherever applicable.

6.5 ALIMCO will undertake assessment and distribution of the devices on the day-to-day basis at their HQ and Regional/ field Offices for the target group. In condition of the unavailability of the Medical Officer, Rehabilitation experts from ALIMCO may prescribe wheelchairs, Tripod, Tetrapod, Elbow Crutch, Axilla Crutch, Walking Stick, Foldable Walker and BTE Hearing Aid. For prescription of Artificial Denture and Spectacles, ALIMCO may hire/engage the experts from the relevant field in assessing the Senior Citizens at their HQ/ALIMCO Auxiliary Production Centres (AAPCs)/Regional Marketing Centres (RMCs).

6.6 ALIMCO is required to keep the ceiling for distribution of assistive devices at the rate of Rs. 7000/- per beneficiary. However, for the cases where the distribution of wheel chair and hearing aids are required, the ceiling may be fixed at Rs. 12000/- per beneficiary.

7. Eligibility criteria for the beneficiaries:

7.1. Senior Citizens, suffering from any of the age-related disability/infirmity, belonging to BPL category or the Senior Citizens with the monthly income not more than Rs. 15000/-.

7.2 The person should be a Senior Citizen of India (aged 60 years and above) and possessing an Aadhaar card.

7.3 The beneficiary may produce a certificate from the District Authority for eligibility or a BPL ration card or proof of receiving Old Age Pension under Indira Gandhi National Old Age Pension Scheme (IGNOAPS) under the National Social Assistance Programme (NSAP) or any other Pension Scheme of the State/UT Government for Senior Citizens belonging to BPL category.

7.4 Certificate from the Medical Officer shall be required for loss of vision, hearing impairment, loss of teeth and locomotor disability requiring use of wheelchair. In condition of the unavailability of the Medical Officer, a Medical Team of doctors or qualified Allopathic doctors may certify the physical disability of the beneficiary.

7.5 The person should not have received the same device(s) free of cost from any Government source including local bodies and public undertakings controlled by the Government during last 3 years. However, replacement of faulty/non-functional device(s) may be allowed as an exception to this condition.

7.6 In any State/UT, out of the total number of beneficiaries, 30 per cent shall be women.

7.7 It should be ensured that the percentage of SC/ST beneficiaries of the Scheme shall be equal to or more of their respective percentage of population in the district.

7.8 Income certificate from Revenue Agencies or BPL card or MGNERGA card or Disability Pension Card or Certificate by M.P./MLA/Councillor/Gram Pradhan may be accepted for providing aids/appliances to Senior Citizens.

8. Awareness Generation on the Scheme:

The Central and the State Governments/UT Administrations shall ensure wide publicity to the Scheme so that adequate awareness is created among the potential beneficiaries and their families as well as the general public about the existence of the Scheme and the benefits available under it.

9. Monitoring and Evaluation:

9.1 After distribution of the assistive living devices, a sample check to the extent of 10% of the beneficiaries shall be made by the ALIMCO/implementing agencies.

9.2 The programme will be evaluated by the Ministry of Social Justice and Empowerment. In addition to this the third party evaluation shall be carried out from time to time. Project Implementing Units will monitor the implementation of the RVY component at the field level. The officers of the Department/PIU may also be deputed for monitoring the camps.

9.3 The details of beneficiaries i.e. name, date of birth, age, sex, address, contact number, Aadhar number, date of distribution of assistive devices, details of devices, cost of devices etc. under RVY scheme must be uploaded in the ARJUN portal to avoid duplicity in distribution of assistive devices to the beneficiaries on real-time basis, by the implementing agency. Details of beneficiaries may be checked through Aadhar on portal and camp-wise reports may be generated. It may however be ensured that the details of beneficiaries under RVY and ADIP are seeded separately in the ARJUN portal.

9.4 Annual Plan/Quarterly Plan for organizing the camps for distributing the assistive devices to the beneficiaries/target group should be prepared in the department.

9.5 Camps for assessment and distributing assistive devices to the target groups should be organised after approval of the Department only.

10. Audit of Accounts:

The accounts of the Implementing Agencies shall be subject to the audit by the prescribed authority in accordance with the provisions of General Financial Rules (GFR), 2017, as amended from time to time, in this regard.

CHAPTER - 2

Elderline:
National Helpline for Senior Citizens (NHSC)

1. Background:

1.1 In National Policy on Older Persons 1999, it is mentioned that 'The State Government shall establish and maintain Helpline for safety and security of senior citizens having one common number across the Nation and it shall be linked to healthcare facilities, police department and other related agencies'.

1.2 The First phase of Implementation of the Scheme of National Helpline was launched on 1st October 2020 on the occasion of International Day of Older Persons with unique number (14567).

1.3 The National Helpline was dedicated to the Nation on 1st October 2021 on the occasion of International Day of Older Persons with a Toll number "14567".

2. Objective:

2.1 With a vision to connect and engage with senior citizens, and serve them in a compassionate manner through a National Helpline, the objective of this component is to create a dedicated one-stop platform for redressing the grievances of the senior citizens by providing necessary intervention.

3. Modalities:

3.1 To generate awareness about the Maintenance and Welfare of Parents and Senior Citizens (MWPSC) Act, 2007, schemes and programmes being executed by different Central and State Governments and to provide platform to redress grievances of Senior Citizens across the country.

3.2 To provide support and guidance to Senior Citizens.

3.3 To have a Pan India integration with Emergency Response Support System (112)

4. Selection process:

The helpline shall be operated through outsourced agencies either selected/nominated by the States/Union Territories or through Request for proposal (RFP).

5. Implementing Agency:

National Institute of Social Defense (NISD) is the nodal agency for implementation of Elder Line across the country.

6. Flow of funds:

6.1 The funds will be released to NISD who will also function as CNA. NISD being the nodal implementing agency will disburse the financial assistance to the implementing agencies.

6.2 One-time grant shall be given to each Centre for procurement of hardware and other items for smooth functioning. In case of change of implementing agency, the hardware, furniture etc. shall be handed over to the new implementing agency as per the provisions of GFR.

7. Monitoring Mechanism:

7.1 Monitoring of the call performance of the helpline with respect to registration of grievances and its redressal, shall be done through the website of Elderline for Senior citizens (elderline.dosje.gov.in).

7.2 The implementing agencies are required to submit the Monthly/Quarterly/Annual report to National Institute of Social Defense (NISD) detailing the activities carried out. Monitoring will be carried out by the Ministry/ PMU/PIU established under PM-AJAY scheme.

8. Audit of Accounts:

The accounts of the Implementing Agencies shall be subject to the audit by the prescribed authority in accordance with the provisions of General Financial Rules (GFR), 2017, as amended from time to time, in this regard.

CHAPTER – 3

Promoting silver economy: Senior-Care Ageing Growth Engine (SAGE)

1. Background:

1.1 In the field of social gerontology, silver economy plays the major role in living of ageing population. The silver economy is not a single sector, but rather a collection of products and services from many existing economic sectors. Government is committed to bring about out-of-the-box solutions for promoting Silver Economy and to have solutions of problems faced by the elderly through promotion of start-ups.

1.2 Currently there is a vacuum in comprehensively addressing the areas that concern the elderly covering areas like mental care, social connectivity, productive activity and product development for the elderly segment.

1.3 Whereas the DPIIT has provided a clear direction for promotion of start-ups in the country, there is a need to support the start-ups entering the elderly care segment for the following reasons: -

(i) The profitability in the start-ups in the elderly care segment is minimal as they are addressing a social issue.

(ii) The institutional banking network has been conservative in funding ventures for elderly care, restricting the scope for raising institutional finance for these ventures.

2. Objectives:

2.1 The objective of the scheme is to call for, through a transparent process, the innovative ideas for the elderly care and promoting them into start-ups by providing equity support.

2.2 To identify and encourage Start-ups, Youth or Senior Citizens for developing products and services for promoting Silver Economy and for welfare of the elderly.

2.3 To provide financial assistance to the start-ups which come up with innovative products or services for promoting Silver Economy.

3. Eligibility:

The following categories would be eligible under the scheme: -

(i) Innovative ideas awarded in the National level innovation challenges such as Smart India Hackathon (of M/o Education) or such other innovative drives – proposing products, processes and services for the welfare of the elderly.

(ii) Start-ups already functioning in the elderly segment proposing to expand operations.

4. Manner of Selection:

(i) An open notification shall be issued for inviting applications from start-ups having ideas/projects meant for the elder care segment.

(ii) SAGE an online portal has been developed for giving details of the start-ups/ideas for easy uploading of the projects/proposals.

(iii) Empowered Evaluation Committee (EEC) will be constituted with experts from the fields of Industry, Education, Science and Technology and other stakeholders, to evaluate and recommend projects for support under the component

(iv) The Project Approval Committee (PAC) under the chairmanship of Secretary at the Ministry level to consider the recommendations of EEC.

5. Modalities:

(i) The Ministry shall provide details of the Start-ups finally selected for assistance under the scheme to the IFCI- Venture Capital Limited.

(ii) The equity would be held in the name of SAGE Venture Fund and Industrial Finance Corporation of India (IFCI) Venture Capital Limited is the investment manager on behalf of the Ministry.

(iii) IFCI- Venture Capital Limited shall assess financial viability of the start-up and release equity so that innovative Start-ups may grow further with sustainability. How much equity is to be shared, shall be decided by IFCI Venture capital subject to maximum limit of 49% equity and ensuring financial security of the equity.

(iv) IFCI Venture Capital Limited shall make necessary arrangements for changing applicable Trust guidelines or add proviso in it so that required equity may be released and maintained smoothly.

6. Entitlement under the Scheme:

The selected start-ups/start-up ideas can be provided equity support of up to Rs.1 crore per project while ensuring that the total Govt equity in the start-up should not exceed 49%.The quantum of funding would depend on the type of project, the scope of expansion and the requirement of funds as per the project proposal.

7. Implementing agency:

Industrial Finance Corporation of India (IFCI) Venture Capital Limited is the implementing agency of the scheme, who will also function as CNA.

8. Monitoring:

(i) Progress of the start-ups will be monitored online.

(ii) The projects funded under this initiative shall be monitored on a regular basis by a Monitoring Committee of the Department.

CHAPTER – 4

Training of Geriatric Care Givers

1. Background:

Industrialization, urbanization and modernization have brought both opportunities and challenged for the populace of this country. The biggest impact of these trends has been felt on joint family system which has been facing multiple challenges. The strain on the joint family system has placed the old generation of grand and great grandparents, who have been in need of social, economic, health and emotional support, to much disadvantageous position. In the old joint family system, the youth were the physical, financial and emotional support while the children were the playmates for the older generation. However, the changing times have left this old and experienced generation disengaged, despondent and dejected.

As a developing nation aspiring the status of developed nation, we have a duty toward this generation, which had toiled with sweat, blood and tears to ensure its sustenance and development. However, we cannot move back the wheel of development and modernization. Nevertheless, we can surely provide for caregivers to this elderly population who can hold their hands in the time of depleting physical, financial and emotional dependence. Evidently the geriatric caregiving shall have multi-disciplinary approach to cater to diverse and dynamic needs of this elderly population and shall ensure availability of dedicated trained manpower to attend to domestic and external needs.

2. Objectives:

The main objective is to bridge the gap in supply and increasing demand in the field of geriatric caregivers so as to provide more professional services to the senior citizens and also to create a cadre of professional care givers in the field of geriatrics. The programme will ensure sufficient availability of dedicated, professionally trained manpower of geriatric caregivers who can attend to diverse and dynamic needs of elderly population relating to recreation, holistic well-being through Naturopathy, alternative medical practices including Ayurveda, Yoga, Unani, Siddha

and Homeopathy, physiotherapy, normal and emergent and crisis related medical conditions including Dementia, Paralysis, Prostate, Parkinson, Alzheimer, Depression, religious and spiritual handholding, pet care and pet management, overall management of patients and families dealing with terminal illness and death etc.

3. Implementing Agency:

National Institute of Social Defense (NISD) will function as the implementing agency and also CNA.

4. About the course:

The courses shall have an emphasis on physical, mental and overall well-being of the elderly with a multi-disciplinary approach. The courses are selected and periodically reviewed by Curriculum Subject Expert Committee Members.

As the trained GCs are likely to cater to diverse needs of elderly population, which will be multi-disciplinary and dynamic in nature, the course curriculum for prospective GCs may only be indicative. It is proposed that the course curriculum for the prospective job roles for GCC may have few of the following topics:

I. Basic understanding and empathy towards the process of ageing and its requirements
II. Skills for anthropogenic measurement for record keeping and medication purposes
III. Ethics in healthcare, privacy, confidentiality, consent, medico-legal concept
IV. Assisting in re creational activities like gardening, walking, hobbies, indoor games etc.
V. Preparing capable elderly population for creative and gainful activities including employment.
VI. Alternative health care systems including ayurveda, yoga, unani, siddha and homeopathy
VII. Pet care and pet management
VIII. Creative and productive use of latest electronic gadgets including TV, mobiles etc

IX. Basics of emergency and disaster care and life support skills
X. Knowledge of computer and information technology
XI. Mental health issues / concerns in elderly
XII. Nutrition including assistance in grooming the patient before, during and after food
XIII. Assistance in grooming the patient before, during and after bath including fall prevention
XIV. Care of patient including oral, nasal, auditory, visual, skin, genitalia, hair, artificial denture etc.
XV. Assisting patient in maintaining normal elimination
XVI. Dealing patients with chronic and terminal illness including Parkinson, dementia, depression, Alzheimer,
XVII. Preparing patient for terminal illness and death

Apart from the topics discussed above, a basic course for family member of Senior citizens on elementary geriatric care would be developed and updated on regular basis. Such a course may be implemented in hybrid mode.

5. Eligibility:

i. Minimum qualification as per required job roles.
ii. Minimum age limit with 18 years (in completed years).
iii. Should have a valid Aadhar card.
iv. Should not be indulged in any substance abuse.
v. Should have documentary proof of age and residence.
vi. Should have a valid education proof.

6. Eligibility of the Training Institute:

The Training for Geriatric Caregivers will be carried out through following categories:

(i) Centre / State Governments Medical and Nursing colleges, Universities, Training Institutes/ Partners empanelled under Ministry of Health and Family Welfare and Ministry of AYUSH.

(ii) The Training Institutions / Partners empanelled under NSDC/Sector Skill Councils certified in Geriatric course.

(iii) The Training Institutions/Partners affiliated with NISD including the RRTCs, having well past track record for the past 2 years and having adequate infrastructure In case of absence of demonstration lab from the above-mentioned institutions, an MoU/agreement between the institution and health care institution or Nursing Institute will have to be produced.

7. Third Party Assessment and Certification:

(i) The Training programme under the scheme is to be completed within 5 months of sanction of training programmes.

(ii) At least 15 days prior to assessment, the training institutions/partners should intimate NISD about the date of assessment.

(iii) To ensure independent and unbiased assessment of trained candidates, the Training Institution/Partner will be required to arrange for assessment through empanelled agencies under NSDC within five days of completion of the course.

(iv) Assessment of trained candidates out of the courses conducted by NISD and RRTCs will be done by NISD themselves

(v) All candidates completing the course will be eligible for NISD certification within five days from the date of receipt of the assessment report by NISD.

8. Monitoring:

(i) Training institutions/partners to submit Progress reports to NISD on completion of the course.

(ii) Training institutions/partners to maintain brief profile of resource persons and trainers.

(iii) NISD will develop a portal and create the pool with all details of the trained candidate to enable the organizations and needy people/families, directly approaching the candidates for his/her services.

9. Release of Financial Assistance:

Common Cost norms of MSDE will be followed. The sanctioned amount of Training Cost will be released as per CNA procedure prescribed by the Department of Expenditure.

10. Audit of Accounts:

The accounts of the Implementing Agencies shall be subject to the audit by the prescribed authority in accordance with the provisions of General Financial Rules (GFR), 2017, as amended from time to time, in this regard.

CHAPTER – 5

OTHER INITIATIVES FOR SENIOR CITIZENS

1. Objectives:

In order to solve the problems of healthy and productive ageing, several initiatives are being done across the country. The proposed initiatives are aimed at involving the elders in building up knowledge which can be useful for the society as a whole.

2. Implementing agency:

National Institute of Social Defence (NISD) will be the implementing agency and will also function as CNA.

3. Initiatives:

i. Activities like community based radio services, podcasts, voice bots.
ii. Volunteering for financial, digital and legal literacy.
iii. Time bank credit system.
iv. Human library.
v. Sensitization of Children through value education training.
vi. Intergeneration bonding.
vii. Any other initiative and innovative ideas for the welfare / wellness of senior citizens.

4. Project proposals:

A Steering Committee shall be constituted under the chairmanship of Joint Secretary, Senior Citizen Division. Any project proposal received under this component will be examined by NISD and thereafter it will be placed before the Steering Committee for consideration/recommendation on quarterly basis. The committee will, after considering the viability, outreach, outcome, financial obligations etc. of the project, either

recommend or reject the project proposal. The project proposal will further be subject to approval of the Integrated Finance Division and the competent authority in the Ministry.

5. Flow of Funds:

The fund flow mechanism will be as per the guidelines of the Department of Expenditure on CNA module.

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