

Chapter VII

Implementation of Centrally Sponsored Schemes

Chapter-VII: Implementation of Centrally Sponsored Schemes

Out of 9,860 Health and Wellness Centres (HWCs) established in the State, 9,474 HWCs were operational as of June 2023. The performance of the HWCs against the parameters is better in the State. However, number of HWCs which had facilities for screening of cervical cancer is relatively low.

The State Government has enrolled 75.82 lakh families under Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana as of December 2023.

Shortfall was noticed in providing 180 IFA tablets and Tetanus Toxoid immunization to the Pregnant Women in the State.

More cases of diabetes and hypertension were noticed during opportunistic screening programme under National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke.

7.1 Introduction

The Central Government supplements the efforts of the State Governments in the delivery of health services through various schemes of primary, secondary and tertiary care. Out of the 20 Central Sponsored Schemes of the health sector running in the State during 2021-22, Audit selected two⁶⁵ schemes for examination during the PA and the relevant observations are discussed in succeeding paragraphs.

7.2 Ayushman Bharat

Government of India announced Ayushman Bharat Programme in February 2018 with two interconnected components - Ayushman Bharat - Health and Wellness Centres (AB-HWC) and Pradhan Mantri Jan Arogya Yojana (PMJAY)⁶⁶.

7.2.1 Ayushman Bharat-Health and Wellness Center (AB-HWC)

Under the first component of AB-HWC, Health and Wellness Centres (HWCs) are to be created to deliver Comprehensive Primary Health Care (CPHC), that is universal and free to users, with a focus on wellness and the delivery of an expanded range of services closer to the community.

i. Target and achievement in establishment of HWC

The details of the achievement with respect to the target of creation and operation of the HWC in Gujarat State as of June 2023 were shown in **Table 7.1** below:

⁶⁵ 1. Ayushman Bharat and 2. National Health Mission.

⁶⁶ PMJAY provides health insurance cover of ₹5 lakhs per year to over 10 crore poor and vulnerable families for seeking secondary and tertiary care.

Table 7.1: Details of the functional AB-HWCs

| Sr. No. | Performance Indicators or Parameters | Number of HWCs |
|---------|--|----------------|
| 1 | Target by GoI for the establishment of Health and Wellness Centre (HWC)- in number | 9,604 |
| 2 | Target by State Government for the establishment of HWC- in number | 9,604 |
| 3 | Number of HWCs established till June 2023 | 9,860 |
| 4 | Number of HWCs made functional or operational as of June 2023 | 9,474 |

(Source -Information furnished by the Director of AYUSH)

The achievement in establishing HWCs in the State was more than the target set by the Government of India or State Government. However, 9,474 out of 9,860 HWCs were made functional as of June 2023.

ii. Performance of HWCs

Under AB-HWCs operational guidelines, HWCs are to be created as centre for Prevention, Screening and Management of Non-Communicable Diseases such as facility for (i) screening and treatment of Hypertension and Diabetes, with referral if needed, (ii) screening for oral, breast and cervical cancer and referral of suspected cases *etc.* Further, AB-HWCs should organise wellness activities like Yoga sessions.

Out of 9,474 functional HWCs, number of HWCs functional as per the AB-HWCs operational guidelines are shown in **Table 7.2**:

Table 7.2 Number of HWCs functional as per the AB-HWCs operational guidelines

| Sr. No | Performance Indicators or Parameters | Number of HWCs |
|--------|---|----------------|
| 1 | Number of HWCs which had facilities for screening of Hypertension | 9,338 |
| 2 | Number of HWCs which had facilities for screening for Diabetes | 9,318 |
| 3 | Number of HWCs which had facilities for screening of Oral Cancer | 9,267 |
| 4 | Number of HWCs which had facilities for screening of Breast Cancer | 9,267 |
| 5 | Number of HWCs which had facilities for screening of Cervical Cancer | 1,825 |
| 6 | Number of HWCs which had wellness activities like Yoga Sessions | 9,382 |
| 7 | Number of HWCs having medicine as per the guidelines | 9,286 |
| 8 | Number of HWCs having diagnostic facilities available as per guidelines | 9,253 |

(Source -Information furnished by the Director of AYUSH)

As seen from the above table, majority of the AB-HWCs in the State were functioning as per the laid down parameters of the scheme. However, number of HWCs which had facilities for screening of cervical cancer is relatively low.

7.2.2 Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (AB-PMJAY)

Under the second component of AB-PMJAY, the beneficiary families under Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) have been identified from the Socio-Economic Caste Census (SECC) of 2011 on the basis of deprivation and occupational criteria across rural and urban areas. The number of eligible beneficiaries in Gujarat was 44.85 lakh families under SECC 2011 which was revised to 49.85 lakh (January 2023). Gujarat has enrolled 23.14 lakh families under AB-PMJAY as of October 2023. Gujarat has enrolled 9.15 lakh families from the beneficiaries of National Food

Security Act under Beneficiary Identification System 2.0 during October 2023 to December 2023.

Before the launch of AB-PMJAY, Gujarat had two State Health Assurance Schemes (i) Mukhyamantri Amrutam (MA) Yojana (started from April 2012) for BPL families under which 2.58 lakh families were enrolled and (ii) MA Vatsalya Yojana (started from August 2014) for families having annual income up to ₹4.00 lakh under which 40.95 lakh families were enrolled. National Health Authority approved (February 2019) merger of these two State schemes with AB-PMJAY. Therefore, Gujarat has totally enrolled 75.82 lakh families under AB-PMJAY as of December 2023.

7.3 National Health Mission

The NHM, a Centrally Sponsored Scheme, with a vision to attain the universal access to equitable, affordable, and quality healthcare services, accountable and responsive to people's needs, with effective inter-sectoral convergent action to address the wider social determinants of health.

7.3.1 Reproductive and Child Health Programme

The Reproductive and Child Health (RCH) programme under NHM emphasized, *inter-alia*, for mothers, (i) early detection and registration of pregnant mothers followed by providing the services like (ii) administration of Tetanus Toxoid injection, (iii) distribution of Iron, Folic Acid Tablets to prevent anemia *etc.*

- **Iron, Folic Acid tablets and TT Immunisation**

Anaemia is considered the leading cause of maternal mortality and is an aggravating factor to haemorrhage, sepsis and toxemia, therefore, the RCH programme emphasised providing 180 Iron, Folic Acid (IFA) to all Pregnant Women (PW). Two dosages of Tetanus Toxoid (TT) have been prescribed to all PW to immunise them and neonates from tetanus. The status of providing IFA tablets and TT immunisation to registered PW during 2016-22 are shown in **Table 7.3** below:

Table 7.3: Details of providing IFA tablets and TT immunisation to PWs during 2016-22

(Figure in lakh)

| Year | Registered PW | Number of registered PW who were given 180 IFA tablets | Number of registered PW who were given two TT immunisation | Percentage of PW who received 180 IFA tablets | Percentage of PW who received two TT immunisation |
|---------|---------------|--|--|---|---|
| 2016-17 | 13.82 | 13.35 | Data not available | 96.60 | Data not available |
| 2017-18 | 14.21 | 13.45 | 10.19 | 94.65 | 71.71 |
| 2018-19 | 13.50 | 12.86 | 09.48 | 95.26 | 70.22 |
| 2019-20 | 12.96 | 12.51 | 09.07 | 96.53 | 69.98 |
| 2020-21 | 12.75 | 12.18 | 08.63 | 95.53 | 67.69 |
| 2021-22 | 13.16 | 12.75 | 08.94 | 96.88 | 67.93 |

(Source: Information provided by CoH)

A shortfall was noticed in providing 180 IFA tablets and TT immunisation to the pregnant women who were registered. The percentage of TT immunisation to PW was found to be in a declining trend during 2017-21.

The CoH during the exit conference (June 2023) stated that a comprehensive programme has been initiated to monitor all regular check-ups for Pregnant Women and provide them with all other Ante Natal Care services.

Recommendation 15: State Government may increase the coverage of providing all necessary health services to pregnant women for safe motherhood.

7.3.2 Institutional Delivery Care

An important component of the RCH programme was to encourage mothers to undergo institutional deliveries. Details of institutional delivery in the State during 2016-22 are shown in **Table 7.4** below:

Table 7.4: Details of total delivery and institutional delivery in the State during 2016-22

| Year | Total Delivery | Institutional Delivery | Percentage of Institutional Delivery |
|---------|----------------|------------------------|--------------------------------------|
| 2016-17 | 11,88,041 | 11,75,381 | 98.93 |
| 2017-18 | 12,15,440 | 12,05,441 | 99.18 |
| 2018-19 | 11,39,108 | 11,32,387 | 99.41 |
| 2019-20 | 11,51,437 | 11,45,868 | 99.52 |
| 2020-21 | 11,18,033 | 11,13,797 | 99.62 |
| 2021-22 | 10,94,655 | 10,92,306 | 99.79 |

(Source: Information provided by CoH)

As seen from the above table, the percentage of institutional deliveries increased during 2016-22.

7.3.3 Non-communicable Diseases

The main types of Non-Communicable Disease (NCD) are cardiovascular diseases (such as heart attacks and stroke), cancers, chronic respiratory diseases (such as chronic obstructive pulmonary disease and asthma) and diabetes. The audit observations on the NCD related programs are discussed as under:

7.3.3.1 National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke

GoI launched (2010) the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) with an objective to prevent and control common NCDs. Under NPCDCS, NCD Cells are being established at National, State and District levels for programme management, and NCD Clinics are being set up at each DHs/SDHs/CHCs to provide services for early diagnosis, treatment and follow-up for common NCDs.

- **Opportunistic Screening**

Opportunistic screening of persons above the age of 30 years is being carried out at Sub-Centres/PHCs/CHCs/DHs, *etc.* Such screening involves history recording like family history of diabetes, history of alcohol, tobacco consumption, dietary habits, *etc.* and physical examination, calculation of BMI, blood pressure, blood sugar estimation, *etc.* to identify those individuals who are at a high risk of developing cancer, diabetes and CVD, warranting further investigation/action. The status of the number of persons screened and new cases of NCD identified during 2016-22 are shown in **Table 7.5** below:

Table 7.5: Details of persons identified with NCD during screening

| Year | Total persons screened | Persons identified with NCD | | | | | | Total |
|--------------|------------------------|-----------------------------|-----------------|---------------------------|---------------|---------------|---------------|------------------|
| | | Diabetes | Hypertension | Diabetes and Hypertension | CVD | Stroke | Cancer | |
| 2016-17 | 25,10,021 | 1,17,299 | 1,15,312 | 30,172 | 7,514 | 1,731 | 2,540 | 2,74,568 |
| 2017-18 | 42,13,723 | 1,87,173 | 2,15,132 | 92,156 | 10,308 | 5,627 | 5,041 | 5,15,437 |
| 2018-19 | 32,38,637 | 99,377 | 1,05,155 | 35,781 | 7,546 | 4,977 | 3,016 | 2,55,852 |
| 2019-20 | 56,64,179 | 2,19,976 | 1,75,989 | 62,793 | 13,643 | 7,898 | 4,168 | 4,84,467 |
| 2020-21 | 55,15,300 | 1,41,327 | 1,10,657 | 39,394 | 10,887 | 6,297 | 3,154 | 3,11,716 |
| 2021-22 | 55,49,331 | 1,07,733 | 1,28,529 | 35,356 | 4,942 | 4,897 | 2,939 | 2,84,396 |
| Total | 2,66,91,191 | 8,72,885 | 8,50,774 | 2,95,652 | 54,840 | 31,427 | 20,858 | 21,26,436 |

(Source: Information provided by CoH)

Out of the total cases of NCDs identified, 41 *per cent* were diabetes cases, 40 *per cent* were hypertension cases and 14 *per cent* had both, diabetes and hypertension.

7.3.3.2 National Programme for Palliative Care

National Programme for Palliative Care⁶⁷ (NPPC) was launched in Gujarat during 2018-19 in 14 districts and subsequently, six more districts were covered during 2021-22 under NPPC. Thus, NPPC was operational in 20 districts in the State as of March 2022.

- **Non-Availability of dedicated 10 bedded Palliative Care ward**

NPPC Guidelines provide for the establishment of 10 bedded palliative care wards for in-patient service at DHs. Patients who require in-patient management were to be admitted to a dedicated ward which is exclusively meant for this purpose.

Audit observed that out of five test-checked MCHs, five DHs and one SDH⁶⁸ (Bhiloda), the NPPC is sanctioned in five hospitals⁶⁹. However, dedicated ward with 10 beds was available only in MCH Jamnagar. DHs Rajkot and Surendranagar had only two beds in the general ward for Palliative care against the prescribed 10 dedicated beds.

⁶⁷ Palliative care improves the quality of life by alleviating pain and suffering and may influence the course of the disease in patients with cancer, AIDS, chronic disease, and the bedridden elderly.

⁶⁸ As per NPPC guidelines, Palliative care was provided by MCH and DH. In special case, palliative care was sanctioned for one SDH (Bhiloda, Arvalli) in the State, as there was no DH in Arvalli District.

⁶⁹ (1) DH Surendranagar, (2) GMERS MCH Gandhinagar, (3) DH Rajkot, (4) MCH Jamnagar and (5) SDH Bhiloda.

