



DELHI STATE AIDS CONTROL SOCIETY

GOVT. OF NCT OF DELHI

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F. No. DSACS-S052/1/2026-CST DIVISION/ Comp. No.:362043/1153 Date: 07/07/2026

ADDENDUM

In partial modification of Vacancy Notice No.: 2026-27/3 (ARTC) for Walk In Interview at ART Centers vide No.19(257)/DSACS/CST/2025/185 dated 22/04/2026, the following vacancies has been inserted as per details given below:

S. No.	Position/ Remuneration	Place of work	No. of Position	Venue, Date & Time of Interview
1.	Medical Officer Rs. 72,000/- PM Consolidated	ARTC, NITRD	1	Office of the Director, National Institute of Tuberculosis and Respiratory Disease, Sri Aurobindo Marg, new Delhi -110030 (Date & Time will be placed as addendum to this notice on the website)
2.	Laboratory Technician Rs. 21,000/- PM Consolidated	ARTC, AIIMS	1	Room No. 3095,3 rd Floor, Deptt. of Medicine, AIIMS, New Delhi-110029 (Date & Time will be placed as addendum to this notice on the website)
3.	Staff Nurse Rs. 21,000/- PM Consolidated	ARTC, DCBH	1	Conference Hall, 3 rd Floor, Admin Block, Deep Chand Bandhu Hospital, Ashok Vihar, Delhi-110052 (Date & Time will be placed as addendum to this notice on the website)
4.	Care Coordinator Rs. 18,000/- PM Consolidated	ARTC, DDUH	1	Doctor's Hostel, Ground Floor, Conference Hall, DDU Hospital, Hari Nagar, New Delhi-110064 (Date & Time will be placed as addendum to this notice on the website)

The essential qualification, experience and ToR for above positions are enclosed at Annexure -II.

All other contents of this vacancy notice remain unchanged.

This issues with the prior approval of Project Director, DSACS.


(Dr. Akshaya Verma)
Addl. Project Director

Position	Essential Qualification	Desirable	Essential Experience	Job responsibilities (All SACS, district and facility level staff will work in accordance to the operational and technical guidelines of NACO issued from time to time focussing on but not limited to the following activities)
MO - ART	MBBS with valid registration from the respective State Medical Council/NMC	Work Experience in HIV/AIDS Programme in field settings.	6 months work experience. Post Graduate from Clinical Discipline will also be considered.	☐ Medical Responsibilities: ☐ He/she should conduct the initial evaluation of PLHIV (clinical and lab) and initiate PLHIV on ART ☐ He/she should conduct the clinical and lab monitoring of PLHIV initiated on ART (including CD4 count, adherence, viral load testing and other lab investigation) ☐ He/she should identify PLHIV with advanced HIV and ensure management of all patients advanced HIV disease at ART centre or must ensure referral and linkages to appropriate facilities e.g. lab, in patient departments etc. ☐ He/she should refer difficult/complicated cases to the nodal officer or other specialist for further expert opinion and interventions including admission and inpatient care, if required. It includes referrals to other departments for treatment of, OIs, STI, etc. ☐ He/she should provide OI prophylaxis and preventive treatment as per guidelines ☐ Prevention and management of TB coinfection: He/she should perform 4S screening and take decision about TPT initiation or referral for TB diagnosis for all PLHIV attending ART centre. Initiation of ATT, CPT and ART as per technical guidelines ☐ He/she must update the prescribed columns in white cards and green books ☐ Ascertain eligibility for differentiated care (MMD, LAC, other DSD models) ☐ MO should refer "suspected/confirmed treatment failure" cases, "complicated cases" to the SACEP at the COE/ART plus for screening and initiation/modification/switch of ART, if required. The nodal officer of the ART centre must countersign all such referrals ☐ Focal point for care of exposed babies and EID for HIV exposed babies found "reactive" with DBS at ICTC and referred to ART centre ☐ Update the prescribed columns in white cards and green books. 12. Should actively participate and coordinate all initiatives/activities related to ART (e.g. Telemedicine, Verbal Autopsy, DSDM etc.) implemented by SACS/NACO time to time ☐ Any other activity assigned under the Programme ☐ Administrative Responsibilities: ☐ In the absence of SMO, the MO is the functional team leader of the ART centre under the overall guidance of the Nodal officer. The MO must supervise the administrative and medical functions of the ART centre on a day-to-day basis ☐ He/she should provide leadership to staff to work as a cohesive team and ensure implementation of national operational and technical guidelines ☐ He/she should ensure implementation of national operational and technical guidelines at ART Centres ☐ MO should also coordinate and monitor the linkages with CSC, other NGO's and networks ☐ He/she must co-ordinate and monitor the LAC/DSD models launched in the ART centre and ensure that the standard guidelines are being followed. Responsibilities in respect to Link ART centres/ LAC plus/ linked ART refill (DSD) sites • He/she has to mentor and monitor the functioning, recording, and reporting of LAC/LAC plus/ DSD site along with the Nodal officer • He/she must follow up out referral and in-referral of patients and communicate with the Link ART centre • He/she must take decision to link out willing patients to the nearest LAC based on eligibility criteria • He/she must do the clinical review of patients referred back to the nodal ART centre from LACs. ☐ Monitor the consumption and availability of drugs (ARV, ATT, OI and other drugs), CD4/VL kits, other consumables and alert the concerned authorities in case of impending shortage well in advance so as to enable adequate replenishment without disruption of ART care and support to PLHIV. Ensure that there is adequate drug stock available for multi-month dispensation patients. ☐ He/she should verify the staff attendance register daily and get it approved by the Nodal Officer at the end of the month before forwarding the attendance to the SACS ☐ MO must assist the nodal officer in carrying out the annual performance appraisal of the contractual staff based on the PMDS format which should then be approved by the nodal officer ☐ He/she must attend or ensure appropriate representatives are sent for monthly coordination meetings held at the district level, ART centre-CSC coordination meetings, HIV-TB meeting, DAPCU coordination meeting and any other. The MO must attend review meetings by NACO/ SACS and training programmes conducted for medical officers ☐ He/she must be aware of all communications sent from NACO/SACS to the ART centre and should update the nodal officer about them on a day to day basis ☐ He/she must ensure that all records, registers, cards and IT based reporting system IMS software are updated daily and reports are sent to the concerned authorities on time. All reports should be checked by the MO before taking approval from the Nodal Officer for sending them to the concerned authorities. ☐ Besides all the above, any other duty assigned by ART Centre In-charge/ SACS/NACO pertaining to ART services.

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LT - ART	B.Sc in Medical Laboratory Technology (BMLT) or BMLS Diploma in Medical Laboratory Technology (DMLT) or DMLS with the course duration of at least 2 years recognised by UGC/ State Government/ Central Government	Community candidates from HIV infected and affected as well as key communities. Engagement with key populations and affected communities at field level.	One Year Experience for B.Sc in MLT (BMLT) or BLMS and Two Year Experience for DMLT or DMLS	☐ Phlebotomy, sample collection, performance of test, reporting

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Staff Nurse-ART	B.Sc. Nursing. OR GNM Candidate must be registered in State nursing council.	Community candidates from HIV infected and affected as well as key communities.	The candidate should be computer literate with working knowledge of MS office, usage of Internet and electronic mail. Engagement with key populations and affected communities at field level.	Perform all paramedical functions of the centre as per requirement and support medical officers in patient consultation Perform baseline assessment of the patient including pulse, BP, weight, height etc Assess the physical, social, and psychological needs of the patient. Support management of patients with advanced HIV disease under the guidance of SMO/MO Provide need-based nursing care and support to the patients Role of nurses at the ART centre in HIV-TB coordination: a. Focal point for all HIV-TB related activities b. Screening all the 4S +ve cases referred by the care coordinator for TB using 4 symptoms complex screening tool c. Record the TB symptom of the patient using the detailed stamp in the patient Green Book. d. Ensure referral of presumptive TB patients to CBNAAT/other appropriate diagnosis e. Fill TB referral form, facilitation TB referral and updating TB results status f. The lab form to be stamped by the nurse with the ART centre stamp to facilitate fast tracking of the patient for TB testing g. Maintaining and updating HIV-TB line list and TB register h. Coordinate with medical officer for initiation of TB treatment in PLHIV with TB co-infection. Provide counselling to PLHIV about TB treatment and ensure treatment completion. i. Prepare, update and maintain TB Treatment Card, HIV-TB register j. Attend the monthly NTEP meeting along with the completed line list for the month to be shared with the concerned STS k. Maintain the TB/HIV register at the ART centre ensuring timeliness, accuracy and completeness l. Coordinate with data manager for preparation of TB/HIV section of MPR m. Coordinate regularly with the HIV-TB coordinator / STS/STLS to ensure effective coordination between ART and NTEP for smooth functioning and uninterrupted service delivery. n. Share the details of all patients initiated on ATT at the ART centre / transfer of HIV-TB patients to another ART centre, with the HIV-TB coordinator daily. o. Ensure that all PLHIV receive TPT. Coordinate with other staff to ensure documentation of updated information in white card for PLHIV initiated on TPT with outcomes on completion of TPT. ☐ Focal point for infection control practices at ART centre: a. Reinforce hand hygiene practices b. Reinforce cough hygiene in PLHIV with respiratory symptoms, including use of face covers /masks c. Ensure implementation of universal safety precautions and proper waste disposal at the centre d. Availability of PEP in emergency, labor room, ICU and other critical areas and maintenance of its records. e. Ensure implementation of IPC/AIC practices ☐ Focal point for all issues related to pregnant positive women and HIV exposed child and early Infant Diagnosis (EID) in the absence of counsellor ☐ Coordinating and tracking the referrals made within the hospital by establishing linkages with various departments and in-patient wards ☐ Streamlining and guiding patients at the ART centre and helping in the efficient and orderly functioning of the centre ☐ Dispensing of ARV drugs in the absence of pharmacist as and when required Counselling of patients as and when required ☐ Collection of blood samples for CD4 testing and arrange/perform its transportation to the linked lab during the absence of Lab technician as and when required ☐ Provide reports to the doctor and other members of the ART centre multidisciplinary team ☐ Update of reports as per NACO guidelines ☐ Any other duty assigned by ART Centre In-charge

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Community Care Coordinator	PLHIV, with 10+2 Pass	Working knowledge of computer, usage of Internet and electronic mail.	Working knowledge of English and local language.	☐ He/she must work under the guidance and supervision of SMO/MO ☐ Be the first interface with patient at centre ☐ Ensure entries in the HIV visit register ☐ Do the first stage 4 S Screening and record in Patient visit register ☐ Be a peer educator for PLHIV at centre and provide psycho-social support to newly registered PLHIV ☐ Aid PLHIV enrolled at the ART centre, within the hospital (OP and IP) ☐ Coordinate with the linked Care and Support Centre & Link ART Centres. ☐ Keep track of drug adherence of patients on ARV, counselling them on the importance of regularity of visits and ARV dosage ☐ Augment the efforts of the counsellor and other staff of the centre in promoting positive living ☐ Assist in patient retrieval, where necessary and as far as possible ☐ Follow MIS/LFU cases on telephone, from "daily missed list" as well ☐ Transfer of kits / other consumables / blood sample to nearby CD4 Labs in absence of LT, if necessary. Emergency transfer of drugs to LAC/ other ART centre/ Home visit of LFU cases (TA/ DA for such visits can be booked under operational cost of ART Centre as per NACO guidelines) ☐ Manage filing of the white cards on daily basis Any other duty related to the programme assigned by SMO/MO