

# Implementation of Centrally Sponsored Schemes

## 7. Centrally Sponsored Schemes

Public Health being a State subject, the primary responsibility of strengthening the public healthcare system lies with the State Governments. However, the Ministry of Health and Family Welfare, GoI, provides technical and financial support to States, from time to time, to strengthen the public healthcare system and manage public health challenges.

Implementation of Centrally Sponsored Schemes such as Health & Wellness Centres (HWCs), Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (PMJAY) under Ayushman Bharat, National AYUSH Mission and Pradhan Mantri Swasthya Suraksha Yojana (PMSSY), are discussed in this chapter. Audit observed significant deficiencies in the implementation of the schemes as discussed below:

### 7.1 Health and Wellness Centres

The National Health Policy, 2017, recommended strengthening the delivery of primary health care, through establishment of “Health and Wellness Centres (HWC)”. HWCs are envisaged to deliver an expanded range of services that go beyond maternal and child health care services, to include care for non-communicable diseases, palliative and rehabilitative care, oral, eye and ENT care, mental health and first level care for emergencies and trauma, and also to supply free essential drugs and provide diagnostic services.

Government of India (GoI) announced (February 2018) the creation of 1,50,000 HWCs, by transforming the existing Sub-Health Centres and Primary Health Centres, under Ayushman Bharat, by December 2022.

#### 7.1.1 Targets and achievement

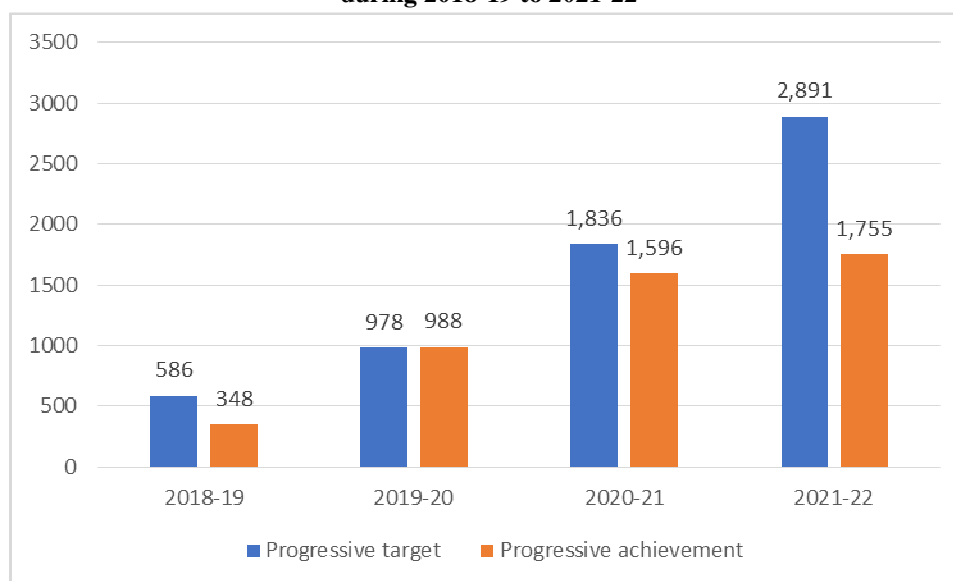
In Jharkhand, 2,891 HWCs were to be created, till March 2022. The year-wise targets and achievement in this regard, as of March 2022, are indicated in **Table: 7.1** and **Chart 7.1**.

**Table 7.1: Status of cumulative targets and achievement in the State, as of March 2022**

Financial Year	Progressive target	Progressive achievement	Shortfall/surplus	Shortfall in per cent
2018-19	586	348	238	41
2019-20	978	988	+10	-
2020-21	1,836	1,596	240	13
2021-22	2,891	1,755	1,136	39

(Source: Information provided by NHM)

**Chart 7.1: Progressive targets and achievements- Creation of HWCs during 2018-19 to 2021-22**



It can be seen from **Table 7.1** that only 1,755 (61 per cent) HWCs had been operationalised in four years. This included creation of 499 HWCs (44 per cent) against the target of 1,135 HWCs, in the six test-checked districts, as detailed in **Table 7.2**.

**Table 7.2: Status of HWCs in the test-checked districts, as of March 2022**

District	Target	Achievement	Shortfall (per cent)
Dhanbad	158	96	62 (39)
Dumka	239	123	116 (49)
Garhwa	135	51	84 (62)
Gumla	256	91	165 (64)
Saraikela Kharsawan	181	86	95 (52)
Simdega	166	52	114 (69)
<b>Total</b>	<b>1,135</b>	<b>499</b>	<b>636 (56)</b>

(Source: Information furnished by NHM)

**Colour code:** Red=Extremely Poor (Shortfall>60%), Yellow=Very poor (60%≤Shortfall≤40%), Green=poor (Shortfall<40%)

Test-check of the records of 25 operational HWCs, upgraded from HSCs, revealed shortcomings in availability of human resources, essential drugs, equipment and consumables as discussed in **Chapter 2** and **4**.

### 7.1.2 Telemedicine services at HWCs

Guidelines for tele-medicine services in HWCs stipulates that tele-consultation facility should be available in all HWCs. Accordingly, GoI introduced (November 2019) tele-medicine services in all HWCs on a Hub<sup>237</sup> and spoke<sup>238</sup> model, through the e-Sanjeevani<sup>239</sup> online platform. As per the

<sup>237</sup> 'Hub' means a panel of doctors to provide the first level of tele-consultation to Spokes (i.e. HWCs).

<sup>238</sup> All HWCs.

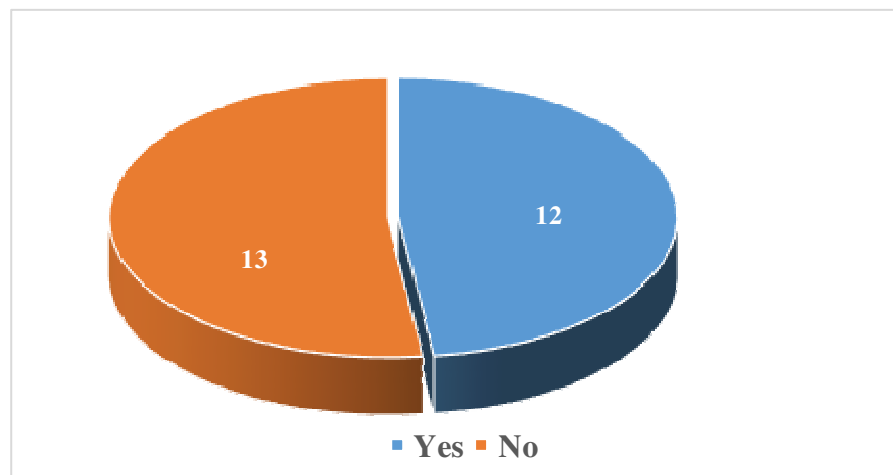
<sup>239</sup> e-Sanjeevani, launched by GoI in 2009, is an independent platform, browser-based application, facilitating both doctor-to-doctor and patient-to-doctor tele-consultations, developed by C-DAC.

guidelines<sup>240</sup> for telemedicine services in HWCs, issued (August 2019) by GoI, Hubs would be created at the State Medical Colleges, for providing Specialist/Super-specialist consultation to Doctors, at PHCs, and Specialist/Doctor consultation to Mid-Level Health Practitioners/Community Health Officers, at HWCs (called as spokes). The services of specialists, available at the District Hospitals, could also be utilised, by establishing tele-consultation facilities there.

The State introduced (April 2021) *e-Sanjeevani* telemedicine services and registered 558 doctors/specialists for providing telemedicine services. Further, HUBs of specialist doctors, at two<sup>241</sup> medical colleges and the Central Institute of Psychiatry, Ranchi, were also established.

Audit observed that only 294 doctors (53 per cent), out of 558 and 1,251 HWCs (82 per cent) out of 1,528 were active in the State, on *e-Sanjeevani*, as of June 2022. Out of the 25 test-checked HWCs, only 12 HWCs (48 per cent) had arrangements for providing tele-consultation services to the public as shown in **Chart 7.2**.

**Chart 7.2: Availability of Tele-consultation Services in test-checked HWCs**



Thus, not all the HWCs had been provided with tele-consultation facilities, as envisaged in the guidelines. The Department, while confirming the facts, stated (March 2023) that action is being taken for bringing about improvement in the functioning of HWCs as per norms.

### 7.1.3 Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (PMJAY)

The Scheme was launched in September 2018, with the objective of providing quality health care to poor and vulnerable families, through improved affordability, accessibility and quality care. The scheme facilitates medical insurance coverage of Rupees five lakh, to deprived families covered under

<sup>240</sup> GoI introduced in August 2019.

<sup>241</sup> RIMS, Ranchi and AIIMS Deoghar.

the Socio-Economic Caste Census (SECC), 2011 and *Rashtriya Swasthaya Bima Yojana* (RSBY).

The State Government also converged its own health scheme, *Mukhyamantri Swasthya Bima Yojana* (MSBY), into PMJAY, to provide medical insurance coverage, to the families covered by the National Food Security Act (NFSA) and decided to provide health insurance to 59,26,204 families of the NFSA-Public Distribution System (PDS). As the benefits under the PMJAY scheme were to be provided to SECC families, the State Government intended to provide the same facilities to the remaining families of PDS, *i.e.* out of 59,26,204 families, the State Government identified 28,05,753 families under PMJAY (SECC, 2011) and the remaining 31,20,451 families under MSBY.

As per the data uploaded on the State Government website<sup>242</sup>, the State Government was providing health insurance facilities to 57,10,933 families (28,05,753 families under PMJAY and 29,05,180 families under MSBY).

## 7.2 National AYUSH Mission

The Ministry of AYUSH, GoI, launched (2014-15) a Centrally Sponsored Scheme (CSS), National AYUSH Mission (NAM). The funding pattern, between the Centre and the State, was to be in the ratio of 75:25 initially and 60:40 from FY 2016-17 onwards. The basic objective of NAM is to promote AYUSH medical systems through cost-effective AYUSH services, strengthening of educational systems, facilitating the enforcement of quality control of Ayurveda, Siddha, Unani & Homoeopathy drugs and sustainable availability of AYUSH raw materials.

### Audit findings

#### 7.2.1 Implementation framework of AYUSH under NAM

##### 7.2.1.1 Constitution of the State AYUSH Society

NAM focuses on the building of institutional capacity, to enhance the implementation efficiency and absorption capacity of the States. At the State level, the Mission was to be governed and executed by the State AYUSH Society (SAS).

The Government of Jharkhand (GoJ) established (February 2017) the Jharkhand State AYUSH Society (SAS), for implementation of NAM. The functioning of SAS is discussed in the succeeding paragraphs.

##### 7.2.1.2 Governing Body

The Chief Secretary, Government of Jharkhand, is the Chairperson of the Governing Body of SAS, with the Secretary of HME & FWD being the

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<sup>242</sup> www.aahar.jharkhand.gov.in

Member Secretary and seven<sup>243</sup> other members. The Governing Body is responsible for review of AYUSH policy and programme implementation, inter-sectorial co-ordination, approval of State Annual Action Plans (SAAP) *etc.*

Audit observed that the Governing Body did not meet even once, during FYs 2016-17 to 2021-22. However, SAAPs for the period 2016-17 to 2021-22 were submitted to GoI, by the Executive Body.

Thus, the Governing Body had neither approved the SAAPs, nor monitored the implementation of SAAPs in the State.

In reply, Director (AYUSH) stated that the Governing Body meeting would be conducted shortly.

### 7.2.1.3 *Executive Body*

The Executive Body comprises of the Secretary of HME & FWD as Chairperson, the Director AYUSH as the Member-Secretary and 10<sup>244</sup> other members. The Executive Body is responsible for preparation of SAAPs; execution of the approved SAAPs, including release of funds to implementing Agencies as per the SAAPs; follow-up of decisions of the Governing Body; monitoring and evaluation of SAAPs; and maintenance of the accounts of SAS.

Audit noticed that the Executive Body had met only twice during FYs 2016-17 to 2021-22, in which *post facto* approvals of the SAAPs for the FYs 2015-16 and 2019-20, were granted. In reply (March 2023) the Department accepted the fact.

### 7.2.1.4 *State Programme Management Unit*

Under NAM, a State Programme Management Unit (SPMU) was to be set up with one Programme Manager and six<sup>245</sup> other members. The staff of SPMU were to be engaged on contractual basis/outsourced and their salary was to be met from the administrative cost of the Mission. SPMU was to provide technical support for implementation of NAM in the State.

<sup>243</sup> Addl. Chief Secretary/Principal Secretary/Secretary, Planning and Finance Department; Addl. Chief Secretary/Principal Secretary/Secretary, Environment Department; Mission Director, National Health Mission; Director-in-Chief (Health Services); Director, State Drugs Controller; Director, AYUSH and Special Executive Officer, Jharkhand Medicinal Plant Board.

<sup>244</sup> Special Secretary/Joint Secretary, HME&FWD; Mission Director, NHM; Nominated Member, Forest and Environment Department; Nominated Member, Planning and Finance Department; Director-in-Chief, Health Services; Deputy Director (Ayurveda); one senior medical officer from each stream *i.e.* Homeopathy/Unani/Yoga nominated by the Addl. Chief Secretary/Principal Secretary/Secretary and Special Duty Officer, State Medicinal Plant Board, Jharkhand, Ranchi.

<sup>245</sup> Two consultants; one Finance Manager; one Accounts Manager; one Health Management Information System (HMIS) Manager and one Data Manager.

Audit observed that only a Programme Manager had been appointed (January 2020) and the other six posts had remained vacant, as of March 2022. Though a proposal (July 2018) for engagement of other members had been submitted by Director, AYUSH, to the Joint Secretary, Department of Health, Medical Education & Family Welfare, GoJ, it had not been approved (August 2022). Thus, the SPMU was not functional.

In reply, Director (AYUSH) stated (January 2023) that the HMIS Manager and Data Entry Operator had been appointed, while appointments for the remaining posts were under process.

#### **7.2.1.5 District AYUSH Society**

As per the implementation framework of NAM, District AYUSH Societies (DASs) were to be registered under the Societies Registration Act, 1860 for carrying out AYUSH activities.

Audit observed that the DASs had not been registered in the six test-checked districts. As such, neither had any AYUSH activities been carried out, nor had the funds, allocated to the District Joint AYUSH Officers, been utilised. The funds were ultimately returned to the SAS. Thus, non-functioning of the DASs had led to non-implementation of the programme in the districts. The Department, while confirming the facts, stated (March 2023) that the registration process is in progress.

#### **7.2.2 Utilisation of funds released under NAM**

The framework for implementation of NAM stipulates that the State AYUSH Society will prepare Perspective and Annual Action Plans.

The Jharkhand AYUSH Society had not prepared any Perspective Plan. However, SAAPs for the FYs 2016-17 to 2021-22 had been submitted to GoI. The approved SAAPs included co-location of AYUSH facilities at the PHCs and CHCs, opening of two integrated AYUSH hospitals, establishment of AYUSH Health Wellness Centres, upgradation of Government AYUSH dispensaries *etc.*

The Director (AYUSH) was maintaining a bank account (in the name of SAS, Jharkhand) for managing the funds released under NAM. It was seen that GoI did not release its share against SAAPs of ₹ 62.60 crore, for the period covered by FYs 2016-17 to 2018-19, due to low utilisation of funds released under the previous SAAPs. The receipt and utilisation of funds under NAM, during FYs 2016-17 to 2021-22, is shown in **Table 7.3** and **Chart 7.3** and **Chart 7.4**.

Table 7.3: Receipt and utilisation of funds under NAM

(₹ in crore)

Financial Year	Opening balance (OB)	Allotment during the year	Interest earned	Total funds available during the year	Expenditure (percentage)	Closing balance
2016-17	8.33	0.48 <sup>246</sup>	Nil	8.81	Nil (0)	8.81
2017-18	8.81	Nil	0.27	9.08	Nil (0)	9.08
2018-19	9.08	Nil	0.34	9.42	0.20 (2)	9.22
2019-20	9.22	15.22	0.29	24.73	0.82 (3)	23.91
2020-21	23.91	Nil	0.30	24.21	0.19 (1)	24.02
2021-22	24.02	31.98	0.39	56.39	0.23 (0.4)	56.16
<b>Total</b>		<b>47.68</b>	<b>1.59</b>		<b>1.44 (3)</b>	

(Source: Information provided by the Directorate of AYUSH)

Chart 7.3: Availability and utilisation of funds under NAM at the State Level

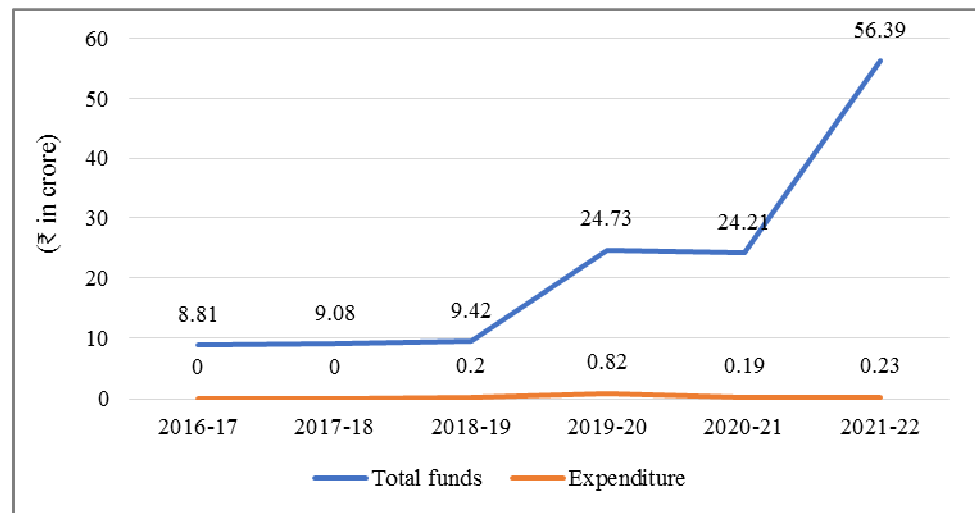
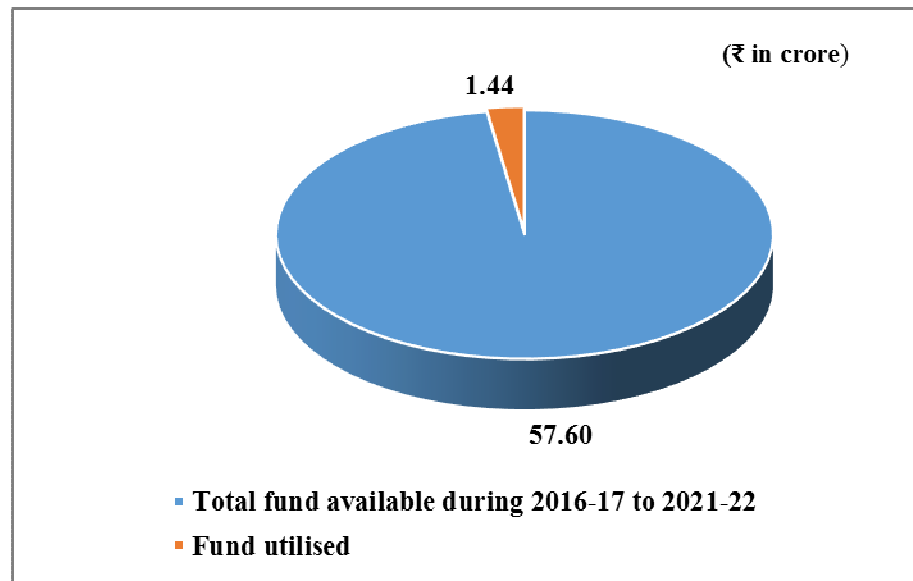


Chart 7.4: Utilisation of NAM funds in Jharkhand, during FYs 2016-17 to 2021-22



It can be seen from **Table 7.3** that only ₹ 1.44 crore (three *per cent*) could be utilised during FYs 2016-17 to 2021-22, against the available funds,

<sup>246</sup> Release against the Annual Plan: 2015-16

amounting to ₹ 57.60 crore<sup>247</sup>. Short utilisation of funds led to the absence of AYUSH facilities to patients, as discussed in the succeeding paragraphs.

In reply, Director (AYUSH) stated that the SAAPs for FYs 2016-17 to 2018-19 had not been approved by GoI, due to low utilisation of funds released under previous SAAPs. The Department confirmed the facts and stated (March 2023) that shortage of manpower was the main reason for non-utilization of funds.

### **7.2.3 Absence of co-location of AYUSH facilities with existing healthcare facilities**

NAM envisages co-location of AYUSH facilities with the existing healthcare facilities, through the Out-Patient Departments (OPDs) in PHCs, In-Patient Departments (IPDs) in CHCs and AYUSH wings in DHs.

- The Director, AYUSH, transferred (May 2020 to December 2021) ₹ 6.39 crore to JMHPCL, for purchase of AYUSH medicines for 90 CHCs/ PHCs. Out of this, only ₹ 32 lakh could be utilised till March 2022, for reasons not available on records. The remaining amount of ₹ 6.07 crore was lying with JMHPCL in its bank account.
- In the test-checked districts, it was noticed that the Director (AYUSH) had released (December 2020) ₹ 2.96 crore to the District Joint AYUSH Officers, for implementation of NAM. However, the same could not be utilised, as the DASs were not registered/functional. The entire funds, along with interest, were returned (October 2021 to February 2022) back to SAS.
- GoI had approved (July 2019) ₹ six crore, for establishment of an integrated AYUSH Hospital, at Ranchi, in SAAP 2019-20. Audit observed that the State Government had not initiated action, as of March 2022, to establish the approved AYUSH hospital.

Thus, SAS could not utilise the funds received under NAM. The Department accepted the facts and stated (March 2023) that shortage of manpower was the main reason for non-utilization of funds.

### **7.2.4 AYUSH Wellness Centres in hospitals**

Under NAM, financial assistance of ₹ 1.44 crore was received during FY 2019-20 (GoI: ₹ 0.86 crore, GoJ: ₹ 0.58 crore) by SAS, for establishment of 24 AYUSH Wellness Centres (AWCs), in the 24 districts of the State, at the rate of ₹ six lakh per centre. The funds included recurring assistance of ₹ 5.40 lakh per centre, for manpower and maintenance of the centres. Yoga and Naturopathy facilities were also to be provided in the centres.

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<sup>247</sup> OB ₹ 8.33 crore + Fund received ₹ 47.68 crore + Interest ₹ 1.59 crore.



However, the entire amount of ₹ 1.44 crore had not been utilised, as of March 2022, as DASs were not functional in any district. The Department accepted the facts and stated (March 2023) that shortage of manpower was the main reason for non-utilization of funds.

### 7.2.5 Availability of sports medicine in AYUSH facilities

The Mission Directorate (NAM), GoI, approved (August 2015) ₹ 44 lakh (₹ two lakh for each centre), for treatment of sportspersons, by the existing AYUSH doctors, in District Joint AYUSH Dispensaries/ DHs/ AYUSH colleges, in 22 districts of the State.

Audit observed that the Director (AYUSH) had transferred (April 2019) the entire amount of ₹ 44 lakh, to the Sports Authority of Jharkhand, instead of developing their AYUSH facilities, for treatment of injured sportspersons, in these 22 districts. Thus, the purpose of treatment of injured sportspersons, through AYUSH, remained unachieved. The Department accepted the facts and stated (March 2023) that remedial action will be taken.

## 7.3 Pradhan Mantri Swasthya Suraksha Yojana

GoI launched the Pradhan Mantri Swasthya Suraksha Yojana (PMSSY) in 2006. Upgradation of medical colleges by opening of super speciality departments and addition of PG seats was one of the objectives of the Scheme.

Findings on implementation of the Scheme are discussed in the following paragraphs.

### 7.3.1 Construction of building for Super Speciality Block in SNMMCH

The Department of Health and Family Welfare, GoI, conveyed (January 2014) approval, to the State Government, for up-gradation of SNMMCH, Dhanbad (erstwhile PMCH, Dhanbad), under the PMSSY under Phase-III<sup>248</sup>. This involved the upgradation of eight<sup>249</sup> Super Speciality departments and creation of 16 additional PG seats, through construction of a building for the Super Speciality Block.

The capital cost ceiling, for upgradation of the College, was kept at ₹ 150 crore, of which the Central Government share was ₹ 120 crore (including management, supervision and consultancy charges) and ₹ 30 crore was to be provided by the State Government. The ceiling cost, for Civil work and Medical equipment was fixed at ₹ 70 crore, each. The State Government

<sup>248</sup> PMSSY was first launched in March, 2006, with the primary objective of correcting the imbalances in availability of affordable/ reliable tertiary level healthcare in the Country in general and to augment facilities for quality medical education in the under-served States. Under Phase-III of PMSSY, construction of Super Speciality Blocks/ Trauma Centres was to be taken up, in 39 Government Medical Colleges/ Institutions of the country.

<sup>249</sup> (1) Nephrology unit, (2) Cardiology & Cath Lab unit, (3) Neurology & Neurosurgery unit, (4) Cardio Vascular Thoracic unit, (5) Plastic & Burn Surgery unit, (6) Gastroenterology-Medicine Unit, (7) Gastroenterology-Surgery unit and (8) Urology unit.

had to create the required posts, deploy personnel against the posts and make unencumbered land available for construction *etc.*

For execution of the civil works, Central Public Works Department (CPWD) was appointed (March 2014) as the Project Management and Supervision Consultant. The Chief Engineer, CPWD, Ranchi, forwarded (December 2014) the Detailed Project Report (DPR) of ₹ 150 crore, to the Additional Chief Secretary, Health, Medical Education and Family Welfare Department, GoJ, for onward submission to GoI. GoI conveyed (November 2015) approval of DPR for ₹ 85.71 crore for civil works against the ceiling cost of ₹ 70 crore. The State Government had committed (October 2015) to bear the additional cost of ₹ 15.71 crore. The GoI conveyed (January 2016) administrative approval and expenditure sanction of ₹ 85.71 crore to CPWD. The CPWD, Dhanbad, received (April 2016 to March 2021) ₹ 85.49 crore (Central: ₹ 54.07 crore and State: ₹ 31.42 crore) for this purpose.

A Tender was, thereafter, invited, at an estimated cost of ₹ 56.13 crore for the work, by Chief Engineer, CPWD, Ranchi. The work was awarded (August 2016) to an agency at ₹ 50.08 crore and an agreement was executed (August 2016) with the agency, by CPWD. The work was to be completed by December 2017. The stipulated date of completion of work was extended (03.10.2019) to October 2019 by the Chief Engineer, due to local hindrances on the allotted construction site and stay orders (September 2017 to February 2018) by the Hon'ble High Court of Jharkhand.

Audit noticed that, though the building had been completed at a cost of ₹ 78.92 crore (as of July 2022), the sewerage treatment plant (STP) and the effluent treatment plant (ETP) were yet to be constructed, due to encroachment on the proposed sites. Further, water supply in the building could not be started, as drilling of tube well was unsuccessful. Action to get water supply connection from the Municipal Corporation, though initiated (January 2022), was awaited, as of July 2022. Photographs of the completed building lying idle are shown below:

**Photograph 7.1**



**Photograph 7.2**



**Idle Super Speciality Block of SNMMCH, Dhanbad (10.06.2022)**

Audit further observed that the electric connection (HT) had been taken (November 2019) by the Principal, SNMMCH, Dhanbad, without immediate requirement and payment of ₹ 1.36 crore (up to March 2022) had been made against the total liability of ₹ 1.77 crore, till June 2022. Further, though the posts of faculty and other cadre had been sanctioned by the GoJ (February 2019), appointments against these posts were pending, as of July 2022.

Thus, the Super Speciality departments could not be started with 16 additional PG seats, due to non-construction of the envisaged STP & ETP, non-commencement of water supply and appointments against the required manpower, not having been made. The Department accepted the facts and stated (March 2023) that steps will be taken to complete and utilize the building.

### 7.3.2 Idle medical equipment

For procurement of medical equipment for Super Speciality Departments under PMSSY (Phase-III) in SNMMCH, Dhanbad, an agency was appointed (July 2016) as the Procurement Support Agency, by GoI. The agency supplied (between May 2018 and December 2020) 58 medical equipment (*Appendix 7.1*), which were lying idle in sealed boxes (as of August 2022), as can be seen from the **photographs 7.3** and **7.4**.

**Photograph 7.3**



**Photograph 7.4**



**Idle medical equipment of Super Speciality departments in SNMMCH, Dhanbad (10.06.2022)**

Further, the value of machines and equipment was not ascertainable, as they had been supplied by GoI and relevant records were not available in the MCH.

While accepting the facts, the Principal SNMMCH, Dhanbad, stated that most of the items of equipment were lying in the store, as the building was yet to be handed over.

However, the fact remains that failure to synchronize the supply of medical equipment, with its associated infrastructure and human resources, led to

idling of expensive equipment and the possibility of the permanent failure or damage of such equipment cannot be ruled out. The Department did not furnish replies to the audit observation.

***Recommendation: State Government may ensure establishment of Health and Wellness Centers as per target, proper execution of National AYUSH Mission and creation of Post Graduate seats in SNMMCH, Dhanbad, under PMSSY scheme.***