

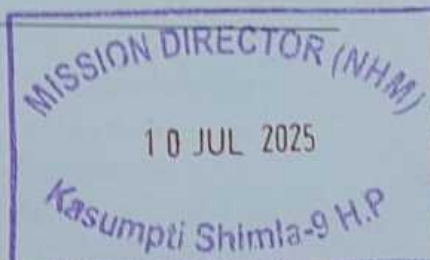


[E- 11443- NHMHP-HWC00GEN/6/2019-HWC-Section-Part (1) - 1599
National Health Mission,
Directorate of Health Services,
SDA Complex, Kasumpti
Himachal Pradesh, Shimla-9

To

All the Chief Medical Officers
in Himachal Pradesh

Dated Shimla-9, the July, 2025



Subject: Regarding SoPs for provision of yoga sessions in Ayushman Arogya Mandirs (AAMs) of Health Department.

Sir/Madam,

It has been decided that Male and Female Yoga Guides engaged on outsourced basis by the Ayush Vibhag will also conduct yoga sessions in the Ayushman Arogya Mandirs (i.e AAMs-HSCs, PHCs, UPHCs, and UHWCs) of the Health Department.

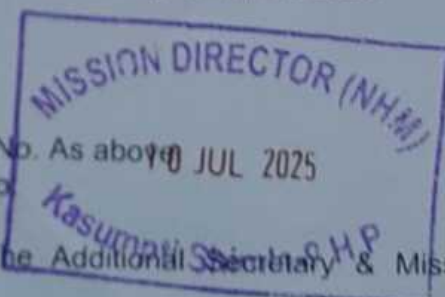
In this regard, please find enclosed the joint D.O. letter, duly signed by the Mission Director, NHM, and the Director, AYUSH, conveying the Standard Operating Protocols (SoPs) for providing Yoga services in Ayushman Arogya Mandirs (AAMs) of the Health & Family Welfare Department by Yoga Guides hired by the AYUSH Vibhag.

You are requested to kindly issue necessary directions to the Medical Officers (MOs) of PHCs and Community Health Officers (CHOs) posted at the Ayushman Arogya Mandirs (AAMs) in your respective districts to facilitate and extend their full support to the AYUSH Yoga Guides in conducting yoga sessions at the designated AAMs-HSCs, PHCs, UPHCs, and UHWCs.

Your cooperation in ensuring the smooth implementation of these services will be highly appreciated.

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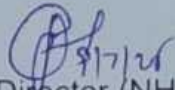
1. The Additional Secretary & Mission Director (NHM), MoH&FW, GoI for



Dy. Mission Director (NHM),
Himachal Pradesh
Dated Shimla-9, the

information please.

2. The Secretary (Health) to the Government of Himachal Pradesh for information please.
3. The Secretary (Ayush) to the Government of Himachal Pradesh for information please
4. The Executive Director, NHSRC, MoH&FW, GoI for information please
5. The Director Health Services, Himachal Pradesh for information please.
6. The Director Ayush, Himachal Pradesh for information please
7. All the District Programme Officer (HWCs) for information and necessary action please


Dy. Mission Director (NHM),
Himachal Pradesh, Shimla



Sh. Rohit Jamwal, (IAS)
Director Ayush Vibhag
Himachal Pradesh



Sh. Pradeep Kumar Thakur, (IAS)
Mission Director (NHM)
Himachal Pradesh

File No. NHMHP-HWC0GEN/6/2019-HWC-Section-Part(1)11443 dt. Shimla-9 the

Subject: Regarding SoPs for provision of yoga sessions in Health & Wellness Centre of Health & Family Welfare Department.

Madam/Sir,

It has been decided that Male and Female Yoga Guides deployed in the Ayush Health & Wellness Centres (AHWCs) by the Ayush Vibhag will also conduct yoga sessions in the HWCs-HSCs/ PHCs/UPHCs/UHWCs of the Health Department. The following SoPs are to be followed for the same:

1. The Block Medical Officer will convene a meeting with the SDAMO of the Ayush Vibhag. They will deliberate upon the number of operational HWCs-HSCs/PHCs/ UPHCs/UHWCs in the block and the availability of Yoga Guides in various Ayush-HWCs. Subsequently, the SDAMO will assign Yoga Guides from the AHWCs to HWCs of Health Department in such a manner that at least 10 yoga sessions are organised in one Health HWC. The SDAMO may assign yoga guides from different AHWCs for a particular HWC based upon the availability of the yoga guides. It must be ensured that maximum number of Health HWCs are covered for the yoga sessions. The BMO will issue minutes of the meeting which would be circulated amongst all the functionaries in Health and Ayush HWCs. Based upon the decision of the SDAMO the AMO –CHO will draft a micro-plan for the yoga instructor as per guidelines issued by the Ayush Vibhag vide letter No. Ayur. H(I)(I) (F) 4 / 85-Yoga Guides –(Gen)-17215-17332 dated 6-9-24. The micro-plan would be conveyed to the MO/CHO of HWC-HSC/PHC/UPHC/UHWC with the copy marked to SDAMO and BMO.
2. On receipt of the micro-plan the front line health workers of the Health HWCs would mobilize the community for the yoga sessions. It would be the responsibility of the MO/CHO of HWCs to upload the photographs of the yoga session on the HWC portal after the yoga session.
3. The Yoga Guide will fill part A of the Claim Form in triplicate at the end of each Calendar month as per format attached. The concerned MO/CHO – HWC will verify the sessions on Part B of the Claim Form. One copy of the Claim Form will be retained at the HWC, the second copy will be submitted by the MO/CHO to the BMO on the date of the monthly block meeting. The third copy will be submitted by the Yoga Guide to the AMO-CHO. It is possible that more than one Yoga Guide is assigned one particular HWC so as to ensure that a minimum of at least 10 Yoga sessions are conducted in

the particular HWC. The AMO-CHO will compile the Claim Forms and send the same to the SDAMO in the succeeding week of each calendar month. The SDAMO will reconcile the payment received from the Health Department with the Claim Forms received from the AMO-CHO.

4. On receipt of the duly verified claim form the BMO will make the payment for the Yoga Guides @ Rs. 250 per Yoga Session subject to the condition that at least 10 Yoga sessions have been organised in a particular HWC in a month in the AYUSH Arogya Kalyan Nidhi of the AHWCs from where the Yoga Guide was requisitioned. The BMO will make such AHWCs as vendor in the PFMS Portal. The payment must be made within a week of the Monthly Block Meeting. The Expenditure incurred on the yoga sessions may be booked under FMR Code HSS. 1, Sr. No. 150.
5. The Yoga Guide will be eligible for remuneration and team based incentives as notified by Ayush Vibhag from time to time.

We are hopeful that the mentioned SoPs are followed in letter and spirit.

Yours sincerely,

(Rohit Jamwal, IAS)

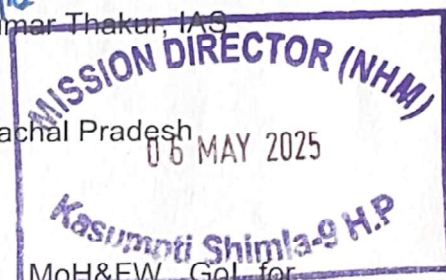
Yours sincerely,

(Pradeep Kumar Thakur, IAS)

All the Chief Medical Officers/ District AYUSH Officers in Himachal Pradesh

Copy to:

1. The Additional Secretary & Mission Director (NHM), MoH&FW, Govt for information please.
2. The Secretary (Health) to the Government of Himachal Pradesh for information please.
3. The Secretary (Ayush) to the Government of Himachal Pradesh for information please
4. The Executive Director, NHSRC, MoH&FW, Govt for information please
5. The Director Health Services, Himachal Pradesh for information please.
6. All the District Programme Officer (HWCs) for information and necessary action please



**Verification form for Yoga Sessions conducted in Health Ayushman Arogya
Mandirs**

Part –A: To be filled by the Yoga Instructor

District: _____

Block: _____

AAM-PHC/UPHC/HSC _____

Claim for the month/ year _____

Yoga Sessions conducted on following dates: _____

Location of sessions conducted: _____

Name of Yoga Instructor: _____

Signature of Yoga Instructor: _____

Part-B: To be verified by MO-PHC/UPHC or CHO-HSC

It is hereby certified that Mr/Ms _____

S/O, D/O, W/O, _____

has conducted 10 yoga sessions of One hour duration each at
AAM _____

and the photographs of the same have been uploaded on the AAM porta.

Name: _____ Signature: _____

Name of AAM: _____ Block: _____

District: _____

Instructions for filling:

1. Form has to be filled in triplicate
2. Original copy is to be handed over to the Yoga instructor after verification
3. First copy to be retained at AAM.
4. Second copy to be sent to concerned Block Medical Officer.