

TRIBAL SUB PLAN

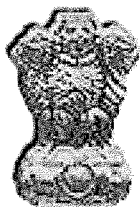
[Action Taken by the Government on the Observations/Recommendations of the Committee contained in their 85th Report (16 Lok Sabha)]

**MINISTRIES OF TRIBAL AFFAIRS, EDUCATION,
HEALTH AND FAMILY WELFARE AND AYUSH**

**PUBLIC ACCOUNTS COMMITTEE
(2022-23)**

FIFTY SIXTH

SEVENTEENTH LOK SABHA



सत्यमेव जयते

**LOK SABHA SECRETARIAT
NEW DELHI**

FIFTY SIXTH REPORT
PUBLIC ACCOUNTS COMMITTEE
(2022-23)

(SEVENTEENTH LOK SABHA)

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[Action Taken by the Government on the Observations/Recommendations of the Committee contained in their 85th Report (16 Lok Sabha)]

**MINISTRIES OF TRIBAL AFFAIRS, EDUCATION,
HEALTH AND FAMILY WELFARE AND AYUSH**



Presented to Lok Sabha on: 14-12-2022

Laid in Rajya Sabha on: 14-12-2022

**LOK SABHA SECRETARIAT
NEW DELHI**

December, 2022 /Agrahayana, 1944 (Saka)

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COMPOSITION OF THE PUBLIC ACCOUNTS COMMITTEE
(2022-23)

Shri Adhir Ranjan Chowdhury - Chairperson

MEMBERS

LOK SABHA

2. Shri Subhash Chandra Baheria
3. Shri Bhartruhari Mahtab
4. Shri Jagdambika Pal
5. Shri Vishnu Dayal Ram
6. Shri Pratap Chandra Sarangi
7. Shri Rahul Ramesh Shewale
8. Shri Gowdar Mallikarjunappa Siddeshwara
9. Shri Brijendra Singh
10. Shri Rajiv Ranjan Singh alias Lalan Singh
11. Dr. Satya Pal Singh
12. Shri Jayant Sinha
13. Shri Balashowry Vallabbhaneni
14. Shri Ram Kripal Yadav
15. Shri Shyam Singh Yadav

RAJYA SABHA

16. Shri Shaktisinh Gohli
17. Shri Bhubaneswar Kalita
18. Dr. Amar Patnaik
19. Dr. C. M. Ramesh
20. *Vacant*¹
21. Dr. M Thambidurai
22. Dr. Sudhanshu Trivedi

SECRETARIAT

1. Shri T.G Chandrasekhar - Additional Secretary
2. Dr. Yumnam Arun Kumar - Director
3. Shri Ashikho Alemo - Executive Officer

(ii)

¹ Shri V. Vijayasai Reddy ceased to be a Member of Committee consequent upon his retirement from Rajya Sabha on 21 June, 2022.

INTRODUCTION

I, the Chairperson, Public Accounts Committee (2022-23), having been authorised by the Committee, do present this Fifty-sixth Report (Seventeenth Lok Sabha) on Action taken by the Government on the Observations/Recommendations of the Committee contained in their Eighty-fifth Report (Sixteenth Lok Sabha) on '**Tribal Sub Plan**' relating to the Ministries of Tribal Affairs, Education (formerly Human Resource Development), Health and Family Welfare and AYUSH.

2. The Eighty-fifth Report was presented to Lok Sabha/laid on the Table of Rajya Sabha on 18 December 2017. Replies of the Government to all the Observations/Recommendations contained in the Report were received from the Ministries concerned in separate batches. The Committee considered and adopted the Fifty-sixth Report at their Sitting held on 05 December, 2022. Minutes of the Sitting of the Committee are given at Appendix-I.

3. For facility of reference and convenience, the Observations and Recommendations of the Committee have been printed in **bold** in the body of the Report.

4. The Committee place on record their appreciation of the assistance rendered to them in the matter by the Committee Secretariat and the office of the Comptroller and Auditor General of India.

5. An analysis of the Action Taken by the Government on the Observations/Recommendations contained in the Eighty-fifth Report (16th Lok Sabha) is given at *Appendix-II*

NEW DELHI:
07 December, 2022
16 Agrahayana 1944 (*Saka*)

ADHIR RANJAN CHOWDHURY
Chairperson,
Public Accounts Committee

Chapter - I

REPORT

This Report of the Public Accounts Committee deals with the action taken by the Government on the Observations / Recommendations of the Committee contained in their Eighty Fifth Report (16th Lok Sabha) on the subject "**Tribal Sub-Plan**" based on C&AG Report No.33 of 2015 relating to the Ministries of Tribal Affairs, Education (formerly Human Resource Development) (Department of School Education and Literacy), Health & Family Welfare (Department of Health and Family Welfare) and AYUSH:

2. The Eighty Fifth Report (16th Lok Sabha), was presented to Lok Sabha and laid in Rajya Sabha on 18th December, 2017 contained 13 Observations/Recommendations. Action Taken Notes in respect of all the Observations/Recommendations have been received and are broadly categorized as under:

(i) Observations/Recommendations which have been accepted by the Government:

Para Nos. 2, 5, 6, 7, 8, 10, 11 and

**Total: 08
Chapter - II**

(ii) Observations/Recommendations which the Committee do not desire to pursue in view of the replies received from the Government:

Para No. Nil

**Total: Nil
Chapter - III**

(iii) Observations/Recommendations in respect of which replies of Government have not been accepted by the Committee and which require reiteration:

Para No. 1, 3, 4, 9 and 12

**Total: 05
Chapter - IV**

(iv) Observations/Recommendations in respect of which Government have furnished interim replies:

Para No. Nil

**Total: Nil
Chapter - V**

3. During the detailed examination of the subject "**Tribal Sub-Plan**" by the Committee it was revealed that discrepancies like non-adoption of specific norms for earmarking and release of Tribal Sub Plan (TSP) funds, non-creation of a non-lapsable pool for TSP funds, weak management of programmes under TSP, delays and non-formulation of nodal units, deficient monitoring system, non-implementation of Information Education and Communication (IEC) Programmes for the benefit of the tribal people, incorrect release of TSP fund to the tribal majority States which do not qualify under TSP, etc. Some of the important observations/ recommendations made by the Committee in their Report are mentioned in the succeeding paragraphs.

4. The Committee noted that TSP funds had been released even to non-tribal populated States along with tribal majority States in violation of TSP guidelines. It was also observed that there was lack of clarity and co-ordination between the Ministry of Tribal Affairs and Ministry of AYUSH that resulted in inappropriate calculation of the percentage of tribal population in a State, tribal concentrated districts, etc. leading to incorrect release of funds. The Committee, therefore had exhorted the Ministries concerned to improve upon their coordination and information showing mechanism and take corrective/remedial measures including imposition of penalty upon the erring officials and recovery of incorrectly released funds.

5. The Committee found that despite the revised TSP guidelines and the recommendations of the Inter-Ministerial Committee to transfer unutilized TSP funds at the end of a financial year into a non-lapsable pool of TSP fund and allocation of proportionate funds from the Non-Lapsable Central Pool of TSP fund (NLCPTF) to the Ministry of Tribal Affairs for implementing schemes exclusively meant for development of STs, such a modality had not been devised. The Committee were of the opinion that concerted efforts should be made towards optimal utilisation of the allocated TSP fund within the given financial year and Non-lapsable pool for TSP fund be created at the earliest

6. The Committee had emphasised that it is imperative to identify and prioritize issues/concerns of the local community in the planning and decision making process and had recommended that inputs/suggestions of local tribal community should be sought before finalizing the plan for implementation of any programme under the TSP.

7. The Action Taken Notes furnished by the Ministries of Tribal Affairs, Human Resource Development (Department of School Education and Literacy), Health & Family Welfare and AYUSH in respect of all the Observations/Recommendations of the Committee have been reproduced in the relevant Chapters of this Report. The Committee will now deal with the action taken by the Government on the Observations/ Recommendations made in the Original Report which either need reiteration or merit comments.

8. The Committee desire that concerned Ministries to furnish Action Taken Notes in respect of Observations/ Recommendations contained in Chapter I within six months of the presentation of the Report to the Parliament.

Better Financial Management

(Recommendation Para No. 1)

9. The Strategy for development of Scheduled Tribes (STs) through TSP includes earmarking of Plan funds of Central Ministries/Departments into a separate head of account to strengthen the administrative arrangements for proper utilization and monitoring of the TSP funds. However, the Committee found that there had been no segregation of TSP funds under a separate Head at State/District /Block level. The Department of Secondary Education & Literacy had written to all States / UTs for strict compliance on maintenance of separate account/record/ Head for the funds received and expenditure incurred under TSP from the Financial Year 2016-17 wherever possible, and strictly from the next financial year i.e. 2017-18 and reflected in the Final Utilization Certificate submitted to the Department. The Committee had opined that such instructions should have been issued much earlier to the States/UTs and recommended that the Department should take a more proactive approach in monitoring and keeping track of fund utilisation and progress in the implementation of the Scheme so as to ensure efficient and timely achievement of targets set under the Plan. The Committee had further recommended that strict adherence to earmarking of funds into separate head at every level be made mandatory for release of funds.

10. In response to the above recommendation, the Ministry of Education (Department of School Education and Literacy) in their duly vetted final action taken reply by Audit and furnished to the Committee on **21st May, 2021** stated as under:-

“On going through the 85th report of PAC and the recent OM dated 28th July, 2019, it is mentioned that the replies w.r.t. point No.1 & 8 pertaining to MHRD was communicated vide letter No.I 2/2015-EE 15(pt.) dated 13th March, 2018

The department has sent various communications in this regard vide letter dated 21st February 2017, 17th October, 2017 and 28th March, 2018 whereby this Department has written to all States and UT for strict compliance on maintenance of separate accounts/record and head for funds/expenditure incurred under TSP.

With integration of the erstwhile scheme of Sarva Shiksha Abhiyan (SSA), Rashtriya Madhyamik Shiksha Abhiyan (RMSA) and Teacher Education (TE) into one integrated Scheme Samagra Shiksha, the States and UTs have again been instructed vide letter no.2-16/2017-EE3/IS-1 dated 12th April, 2019 to ensure that appropriate bank accounts under the Samagra Shiksha Scheme and maintenance of Separate Bank Account w.r.t SC and ST should also be complied with and disbursement should be made from the account for all activities covered

under the Samagra Shiksha. It may be mentioned that the States and UTs have been further instructed to separately show the component of ST and SC component on the fund utilization and emphasized at mechanism should be devised for ready availability for the relevant data at the different level. It may be stated that Department has also issued instructions to the States to provide separate budget head for the ST component in the State budget also in line with the budget heads as provided in the Central budget for the scheme. It may be further informed that the mandatory provision for ST component (10.70% of the total BE) is invariably provided in the Central Budget and Samagra Shiksha Scheme.

11. Audit in their vetting comment stated as under:-

“i) Ministry has not furnished the details of any action taken by it for monitoring and keeping track of fund utilization and progress as recommended by the PAC. Further, the outcome of the efforts made by the Ministry to ensure strict adherence to earmarking of funds into separate head at every level be made mandatory for release of funds has also not been provided. The same may be provided to PAC.

(ii) How many States have complied with the instructions issued on 12/04/2019 by the Ministry?”

12. The Ministry in their updated reply stated as under:-

“The allocation of funds in Samagra Shiksha Scheme is governed by the programmatic and financial norms and the activities and interventions are well defined and depending on the interventions, the funds are budgeted for the benefit of STs and spent accordingly. Some of the beneficiary-oriented activities funded under the scheme are as follows:-

- i. Provision free text-books up to Class VIII- To all children including ST students.
- ii. Uniforms up to Class VIII- Two sets of Uniforms to children belonging to SC, ST & Minority communities including BPL families.
- iii. Special projects for Social equity: the benefits under this intervention are accorded to SC, ST, OBC Minorities communities
- iv. KGBVs for Girls from Elementary Level (VI-VIII) to Senior Secondary Level (VI-XII). The Scheme provides for access and quality education to girls from disadvantaged groups of girls in the age group of 10-18 years aspiring to study in classes VI to XII: belonging to SC, ST, OBC, Minority communities and BPL families

to ensure smooth transition of girls from elementary to secondary and upto class XII wherever possible.

Also Priority is given to special focus districts with higher concentration of SC, ST, Minorities and aspirational districts as well as educationally backward blocks while approving interventions such as upgradation/strengthening of schools. ICT facilities, vocational education etc.

The budgetary allocation of 20% for SC and 10.70 % for ST is done out of the total BE as per the guidelines. Funds are released accordingly under separate sub-heads and utilized by the States and accounted for under different sub-heads.

An online project monitoring system, namely 'PRABANDH' has been launched for enhancing efficiency and managing the implementation of Samagra Shiksha in all the States & UTs. It is enabled on the website <https://seshagun.gov.in> and can be accessed from the School, Block, District and State Level. The important features of the PRABANDH System are:

- Online submission of Annual Work Plan & Budget from District/State Level
- Tracking of GOI Funds release to State/UTs
- Generation of different types of reports like Physical & Financial Progress, Spill-over and Committed Liabilities, Unspent balances etc. on real time basis.

Also, a Data Visualization Dashboard has been created in the PRABANDH System for display of monthly status of physical and financial progress under the major interventions. With a view to facilitating the online submission of Monthly Progress Reports district wise, by the respective State/UT, an Expenditure Module for District Users has been introduced to capture the physical and financial progress of various interventions from the district level and the progress can be seen in the National Reports.

All the States and UTs except Ladakh and Lakshadweep maintain books of account in computerized manner.

Public Financial Management System (PFMS) being implemented by Controller General of Accounts (CGA) for all Centrally Sponsored Schemes also covers Samagra Shiksha. Funds to the States/UTs under the scheme are released through the PFMS."

13. Audit in their further vetting comments communicated to the Ministry stated as under:-

- i) Ministry has not furnished the details of any action taken by it for monitoring and keeping track of fund utilization and progress as recommended by the PAC. Further, the outcome of the efforts made by the Ministry to ensure strict adherence to earmarking of funds into separate head at every level be made mandatory for release of funds, has also not been provided. The same may be provided to PAC.
- ii) How many states have complied with the instructions issued on 12/04/2019 by the Ministry?
- iii) The reply by the Ministry at (iv) above indicates that there is difficulty in measuring the outcomes of the earmarked fund. How does the Ministry plan to tackle this shortcoming?

14. Comments/clarification furnished by the Mid Day Meal (MDM) Division, Department of School Education & Literacy, Ministry of Education in respect of point No. (iii) commented by Audit stated as under:-

- "i) The MDM is ensuring adherence to the guidelines issued by the Central Government for earmarking of 10.7% of the Budget Estimates for Tribal Sub Plan in the Demands for Grants of the Department.
- ii) The releases for TSP are made on the basis of tribal population of elementary class children in various States /UTs in accordance with the data in U-DISE
- iii) Separate sanctions are issued for each category viz. General, SCSP and TSP so as to ensure transparency and accountability in the financial assistance for each category.
- iv) The instructions contained in the Budget Circular issued every year by the Ministry of Finance (Department of Economic Affairs) regarding re-appropriation of TSP funds to other heads of accounts in the scheme are followed.
- v) Ministry of Tribal Affairs is the nodal Ministry for creating a Non Lapsable Pool of TSP funds so that the savings in TSP funds is ploughed back to NLP of TSP. As and when the NLP of TSP is created, the unutilized funds from TSP would go back to that pool.
- vi) The States/UTs compile Annual Work Plan & Budget proposals by adopting bottom up approach in consultation with schools, blocks, districts and State and indicate expenditure incurred against allocated funds for General, SCSP and TSP during the previous year and projections for requirement of funds for each category viz. General, SCSP and TSP during the next year. The approved AWP&B proposals of States and UTs are uploaded on Department of School Education & Literacy website www.mdm.nic.in.
- vii) The Department has taken an initiative for providing flexi funds for new intervention relating to setting up of School Nutrition Gardens for addressing the problems of anemia and deficiency of Micronutrients amongst the school children. Supplementary nutrition is also provided to school children in Tribal identified areas with reported high level of malnutrition.

- viii) The Mid Day Meal Scheme is an ideal platform for promoting and conserving the composite culture of the country. The value of integration and communal harmony are taught to the children when they sit together and take mid day meal together irrespective of their caste, religion etc. Out of 25 lakh Cooks-cum-helpers engaged by States/UTs about 90% women are from the socially and economically challenged segment of the society.
- ix) MDMS is a right based programme under National Food Security Act, 2013 for all the children studying in elementary classes in eligible schools, irrespective of their caste, religion etc.
- x) The sanction letter for release of central assistance for TSP also includes a condition that Utilization Certificate of grant will be submitted within three months of the closure of financial year."

15. The Committee in their Report had opined that instructions that were issued to the States/UTs by the Department of Secondary Education & Literacy for strict compliance on maintenance of separate account/record/ Head for the funds received and expenditure incurred under the Tribal Sub Plan (TSP) should have been done much earlier. To further address the issue, the Committee had also recommended the Department to take more proactive approach in monitoring the utilisation of funds and the progress made in implementing the Scheme. Further, the Committee had emphasized the need for strict adherence to mandatory earmarking of funds into separate heads at every level. An examination of the action taken reply reveals that with the integration of the erstwhile scheme of Sarva Shiksha Abhiyan (SSA), Rashtriya Madhyamik Shiksha Abhiyan (RMSA) and Teachers Education (TE) into one Scheme under the Samagra Shiksha, States/UTs had been instructed to streamline the flow of funds, by way of measures such as ensuring maintenance of appropriate and separate bank accounts with respect to SC and ST, and separation of ST and SC component on fund utilization. In addition, the Ministry have issued instructions to the States to provide separate budget head for the ST component in their State budget in line with the budget heads as provided in the Central budget. The

Committee, having taken due note of the initiatives that have been taken by the Ministry, nonetheless, find the reply inadequate, and bereft of any concrete action taken by the States on the points raised in the recommendation. They are of the view that responsibility of the Ministry begins with issuance of the instructions but without visible outcome, it remains a non starter. The Committee feel that this is unfortunate and urge the Ministry to apprise them of the concrete action taken under due intimation.

The Committee are also baffled that till date, the Ministry are unable to furnish the details of the States/ UTs that have complied with their instruction that was initiated way back in February, 2017. The lethargic situation being despite the Audit in their vetting comments having time and again emphasizing the need to do so. Moreover, the reply is completely silent on the issue flagged by the Committee regarding release of subsequent funds only after checking that States/UTs that have mandatorily adhered to earmarking of funds into separate heads. The Committee find this unacceptable and therefore, desire to know the status of compliance to the instruction issued by the Ministry with regard to all the States/UTs. In cases of erring/deviating States/UTs, the need of the hour is their identification and initiation of stringent measures for due compliance. They would also like to have a detailed report on the outcome of the earmarked fund to facilitate them in assessing the impact it has made in the lives of the ST population in the country.

The Committee also note from the reply that the Ministry has only focused on the Mid Day Meal Scheme and are surprised as to why the Ministry are completely oblivious about the other components of TSP which *inter-alia* include Sarva Siksha Abhiyan, Information and Communication Technology, Rashtriya

Madhyamik Shiksha Abhiyan, etc. The Committee find the approach evinced by the Ministry completely unacceptable and thus, urge the Ministry to apprise them of the visible outcome of other components under TSP. At the same time, the Committee would also emphasize upon the Ministry to avoid furnishing generalized reply, as is the case pertaining to Mid Day Meals Scheme.

Creation of a non- lapsable pool for TSP Fund
(Recommendation Para No. 3)

16. The Committee noted that despite the revised TSP guidelines and the recommendations of the Inter-Ministerial Committee to transfer unutilized TSP funds at the end of a financial year into a non-lapsable pool of TSP fund and allocation of proportionate funds from the Non-Lapsable Central Pool of TSP funds (NLCPTF) to the Ministry of Tribal Affairs for implementing schemes exclusively meant for development of STs, such a modality had not been devised at that time. The Ministry of Tribal Affairs had informed that the issue of Non-lapsable pool of funds was being handled by NITI Aayog in consultation with the Ministries concerned. The Ministry had simultaneously advocated the creation of a non-lapsable pool for TSP funds. The Committee had opined that concerted efforts should be made towards optimal utilisation of the allocated TSP fund within the given financial year and Non-lapsable pool for TSP fund be created at the earliest to pool funds that could not be utilized due to unforeseen eventualities and unavoidable circumstances, within the specific time period.

17. The Ministry of Tribal Affairs in their action taken reply stated as under:-

“An online monitoring system has been put in place with web address <https://stcmis.gov.in>. The framework envisages monitoring of allocations for welfare of STs under the schemes, monitoring of expenditure vis-a- vis allocations, monitoring of physical performance and outcome monitoring. In the First phase, Central Ministries/Departments have been linked to the <https://stcmis.gov.in>. This online system captures the release data scheme-wise and also state-wise by the Central Ministries / Departments. As regards efforts towards optimal utilisation of the allocated TSP fund within the given financial year and creation of Non-lapsable pool for TSP fund, the same is to be decided at appropriate level in the Government.”

18. Audit in their vetting comment stated as under:-

“The efforts made by the Ministry to ensure optimum utilization of allocated TSP fund within the given financial year and to create non-lapsable pool for TSP fund may be intimated to PAC.”

19. The Ministry of Tribal Affairs in their updated reply stated as under:-

“Nodal officers have been nominated in each line Ministry/Department and Ministry of Tribal Affairs is taking meetings with these nodal officers under the chairpersonship of Secretary (TA) to persuade the concerned Ministries/Departments for full utilization of allocated funds. NITI Aayog has observed that in India the system of cash-based budgeting is followed. However, Ministry of Tribal Affairs is deliberating with NITI Aayog for an appropriate decision with regard to optimum utilization of funds in line with the suggestions of PAC.”

20. **The Committee found that the modality to create non-lapsable pool for TSP fund was not in vogue despite the revised TSP guidelines and the recommendations of the Inter-Ministerial Committee. In this backdrop, the Committee had urged the Ministry to make concerted efforts for optimal utilisation of the allocated TSP fund within the respective financial year and non-lapsable pool for TSP fund be created at the earliest. The Committee note with disappointment that the Ministry have not addressed the focal point of their recommendation and have merely apprised them about the nomination of nodal officers in each Ministry/Department and the meetings they had with them for fuller utilization of allocated funds along with their deliberations with NITI Aayog with regard to optimum utilization of funds. The Committee, while noting the aforementioned efforts, desire that the Ministry, in coordination with NITI Aayog should expeditiously take a well reasoned and pragmatic decision to ensure that funds allocated under the TSP are judiciously and efficiently utilised.**

In view of the lackadaisical approach exhibited by the Ministry in prolonging a genuinely required policy for the judicious utilisation of allocated

funds even after the expiry of financial year, the Committee express their utmost displeasure as the intent of the Committee through their recommendation was to create non-lapsable pool for TSP fund while the response is completely silent about it. The Committee while strongly reiterating their recommendation desire that the Ministry gear up appropriately and initiate all possible measures for creating a non-lapsable pool for TSP fund without any further delay. Details of action taken may be intimated to the Committee.

Better Programme Management

(Recommendation Para No.4)

21. The Committee noted that full amount was not released for National Programme for Health Care for the Elderly (NPHCE), National Programme for Prevention & Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke (NPCDCS) due to high unspent balance in these programme under TSP. The Committee found that, in the case of NPHCE, there was lack of health care and training facilities and the Ministry of Health and Family Welfare had not conducted IEC and mass media activities to inform the elders of different health risks and treatments. In the case of NPCDCS, there was lack of activities for behaviour & Life style changes, non-screening of persons for early diagnosis, deficiency in treatment facilities and training activities, non-establishment of Tertiary Cancer Centre (TCCs); deficient treatment for infant diseases, etc. The Committee were of the view that had the Ministry of Health & Family Welfare formulated the comprehensive plan to spend the allocated fund under these programmes and diversify the expenditure on IEC activities, training and health centres, health counselling camps, screening and health checkups, etc., there would not have been any unspent balance of funds and more importantly, these programmes would have achieved their goals. The Committee, therefore recommended that hence forth, while formulating a comprehensive plan for the implementation of these programme, the Ministry of Health & Family Welfare should take into consideration IEC activities for widening the reach of these programmes through awareness, trainings and health counselling, health centres and innovative and interactive activities etc., so as to ensure effective and efficient utilization of the allocated funds under NPHCE and NPCDCS for betterment of the intended beneficiaries.

22. The Ministry of Health and Family Welfare (Department of Health & Family Welfare) in their action taken reply stated as under:-

“(i) National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS):

The Government of India is implementing National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) for interventions up to District level under the National Health Mission (NHM). It has focus on awareness generation for behaviour and life-style changes, screening and early diagnosis of persons with high level of risk factors and their treatment and referral (if required) to higher facilities for appropriate management for Non-Communicable Diseases (NCDs).

The programme was revamped after 11th Five Year Plan. During 12th FYP, the focus of the programme was on the PAN India coverage on health promotion, prevention, detection, treatment and rehabilitation services at decentralised level up to district hospital & below level under the overall umbrella of National Health Mission (NHM) for primary and secondary level health care services.

Strategy for implementation of the programme comprised focus on Health promotion, awareness generation and promotion of healthy life style, screening and early detection, timely, affordable and accurate diagnosis, access to affordable treatment, rehabilitation. Strategy for early diagnosis comprised opportunistic screening of persons above the age of 30 years for diabetes and hypertension, with health care facility, for village, sub-centre, CHC and District hospital.

Under the programme, testing, diagnosis and treatment facilities for cancer (Oral, Cervix, Breast), diabetes and hypertension are provided through different levels of healthcare by setting up NCD Clinics in District Hospitals and Community Health Centres (CHCs). The treatment is either free or highly subsidized for the poor and needy. Till June, 2018; 525 District NCD Clinics, 2564 Community Health Centres NCD Clinics and 167 Cardiac Care Units have been set up under the programme.

A population level initiative for prevention, control and screening for common Non-Communicable Diseases (diabetes, hypertension and cancer viz. oral, breast and cervical cancer) has been rolled out in over 150 districts of the country in 2017-18 under NHM, as a part of comprehensive primary healthcare. Under the initiative, frontline health workers such as Accredited Social Health Activists (ASHA) and Auxiliary Nurse Midwives (ANM), inter alia, are leveraged to carry out screening and generate awareness about the risk factors of NCDs among the masses. Training modules for screening have been launched and distributed to the States. State-level trainings are organized for implementing the programme. Funds for training of health professionals i.e. MOs, ASHAs, ANMs, Staff Nurses, Multi Purpose Health Workers (MPHWs) are also being provided to States under the initiative.....Under NPCDCS, funds are also being allocated to the States/UTs in the State PIPs for awareness, training, health counselling to the health centres for innovative and interactive activities etc. for

betterment of the intended beneficiaries including scheduled tribes. Budgetary allocation for IEC activities has also been increased from Rs.10 lakh per State NCD Cell to Rs. 70 lakh (24 bigger States) & Rs.50 lakh (small States/UTs). States have developed many modes for IEC viz. pamphlets, banners, posters, teaching manuals along with audio-visual and visual means. World Cancer Day and World Diabetes Day are also observed to generate public awareness to promote healthy lifestyle habits.

(ii) National Programme for the Health Care for the Elderly (NPHCE):

'NPHCE, since 2015-16, is being implemented under NCD flexible pool of National health Mission (NHM) for implementation of district and sub- district activities of the programme on the basis of Programme Implementation Plan (PIP) submitted by the States/UTs and examined by this Ministry. The flexible pool was introduced to utilize the optimum funds released under the pool for implementation of the activities and goals envisaged under the programme. However, observation of the Committee will be complied with while considering the IEC activities for widening the reach of NPHCE through awareness, training and health counselling, health centres and innovative and interactive activities etc.

23. Audit in their vetting comment stated as under:-

"Utilisation of allocated funds against the allocation and achievement against the target may be intimated to PAC."

24. The Ministry in their updated reply submitted as under:-

"Allocation & Expenditure is given at Annexure: "A" Physical Target & achievement is attached at: Annexure: "B"."

25. The Committee had emphasised that while formulating a comprehensive plan for the implementation of National Programme for Health Care for the Elderly (NPHCE), National Programme for Prevention & Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke (NPCDCS), the Ministry of Health & Family Welfare (Department of Health and Family Welfare) should take into consideration the significance of Information Education and Communication (IEC) activities for widening the reach of these programmes through awareness, training and health counselling, health centres and innovative and interactive activities, etc. This

would go a long way in ensuring targeted and efficient utilization of the allocated funds under NPHCE and NPCDCS for betterment of the intended beneficiaries. In their action taken reply, the Ministry *inter-alia* have apprised that for NPCDCS, funds are being allocated to the States/UTs in the Programme Implementation Plans (PIPs) of the State for awareness, training, health counselling to the health centres for innovative and interactive activities for better outreach of the intended beneficiaries including Scheduled Tribes. Further, the budgetary allocation for IEC activities has also been increased from Rs.10 lakh per State NCD Cell to Rs.70 lakh (for 24 bigger States) and Rs.50 lakh (for small States/UTs). Accordingly, States have developed many modes for IEC viz. pamphlets, banners, posters, teaching manuals along with audio-visual and visual means. World Cancer Day and World Diabetes Day are also observed to generate public awareness so as to promote healthy lifestyle habits. However, the Committee are surprised to note that regarding National Programme for the Health Care for the Elderly (NPHCE), the Ministry have casually indicated that the observation of the Committee will be complied while considering the IEC activities for widening its reach. This is not acceptable to the Committee as the emphasis to adopt IEC was for both the programmes. Moreover, IEC was to act as a medium for innovative and interactive activities so that effective and efficient utilization of the allocated funds are ensured. The Committee express their displeasure with the half baked reply and impress upon the Ministry to take expeditious steps for introduction of IEC for NPHCE too and they be informed accordingly of the visible outcome and the impact it has brought on fuller utilisation of funds for both the programmes at the earliest.

A perusal of the statement on allocation and expenditure of funds and achievements of physical targets under Non-Communicable Diseases Flexi Pool during the period from 2015-16 to 2018-19 reveal that out of the allocated fund of Rs.1,84,204 lakh only Rs. 82,626.46 lakh could be spent, indicating thereby that there was huge under utilisation of funds as only 44.85 percent could be utilised. The Committee also observed that there has been mismatch between the set physical target and the achievements made therein during the said period (2015-16 to 2018-19) for NPCDCS. For the District Non-Communicable Disease Cell, out of the target of 687 only 543 could be achieved (79 percent). The achievement for District Non-Communicable Disease Clinic was 585 out of 698 i.e. 86 percent whereas the achievement made for Critical Care Unit was 168 out of 245 i.e. 68 percent. As far the achievement in regard to Day Care Centres, it was 168 out of 276 i.e. 60 percent whereas for the CHC-NCD Clinics, the achievement was 3084 out of 4241 i.e. only 72 percent achievement. Analysing this, the Committee are constrained to conclude that the financial and physical performance of the programmes were not upto the mark and the efforts being undertaken by the Ministry definitely require a push forward. The Committee, therefore, desire to be apprised of the reasons for the unsatisfactory performance and the concerted efforts that have been made/need to be made by the Ministry to efficiently utilise the fund allocated for the programmes. The Committee also desire to be apprised of the performance of the programme since 2018-19 till date.

Central Nodal Unit for Overview

(Recommendation Para No.6)

26. The Committee noted that as per the guidelines of Planning Commission (2006), TSP was to be implemented by constitution of dedicated unit in every Ministry/Department. The Committee had however, noted that that there were delays in

formation of nodal units in the Ministries/Departments. In addition, the Ministry of Tribal Affairs were neither involved in the annual planning exercise nor were there any guidelines detailing the processes for an oversight. As the basic objective of Tribal Sub-Plan is to channelize the flow of outlays from Central Ministries/Departments by earmarking funds for the development of Scheduled Tribes in the States, at least in proportion to their population; the Committee had emphasised that a central unit for oversight was an absolute necessity and recommended that as suggested by NITI Aayog, the Ministry of Tribal Affairs should create a central nodal unit for oversight so as to facilitate better co-ordination and efficient implementation of TSP through an online monitoring system.

27. The Ministry of Tribal Affairs in their action taken reply stated as under:-

“Allocation of Business Rules (ABR) has now been amended in January, 2017 whereby Ministry of Tribal Affairs (MoTA) has been given mandate for monitoring of STC funds of Central Ministries based on the framework and mechanism designed by NITI Aayog. TSP Division of the Ministry is acting as a central unit to facilitate better co-ordination and efficient implementation of TSP. An online monitoring system has been put in place with web address <https://stcmis.gov.in>. The framework envisages monitoring of allocations for welfare of STs under the schemes, monitoring of expenditure vis-a-vis allocations, monitoring of physical performance and outcome monitoring. Further, nodal officer has been nominated in the line Ministries / Departments for coordination and monitoring.”

28. No further comments from Audit.

29. **The Committee had opined that a central unit for oversight, is an absolute necessity and had recommended that as suggested by NITI Aayog, the Ministry of Tribal Affairs should create a central nodal unit to facilitate better co-ordination and efficient implementation of TSP through an online monitoring system. The Committee note from the action taken reply that the Ministry of Tribal Affairs have amended the Allocation of Business Rules (ABR) in January, 2017 as per the mechanism designed by NITI Aayog and they have been given the mandate to monitor the Scheduled Tribe Component (STC) funds of Central Ministries. The Committee also note that TSP Division is the central unit to facilitate better co-ordination and efficient implementation of TSP and an online monitoring system**

has been put in place to monitor allocation of funds, physical performance and outcome of ST Schemes. Moreover, a nodal officer has also been nominated for better coordination between Ministries/Departments. The Committee, while appreciating the initiative taken by the Ministry desire that they be apprised of the outcome that has been achieved as a consequence of the amendment made in January, 2017 whereby the Ministry have been given the mandate to monitor the Scheduled Tribe Component (STC) funds of Central Ministries and the trickle down impact it has made on the performance of the Tribal Sub Plan since 2017.

Inclusive online Monitoring System

(Recommendation Para No.9)

30. The Committee noted that monitoring of TSP of Central Ministries/Departments would be by the Ministry of Tribal Affairs and accordingly the Ministry was developing an online monitoring system for Central Ministries/ Departments. The system would encompass monitoring of fund allocations and expenditure and achievement of physical targets i.e. scheme-wise performance of each Ministry/Department. The Committee were of the view that in order to ensure implementation of programmes under TSP as per guidelines and also to ensure flow of benefits to the tribals, it is imperative for nodal units at the Central level as well as the State level to have real time information sharing system. The Committee had also opined that online monitoring system only at the Central Ministries/Departments would be incomplete and ineffective as the Ministry was unable to gain/collect/gather information on the actual needs of the tribals at the grass root level. The Committee, therefore, recommended that nodal units at the State level as well as District level be included in the online monitoring system that was being developed by the Ministry at the earliest. The Committee desired to be apprised of the status report in that regard within six months of the presentation of this report.

31. The Ministry of Tribal Affairs in their action taken reply stated as under:-

“An online monitoring system has been put in place with web address <https://stcmis.gov.in>. The framework envisages monitoring of allocations for welfare of STs under the schemes, monitoring of expenditure vis-a- vis allocations, monitoring of physical performance and outcome monitoring. In the First phase, Central Ministries / Departments have been linked to the <https://stcmis.gov.in>. This online system captures the release data scheme-wise and also state-wise by the Central Ministries / Departments.”

32. Audit in their vetting comment stated as under:-

“The Ministry did not furnish the status of inclusion of the nodal units at the State level and District level in the online monitoring system that has been put in place. The same may be provided to PAC.”

33. The Ministry of Tribal Affairs in their updated reply stated as under:-

“There is multiplicity of schemes and agencies, multiple implementation guidelines, multiple physical and financial reporting structures. Also, within each State, different Departments handle TSP funds. Thus, bringing synergy and effecting convergence is a grave challenge. However, Ministry of Tribal Affairs has given a project to Price Water House Cooper (PWC) to work out a monitoring framework to be incorporated in the online monitoring portal <https://stcmis.gov.in>.”

34. **The Committee in their Report had recommended that nodal units at the State level as well as District level be included in the online monitoring system at the earliest and they be apprised of the same accordingly. The Ministry of Tribal Affairs in their action taken reply have now submitted that a web address, <https://stcmis.gov.in> has been put in place for online monitoring of allocations, monitoring of physical performance and outcome of schemes. To bring about synergy and convergence in monitoring by different Departments at different levels, the Ministry of Tribal Affairs have given a project to Price Water House Cooper (PWC) to work out a monitoring framework to be incorporated in the online monitoring portal. The Committee, while strongly believing that the project given to Price Water House Cooper must have been completed by now, urge the Ministry to apprise them of its outcome.**

The Committee are however disheartened to note that the Ministry have chosen to remain silent on the specific thrust made with regard to inclusion of the nodal units at the State and District levels in the online monitoring system. The Committee find that the Ministry have accepted that there is multiplicity of

agencies which poses a grave challenge in bringing in nodal units. This logic in itself vindicates the idea raised by the Committee as the issue of existence of multiple agencies by itself, needs to be streamlined in accordance with the requirement of monitoring. Therefore, the Committee find the response absolutely unacceptable and further urge upon the Ministry, while reiterating the recommendation, to address the issue on priority basis and be informed accordingly.

35. The Ministry of Health and Family Welfare (Department of Health & Family Welfare) in their action taken reply to Recommendation Para No.9 of the Committee stated as under:-

“The Programme Implementation Plan (PIP) software developed with the support of NIC had some operational issues. Therefore, an enriched version of the software is being developed with the support of external agencies. This new software would facilitate the Ministry in receiving all future PIPs electronically with separate disclosure on activities related to Tribal Sub Plan (TSP). This software will act as an on line monitoring system and would facilitate to assess the actual needs of the tribal's at ground level.”

36. Audit in their vetting comment stated as under:-

“The latest status of the development and operationalization of the software may be intimated to PAC.”

37. The Department of Health & Family Welfare in their updated reply stated as under:-

“National Rural Health Mission (NRHM) was launched in 2005 to provide accessible, affordable and quality health care to the rural population especially the vulnerable sections. One of the key features of NRHM included interventions for improving health indicators. In 2013, the National Rural Health Mission (NRHM) was subsumed under the National Health Mission (NHM) as its Sub-Mission, along with National Urban Health Mission (NUHM) as the other Sub-Mission.

Under NHM, tribal areas enjoy relaxed norms as under:

- i. Relaxed norms for health facilities-The population norms for setting up Health Facilities in tribal areas are relaxed. Against the population norms of 5000, 30000, and 1,20,000 for setting up of Sub Centre, PHC and CHC respectively, in tribal and desert areas its 3000, 20,000 and 80,000. A new norm of "time to care" has also been adopted for setting up Sub Health Centres in tribal areas under which a Sub Health Centre can be set up within 30 minutes of walk from habitation.
- ii. States have been provided with the flexibility of relaxing the norm of one ASHA per 1000 population to one ASHA per habitation in Tribal/hilly and difficult areas.
- iii. While other States had Mobile Medical Units per 10.00 lakh populations subject to capping of 5 MMUs per district, for tribal and hilly states this could be relaxed as per need. The norms for MMU have been further revised to relax the norm where one MMU exceeds 60 patients per day in plain areas and 30 patients per day in tribal/hilly areas.
- iv. In addition, all tribal majority districts whose composite health index is below the State average have been identified as High Priority Districts (HPDs). These districts are to receive higher per capita funding, relaxed norms, enhanced monitoring and focussed supportive supervision and encouraged to adopt innovative approaches to address their peculiar health challenges.
 - The PIP software is in the process of development and after incorporating feedback of the States/UTs, the User Acceptance Test (UAT) and third party audit will be carried out before hosting the same into server. This process may take some more time; however, the Ministry is in the process of finalizing the software at the earliest.

Pending that, presently, all proposals under NHM from the States/UTs are received electronically in the form of e-mails and excel files etc. from the State/ UTs. Further, unique FMR code have been approved for each activity."

38. The Committee note that the Ministry of Health and Family Welfare (Department of Health & Family Welfare) are in the process of developing a Programme Implementation Plan (PIP) software for online monitoring to facilitate the assessment of the actual needs of the tribals at ground level. The Committee, while welcoming the initiative taken by the Ministry and also believing that by

now the software must have been put in place, desire that they be apprised of the outcome seen and experienced by the Ministry as a result of such initiatives and the lessons learnt in the process that can be shared with other Ministries/ Departments. The Committee further urge the Ministry of Health and Family Welfare (Department of Health & Family Welfare) to coordinate with the Ministry of Tribal Affairs to ensure smooth interface with the monitoring mechanisms by adopting the online mode.

Strengthening the Implementation of Mid-Day Meal Scheme

(Recommendation Para No. 11)

39. In the implementation of Mid-Day Meal (MDM) Scheme, the Committee found that no Annual Work Plan & Budget was prepared nor was there any special plan or projects for ST students. The Committee also noted about non-availability of kitchen sheds, incomplete infrastructure in kitchens, inadequate kitchen devices and insufficient drinking water, exposure of children to health hazards as the meals were being prepared and served in open and un-hygienic conditions; absence of grievance redressal mechanism, etc. The Department of School Education & Literacy had stated that schools have population of all categories of children i.e. General, SC & ST and Mid Day Meal is provided to all students on school days irrespective of their caste. The Department had further submitted that all States had public grievances redressal mechanism and grievances, if any, were promptly resolve. The Committee felt that the Department had not conducted proper inspection of all concerned States/Districts to gauge the actual state of affairs in the implementation of MDMs across the country, in terms of schools and infrastructure being used for MDMs, quality of food, construction of kitchens as per guidelines etc. The Committee, therefore had recommended that the Department should either constitute a team of its own or engage an independent agency to conduct thorough inspection of all schools under MDM Scheme for requisite remedial action wherever warranted. The Committee desired that they be apprised of the action taken by the Department within six months of the presentation of this report.

40. The Department of School Education and Literacy in their action taken reply to Recommendation stated as under:-

“Annual Work Plan & Budget (AWP&B)

The States and UTs submit their AWP&B for consideration and approval by PABMDM headed by the Secretary, Department of School Education & Literacy, MHRD, Government of India are consisting of Members from the

line Ministries viz. Ministry of Women & Child Development; Ministry of Social Justice & Empowerment, Ministry of Rural Development, Ministry of Panchayati Raj, Ministry of Health & Family Welfare, NITI Aayog, Ministry of Tribal Affairs, Ministry of Drinking Water & Sanitation etc. The AWP&B is prepared through bottom up approach starting from smallest field unit and compiled at Cluster, Block, District and State. The AWP&B is a comprehensive document and provides data on enrolment of children in elementary classes I-VIII in Government and Government aided schools, Special Training Centres and Madrasas and Maqtabas supported under Samagra Shiksha.

The AWP&B contains information on Budget Provision made by the States & UTs for General category, Scheduled Caste Sub Plan (SCSP) and Tribal Sub Plan (TSP). The AWP&B is prepared by bottom up approach by compiling information obtained from the grass root level and consolidated in the District Plan and State Plan. No separate Plan is submitted by the States and UTs for General Category, SCSP and TSP. However, keeping in view the nutritional requirement in tribal areas, the approval of the Cabinet has been obtained for providing supplementary nutrition to the children studying in the schools in these areas. Further, 10.70% of the Plan budget of MDM is allocated for TSP in the Demands for Grants of MHRD. However, Central Government has issued instructions that TSP allocation is not reappropriated to augment the provisions of other heads of accounts for General Category and SCSP. The unutilised TSP funds cannot be utilised for General categories and SCSP. Therefore, the TSP allocations is utilised for the States and UTs for covering the eligible children under TSP.

Kitchen-cum-Stores Release of non-recurring Central Assistance to the States and UTs for construction of Kitchen-cum-stores was started from 2006-07. MHRD released non-recurring central assistance of Rs.802555.79 lakh during 2006-07 to 2013-14 for constructions of 1006263 kitchen-cum-stores (**Annexure-1**). The Statement indicating the number of kitchen-cum-stores constructed till 31st March, 2014 is enclosed at **Annexure-II** which indicates that 67% of the sanctioned kitchen-cum-stores were constructed; construction work was in progress in 13% kitchen-cum-stores and construction was yet to start in the remaining 21% schools.

The pace of construction of kitchen-cum-stores was regularly reviewed during the meetings of the Programme Approval Board-Mid Day Meal (PAB-MDM). The States and UTs informed in these meetings that due to the increase in the cost of construction, they were unable to construct the kitchen-cum-stores which were sanctioned between 2006-07 to 2008-09

on unit cost norms @ Rs.60,000/- each. These States desired that they may be provided additional central assistance or resanction these kitchen-cum-stores on plinth area norms as per State's Schedule of Rates (SoRs). The request of the States and UTs was considered and agreed by PAB-MDM. The total number of kitchen-cum-stores sanctioned from 2006-07 to 2018-19 is 10,11,411. The slight change in the number of kitchen-cum-stores sanction till 2013-14 and up to 2018-19 is due to the fact that some States had either surrendered or requested for less number of kitchen-cum-stores on plinth area norms against the kitchen-cum-stores previously sanctioned on unit cost norms. As per the information submitted by the States till 31st March, 2019, the States and UTs have constructed 8,45,424 (84%) kitchen-cum-stores, whereas construction in 50,449 (5% approx) is under progress and work is yet to start for the remaining 11% kitchen-cum-stores (**Annexure-III**). The component of repair of 10-year-old kitchen-cum-stores has also been approved by the CCEA in February, 2019. This has enabled the States and UTs to carry out repairs for the kitchen-cum-stores constructed 10 or more years ago.

Kitchen Devices

For preparation and serving of cooked meal under Mid-Day Meal Scheme, MHRD started the release of non-recurring Central Assistance to the States and UTs for procurement of kitchen devices @ Rs 5,000 for each school. The replacement of kitchen devices sanctioned five years earlier was also started during 2012-13. MHRD had released central assistance of Rs.88084.04 lakh for the procurement of 1240431 units of kitchen devices and replacement of 521841 kitchen devices till March, 2013-14 (**Annexure- IV**). As per latest statement till September, 2019, MHRD has sanctioned central assistance of Rs.115664.21 lakh for 2321094 (procurement of 1314427 and replacement of 1006667) kitchen devices (**Annexure - V**). The norms for procurement and replacement of kitchen devices have been revised with the approval of CCEA in February, 2019. Now the grant for kitchen devices has been linked with enrolment in place of previously unit cost norm of Rs 5000/- per school.

Drinking Water

The drinking water facilities in schools are provided in convergence with the Ministry of Drinking Water and Sanitation. As per the information furnished by the States, the drinking water facility was available in 94% of the schools till 2013-14. This has increased to 97% during 2018-19. Relevant statements on the State and UT wise availability of drinking water is at **Annexures- VI and VII**.

Inspections

As per MDM Guidelines at least 25% schools should be visited for, inspections in each quarter. The State-wise information on the number of institutes inspected during 2018-19 is enclosed at **Annexure- VIII**. The information reveals that the inspections in the States and UTs of Andhra Pradesh, Assam, Haryana, Jammu & Kashmir, Mizoram, Nagaland, Sikkim and Lakshadweep are not up to the mark. These States and UTs have been advised to inspect the institutes on regular basis.

Grievance Redressal Mechanism

The status of Grievance Redressal Mechanism in States and UTs is enclosed at **Annexure-IX**.

Monitoring Mechanism

Management Information System was developed In June, 2012 for web based monitoring of the Mid Day Meal Scheme. The States and UTs have also rolled out Automated Monitoring System for near real time monitoring of the Scheme. The States and UTs have been advised to set up Management Structures at State, District, Block and school levels. The existing Monitoring Mechanism of Mid Day Meal Scheme is enclosed at **Annexure-X**. At present the scheme is being evaluated by the NITI Aayog."

41. Audit in their vetting comment stated as under:-

"Ministry has not provided the details of action taken on the PAC's recommendation on constituting a team of its own or engaging an independent agency to conduct thorough inspection of all schools under MDM Scheme. The same may be furnished to PAC."

42. The Department of School Education and Literacy in their updated reply stated as under:-

"The Mid Day Meal Scheme (MDMS) covers about 11.59 crore enrolled children studying in 11.34 lakh schools in India. As per MDM guidelines, all schools must be visited atleast once for inspection in a year.

In compliance of the recommendation of PAC, this Department has initiated the process of framing guidelines for strengthening of monitoring mechanism by engaging the services of reputed independent Agencies/Institutes like National Institute of Nutrition (NIN), home science departments of Central/State Agriculture Universities, reputed home science colleges on a clearly defined Terms of Reference (ToR) and

timelines for independent 3rd party thorough inspection and monitoring of the implementation of Mid Day Meal Scheme.

Keeping the spirit of PAC's recommendation, the ToRs will be designed in such a manner that every district in the country is covered each year. These will also include tracking of children's nutritional and health parameters to provide timelines and trend lines in order to assess the impact of the scheme and to facilitate timely interventions for course correction."

43. The Committee had noted that that the Ministry of Human Resource Development (Department of School Education and Literacy) had not conducted proper inspection of all concerned States/Districts to gauge the actual state of affairs in the implementation of MDMs across the country, in terms of schools and infrastructure being used for MDMs, quality of food, construction of kitchens as per guidelines etc. Taking these into cognisance, they had recommended that the Department should either constitute a team of its own or engage an independent agency to conduct thorough inspection of all schools under MDM Scheme for requisite remedial action wherever warranted and they be informed accordingly. The Committee note from the action taken reply that a number of measures to improve the implementation of the Mid Day Meal Scheme (MDMS) have been taken by the Department as the physical progress of construction of kitchen-cum-stores (Primary and Upper Primary) and availability of gas based cooking, drinking water and toilet facility in schools have improved since 2013-14. However, only a few States/UTs have achieved 100 percent target as of 2018-19 on the various provisions made under MDMS. The Committee, therefore are of the opinion that further efforts need to be made by all States/UTs towards achieving 100 percent target and recommend that the Department may

accordingly impress upon them towards achieving this end and Committee be informed accordingly.

The Committee also note that the Department had initiated the process of framing guidelines to strengthen the monitoring mechanism by engaging the services of reputed independent Agencies/Institutes like National Institute of Nutrition(NIN), home science departments of Central/State Agriculture Universities, reputed Home Science colleges on a clearly defined Terms of Reference (ToR) and timelines for independent Third Party thorough inspection and monitoring of the implementation of Mid Day Meal Scheme, ToR was to be designed to ensure that every district is covered each year and would include tracking of children's nutritional and health parameters to facilitate impact assessment of the Scheme and timely interventions for course correction. The Committee desire to be apprised of the outcome of Third Party interventions in the monitoring mechanisms and the measures taken by the Department towards improving the implementation of the MDM Scheme across the country and the benefits it has brought to the Scheduled Tribe Population.

Involvement of Local Community in the Planning Process

(Recommendation Para No.12)

44. Audit had highlighted that planning for implementation of Schemes was deficient as the plans were formulated without specific consideration of tribal beneficiaries as required under TSP. The Committee felt the need to strengthen the planning process with the involvement of the community especially in tribal dominant blocks. The Committee had opined that it is imperative to identify and prioritize issues/concerns of the local community in the planning and decision making process. The Committee therefore had recommended that inputs/suggestions of local tribal community should be sought before finalizing the plan for implementation of any programme under the TSP. The Committee were of the view that such initiative would enable the implementing agency to pin point issues that need special attention and devote additional fund,

human resources and time for resolution of the same and ensure flow of benefits to tribal communities under the respective programmes/schemes.

45. The Ministry of Tribal Affairs in their action taken reply stated as under:-

“As per guidelines for State TSP dated 18.06.2014 issued by erstwhile Planning Commission it is stipulated that Tribal Welfare Department is the nodal department authorized to lead the process of TSP development at the State level. While formulating State TSP, State Nodal Department shall ensure that TSP should be formulated at the District level by the District Planning and Monitoring Committee (DPMC). DPMC must reflect on the actual demand for the schemes / programmes that are to benefit STs, giving priority to equity aspect of their local aspirations and socio-economic backwardness.

While issuing Sanction orders by this Division, one of the conditions is that State Government shall ensure that concerned Panchayati Raj Institutions should be duly informed about the projects / programmes relating to Tribal Development to be implemented in the area of jurisdiction. State Government shall also ensure that meetings of Gram Sabha are conducted on regular interval as per norms in such areas.

46. Audit in their vetting comments stated as under:-

“Ministry may intimate PAC about the mechanism put in place to ensure that inputs/suggestions of local tribal community have been sought and incorporated in the plan as recommended by the PAC.”

47. The Ministry of Tribal Affairs in their updated action taken replies stated as under:-

“As stated above, while issuing Sanction orders by the Ministry, one of the conditions is that State Government shall ensure that concerned Panchayati Raj Institutions should be duly informed about the projects/programmes relating to Tribal Development to be implemented in the area of jurisdiction. State Government shall also ensure that meetings of Gram Sabha are conducted on regular interval as per norms in such areas”

48. The Committee had opined that it is imperative to identify and prioritize issues/concerns of the local community in the planning and decision making process and recommended that their inputs/suggestions should be sought before finalizing the plan for implementation of any programme under TSP. The Committee note from the action taken reply of the Ministry of Tribal Affairs that

while issuing Sanction orders by the Ministry, one of the conditions is that State Government shall ensure that concerned Panchayati Raj Institutions are duly informed about the projects/programmes relating to tribal development to be implemented in their areas and shall also ensure that meetings of Gram Sabha are conducted at regular intervals as per norms. However, the desired information regarding the issue of incorporating local community felt needs and their suggestions in the Plan are conspicuously absent. The Committee find this unacceptable and while again acknowledging the importance of taking the local community in confidence in formulating and implementing any project, reiterate their earlier recommendation and urge the Ministry to furnish information on steps taken to address the specific point raised by the Committee in their Report and they be apprised accordingly.

49. The Ministry of Health and Family Welfare (Department of Health & Family Welfare) in their action taken reply to Recommendation Para No.12 of the Committee stated as under:-

“Under National Health Mission, bottom-up approach is expected for preparing the Programme Implementation Plans (PIPs) for States. The Framework for implementation of NHM provides for decentralised planning. Untied grants are provided to Village Health Sanitation and Nutrition Committees to enable local planning and action. Further, under NHM, States have been asked to provide higher per capita allocation to High Priority Districts that cover all Tribal Districts with composite health index below the State average.”

50. Audit in their vetting comments stated as under:-

“Reply of the Ministry does not address the recommendation of the PAC. Specific reply may be furnished to PAC.”

51. The Department of Health & Family Welfare in their updated reply stated as under:-

“Under the National Health Mission, support is provided to States/UTs for strengthening their healthcare system based on proposal incorporated in their State Programme Implementation Plan (PIP). The State PIPs are

envisaged to be an aggregate of the district/city health action plans, and include activities to be carried out at the state level.

District Health Action Plans developed through district based planning utilizing locally generated service data, civil registration etc is a key pillar under NHM. Decentralized planning using data has following benefits:

- It ensures active community participation including tribal population participation to identify local Health needs and ways to address them.
- It also enables mobilization of resources from sectors other than health.
- It brings community closer to the health system and provides a platform for interaction of community members with health service providers.
- It enables health system to get feedback from the community to improve quality of services and utilization of services offered.
- Programmes based on evidence are likely to be more effective and successful.

Letter has been issued to the states that the local tribal communities should be involved in the planning for development of health action plans in scheduled tribal districts. (Copy enclosed)

52. To ensure involvement of the local tribal community in the planning and decision making process in TSP Scheme implementation, the Ministry of Health and Family Welfare (Department of Health & Family Welfare) in their action taken note have informed that the State Programme Implementation Plan (PIP) are an aggregate of the district/city health action plans and include activities to be carried out at the State Level. Further, the District Health Action Plans are developed through district based planning utilizing locally generated service data, civil registration, etc. under the National Health Mission (NHM). In addition, the Department have also instructed States to involve local tribal communities in the planning for development of Health Action Plans in the scheduled tribal districts. The Committee, while appreciating the steps taken towards involving the local tribal communities in the planning process, wish to be apprised of the mechanism that has been put in place by the Department to check compliance of

the same by the States. The Committee are also of the view that while empirical data is important in the planning process, first hand inputs and suggestions from the local tribal community are also of equally vital importance in formulating a complete plan for the welfare of tribal people in the country. The Committee, therefore desire that interactive sessions and meeting may be conducted at periodic intervals to hear the views of the tribal local community as well as educate them on healthy and hygienic living by the concerned officials involved in the process regarding the health schematic interventions.

N C D Flexi Pool

Statewise Release under NCD Flexi pool during FY 2015-16, 2016-17, 2017-18 & 2018-19
(Rs.in Lakh)

Sl. No	State/UT	Central Release Under NCD Flexi Pool				Expenditure # (NPCDCS)			
		2015-16	2016-17	2017-18	2018-19	2015-16	2016-17	2017-18	2018-19
	A. High Focus States								
1	Bihar	2234	1804	4726	5141	65.34	90.1	75.69	467.82
2	Chhatisgarh	847	1485	3469	2115	124.6	919.33	702.14	1012.76
3	Jharkhand	1057	1511	0	2153	144.62	232.87	109.35	3204.74
4	Madhya Pradesh	2682	3540	5048	3363	745.94	524.88	136.04	786.56
5	Odisha	1619	1955	1785	1857	982.15	711.74	229.28	1812.87
6	Rajasthan	2704	2678	6378	3391	1668.9	1869.62	740.5	2408.83
7	Uttar Pradesh	5439	7181	15132	10232	938.48	2909.59	2252.51	9679.46
	Sub- Total (A)	16582	20154	36538	28252	4670.03	7258.13	4245.51	19373.04
	B. Hilly States								
8	Himachal Pradesh	478	324	644	605	403.08	76.92	160.69	257.66
9	Jammu & Kashmir	816	1459	2357	1386	480.69	189.62	280.09	1469.46
10	Uttarakhand	662	890	186	1268	0	39.23	257.11	296.28
	Sub- Total (B)	1956	2673	3187	3259	883.77	305.77	697.89	2023.4
	C. Other States								
11	Andhra Pradesh	1478	3082	3645	2466	434.8	675.31	1276.18	846.96
12	Telangana	941	1123	2012	1763	200	15.54	375.41	1151.84
13	Goa	23	0	0	0	42.73	44.98	24.95	100.17
14	Gujarat	2098	2132	4754	3006	857.45	1470.8	599.55	917.71
15	Haryana	493	380	1388	717	132.74	266.48	251.73	525.15
16	Karnataka	1429	2134	8284	2007	860.42	1479.76	757.77	1488.27
17	Kerala	518	693	1211	1311	382.81	573.12	211.06	879.72
18	Maharashtra	2754	3768	6208	0	1290.01	1234.91	443.03	1670.82
19	Punjab	671	835	1726	1182	298.33	712.62	90.74	289.89
20	Tamil Nadu	1716.00	2145	5461	3036	3185.38	2775.15	416.08	3278.17
21	West Bengal	1303	2485	2303	2351	383.77	192.13	260.79	1819.1

									1
22	Chandigarh	69	46	109	84	18.95	28.26	28.19	1.09
23	Delhi	223	564	1289	395	18.58	14.07	9.03	6.17
24	Puducherry	29	39	125	137	13.64	104.93	18.37	45.22
	Sub- Total (C)	13745	19426	38515	18455	8119.61	9588.06	4762.88	13020.29
	D. Union Territories								
25	Andaman & Nicobar Islands	55	121	108	0	0	2.2	28.13	54.21
26	Dadra & Nagar Haveli	63	82	89	62	37.93	65.67	28.05	34.9
27	Daman & Diu	35	39	19	0	0	0	5.74	4.4
28	Lakshadweep	7	0	0	0	3.18	0.76	0	0
	Sub- Total (D)	160	242	216	62	41.11	68.63	61.92	93.51
	E. North-Eastern High Focus States								
29	Arunachal Pradesh	570	841	1606	974	128.47	493.82	270.52	382.06
30	Assam	3578	5533	6046	1113	890.69	1279.07	369.04	517.62
31	Manipur	308	250	675	416	63.69	123.12	94.46	200.6
32	Meghalaya	246	531	779	0	42.36	153.54	77.08	129.57
33	Mizoram	142	214	1297	356	149.16	316.97	12.96	65.88
34	Nagaland	263	183	637	304	217.04	99.94	43.76	254.94
35	Sikkim	95	158	115	159	103.19	69.19	64.4	106.32
36	Tripura	255	266	821	664	47.79	172.54	264.06	209.06
	Sub-Total (E)	5457	7976	11976	3986	1642.39	2708.19	1196.28	1866.05
	Grand-Total (A+B+C+D +E)	37900	50471	90432	54014	15356.91	19928.78	10964.48	36376.29

NPCDCS Programme has been Subsumed under NCD Flexi Pool from 2015-16 onward. Release (Central) of funds under the Flexi Pool of NCD is for 5 programmes (including NPCDCS) and expenditure of NPCDCS has been shown as reported by the States/UTs including Centre & States/UTs share.

Annexure-B

National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS)

As on March, 2019

S. No.	State	Approved up to 2018-19						Achievement upto 2018-19					
		State NCD Cell	District NCD Cell	District NCD Clinic	CCU	Day Care Center	CHC NCD Clinic	State NCD Cell	District NCD Cell	District NCD Clinic	CCU	Day Care Center	CHC NCD Clinic
1	Andhra Pradesh	1	13	13	12	12	80	1	13	13	7	0	193
2	Arunachal Pradesh	1	20	20	3	3	54	1	18	18	0	0	49
3	Assam	1	27	27	11	7	123	1	14	14	5	5	79
4	Bihar	1	38	38	12	22	63	1	38	30	6	0	0
5	Chhattisgarh	1	27	27	6	11	136	1	27	27	1	2	89
6	Goa	1	2	2	2	2	9	1	1	2	2	2	4
7	Gujarat	1	33	33	13	16	123	1	19	19	5	2	68
8	Haryana	1	21	13	8	8	149	1	13	20	8	8	62
9	Himachal Pradesh	1	12	12	5	7	9	1	12	12	11	11	146
10	Jammu & Kashmir	1	22	22	12	7	56	1	14	14	6	5	36
11	Jharkhand	1	24	24	3	7	110	1	23	21	1	0	68
12	Karnataka	1	30	30	10	9	243	1	28	29	5	5	201
13	Kerala	1	14	14	11	14	317	1	14	14	4	16	85
14	Madhya Pradesh	1	51	51	10	10	96	1	5	51	5	51	51
15	Maharashtra	1	35	34	18	23	686	1	34	34	25	10	447
16	Manipur	1	16	16	2	10	22	1	11	11	1	1	5

17	Meghalaya	1	7	7	1	1	14	1	4	4	1	2	8
18	Mizoram	1	8	8	2	2	15	1	8	8	2	2	10
19	Nagaland	1	11	11	1	1	5	1	11	11	1	2	5
20	Odisha	1	30	30	12	12	247	1	30	30	5	30	62
21	Punjab	1	22	22	23	18	140	1	22	22	14	3	192
22	Rajasthan	1	33	33	8	8	227	1	33	33	8	8	227
23	Sikkim	1	4	4	2	2	2	1	4	2	2	1	2
24	Tamil Nadu	1	32	32	32	32	664	1	32	32	32	0	664
25	Telangana	1	14	30	2	7	74	1	12	7	2	1	21
26	Tripura	1	8	8	2	2	56	1	8	8	0	0	23
27	Uttar Pradesh	1	75	75	7	5	427	1	53	55	0	0	234
28	Uttarakhand	1	13	13	2	2	35	1	11	11	0	0	8
29	West Bengal	1	27	27	10	14	38	1	27	27	8	1	38
30	Andaman & Nicobar	1	3	2	1	0	8	1	0	0	0	0	0
31	Chandigarh	1	0	1	0	0	3	1	0	1	0	0	3
32	Dadar & Nagar Haveli	1	0	1	0	0	1	1	0	1	0	0	0
33	Daman & Diu	1	1	2	0	0	2	1	0	0	0	0	0
34	Lakshadweep	1	0	1	1	1	3	1	0	0	0	0	0
35	Delhi	1	11	11	0	0	0	1	0	0	0	0	0
36	Puducherry	1	3	4	1	1	4	1	4	4	1	0	4
Grand Total		36	687	698	245	276	4241	36	543	585	168	168	3084

Annexure I

Details of Central Assistance released and utilised for Construction of Kitchen Cum Store under Mid-Day Meal Scheme during 2006-07 to 2013-14

(Rs In lakh)

Sl. No.	State	No. of kitchen sheds sanctioned @ Rs. 60000 per unit						No. of kitchen sheds sanctioned on plinth area norms as per State Scheduled of rates										Total No. of kitchen sheds sanctioned upto 2013-14		
		2006-07		2007-08		2008-09		2008-10		2010-11		2011-12		2012-13		2013-14		Unit	Amount	
		Unit	Amount	Unit	Amount	Unit	Amount	Unit	Amount	Unit	Amount	Unit	Amount	Unit	Amount	Unit	Amount			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
Non-NER States																				
1	Andhra Pradesh	17201	10320.81	33328	18885.80	0	0.00	0	0.00	0	0.00	24754	27848.25					75263	55185.88	
2	Bihar	16050	9628.75	15058	9035.40	31078	18648.80	0	0.00	0	0.00	3780	7328.00	19975	11395.14	573	553.14	65560	45183.08	
3	Chhattisgarh	5570	3342.28	6016	3609.60	26727	16035.20	0	0.00	0	0.00	8953	7014.11					47266	30002.19	
4	Goa	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00					0	0.00	
5	Gujarat	6318	3790.58	0	0.00	8303	5981.80	4247	4415.07	0	0.00	0	0.00			5208	9415.72	25077	23203.15	
6	Haryana	3185	1911.28	873	523.80	0	0.00	7425	9275.45	0	0.00	0	0.00					11483	11710.54	
7	Himachal Pradesh	3433	2059.80	47	28.20	11288	6778.80	181	182.90	0	0.00	0	0.00					14958	8220.70	
8	Jammu & Kashmir	8087	3952.20	728	435.80	0	0.00	0	0.00	0	0.00	6008	4804.63					11815	8393.83	
9	Jharkhand	6537	3322.14	10354	8212.40	4510	2706.00	2000	3270.00	0	0.00	16800	26334.95					38001	40845.48	
10	Karnataka	8806	5783.61	18241	10944.60	0	0.00	0	0.00	0	0.00	8724	10184.52	0	15051.10	3905	11975.59	40477	53928.42	
11	Kerala	451	270.55	834	550.40	0	0.00	1165	1773.60	0	0.00	0	0.00					2450	2544.55	
12	Madhya Pradesh	23232	13930.08	44599	26759.40	25288	17560.80	0	0.00	0	0.00	0	0.00	1353	1574.25	2289	2543.80	100751	62477.34	
13	Maharashtra	18417	11055.20	87	52.20	38048	22828.80	1362	1421.08	7869	8280.77	0	0.00			6000	7834.98	71783	61448.01	
14	Mississipi	15091	9354.33	26318	15791.40	18749	11248.40	6893	4484.68	0	0.00	0	0.00					69152	40578.81	
15	Punjab	4571	2742.80	1052	631.20	12822	7683.20	524	592.00	0	0.00	0	0.00					18589	11858.00	
16	Rajasthan	8093	4849.58	10050	11438.00	140557	24034.12	10089	6818.15	0	0.00	0	0.00					71288	47135.85	
17	Tamilnadu	487	274.30	1034	620.40	3804	2282.40	8045	14853.00	0	0.00	0	0.00	14130	28877.50			28470	45007.80	
18	Uttarakhand	4154	2490.12	609	485.40	0	0.00	0	0.00	3000	3913.35	4855	5102.88	3361	5293.52			16989	17283.27	
19	Uttar Pradesh	22920	13751.61	41877	24846.20	18189	11519.40	38876	24783.45	0	0.00	0	0.00					122572	75000.66	
20	West Bengal	8792	5875.20	1800	1140.00	56358	22174.80	8418	17368.52	7193	12355.88	3023	7180.54			13128	19682.50	81314	85188.44	
	Total	178186	107488.61	221917	133150.20	281821	169092.82	82335	89245.88	18852	24530.00	77589	64507.88	18854	48198.38	31106	62116.72	821669	719437.59	
UTs with Legislature																				
21	Delhi	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00					0	0.00	
22	Puduchery	0	0.00	0	0.00	92	55.20	0	0.00	0	0.00	0	0.00					92	55.20	
	Total	0	0.00	0	0.00	92	55.20	0	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	92	55.20
UTs without Legislature																				
23	AndN Islands	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	34	258.00	217	1033.69	251	802.3	251	1295.68	
24	Chandigarh	0	0.00	0	0.00	10	23.34	0	0.00	0	0.00	0	0.00					10	23.34	
25	D&N Haveli	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	50	85.52					50	85.52	
28	Daman & Diu	26	15.43	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	8	23.96			32	39.39	
27	Lakshadweep	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00					0	0.00	
	Total	26	15.43	0	0.00	10	23.34	0	0.00	0	0.00	84	321.52	223	1063.65	0	0.00	343	1423.84	
NER States																				
28	Arunachal Pradesh	3843	2305.67	242	145.20	0	0.00	0	0.00	48	44.00	0	0.00					4131	2494.87	
29	Assam	30068	18040.76	0	0.00	10048	6028.80	4613	7449.72	3941	5018.88	8125	10347.18					56783	46885.32	
30	Manipur	1174	704.40	0	0.00	0	0.00	0	0.00	1879	3579.02	0	0.00					3053	4283.42	
31	Meghalaya	2538	1523.40	488	280.80	1294	778.40	1467	2949.48	3723	9147.00	0	0.00					9491	14677.08	
32	Mizoram	611	368.85	21	12.60	901	540.80	0	0.00	0	0.00	853	1703.7					2385	2823.75	
33	Nagaland	1752	1051.44	3	1.80	22	13.20	0	0.00	448	1452.52	0	0.00					2223	2518.98	
34	Sikkim	800	480.00	0	0.00	89	35.40	0	0.00	0	0.00	0	0.00			77	168.84	888	684.34	
35	Tripura	862	577.25	190	118.80	722	433.20	1022	1981.20	0	0.00	1730	3489.54			630	851.33	5144	7471.32	
	Total	41749	26049.77	932	658.20	13046	7827.60	7082	12300.40	10335	19241.40	10718	16550.42	0	0.00	607	1020.27	84169	81639.06	
	GRAND TOTAL	220840	132583.21	222849	133709.43	234989	176998.66	88417	101638.28	28887	43771.40	88401	110770.82	19077	49860.03	31713	53136.99	1008263	802555.79	
	Or Say, Rs. In Crore		1325.83		1337.09		1769.99		1016.36		437.71		1107.80		499.60		531.37		8025.56	

* Release the surrendered amount to utilize for construction of 18,975 kitchen-cum-stores.

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558/2020/Desk-MDM

PHYSICAL PROGRESS ON CONSTRUCTION OF KITCHEN-CUM-STORES (PRIMARY +UPPER PRIMARY)								
Sl. No.	State/UT	No. of Kitchen -cum- stores sanctioned during 2006-07 to 2013-14	Physical Progress of Kitchen cum stores as on 31-03-2014					
			Constructed		In Progress		Not yet started	
			No.	%	No.	%	No.	%
1	2	3	4	5	6	7	8	9
1	Andhra Pradesh	75283	12908	17%	7868	10%	54507	72%
2	Arunachal Pradesh	4131	4085	99%	0	0%	46	1%
3	Assam	56795	38711	68%	8811	16%	9273	16%
4	Bihar	66550	46140	69%	9939	15%	10471	16%
5	Chhattisgarh	47266	38044	80%	6423	14%	2799	6%
6	Goa	0	0	0%	0	0%	0	0%
7	Gujarat	25077	18388	73%	141	1%	6548	26%
8	Haryana	11483	7414	65%	1165	10%	2904	25%
9	Himachal Pradesh	14959	13638	91%	859	6%	452	3%
10	Jammu & Kashmir	11815	11442	97%	107	1%	266	2%
11	Jharkhand	39001	20554	53%	8396	22%	9951	25%
12	Karnataka	40477	28952	72%	5635	14%	5890	15%
13	Kerala	2450	318	13%	484	20%	1648	67%
14	Madhya Pradesh	100751	85680	85%	7963	8%	6108	6%
15	Maharashtra	71783	41623	58%	4046	5%	25114	36%
16	Manipur	3053	1174	38%	0	0%	1879	62%
17	Meghalaya	9491	7613	80%	1701	18%	177	2%
18	Mizoram	2396	2396	100%	0	0%	0	0%
19	Nagaland	2223	2209	99%	14	1%	0	0%
20	Orissa	69152	36121	52%	22101	32%	10930	16%
21	Punjab	18969	16413	87%	2032	11%	524	3%
22	Rajasthan	77298	44828	58%	5505	7%	26955	35%
23	Sikkim	936	800	85%	59	6%	77	8%
24	Tamil Nadu	28470	7682	27%	20788	73%	0	0%
25	Tripura	5144	4260	83%	1145	22%	0	0%
26	Uttar Pradesh	122572	110245	90%	918	1%	11409	9%
27	Uttarakhand	16989	8904	52%	3477	20%	4608	27%
28	West Bengal	81314	58822	72%	9364	12%	13128	16%
29	A&N Islands	251	5	2%	11	4%	235	94%
30	Chandigarh	10	7	70%	0	0%	3	30%
31	D&N Haveli	50	1	2%	49	98%	0	0%
32	Daman & Diu	32	26	81%	0	0%	6	19%
33	Delhi	0	0	0%	0	0%	0	0%
34	Lakshadweep	0	0	0%	0	0%	0	0%
35	Puducherry	92	92	100%	0	0%	0	0%
	Total	1006263	670595	67%	129011	13%	206918	21%

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Amend-III

807/665

781558/2020/Desk-M/DW PHYSICAL PROGRESS ON CONSTRUCTION OF KITCHEN-CUM-STORES

Sl. No.	State/UT	No. of Kitchen - cum-stores sanctioned during 2006-07 to 2018-19	Physical Progress of Kitchen cum stores upto 31.03.2019					
			Constructed		In Progress		Not yet started	
			No.	%	No.	%	No.	%
1	2	3	4	5	6	7	8	9
1	Andhra Pradesh	44875	18291	41%	1033	2%	24992	56%
2	Arunachal Pradesh	4085	4085	100%	0	0%	0	0%
3	Assam	56795	51146	90%	527	1%	5122	9%
4	Bihar	66550	58363	88%	484	1%	7703	12%
5	Chhattisgarh	47266	45166	96%	2100	4%	0	0%
6	Goa	0	0	0%	0	0%	0	0%
7	Gujarat	25077	24308	97%	2	0%	767	3%
8	Haryana	11483	10155	88%	653	6%	675	6%
9	Himachal Pradesh	14959	14829	99%	34	0%	96	1%
10	Jammu & Kashmir	11815	7118	60%	0	0%	4697	40%
11	Jharkhand	39001	29656	76%	1203	3%	8142	21%
12	Karnataka	40477	39237	97%	96	0%	1144	3%
13	Kerala	5481	2450	45%	0	0%	3031	55%
14	Madhya Pradesh	103401	93838	91%	4800	5%	4763	5%
15	Maharashtra	71783	59405	83%	546	1%	11832	16%
16	Manipur	2966	1083	37%	1883	63%	0	0%
17	Meghalaya	9758	9491	97%	0	0%	267	3%
18	Mizoram	2532	2506	99%	0	0%	26	1%
19	Nagaland	2223	2223	100%	0	0%	0	0%
20	Odisha	69152	44491	64%	24661	36%	0	0%
21	Punjab	18969	18969	100%	0	0%	0	0%
22	Rajasthan	77298	50595	65%	4143	5%	22560	29%
23	Sikkim	948	940	99%	8	1%	0	0%
24	Tamil Nadu	28470	27792	98%	344	1%	334	1%
25	Telangana	30408	17483	57%	3698	12%	9227	30%
26	Tripura*	5304	5565	105%	0	0%	0	0%
27	Uttar Pradesh	122572	112808	92%	2	0%	9762	8%
28	Uttarakhand	15933	15639	98%	83	1%	211	1%
29	West Bengal	81382	77446	95%	4136	5%	0	0%
30	A&N Islands	251	165	66%	0	0%	85	34%
31	Chandigarh	10	7	70%	0	0%	3	30%
32	D&N Haveli	50	50	100%	0	0%	0	0%
33	Daman & Diu	32	32	100%	0	0%	0	0%
34	Delhi	0	0	0%	0	0%	0	0%
35	Lakshadweep	0	0	0%	0	0%	0	0%
36	Puducherry	105	92	88%	13	12%	0	0%
Total		1011411	845424	84%	50449	5%	115440	11%

*Tripura has constructed 261 more kitchen-cum-store than sanctioned.

Details of Central Assistance released for Procurement and Replacement of Kitchen Devices under Mid-Day Meal Scheme during 2006-07 to 2013-14

558/2020/Dask-MDM

Sl. No.	State/UT	No. of schools sanctioned for kitchen devices @ Rs. 6000 per unit for the year 2006-07		No. of schools sanctioned for kitchen devices @ Rs. 6000 per unit for the year 2007-08		No. of schools sanctioned for kitchen devices @ Rs. 5000 per unit for the year 2008-09		No. of schools sanctioned for kitchen devices @ Rs. 6000 per unit for the year 2009-10		No. of schools sanctioned for kitchen devices @ Rs. 6000 per unit for the year 2010-11		No. of schools sanctioned for kitchen devices @ Rs. 8000 per unit for the year 2011-12		No. of schools sanctioned for kitchen devices @ Rs. 6000 per unit for the year 2012-13		sanctioned for Replacement of kitchen devices @ Rs. 6000 per unit for the year 2012-13		No. of schools sanctioned for Procurement of kitchen devices @ Rs. 6000 per unit for the year 2013-14		sanctioned for Replacement of kitchen devices @ Rs. 6000 per unit for the year 2013-14		Total No. of kitchen devices sanctioned upto 2014-15					
		Unit	Amount	Unit	Amount	Unit	Amount	Unit	Amount	Unit	Amount	Unit	Amount	Unit	Amount	Unit	Amount	Unit	Amount	Unit	Amount	Unit	Amount	Unit	Amount		
Non-NER States																											
1	Andhra Pradesh	49818	2490.90	28839	1441.95	0	0.00	0	0.00	0	0.00	0	0.00	2468	123.39	48618	2430.90							130541	6527.07		
2	Bihar	35780	1789.02	27024	1351.20	4777	238.85	18667	933.35	0	0.00	0	0.00			35780	1789.02	6270	313.50	27024	1351.20	1351.20	1351.20	65482	3274.17		
3	Chhattisgarh	22429	1120.99	6216	300.80	30774	1538.70	0	0.00	0	0.00	0	0.00			16800	840.00							7810	3905.49		
4	Goa	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00												0	0.00	
5	Gujarat	22399	1119.95	6707	335.35	0	0.00	762	38.10	0	0.00	3872	193.60			22399	1119.95	1119.95							56939	2849.85	
6	Haryana	6645	332.24	2862	143.10	0	0.00	1978	98.90	0	0.00	3872	193.60					161	8.05	7793	389.60	23262	1163.09				
7	Karnataka	7557	377.85	270	11.00	7183	359.15	155	7.80	0	0.00	0	0.00			7557	377.85			220	11.00	22873	1143.65				
8	Kerala	11108	555.41	738	36.40	0	0.00	7739	386.95	1939	91.95	0	0.00												21504	10754.21	
9	Madhya Pradesh	14580	729.00	4639	231.95	0	0.00	17535	876.75	0	0.00	0	0.00			11245	562.25								48375	24187.74	
10	Madhya Pradesh	30891	1544.55	628	31.40	0	0.00	10897	544.85	0	0.00	0	0.00	12028	601.40	30891	1544.55	489	24.45	900	45.00	86704	4335.29				
11	Madhya Pradesh	3139	156.95	640	32.00	0	0.00	0	0.00	0	0.00	0	0.00												4078	203.95	
12	Madhya Pradesh	57853	2892.65	33267	1663.35	5869	293.45	10432	521.60	0	0.00	0	0.00												107531	5378.57	
13	Madhya Pradesh	43450	2172.51	64539	3226.95	12797	639.85	0	0.00	0	0.00	1527	77.35			43450	2172.51								84399	4218.89	
14	Odisha	34385	1719.25	76343	3817.15	10577	528.85	2578	128.90	0	0.00	0	0.00					1500	75.00						12091	6045.65	
15	Punjab	6285	314.25	1052	52.60	0	0.00	6552	327.60	0	0.00	0	0.00												10317	515.65	
16	Rajasthan	14484	724.20	6445	322.25	0	0.00	5426	271.30	0	0.00	0	0.00			14484	724.20	3175	158.75	6445	322.25	103253	5162.63				
17	Tamil Nadu	17912	895.60	5831	291.55	8526	426.30	9515	475.75	0	0.00	0	0.00			17912	895.60	6979	348.95	5831	291.55	71408	3570.32				
18	Uttar Pradesh	8440	422.00	609	30.45	6127	306.35	1807	90.35	0	0.00	0	0.00			8440	422.00								19778	988.80	
19	Uttar Pradesh	82767	4138.35	34607	1730.35	46893	2344.65	0	0.00	0	0.00	13437	671.85	6601	330.05	82767	4138.35	8568	428.40	10932	546.60	34607	1730.35	292848	14642.86		
20	West Bengal	38928	1946.40	7	0.35	0	0.00	46881	2344.05	0	0.00	0	0.00			841	42.05	38928	1946.40			237	11.85	130788	6539.00		
Total		491418	24570.97	245742	12287.10	134093	6703.48	156568	7777.80	1639.00	91.95	22468	1123.12	25729	1286.65	299468	14972.80	28616	1431.80	212644	10632.30	156202	7736.80	82269.80	4113.65		
UTs with Legislature																											
21	Delhi	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00												0	0.00	
22	Puducherry	308	15.40	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			151	7.55								459	22.95	
Total		308	15.40	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	151	7.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	459	22.95	
UTs without																											
23	Andhra Pradesh	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	229	11.30										229	11.30	
24	Chandigarh	50	2.50	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00												50	2.50	
25	Chandigarh	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	283	14.15										283	14.15	
26	Chandigarh	22	1.10	0	0.00	0	0.00	32	1.60	0	0.00	0	0.00	30	1.50	67	3.35								161	8.05	
27	Lakshadweep	13	0.65	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00												13	0.65	
Total		95	4.65	0	0.00	0	0.00	32	1.60	0	0.00	0	0.00	639	31.95	67	3.35	0	0.00	0	0.00	0	0.00	0	0.00	733	36.45
NER States																											
28	Assam	1278	63.90	1202	60.10	0	0.00	0	0.00	1851	92.55	0	0.00							1202	60.10	5833	291.65				
29	Assam	17658	882.90	13272	663.85	0	0.00	0	0.00	0	0.00	31324	1566.20												62287	3113.35	
30	Mizoram	1457	72.85	0	0.00	0	0.00	1550	77.50	0	0.00	0	0.00												3107	155.35	
31	Manipur	1450	72.50	1547	77.35	0	0.00	8367	418.35	0	0.00	0	0.00	700	35.00			538	26.90	3037	151.85	13619	680.93				
32	Nagaland	727	36.35	567	28.35	0	0.00	0	0.00	1134	56.70	0	0.00			608	30.40			567	28.35	3603	180.15				
33	Nagaland	958	47.90	768	38.40	0	0.00	415	20.75	541	27.05	0	0.00			1000	50.00								3751	187.55	
34	Sikkim	445	22.25	236	11.80	0	0.00	0	0.00	0	0.00	87	4.35			443	22.15					338	16.90	1855	92.75		
35	Tripura	1078	53.90	1788	89.40	0	0.00	1535	76.75	330	16.50	81	4.05	21	1.05	1078	53.90					531	26.55	6540	327.00		
Total		28001	1400.05	19821	991.05	0	0.00	1867	93.35	3858	192.90	22302	1115.10	721	36.05	4078	203.90	638	31.90	3037	151.85	13619	680.93	6540	327.00		
GRAND TOTAL		617823	30890.87	265263	13263.15	134093	6703.48	208557	10427.64	8795	439.75	64790	3238.20	27140	1357.60	303654	15182.90	30364	1518.20	30364	1518.20	10814.36	5407.22	88084.84	4403.65		
Or. Sev. Rs. In. Core			268.81		132.65		67.00		33.50		1.68		0.84		0.42		0.21										

Unit Amount
Replacement 1240431 6192
1762272 88084.04

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Availability of Gas based cooking, Drinking water, and toilet facility in schools [PY + U.PY] during 2013-14

Sl. No.	State/UT	Total Institution	Infrastructure					
			Gas based cooking		Drinking water		Toilet	
1	2	3	4	5	6	7	8	9
1	Andhra Pradesh	77091	27946	36%	59300	77%	53871	70%
2	Arunachal Pradesh	3339	67	2%	2299	69%	2233	67%
3	Assam	56327	556	1%	45829	81%	40362	72%
4	Bihar	69367	288	0%	66603	96%	55252	80%
5	Chhattisgarh	47879	431	1%	47879	100%	45769	96%
6	Goa	1532	0	0%	1419	93%	1405	92%
7	Gujarat	33728	28901	89%	33623	100%	33623	100%
8	Haryana	15264	15305	100%	15466	101%	15466	101%
9	Himachal Pradesh	15197	13023	86%	15207	100%	15091	99%
10	Jammu & Kashmir	22965	13716	60%	17814	78%	16179	70%
11	Jharkhand	40855	1843	5%	34376	84%	35977	88%
12	Karnataka	55080	53839	98%	56903	103%	55401	101%
13	Kerala	12377	0	0%	12211	99%	12189	98%
14	Madhya Pradesh	116356	5883	5%	115842	100%	115842	100%
15	Maharashtra	86028	11830	14%	86028	100%	85971	100%
16	Manipur	3298	5	0%	566	17%	2545	77%
17	Meghalaya	10580	0	0%	7082	67%	8825	83%
18	Mizoram	2516	1273	51%	2146	85%	2095	83%
19	Nagaland	2261	1789	79%	1246	55%	1962	87%
20	Orissa	63531	0	0%	63531	100%	45718	72%
21	Punjab	20369	20369	100%	20369	100%	20369	100%
22	Rajasthan	80344	29815	37%	79587	99%	0	0%
23	Sikkim	876	447	51%	751	86%	799	91%
24	Tamil Nadu	42619	7989	19%	41676	98%	42315	99%
25	Tripura	6545	137	2%	5463	83%	5984	91%
26	Uttar Pradesh	165918	98511	59%	154012	93%	151355	91%
27	Uttarakhand	17736	8468	48%	16649	94%	33743	190%
28	West Bengal	83707	7016	8%	83333	100%	82476	99%
29	A&N Islands	338	75	22%	338	100%	338	100%
30	Chandigarh	115	10	9%	115	100%	115	100%
31	D&N Havell	283	283	100%	271	96%	243	86%
32	Daman & Diu	99	99	100%	99	100%	99	100%
33	Delhi	3065	3065	100%	3065	100%	3065	100%
34	Lakshadweep	42	0	0%	42	100%	42	100%
35	Puducherry	453	6	1%	319	70%	319	70%
	Total	1158070	353985	31%	1091627	94%	987038	85%

Availability of Gas based cooking, Drinking water, and toilet facility in schools [PY + U PY]

2018-19

Sl. No.	State	Total institution	Infrastructure					
			Gas based cooking		Drinking water		Toilet	
1	2	3	4	5	6	7	8	9
1	Andhra Pradesh	45583	44826	98%	45198	99%	44826	98%
2	Arunachal Pradesh	3182	99	3%	3182	100%	2503	79%
3	Assam	57240	13474	24%	47453	83%	57240	100%
4	Bihar	72957	54512	75%	65499	90%	65499	90%
5	Chhattisgarh	44838	3153	7%	44838	100%	44838	100%
6	Goa	1479	1479	100%	1478	100%	1478	100%
7	Gujarat	34759	34759	100%	34644	100%	34644	100%
8	Haryana	14392	13975	97%	14392	100%	14392	100%
9	Himachal Pradesh	15301	14868	96%	15467	100%	15339	99%
10	Jammu & Kashmir	23141	14591	63%	20658	89%	21410	93%
11	Jharkhand	39870	15672	39%	39518	99%	37242	93%
12	Karnataka	54839	54839	100%	54833	100%	54833	100%
13	Kerala	12341	12341	100%	12341	100%	12341	100%
14	Madhya Pradesh	113830	32033	28%	113830	100%	113830	100%
15	Maharashtra	86801	38041	44%	83485	96%	80033	92%
16	Manipur	3857	300	8%	1871	49%	2545	66%
17	Meghalaya	11847	373	3%	10610	90%	10177	86%
18	Mizoram	2532	2539	100%	2146	85%	2095	83%
19	Nagaland	2139	1752	82%	1246	58%	1962	92%
20	Orissa	58784	22210	38%	58301	99%	58784	100%
21	Punjab	20157	20246	100%	20157	100%	20157	100%
22	Rajasthan	66506	64497	97%	66506	100%	66506	100%
23	Sikkim	869	447	51%	869	100%	869	100%
24	Tamil Nadu	43283	35713	83%	43205	100%	43205	100%
25	Telangana	28672	4772	17%	26993	94%	28672	100%
26	Tripura	6598	1571	24%	5732	87%	6128	93%
27	Uttar Pradesh	169291	163580	97%	168122	99%	167960	99%
28	Uttarakhand	18324	11196	61%	17084	93%	17293	94%
29	West Bengal	84171	38798	46%	83696	99%	83205	99%
30	A&N Islands	338	99	29%	338	100%	338	100%
31	Chandigarh	123	123	100%	123	100%	123	100%
32	D&N Haveli	280	280	100%	280	100%	280	100%
33	Daman & Diu	96	96	100%	96	100%	96	100%
34	Delhi	2975	2979	100%	2975	100%	2975	100%
35	Lakshadweep	40	0	0%	39	98%	39	98%
36	Puducherry	433	430	99%	431	100%	431	100%
	Total	1142068	720663	63%	1107636	97%	1114288	98%

Institute Inspected: (Primary and Upper Primary) 2018-19

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S.No	States /UTs	Total No. of Institutions	Total No. of Inst. Inspected	% institutions inspected
1	2	3	4	5
1	Andhra Pradesh	45583	27849	61%
2	Arunachal Pradesh	2934	2934	100%
3	Assam	57103	36925	65%
4	Bihar	69513	69513	100%
5	Chhattisgarh	44838	44838	100%
6	Goa	1473	1473	100%
7	Gujarat	34644	34644	100%
8	Haryana	14391	7306	51%
9	Himachal Pradesh	15504	15504	100%
10	Jammu & Kashmir	23120	16401	71%
11	Jharkhand	39717	35773	90%
12	Karnataka	54830	54576	100%
13	Kerala	12341	12341	100%
14	Madhya Pradesh	113621	110012	97%
15	Maharashtra	86744	79430	92%
16	Manipur	3481	3481	100%
17	Meghalaya	11659	10675	92%
18	Mizoram	2525	1927	76%
19	Nagaland	2099	1384	66%
20	Orissa	57590	50533	88%
21	Punjab	20157	20157	100%
22	Rajasthan	66506	66506	100%
23	Sikkim	867	679	78%
24	Tamilnadu	43283	38829	90%
25	Telangana	28586	27732	97%
26	Tripura	6529	6529	100%
27	Uttar Pradesh	169232	169232	100%
28	Uttarakhand	17339	17339	100%
29	West Bengal	84171	80261	95%
30	Andaman Nicobar	338	332	98%
31	Chandigarh	123	123	100%
32	Dadra & Nagar Haveli	280	280	100%
33	Daman and Diu	92	92	100%
34	Delhi	2975	2970	100%
35	Lakshadweep	39	31	79%
36	Puducherry	428	429	100%
	Total	1134655	1049040	92%

Public Grievance System - Toll-free Numbers		
Sl.No.	States	Toll-free Numbers
1	Andhra Pradesh	State level - 9393121651
2	Arunachal Pr.	1800-345-3604 and 0360 - 2292061 (Dedicated No.)
3	Assam	18003453525
4	Bihar	18003456208
5	Chhattisgarh	18002331152
6	Goa	Dedicated landline installed for three Deputy Education Officers. If they fail to redress the Grievance, the same is forwarded to Assistant Director (Education) whose telephone No. has been displayed on the school notice board. (Source - AWP&B-2016-17 for Goa).
7	Gujarat	Complaints received at State, District and Block level offices. Commissioner (MDM) reviews the complaints at State Level. Grievances can also be submitted on Chief Ministers Help Line "SWAGAT". (Source: AWP&B-2016-17 of Gujarat.
8	Haryana	0172- 2584522
9	Himachal Pradesh	1800-180-8007
10	Jammu & Kashmir	Departmental Hierarchy addresses public grievances (Source: AWP&B-2016-17 of J&K)
11	Jharkhand	Monitoring Cell set up at State, District and Block Level for grievance redressal with 24 to 72 hours. (Source: AWP&B 2016-17 of Jharkhand)
12	Karnataka	1800-425-20007
13	Kerala	GRM constituted on 19 th January, 2011 at State level with Parents Teacher Association, Director of Public Instructions and Local Bodies. Grievance can be registered on dedicated landline of Noon Meal Section. (Source AWP&B-2016-17 of Kerala).
14	Madhya Pradesh	Toll free number -181
15	Maharashtra	18002339988
16	Manipur	1800-345-3820 and 0385-2411095
17	Meghalaya	All Deputy Commissioners and Sub-Divisional Officer (Civil) have set up Grievance Redressal Mechanism.]
18	Mizoram	Toll Free No. 0389-2341325 at State Level and 0389-2345639 at district level. SMS on Mobile No. 91-8974245007 and email id mizorammdm@gmail.com (Source: State's AWP&B-2016-17)
19	Nagaland	0370-2260036(office)
20	Orissa	Toll free number - 18003456722
21	Punjab	1800-137-2215
22	Rajasthan	0141-2221960 and 0141-2221694
23	Sikkim	03592-208049
24	Tamil Nadu	Toll free numbers have been provided in 25 Districts as follows : 1 Tiruvallur 1800-425-7003 14 Sivagangai 1800 -425-4186 2 Tiruvannamalai 1800-425-4978 15 Madurai 1800-425-4982 3 Tiruvarur 1800-425-5125 16 Tuticorin 1800-4255-4444 4 Erode 1800-425-8367 17 Theni 1800-425-0045 5 The Nilgiris 1800-425-6250 18 Salem 1800-425-1124

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		6 Coimbatore 1800-425-1049 19 Dindigul 1800-425-0382 7 Namakkal 1800-255-4444 20 Tirunelveli 1800-425-00768 8 Dharmapuri 1800-425-1071 21 Trichy 1800-425-6867 9 Krishnagiri 1800-425-7009 22 Virudhunagar 1800-425-2528 10 Tirupur 1800-425-0421 23 Pudukottai 1800-425-2230 11 Thanjavur 1800-425-3998 24 Perambalur 1800-425-4166 12 Kanyakumari 04652 224048 25 Ramnad.1800-425-4187 13 Vellore 1800-425-4982.
25	Telangana	1800-425-3525 and 1800-425-7462
26	Tripura	1800-345-3667
27	Uttar Pradesh	1800-4190-102
28	Uttarakhand	1800 180 4132
29	West Bengal	Phone No. (033)2359-6761, 6798, 6799 Fax-(033)23344052
30	A&N Islands	There is no separate help lines available however the present official Telephone Numbers of Nodal Officer (Mid Day Meals) and Nine Zonal Officers across the Islands are used for addressing the grievances and its redressal. Complaint boxes and registers are also maintained in all schools. (Source: AWP&B 2016-17 of UT)
31	Chandigarh	Telephone No. 0172-5021697 and by dak in the office. Toll Free No. has been applied.
32	D&N Haveli	18002330260
33	Daman & Diu	09586609450
34	Delhi	011-23890002
35	Lakshadweep	Telephone No. of Grievances Redressal Mechanism A. Island Level 1 Agatti Principal, GSSS -04894 242253 2 Amini Principal, GSSS -04891 273255 3 Andrott Principal, GSSS -04893 232323 4 Bitra Headmaster, GSBS -04890 275222 5 Chetlat Principal, GSSS- 04899 276256 6 Kadmat Principal, GSSS -04897 274223 7 Kalpeni Principal, GSSS -04895 252225 8 Kavaratti Principal, GSSS -04896 262218 9 Kiltan Principal, GSSS -04898 272239 10 Minicoy Principal, GSSS -04892 222251 B. UT Level Lakshadweep Directorate of Education - 04896 262318
36	Puducherry	1800-425-1967

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Monitoring Mechanisms

Department of School Education and Literacy, Ministry of Human Resource Development has prescribed a comprehensive and elaborate mechanism for monitoring and supervision of the Mid-Day Meal Scheme. The monitoring mechanism includes the following:

- i) **Arrangements for local level monitoring:** Representatives of Gram Panchayats/ Gram Sabhas, members of SMCs, VECs, PTAs, SDMCs as well as Mothers' Committees are required to monitor the (i) regularity and wholesomeness of the mid-day meal served to children, (ii) cleanliness in cooking and serving of the mid-day meal, (iii) timeliness in procurement of good quality ingredients, fuel, etc, (iv) implementation of varied menu, (v) social and gender equity on a daily basis.
- ii) **Display of Information:** In order to ensure transparency and accountability, all schools and centers, where the programme is being implemented, are required to display the following information at a visible place in the campus for the notice of the general public:
 - a) Quantity of food grains received, date of receipt.
 - b) Quantity of food grains utilized.
 - c) Other ingredients purchased, utilized.
 - d) Number of children given mid-day meal.
 - e) Daily Menu.
 - f) Roster of Community Members for supervision and monitoring.
- iii) **Block Level Committee:** A broad based Steering-cum-Monitoring Committee also monitors implementation of the Mid-Day Meal Scheme at the block level.
- iv) **Inspections by State Government Officers:** Officers of the State Governments/UTs belonging to the Departments of Revenue, Rural Development, Education and other related sectors, such as Women and Child Development, Food, Health etc. are also required to inspect schools and centres where the programme is being implemented. It has been recommended that 25% of the schools/special training centres are visited every quarter.
- v) **District Level Committee:** Besides a District Level Steering-cum-Monitoring Committee for monitoring the MDM scheme, a District Level Committee under the Chairmanship of senior most Member of Parliament (MP) of the district has been constituted to monitor the scheme on quarterly basis. This committee also monitors the implementation of Samagra Shiksha and Bharat programmes in the district.
- vi) **Periodic Returns:** The State Government/UT is also required to submit periodic returns to the Department of School Education and Literacy, GoI to

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provide information on (i) coverage of children and institutions, (ii) number of school days (iii) Progress in utilization of central assistance (iv) availability of necessary infrastructure in schools, (v) any untoward incident etc.

vii) **Grievance Redressal:** States and Union Territories are required to develop a dedicated mechanism for public grievance redressal, which should be widely publicized and made easily accessible.

viii) **State level Monitoring:** States and UT Administrations are also required to set up a Steering-cum-Monitoring Committee at the State level to oversee the implementation of the Scheme. States/UTs have deployed independent institutions for the evaluation of the Scheme.

ix) Web enabled MDM-MIS has been launched for effective online monitoring of the Scheme. The portal captures information on important parameters like category wise enrollment, teacher (looking after MDM) details, cook-cum-helpers details with social composition, availability of Infrastructural facilities like Kitchen-cum-stores & Kitchen devices, mode of cooking, drinking water, toilet facilities etc. on annual basis. The States/UTs are also feeding monthly data into the portal, which helps in monitoring the critical components/ indicators of the MDMS such as no. of meals served, utilization of food grain & cooking cost, honorarium paid to cook-cum-helpers, school inspection details etc.

x) **Automated Monitoring System (AMS)**
This department has put in place an automated system of data collection for real time monitoring of MDMS. Such data (on number of meals served on that particular day and reasons if meals not served) is being captured from schools with no cost to school Head Master/Teacher.

Under the automated monitoring system, States/UTs have set up a suitable system of data collection (i.e. Interactive Voice Response System(IVRS)/SMS/Mobile Application/Web Application) from schools on a daily basis and using it for purpose of monitoring and timely follow up action. States/UTs are pushing data on specific fields in a predefined format on a real time basis to the Central Server maintained by NIC. A central portal for analysis and display of data at the Central level. Based on the data collected, various drill down reports are made available for real time monitoring of the scheme at National/State/District/Block level. Daily email alerts are sent to States/UTs regarding number of schools which have reported data on that particular date and schools where meals have not been served. It has been implemented in all the States and UTs.

xi) Emergency Medical Plan to tackle the untoward incidents, if any, at schools.

xii) Grievance Redressal Mechanism to address the grievances of the stakeholders.

xiii) **National level:**

a) **Empowered Committee** on Mid-Day Meal has been set up under the Chairmanship of Hon'ble Minister, Human Resource Development for monitoring the access, safety, hygiene and quality aspects in the

implementation of MDMS; Review mechanism is in place to ensure effective monitoring and evaluation of the scheme; Mechanism is in place for community participation in the scheme and its effective monitoring.

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- b) Executive Council of the National Mission for Samagra Shiksha (SS) headed by the Minister, Human Resource Development also reviews Mid-Day Meal Scheme.
 - c) National Level Steering-cum-Monitoring Committee (NSMC), Programme Approval Board (PAB) under the Chairpersonship of Secretary (SE&L).
 - d) National Meetings with Education Secretaries and Regional Review Meetings are also held to monitor implementation of MDMS.
- xiv) 10th Joint Review Mission visited 5 States namely Madhya Pradesh (districts Dewas and Sheopur) during 3-9 October, 2017, Telangana (districts Karimnagar and Warangal) during 27 November - 4 December, 2017, Arunachal Pradesh (districts Papumpare and Lower Subansiri) during 14 - 21 December, 2017, Punjab (districts Jalandhar and Rupnagar) during 22nd - 29th January, 2018 and Gujarat (districts Banaskantha and Vadodara) during 5th - 12th March, 2018. 11th JRM visited to the States of Andhra Pradesh, Bihar, Himachal Pradesh, Maharashtra and Uttar Pradesh during 2018-19.

xv) **Social Audit**

"Social audit" means the process in which people collectively monitor and evaluate the planning and implementation of a programme or scheme. The social audit was conducted by Society for Social Audit Accountability and Transparency (SSAAT) in two districts viz. Khammam and Chittoor of undivided Andhra Pradesh during 2012-13. Encouraged by the outcome of the Social Audit in Andhra Pradesh, the Department had issued detailed guidelines for conducting of social audit under Mid Day Meal Scheme. So far 13 States viz. Bihar, Maharashtra, Odisha, Karnataka, Punjab, Uttar Pradesh, Telangana, Nagaland, Andhra Pradesh, West Bengal, Rajasthan, Uttarakhand and Tamil Nadu have conducted of social audit.

The Programme Approval Board-Mid Day Meal informed the States and UTs while considering and approving the their AWP&B 2019-20 that Social Audit is collective monitoring of a scheme by people's active involvement. It covers the issues of equity and equality along with expenditure in programme implementation. States and UTs were informed that under the provisions of section 28 of National Food Security Act, 2013 Social Audit of the scheme is mandatory. As per the MDM guidelines it is mandatory to conduct Social Audit in at least 20 schools in all districts. The Social Audit Units (SAU) set up under MNREGS, may be actively involved in conducting Social Audit of MDM in all districts. State was advised to share the findings of Social Audit with Department of School Education and Literacy, Ministry of Human Resource Development, Government of India.

CHAPTER II

OBSERVATIONS/RECOMMENDATIONS WHICH HAVE BEEN ACCEPTED BY THE GOVERNMENT

Observation/ Recommendation

The Committee are deeply concerned to note that TSP funds have been released even to non-tribal populated States along with tribal majority to the incorrect release of funds due to lack of clarity and have assured to avoid such lapses in future. The Committee are surprised that lack of clarity and co-ordination between the Ministry of Tribal Affairs and Ministry of AYUSH has resulted in inappropriate calculation of the percentage of tribal population in a State, tribal concentrated districts, etc. leading to incorrect release of funds. While expressing their serious displeasure over the state of affairs, the Committee exhort the Ministries concerned to improve upon their coordination and information showing mechanism and take recourse to all precautionary and corrective/remedial measures including imposition of penalty upon the erring officials and recovery of incorrectly released funds so as to obviate recurrence of such lapses/ mistakes.

[Para No.2]

Action taken by the Ministry of AYUSH

Central Council for Research in Unani Medicine (CCRUM)

The Council has followed/has been following the Guidelines for Inter-State allocation of funds and implementation of Programmes/Activities under Special Central Assistance (SCA) to Tribal Sub Plan (TSP) during 2016-17 and onwards issued by Ministry of Tribal Affairs vide F. No. 11016/06/2016-SG-II dated 01.07.2016.

The Council has been following guidelines of expenditure in TSP as available from time to time both by communication from Ministry and observations of audit.

The Council is conducting Mobile Healthcare Programme under TSP for the benefits of Tribal Populations only in selected Tribal Districts/ITDA as per guidelines issued by Ministry of Tribal Affairs vide F.No. 11016/06/2016-SG-II dated 01.07.2016. The Council is very much careful in releasing the funds following the recommendations of CAG Report No. 33 of 2015 on Tribal Sub-Plan as such imposition of Penalty on erring officials does not arise.

Central Council for Research in Ayurvedic Sciences (CCRAS)

The Council has followed/has been following the recommendations of CAG Report No. 33 of 2015 on Tribal Sub Plan (TSP). The Council has not released funds either to non-tribal States or to tribal majority States.

The Council has been following guidelines of expenditure in TSP as available from time to time both by communication from Ministry and observations of audit.

The Council is conducting tribal health care research programme under TSP only in selected blocks as per CAG Report No. 33 of 2015.

The Council is very much careful in releasing the funds following the recommendations of CAG Report No. 33 of 2015 on Tribal Sub-Plan as such imposition of Penalty on erring official does not arise.

Central Council for Research in Homoeopathy (CCRH)

The Council has followed/has been following the recommendations of CAG Report No. 33 of 2015 on Tribal Sub Plan (TSP). The Council has discontinued to release funds either to non-tribal populated States or to tribal majority States.

The Council has been following guidelines of expenditure in TSP as available from time to time both by communication from Ministry and observations of audit.

The Council is conducting health care research Programme under TSP for the benefits of Tribal Populations only in selected Blocks/Districts as per guidelines issued by Ministry of Tribal Affairs vide F. No. 11016/06/2016-SG-II dated 01.07.2016.

The Council is very much careful in releasing the funds following the recommendations of CAG Report No. 33 of 2015 on Tribal Sub-Plan as such imposition of Penalty on erring officials does not arise.

Vetting comment of Audit

- a) Improvement in its coordination and information sharing mechanism, and
- b) Imposition of penalty upon erring officials and recovery of incorrectly released funds.

Updated Reply of the Ministry of AYUSH

In the light of the observation of C&AG Audit Paras, the Ministry has sought to improve its monitoring mechanism with following initiatives:

- (i) Shri R.C. Aggarwal, DDG in the Ministry of AYUSH has been nominated as Nodal Officer, vide O.M. No. G.25012/1/2015-AYUSH (E.III) dated 03.02.2017 (copy enclosed), for monitoring of Tribal Sub-Plan and also assigned the monitoring/co-ordination job to the concerned Section (P&E) in the Ministry.
- (ii) Further, the three Councils, viz Central Council for Research in Unani Medicine (CCRUM), Central Council for Research in Ayurvedic Sciences (CCRAS) and Central Council for Research in Homoeopathy (CCRH) have also nominated their respective Nodal Officers (copies enclosed).
- (iii) After the receipt of CAG Report No. 33 of 2015 on Tribal Sub-Plan, the Councils have discontinued funding the projects in Tribal majority States and scrupulously following the guidelines issued by the Ministry of Tribal Affairs, vide F.No. 11016/06/2016-SG-II dated 1.7.2016.
- (iv) The Ministry has been regularly monitoring/coordinating the Tribal Sub-Plan projects under implementation. Monitoring report of respective Research Council implementing the TSP projects with the targets and Actual Achievements for the year 2017-18 is enclosed herewith.

b) In regard to imposition of penalty upon erring officials and recovery of incorrectly released funds it is stated that all the three Councils have discontinued their projects in Tribal Majority States. They have taken suitable and corrective measures and are scrupulously following the guidelines on TSP. Hence, as suitable and corrective measures have been taken and also as funds previously released in Tribal majority States were for the benefit of tribal people without any malafide intention therefore, imposition of penalty on erring officials is not considered appropriate.

Observation/ Recommendation

As regards creation of nodal units for the implementation of TSP, by the Ministries/ Departments concerned, the Committee note that the Department of School Education & Literacy and Higher Education have a dedicated Unit (SC/ST Cell) to formulate and implement Tribal Sub Plan under the Ministry of Human Resource Development. Both

the Departments have stated that as per the Allocation of Business Rules, 1961 (amended from time to time), the Ministry of Tribal Affairs is the nodal Ministry for overall policy, planning and coordination of programmes of development for the Scheduled Tribes. The Committee further note that NITI Aayog had suggested that the TSP Ministries/Department should set up monitoring units and indicate State-specific allocation and release for the vulnerable section separately under centrally sponsored schemes and Central Sector Schemes. However, information regarding the creation of nodal units at the States and District level is awaited from the concerned State/District. The Committee, recommend that all Ministries/Department concerned should set up their own dedicated nodal units to ensure effective monitoring of Tribal Sub Plan at the implementation stage. The Committee further recommend that the Ministry of Tribal Affairs issue instructions to all States to ensure timely formation of nodal units at the State and District levels and consider withholding release of TSP funds to those States which have not created the nodal units.

[Para No.5]

Action Taken by the Ministry of Tribal Affairs

As per Guidelines for State TSP dated 18.06.2014 issued by erstwhile Planning Commission, State Tribal Welfare Department is the nodal department authorized to lead the process of TSP development at the State level. Further, Nodal department has to work in close coordination with all relevant line departments, for appraisal of the perspective document as well as of the TSP schemes of different departments for inclusion in Annual TSP.

Vetting Comment of Audit

Ministry may inform PAC outcome of Ministry's consideration to withhold release of TSP funds to those States which not created the Nodal units.

Updated Reply of Ministry of Tribal Affairs

All the States having notified STs has unit looking after tribal development. Except Kerala, all such States have constituted an Executive Committee under the Chairpersonship of Chief Secretary for finalization of TSP in the States.

Action Taken by the Department of Health & Family Welfare

Under NHM, the funds are allocated and released to States/UTs under three different components viz. General, Scheduled Caste Sub plan and Scheduled Tribe Sub Plan on the basis of Census Population of 2011 so that funds can be utilised by the States accordingly. Further, the utilisation certificates (UCs) furnished by the States are settled accordingly. The NHM Policy division of the Ministry monitors the benefits of Tribal population due to implementation of TSP. The health outcome in Tribal population is significant and much accelerated implementation in HR, Infrastructure and Health

Service Delivery etc. Apart from this, the Bureau of Planning acts as a Nodal Unit for the Ministry.

Vetting Comments of Audit

Ministry's reply that Bureau of Planning acts as a Nodal Unit for the Ministry is not in line with the recommendation of PAC. Further, Ministry has not respond to issue of instruction to all States by Ministry of Tribal Affairs to ensure timely formation of nodal units at the State and District level and consider withholding release to TSP funds to those States which have not created the nodal units taken on the recommendation of PAC. The same may be provided to PAC.

Updated Reply of the Department of Health & Family Welfare

AS per the recommendation of the Committee is D.O. letter No.G-27034/145/2018 dated 20th August, 2018 has already been issued to Mission Directors (NHM) of all States/UTs for necessary action (copy enclosed).

Observation/ Recommendation

The Committee note that as per the guidelines of Planning Commission (2006), TSP was to be implemented by constitution of dedicated unit in every Ministry/Department. The Committee, however, note that that there were delays in formation of nodal units in the Ministries/Departments. Moreover, the Ministry of Tribal Affairs was neither involved in the annual planning exercise nor were there any guidelines detailing the processes for an oversight. As the basic objective of Tribal Sub-Plan is to channelize the flow of outlays from central Ministries/Departments by earmarking funds for the development of Scheduled Tribes in the States, at least in proportion to their population; the Committee are of the view that a central unit for oversight is an absolute necessity. The Committee, therefore, recommend that as suggested by NITI Aayog, the Ministry of Tribal Affairs should create a central nodal unit for oversight so as to facilitate better co-ordination and efficient implementation of TSP through an online monitoring system.

[Para No. 6]

Action Taken by the Ministry of Tribal Affairs

Allocation of Business Rules (ABR) has now been amended in January, 2017 whereby Ministry of Tribal Affairs (MoTA) has been given mandate for monitoring of STC funds of Central Ministries based on the framework and mechanism designed by NITI Aayog. TSP Division of the Ministry is acting as a central unit to facilitate better co-ordination and efficient implementation of TSP. An online monitoring system has been

put in place with web address <https://stcmis.gov.in>. The framework envisages monitoring of allocations for welfare of STs under the schemes, monitoring of expenditure vis-a- vis allocations, monitoring of physical performance and outcome monitoring. Further, nodal officer has been nominated in the line Ministries / Departments for coordination and monitoring.

Vetting Comment of Audit

No further comments.

Action Taken by the Department of Health & Family Welfare

At the Ministry level, the annual plan as far as flagship programme of the Ministry i.e. the National Health Mission (NHM) is concerned; it is more of funding provision. The annual plans in form of PIP for NHM are prepared by the States based on their specific needs and local context. The implementation is carried out by the States and is guided by the Framework for Implementation of the NHM.

The Mission Steering Group (MSG) and Empowered Programme Committee (EPC) at the national level provide broad policy direction for implementation of NHM. The Secretary MoTA is Member of MSG and EPC. The Secretary, Dept. of Tribal Affairs in the States are members of State Health Society.

Vetting Comments of Audit

Ministry has not replied to the recommendation for PAC on creation of a central nodal unit for oversight by Ministry of Tribal Affairs. The same may be provided to PAC.

Updated Reply of the Department of Health & Family Welfare

As stated earlier, the Mission Steering Group (MSG) and Empowered Programme Committee (EPC) at the National level provide broad policy direction for implementation of NHM. The Secretary Ministry of Tribal Affairs is Member of MSG and EPC. The Secretary, Dept. of Tribal Affairs in the State is member of State Health Society.

Further, it is submitted that Bureau of Planning (BOP) Division of the Ministry is working central nodal unit for Tribal Matters.

Observation / Recommendation

The Committee find that even though funds from the Central Government were released under trifurcated head Gen/SC/ST to the States and from States to District implementing agencies, the accounts for such expenditure have not been maintained separately at each level. Also there is no proper earmarking of TSP funds at the grass root level and allocations of funds have not been based on tribal specific plans. The Committee find it absurd that expenditure of funds released under three heads namely,

Gen/SC/ST are not earmarked under separate head of accounts. Since funds released under TSP are meant exclusively for the tribal, it is pursuant to maintain separate expenditure account for each category which would enable the Ministry to keep track of the expenditure, targets/ achievements and effective implementation of the TSP Scheme. The Committee therefore exhort the Ministry to impress upon all States and District implementing agencies to strictly adhere to maintenance of separate expenditure accounts and submit UCs under separate heads. The Committee further recommend that the Ministry review the TSP strategy to ensure that funds allocated are not diverted elsewhere and expenditure reported are linked with actual accrual of benefits to STs.

[Para No.7]

Action Taken by Ministry of Tribal Affairs

The allocations under schemes for welfare of STs have already been allotted a separate budget head 796 for avoiding possibility of diversion of funds.

Vetting Comment of Audit

The Ministry's reply does not address the PAC's recommendation to: (a) impress upon all States and District implementing agencies to strictly adhere to maintenance of separate expenditure accounts and submit UCs under separate heads and (b) to review the TSP strategy to ensure that funds allocated are not diverted elsewhere and expenditure reported are linked with actual accrual of benefits to STs. Specific replies may be submitted to PAC.

Updated reply of the Ministry of Tribal Affairs

As per Allocation of Business Rules, 1961 as amended from time to time, 'In regard to sectoral programmes and schemes of development of these communities policy, planning, monitoring, evaluation etc. as also their coordination will be the responsibility of the concerned Central Ministries/ Departments, State Governments and Union Territory Administrations.' Ministry of Tribal Affairs invariably impresses upon the States to provide UCs of funds released under its schemes as also the physical progress report of the sanctioned projects. In case of pending UCs, allocated funds are adjusted to that extent before further release.

Action Taken by the Department of Health & Family Welfare

The State and District level maintenance of separate accounts for TSP funds under the NHM may not be feasible as under this programme the funds are provided for 18 different programs, each of which has STSP, SCSP and General component. Further, funds under NHM flow from State to 672 District Health Societies, 763 District Hospitals and Sub-District units that comprise of 5396 CHCs, 25308 PHCs, 153655

Sub-Centers, 5,10,416 Village Health and Sanitation, Nutrition Committees (VHNSCs) and to various Implementing agencies for civil works, procurements etc.

However, the States have been asked to report expenditure component wise in the Financial Management Report (FMR).

Vetting Comments of Audit

Utilization of allocated funds at State and Districts Level may be provided to PAC. Ministry has not furnished the details of review of TSP strategy to ensure that funds allocated are not diverted elsewhere and expenditure reported are lined with actual accrual of benefits to STs. The same may be furnished to PAC.

Updated reply of the Department of Health & Family Welfare

Public Health and Hospitals is a State subject and its implementation also lies with the State Governments. However, Ministry has issued directions to State Governments by issuing D.O. letters for category wise reporting of expenditure. Some States viz. Gujarat, Uttar Pradesh, Haryana etc. have already started submitting Category wise Utilisation Certificates (UCs) in adherence to the guidelines.

This was also communicated to the States in the 1st Quarterly Performance Review Meeting held on 19th and 20th September, 2019 which was attended by Senior State Officials.

Observation / Recommendation

The Committee find various deficiencies in the implementation of Sarva Shiksha Abhiyan (SSA) under TSP which inter-alia include shortfall in establishment of Kasturba Gandhi Balika Vidhyalayas (KGBVs); non establishment and non-functioning of 'Model Cluster Schools for Girls'; lack of basic amenities and facilities; non distribution of school uniforms as per norms; deficiencies in appointment of local language native teachers and non availability of text books and shortage of teachers. The Department of School Education & Literacy has clarified that beside the States of Madhya Pradesh and Maharashtra, other States concerned have not provided a compliance report despite repeated reminders. Taking serious note of the brazen negligence towards efficient implementation of SSA at the State and District levels, the Committee, recommend that the Ministry take a more pro-active approach by imposing a deadline for implementation and target achievement, set a minimum standard/quality of infrastructure and penalize the non-compliant States by withholding central share of funds. The Committee further recommend that the Ministry conduct online inspections apart from periodical on the spot inspections/ verifications to ensure proper implementation of programmes as per SSA guidelines/norms.

[Para No.8]

Action Taken by the Department of School Education & Literacy

The reply on the above Para w.r.t. action taken has been sent to the concerned section on 13th March, 2018 and thereafter, 3rd April, 2018. Apart from the action as reported in above referred communication further action has been taken as mentioned below:

1. Under the new scheme of Samagra Shiksha, the compliance by States and UTs for meeting the RTE entitlement such as school uniform, text books, etc. has already been ensured as the expenditure on the same is monitored through the Project Monitoring System (PMS) portal. The central share is released only after examining the progress made and the expenditure incurred for all interventions including infrastructure. Based on evaluation of the physical and financial progress, the central funds are released, thereby restricting the flow of funds.

2. Further, in order to monitor all the activities, the Department has initiated the following steps during the year 2019-20 under Samagra Shiksha.

a. School based audit has been devised (Shagunotsav) to physically examine the existence of the infrastructure and the utilization of various grants including school grants up to the last level.

b. Performance Grading Index - The Performance grading index (PGI) has been designed to cater to the transformational change in the field of school education where the focus has now shifted to the quality of education. The index comprising of 70 indicators would propel States and UTs towards undertaking multi pronged interventions that will bring about the much desired educational outcomes. These also include timely provisions of uniforms and text-books to all eligible students.

c. Specific focus is laid on girls' education. Provision has been made to extend KGBVs up to class XII for smooth transition of girls from elementary to senior secondary. Out of 3700 KGBVs, 1232 have been upgraded up to class X/XII in 2018-19. More than 7.25 lakh rural girls from SC, ST, OBC, Minority and BPL families will benefit. Financial support has been provided to 2,11,416 government schools for self-defense training for girls for inculcating skills for self protection and self-development.

The above steps have been taken to ensure that all the vulnerable sections including ST beneficiaries are fully covered and benefits accrued them directly.

The referred letters as above is enclosed.

Kasturba Gandhi Balika Vidyalaya (KGBV): Department of school education and literacy, Ministry of Human Resource Development has implemented integrated Scheme for School Education (ISSE) namely Samagra Shiksha. The Integrated Scheme for School Education envisages the 'school' as a continuum from Pre-school, primary, upper primary, secondary to Senior Secondary levels.

Till the year 2017-18, Kasturba Gandhi Balika Vidyalayas (KGBVS) were residential schools at upper primary level for girls belonging to disadvantaged groups such as SC, ST, OBC Minority and BPL under Sarva Shiksha Abhiyan (SSA) and the

girls hostel component of Rashtriya Madhyamik Shiksha Abhiyan (RMSA) envisaged construction of a hostel with the capacity of 100 girls with the objective to improve access to and retain the girl child in Secondary and Higher Secondary classes (IX-XII) so that the girl students were not denied the opportunity to continue their study due to distance to school, parents financial capacity and other connected social factors.

Under the Samagra Shiksha, effective from 2018-19 the existing KGBVs at upper primary level and girls hostel at secondary level have been extended/converged to provide residential and schooling facilities at upper primary level up to Senior Secondary level. The scheme envisages to provide access and quality education to girls from disadvantaged groups by setting up residential schools from upper primary to senior secondary level and to ensure smooth transition of girls from elementary to secondary and up to class XII wherever possible. The State-wise status of civil works of KGBVs (as on 02.03.2021) is given at Annexure-A.

Vetting Comments of Audit

Reply of the ministry does not address the recommendations of PAC. Ministry may provide the PAC the following:

- (i) How does the Ministry ensure that basic amenities and facilities are ensured and shortages of teachers are taken care of under the Samagra Shiksha?
- (ii) Details of action taken in case of non-compliant States/UTs. (iii) Details of online inspections apart from periodical on the spot inspection/verifications to ensure proper implementation of programmes as per SSA guidelines/norms.

Updated Reply of the Department of School Education and Literacy

(i) Regarding Basic Amenities and Facilities: The requirement of necessary basic amenities such as toilets, drinking water, classrooms, is reviewed periodically and in detail at the time of finalising the Annual Work Plan & Budget (AWP&B) of every State and UT in the Project Approval Board (PAB) meeting, and the Gaps are identified based on UDISE+ database and bridged by providing additional facility after assessing the progress made during the previous year and availability of funds.

In response to the clarion call made by the Prime Minister on 15 August, 2014, the Department of School Education & Literacy launched the Swachh Vidyalaya Initiative (SVI) for provision of separate toilets for girls and boys in all government schools. Under the initiative, 4,17,796 toilets including 1,90,887 girls' toilets were constructed/made functional in 2,61,400 government schools in the one-year period up to 15th August, 2015 in collaboration with State and UT Governments, Public Sector Undertakings (PSU) & Private Corporates.

Further, schools ensure hand washing stations and safe drinking water facility for all students and availability of essentials like soap, alcohol rub/hand sanitizer or chlorine solution, disinfection and cleaning material in the school.

In keeping with the spirit of Digital India initiative, the Swachh Vidyalaya programme conceptualized and developed a web portal to plan, implement, monitor, and support this initiative in real time. The web portal, apart from other features, enabled corporates and partners to easily navigate and identify specific locations and schools they wished to support for construction and repair of toilets. It allowed them to pledge financial and in-kind commitments. The digital solution provided the means to monitor the initiative in real time through the portal. This also made the information on progress transparent and encouraged public participation. The newly launched Samagra Shiksha scheme in 2018-19 made provision for earmarking at least 10% of the Annual Composite School Grant towards Swachta Action Plan, for ensuring maintenance of hygiene and sanitation in schools and the expenditure is also reviewed periodically.

The newly launched Samagra Shiksha scheme in 2018-19 made provision for earmarking at least 10% of the Annual Composite School Grant towards Swachta Action Plan, for ensuring maintenance of hygiene and sanitation in schools and the expenditure is also reviewed periodically.

Regarding Shortage of Teachers:- Education is in the concurrent list of the Constitution and most of the teachers are under the jurisdiction of the respective States & UTs. The recruitment of teachers and their rational deployment come under the purview of the respective States & UTs. However, this department has taken steps to address the same in two pronged manner:

- a) Rationalization of Deployment of teachers.
- b) Fill up vacant posts immediately.

The following directions have been issued and the States and UTs are asked to do the needful during the PAB meeting for the AWP&B and review meetings held from time to time.

The States are asked to rationalize teacher deployment in primary and upper primary schools, so that there is no single teacher school and all schools have Pupil Teacher Ratio (PTR) as per norms under the RTE Act, 2009. At the upper primary level, special emphasis should be laid on maintaining the subject PTR.

The States & UTs are also asked to recruit Headmaster in primary and upper primary schools as per the RTE norms. Given the significant role of a headmaster in school management, direct recruitment (Including through limited department exam) of 50% of all headmasters may be considered. These vacant post needs to be filled up on priority as it is also directly impacting Performance Grading Index (PGI) grading of the States.

In order to ensure that the States & UTs take effective steps for recruitment of teachers, the Central assistance is given only for the filled-up posts and States are asked to fill up the vacant posts to get remaining funds.

(ii) All the States and UTs have taken steps for compliance of all the directions and facilities to be provided and the same was also reviewed in the PAB meeting held for the year 2020-21 and in subsequent review meetings.

As already stated performance parameters have been devised through the process of Performance Grading Index (PGI) and activities/outcomes are well defined and States & UTs are graded annually on the basis of the same. The Performance Grading Index has now been extended upto district level.

Moreover as regards the infrastructure, the States have been asked to complete the pending infrastructure works by March 2021.

(iii) The States have been asked to provide online data through the SE Shagun portal and the PRABANDH portal as well as UDISE+ and the same is reviewed by the department for taking further corrective action and the directions are issued to individual States and UTs pointing out the deficiencies and for compliance of the same.

Recently a monitoring format has been designed for Exhaustive online monitoring and regular monitoring is being done at different levels i.e. Director/Joint Secretary/Secretary level for review of physical and financial progress of implementation of the different components of the scheme.

Observation / Recommendation

The Committee find a number of deficiencies in the implementation of National Health Mission (NHM) like non-availability of basic health care facilities, primary health care centres, shortage of doctors and nurses in the remote areas, inaccessibility to basic/first aids in the far-flung areas etc. The Committee also note that the Ministry of Health and Family Welfare are undertaking innovative concepts like incentives to attract doctor and nurses, providing mobile vans in remote areas etc. to ensure basic medical accessibility in remote areas. While appreciating the initiatives being taken by the Ministry, the Committee stress that funds allocated for programmes under NHM be streamlined and utilized, keeping in mind, the varied needs of the beneficiaries in order to ensure a more comprehensive approach in the implementation of NHM. The Committee, further recommend that in addition to the remedial measures, the Ministry should also focus on preventive/precautionary measures and undertake IEC activities to educate the tribal population on healthy living habits, benefits of sanitation, training for basic first aid treatments, etc.

[Para No. 10]

Action Taken by the Department of Health & Family Welfare

National Health Mission scheme is so designed that provides an inbuilt flexibility to States/UTs where the States/UTs propose their Programme Implementation Plans (PIPs) based on their health care needs and context. Thus, there is very substantial flexibility for the states under the NHM. The Ministry does provide technical support and guidelines, but cannot impose them on the states. Therefore, the financial approvals are given to States keeping in mind the varied needs of the beneficiaries in order to ensure a more comprehensive approach in the implementation of NHM.

Further, the Ministry also focuses on preventive/precautionary measures and undertakes IEC activities to educate the tribal population on healthy life styles, benefits of sanitation, nutrition, training for basic first aid treatments, etc. Health and Wellness centres are the second pillar of Ayushman Bharat announced by the Central Government for provision of comprehensive primary healthcare close to communities. Besides provision of expanded package of primary healthcare services, comprehensive primary healthcare includes health promotion and prevention with focus on counselling on healthy lifestyles. The operationalization of Health and Wellness Centres have been prioritised for Aspirational districts which include many tribal majority districts. The Government has also rolled out Health and Wellness Ambassadors Initiative under Ayushman Bharat. A Memorandum of Understanding (MoU) has been signed between Ministry of Health & Family Welfare (MoHFW) and Ministry of Tribal Affairs (MoTA), Government of India for cooperation between the two Ministries. The MoU covers various activities including extending all aspects of the School Health Program viz., providing weekly Iron and Folic Acid Supplementation, biannual de-worming, basic first aid and health promotion activities through teachers designated as Health and Wellness Ambassadors at the school level in all functional EMRSs, Ashram Schools and other Schools supported by MoTA in the states.

Audit Vetting Comments

No further comments.

Observation / Recommendation

In the implementation of Mid-Day Meal (MDM) Scheme, the Committee found that no Annual Work Plan & Budget was prepared nor was there any special plan or projects for ST students. The Committee also noted about non-availability of kitchen sheds, incomplete infrastructure in kitchens, inadequate kitchen devices and insufficient drinking water, exposure of children to health hazards as the meals were being prepared and served in open and un-hygienic conditions; absence of grievance redressal mechanism, etc. The Department of School Education & Literacy had stated

that schools have population of all categories of children i.e. General, SC & ST and Mid Day Meal is provided to all students on school days irrespective of their caste. The Department had further submitted that all States had public grievances redressal mechanism and grievances, if any, were promptly resolve. The Committee felt that the Department had not conducted proper inspection of all concerned States/Districts to gauge the actual state of affairs in the implementation of MDMs across the country, in terms of schools and infrastructure being used for MDMs, quality of food, construction of kitchens as per guidelines etc. The Committee, therefore had recommended that the Department should either constitute a team of its own or engage an independent agency to conduct thorough inspection of all schools under MDM Scheme for requisite remedial action wherever warranted. The Committee desired that they be apprised of the action taken by the Department within six months of the presentation of this report.

[Para No.11]

Action taken by the Department of School Education and Literacy

Annual Work Plan & Budget (AWP&B)

The States and UTs submit their AWP&B for consideration and approval by PABMDM headed by the Secretary, Department of School Education & Literacy, MHRD, Government of India are consisting of Members from the line Ministries viz. Ministry of Women & Child Development; Ministry of Social Justice & Empowerment, Ministry of Rural Development, Ministry of Panchayati Raj, Ministry of Health & Family Welfare, NITI Aayog, Ministry of Tribal Affairs, Ministry of Drinking Water & Sanitation etc. The AWP&B is prepared through bottom up approach starting from smallest field unit and compiled at Cluster, Block, District and State. The AWP&P is a comprehensive document and provides data on enrolment of children in elementary classes I-VIII in Government and Government aided schools, Special Training Centres and Madrasas and Maqtabs supported under Samagra Shiksha.

The AWP&B contains information on Budget Provision made by the States & UTs for General category, Scheduled Caste Sub Plan (SCSP) and Tribal Sub Plan (TSP). The AWP&B is prepared by bottom up approach by compiling information obtained from the grass root level and consolidated in the District Plan and State Plan. No separate Plan is submitted by the States and UTs for General Category, SCSP and TSP. However, keeping in view the nutritional requirement in tribal areas, the approval of the Cabinet has been obtained for providing supplementary nutrition to the children studying in the schools in these areas. Further, 10.70% of the Plan budget of MDM is allocated for TSP in the Demands for Grants of MHRD. However, Central Government has issued instructions that TSP allocation is not reappropriated to augment the provisions of other heads of accounts for General Category and SCSP. The unutilised

TSP funds cannot be utilised for General categories and SCSP. Therefore, the TSP allocations is utilised for the States and UTs for covering the eligible children under TSP.

Kitchen-cum-Stores Release of non-recurring Central Assistance to the States and UTs for construction of Kitchen-cum-stores was started from 2006-07. MHRD released non-recurring central assistance of Rs.802555.79 lakh during 2006-07 to 2013-14 for constructions of 1006263 kitchen-cum-stores (**Annexure-1**). The Statement indicating the number of kitchen-cum-stores constructed till 31st March, 2014 is enclosed at **Annexure-II** which indicates that 67% of the sanctioned kitchen-cum-stores were constructed; construction work was in progress in 13% kitchen-cum-stores and construction was yet to start in the remaining 21% schools.

The pace of construction of kitchen-cum-stores was regularly reviewed during the meetings of the Programme Approval Board-Mid Day Meal (PAB-MDM). The States and UTs informed in these meetings that due to the increase in the cost of construction, they were unable to construct the kitchen-cum-stores which were sanctioned between 2006-07 to 2008-09 on unit cost norms @ Rs.60,000/- each. These States desired that they may be provided additional central assistance or resanction these kitchen-cum-stores on plinth area norms as per State's Schedule of Rates (SoRs). The request of the States and UTs was considered and agreed by PAB-MDM. The total number of kitchen-cum-stores sanctioned from 2006-07 to 2018-19 is 10,11,411. The slight change in the number of kitchen-cum-stores sanction till 2013-14 and up to 2018-19 is due to the fact that some States had either surrendered or requested for less number of kitchen-cum-stores on plinth area norms against the kitchen-cum-stores previously sanctioned on unit cost norms. As per the information submitted by the States till 31st March, 2019, the States and UTs have constructed 8,45,424 (84%) kitchen-cum-stores, whereas construction in 50,449 (5% approx) is under progress and work is yet to start for the remaining 11% kitchen-cum-stores (**Annexure-III**). The component of repair of 10-year-old kitchen-cum-stores has also been approved by the CCEA in February, 2019. This has enabled the States and UTs to carry out repairs for the kitchen-cum-stores constructed 10 or more years ago.

Kitchen Devices

For preparation and serving of cooked meal under Mid-Day Meal Scheme, MHRD started the release of non-recurring Central Assistance to the States and UTs for procurement of kitchen devices @ Rs 5,000 for each school. The replacement of kitchen devices sanctioned five years earlier was also started during 2012-13. MHRD had released central assistance of Rs.88084.04 lakh for the procurement of 1240431 units of kitchen devices and replacement of 521841 kitchen devices till March, 2013-14 (**Annexure- IV**). As per latest statement till September, 2019, MHRD has sanctioned

central assistance of Rs.115664.21 lakh for 2321094 (procurement of 1314427 and replacement of 1006667) kitchen devices (**Annexure - V**). The norms for procurement and replacement of kitchen devices have been revised with the approval of CCEA in February, 2019. Now the grant for kitchen devices has been linked with enrolment in place of previously unit cost norm of Rs 5000/- per school.

Drinking Water

The drinking water facilities in schools are provided in convergence with the Ministry of Drinking Water and Sanitation. As per the information furnished by the States, the drinking water facility was available in 94% of the schools till 2013-14. This has increased to 97% during 2018-19. Relevant statements on the State and UT wise availability of drinking water is at **Annexures- VI and VII**.

Inspections

As per MDM Guidelines at least 25% schools should be visited for, inspections in each quarter. The State-wise information on the number of institutes inspected during 2018-19 is enclosed at **Annexure- VIII**. The information reveals that the inspections in the States and UTs of Andhra Pradesh, Assam, Haryana, Jammu & Kashmir, Mizoram, Nagaland, Sikkim and Lakshadweep are not up to the mark. These States and UTs have been advised to inspect the institutes on regular basis.

Grievance Redressal Mechanism

The status of Grievance Redressal Mechanism in States and UTs is enclosed at **Annexure-IX**.

Monitoring Mechanism

Management Information System was developed In June, 2012 for web based monitoring of the Mid Day Meal Scheme. The States and UTs have also rolled out Automated Monitoring System for near real time monitoring of the Scheme. The States and UTs have been advised to set up Management Structures at State, District, Block and school levels. The existing Monitoring Mechanism of Mid Day Meal Scheme is enclosed at **Annexure-X**. At present the scheme is being evaluated by the NITI Aayog."

Audit vetting comment

Ministry has not provided the details of action taken on the PAC's recommendation on constituting a team of its own or engaging an independent agency to conduct thorough inspection of all schools under MDM Scheme. The same may be furnished to PAC.

Updated reply of the Department of School Education and Literacy

The Mid Day Meal Scheme (MDMS) covers about 11.59 crore enrolled children studying in 11.34 lakh schools in India. As per MDM guidelines, all schools must be visited atleast once for inspection in a year.

In compliance of the recommendation of PAC, this Department has initiated the process of framing guidelines for strengthening of monitoring mechanism by engaging the services of reputed independent Agencies/Institutes like National Institute of Nutrition (NIN), home science departments of Central/State Agriculture Universities, reputed home science colleges on a clearly defined Terms of Reference (ToR) and timelines for independent 3rd party thorough inspection and monitoring of the implementation of Mid Day Meal Scheme.

Keeping the spirit of PAC's recommendation, the ToRs will be designed in such a manner that every district in the country is covered each year. These will also include tracking of children's nutritional and health parameters to provide timelines and trend lines in order to assess the impact of the scheme and to facilitate timely interventions for course correction.

Observation/Recommendation

The Committee note that during the sitting of the Sub-Committee IV on 05.01.2017, the representatives of the Ministries of Tribal Affairs, Health and Family Welfare, AYUSH and Department of School Education & Literacy and Higher Education were requested to furnish their written replies and comments on some issues and points relating to their Ministries/Departments. While the Ministry of Tribal Affairs, Departments of School Education & Literacy and Higher Education and the Ministry of AYUSH have furnished the requisite written information, the Ministry of Health & Family Welfare have not furnished written replies to the relevant points relating to them in spite of repeated reminders. Taking a serious note of such aberration, the Committee caution the Ministry of Health and Family Welfare to be more alert and careful in future and undertake immediate measures to tackle issues like discrepancies/lacunae in the implementation of immunisation programme, shortfalls in providing maternal health facilities, child health facilities etc. under the Child Health Flexible Pool, loopholes in the implementation of Flexible Pool for State Programme Implementation Plan (FPSPIP) and Reproductive Child Health Flexible Pool (RCHFP) etc. The Committee desire to be appraised of the action taken by the Ministry of Health and Family Welfare on these issues within six months of the presentation of this report.

[Para No. 13]

Action Taken by the Department of Health & Family Welfare

Maternal Mortality Ratio of India has declined by 37 points from 167/ lakh live births in 2011-13 to 130/ lakh live births in 2014-16 and achieved the MDG -5 goal for Maternal Mortality Ratio and Under Five mortality of India has come down from 69/per 1000 live births in 2008 to 39/1000 live births 2016.

- Under National Health Mission (NHM), Various Child Health Facilities such as 792 Special Newborn Care Units (SNCUs), 2330 New-born Stabilization Units (NBSUs) and 1150 Nutrition Rehabilitation Centers (NRCs) has been set-up all across the country. More than 9.5 Lakhs newborn have been treated in SNCUs in 2017-18 and more than 1.8 lakhs under 5 children have been treated in NRCs in 2017-18.
- Promotion of institutional deliveries through Janani Suraksha Yojana. More than 1.07 crore pregnant women received JSY benefits in 2017-18.
- Janani Shishu Suraksha Karyakaram (JSSK) entitles all pregnant women delivering in public health institutions to absolutely free and no expense delivery including Caesarean section. The initiative stipulates free drugs, diagnostics, blood and diet, besides free transport from home to institution, between facilities in case of a referral and drop back home. Similar entitlements have been put in place for ante-natal and post-natal complications during pregnancy and all sick infants accessing public health institutions for treatment. Approximately 1.3 crore pregnant women received JSSK benefits every year.
- Funds are being provided for strengthening of 'Delivery Points' for provision of comprehensive Reproductive, Maternal, New Born Child Health and Adolescent (RMNCH+A) services. More than 20,000 facilities have been strengthened as delivery points.
- Over 2200 facilities have been operationalized as First Referral Units (FRUs) to provide comprehensive emergency obstetric care services and blood transfusion services. Additionally over 50 Obstetric HDUs/ ICUs have been established to provide critical care to mothers developing life threatening complications.
- In order to provide state-of-the-art and outstanding quality care to pregnant women and children 100/50/30 bedded Maternal and Child Health (MCH) Wings have been sanctioned in Public Health facilities with high bed occupancy. More than 32,000 additional beds have been sanctioned across more than 590 health facilities.
- Capacity building of MBBS doctors in Anesthesia (LSAS) and Obstetric Care including C-section (EmOC) skills has been undertaken to overcome the shortage of specialists in these disciplines, particularly in rural areas.

- LaQshya: In order to further accelerate our decline in the coming years, Health Ministry has recently launched 'LaQshya - Labour room Quality improvement Initiative'. LaQshya program is a focused and targeted approach to strengthen key processes related to the labour rooms and maternity operation theatres which aims at improving quality of care around birth and ensuring Respectful Maternity Care.
- Carrying forward the vision of our Hon'ble Prime Minister, the Pradhan Mantri Surakshit Matritva Abhiyan was launched in 2016 to ensure quality antenatal care to pregnant women in the country on the 9th of every month.
- More than 1.42 crore antenatal checkups have been conducted at PMSMA sites for comprehensive services under the programme.
- Under the RMNCH+A approach, iron and folic acid supplementation under the National Iron Plus Initiative (NIPI) is being given across life stages including pregnant, lactating women and adolescent girls at health facilities and during outreach activities
- Recently, Operational Guidelines have been prepared and disseminated to the States for Screening for Diagnosis & management of Gestational Diabetes Mellitus, Hypothyroidism during pregnancy, Calcium supplementation during pregnancy and lactation, De-worming during pregnancy, universal screening for HIV/Syphilis during pregnancy.
- Capacity building of doctors is undertaken to strengthen availability of Comprehensive Abortion Care Services at health facilities.
- 5 National level and 54 state level Skill Labs have been established to strengthen skills of staff working at delivery points.
- Dakshata, a strategic 3 day training capsule for building the skills of health care providers for imparting quality intrapartum care, is also being implemented. Additionally, various Capacity building programmes such as RTI/ STI trainings etc are being implemented for health personnel i.e. doctors, staff nurse and auxillary mid-wife (ANMs).
- MCP Card and Safe Motherhood Booklet are distributed to the pregnant women.
- A Mother and Child Tracking System (MCTS) / RCH portal and Mother and Child Tracking Facilitation Centre (MCTFC) has been introduced. A name, telephone, address based web enabled system has been introduced by Government of India to track every pregnant woman and child in order to ensure and monitor timely and quality services to them including ANC, JSY benefit, Immunization etc.
Special focus to the tribal population in the country:
- The Ministry of Health and Family Welfare is giving special attention to provide Reproductive and Child Health services in the hard to reach areas including tribal districts.

- Cash assistance of Janani Suraksha Yojana (JSY) is available to women belonging to Scheduled Tribe households for giving birth in public health facilities or accredited private health facilities.
- Gram Swaraj Abhiyan: Mission Indradhanush is one of the seven flagship schemes under Gram Swaraj Abhiyan which was launched on 23rd April 2018 in 16850 villages identified based on the SC/ST population across states and UTs. The main aim of the drive is to achieve 100% saturation in the identified villages through immunization of all the unreached and partially vaccinated children and pregnant women. During the three rounds under GSA, as on 16th July 2018 around 5.01 lakh children and 1.14 lakh pregnant women have been vaccinated and nearly all the villages have been saturated. Partner agencies (WHO, UNICEF, ITSU and UNDP) are also extending support for the drive. Nodal persons have been identified for the districts under GSA to provide necessary support to the district in planning and implementation of the drive.
- 117 Aspirational districts have been identified across 28 States in the country for transformation by the year 2022. Among the 117 aspirational districts, 47 districts are Priority Districts identified by Ministry of Tribal Affairs. Ministry of Health and Family Welfare has given special focus to intensify implementation of existing programmes in these Aspirational districts by monitoring 13 core indicators such as, Pregnant Women receiving four or more Ante-Natal Care (ANC) check-ups, pregnant women taking Supplementary Nutrition under the ICDS programme, pregnant women having severe anaemia, institutional deliveries, home deliveries attended by an SBA, new-borns breastfed within one hour of birth, underweight children, stunted children, SAM children, 6 - 23 months old receiving adequate diet, children fully immunized, Tuberculosis (TB) case notification rate and Health Infrastructure.
- Ministry of Health & Family Welfare is also committed towards implementation of the Extended Gram Swaraj Abhiyan in the identified 49,178 villages across the Aspirational districts. Mission Indradhanush (MI), for ensuring immunization services to children & pregnant women who have been partially or fully left out of routine immunization in the Aspirational districts, has now been extended to cover 117 aspirational districts identified by NITI Aayog. The main aim of the drive was to achieve 100% saturation in identified 48,929 villages by 15th August 2018. However, under MI-EGSA, it was aiming for saturation of entire districts.

The partner agencies have been asked to extend their support this round of Mission Indradhanush. One nodal person for each district has been identified to provide the required support for the implementation of the drive.

Audit Vetting Comments

No further comments.

CHAPTER III

**OBSERVATIONS/RECOMMENDATIONS WHICH THE COMMITTEE DO NOT
DESIRE TO PURSUE IN VIEW OF THE REPLIES RECEIVED FROM THE
GOVERNMENT**

-NIL-

CHAPTER IV

OBSERVATIONS/RECOMMENDATIONS IN RESPECT OF WHICH REPLIES OF GOVERNMENT HAVE NOT BEEN ACCEPTED BY THE COMMITTEE AND WHICH REQUIRE REITERATION

Observation/Recommendation

The Strategy for development of Scheduled Tribes (STs) through TSP includes earmarking of Plan funds of Central Ministries/Departments into a separate head of account to strengthen the administrative arrangements for proper utilization and monitoring of the TSP funds. However, the Committee found that there had been no segregation of TSP funds under a separate Head at State/District /Block level. The Department of Secondary Education & Literacy had written to all States / UTs for strict compliance on maintenance of separate account/record/ Head for the funds received and expenditure incurred under TSP from the Financial Year 2016-17 wherever possible, and strictly from the next financial year i.e. 2017-18 and reflected in the Final Utilization Certificate submitted to the Department. The Committee had opined that such instructions should have been issued much earlier to the States/UTs and recommended that the Department should take a more proactive approach in monitoring and keeping track of fund utilisation and progress in the implementation of the Scheme so as to ensure efficient and timely achievement of targets set under the Plan. The Committee had further recommended that strict adherence to earmarking of funds into separate head at every level be made mandatory for funds.

[Para 1]

Action taken reply of the Department of School Education and Literacy

On going through the 85th report of PAC and the recent OM dated 28th July, 2019, it is mentioned that the replies w.r.t. point No.1 & 8 pertaining to MHRD was communicated vide letter No.1 2/2015-EE 15(pt.) dated 13th March, 2018

The department has sent various communications in this regard vide letter dated 21st February 2017, 17 October, 2017 and 28th March, 2018 whereby this Department has written to all States and UT for strict compliance on maintenance of separate accounts/record and head for funds/expenditure incurred under TSP.

With integration of the erstwhile scheme of Sarva Shiksha Abhiyan (SSA), Rashtriya Madhyamik Shiksha Abhiyan (RMSA) and Teacher Education (TE) into one integrated Scheme Samagra Shiksha, the States and UTs have again been instructed vide letter no.2-16/2017-EE3/IS-1 dated 12th April, 2019 to ensure that appropriate bank

accounts under the Samagra Shiksha Scheme and maintenance of Separate Bank Account w.r.t SC and ST should also be complied with and disbursement should be made from the account for all activities covered under the Samagra Shiksha. It may be mentioned that the States and UTs have been further instructed to separately show the component of ST and SC component on the fund utilization and emphasized at mechanism should be devised for ready availability for the relevant data at the different level. It may be stated that Department has also issued instructions to the States to provide separate budget head for the ST component in the State budget also in line with the budget heads as provided in the Central budget for the scheme. It may be further informed that the mandatory provision for ST component (10.70% of the total BE) is invariably provided in the Central Budget and Samagra Shiksha Scheme.

Audit vetting comment

i) Ministry has not furnished the details of any action taken by it for monitoring and keeping track of fund utilization and progress as recommended by the PAC. Further, the outcome of the efforts made by the Ministry to ensure strict adherence to earmarking of funds into separate head at every level be made mandatory for release of funds has also not been provided. The same may be provided to PAC.

(ii) How many States have complied with the instructions issued on 12/04/2019 by the Ministry'?"

Updated reply of the Department of School Education & Literacy

The allocation of funds in Samagra Shiksha Scheme is governed by the programmatic and financial norms and the activities and interventions are well defined and depending on the interventions, the funds are budgeted for the benefit of STs and spent accordingly. Some of the beneficiary-oriented activities funded under the scheme are as follows:-

- v. Provision free text-books up to Class VIII- To all children including ST students.
- vi. Uniforms up to Class VIII- Two sets of Uniforms to children belonging to SC, ST & Minority communities including BPL families.
- vii. Special projects for Social equity: the benefits under this intervention are accorded to SC, ST OBC Minorities communities
- viii. KGBVs for Girls from Elementary Level (VI-VIII) to Senior Secondary Level (VI-XII). The Scheme provides for access and quality education to girls from disadvantaged groups of girls in the age group of 10-18 years aspiring to study in classes VI to XII: belonging to SC, ST, OBC, Minority

communities and BPL families to ensure smooth transition of girls from elementary to secondary and upto class XII wherever possible.

Also Priority is given to given to special focus districts with higher concentration of SC, ST, Minorities and aspirational districts as well as educationally backward blocks while approving interventions such as upgradation/strengthening of schools. ICT facilities, vocational education etc.

The budgetary allocation of 20% for SC and 10.70 % for ST is done out of the total BE as per the guidelines. Funds are released accordingly under separate sub-heads and utilized by the States and accounted for under different sub-heads.

An online project monitoring system, namely 'PRABANDH' has been launched for enhancing efficiency and managing the implementation of Samagra Shiksha in all the States & UTs. It is enabled on the website <https://seshagun.gov.in> and can be accessed from the School, Block, District and State Level. The important features of the PRABANDH System are:

- Online submission of Annual Work Plan & Budget from District/State Level
- Tracking of GOI Funds. release to State./UTs
- Generation of different types of reports like Physical & Financial Progress, Spill-over and Committed Liabilities. Unspent balances etc. on real time basis.

Also, a Data Visualization Dashboard has been created in the PRABANDH System for display of monthly status of physical and financial progress under the major interventions. With a view to facilitating the online submission of Monthly Progress Reports district wise, by the respective State/UT, an Expenditure Module for District Users has been introduced to capture the physical and financial progress of various interventions from the district level and the progress can be seen in the National Reports. All the States and UTs except Ladakh and Lakshadweep maintain books of account in computerized manner.

Public Financial Management System (PFMS) being implemented by Controller General of Accounts (CGA) for all Centrally Sponsored Schemes also covers Samagra Shiksha. Funds to the States/UTs under the scheme are released through the PFMS system."

Further Audit vetting comments

- i) Ministry has not furnished the details of any action taken by it for monitoring and keeping track of fund utilization and progress as recommended by the PAC. Further, the outcome of the efforts made by the Ministry to ensure strict adherence to earmarking of funds into separate heads at every level to be made mandatory for release of funds has also not been provided. The same may be provided to PAC.
- ii) How many states have complied with the instructions issued on 12/04/2019 by the Ministry?
- iii) The reply by the Ministry at (iv) above indicates that there is difficulty in measuring the outcomes of the earmarked fund. How does the Ministry plan to tackle this shortcoming?

Comments/clarification furnished by the Mid Day Meal (MDM) Division, Department of School Education & Literacy

- i) The MDM is ensuring adherence to the guidelines issued by the Central Government for earmarking of 10.7% of the Budget Estimates for Tribal Sub Plan in the Demands for Grants of the Department.
- ii) The releases for TSP are made on the basis of tribal population of elementary class children in various States /UTs in accordance with the data in U-DISE.
- iii) Separate sanctions are issued for each category viz. General, SCSP and TSP so as to ensure transparency and accountability in the financial assistance for each category.
- iv) The instructions contained in the Budget Circular issued every year by the Ministry of Finance (Department of Economic Affairs) regarding re-appropriation of TSP funds to other heads of accounts in the scheme are followed.
- v) Ministry of Tribal Affairs is the nodal Ministry for creating a Non Lapsable Pool of TSP funds so that the savings in TSP funds is ploughed back to NLP of TSP. As and when the NLP of TSP is created, the unutilized funds from TSP would go back to that pool.
- vi) The States/UTs compile Annual Work Plan & Budget proposals by adopting bottom up approach in consultation with schools, blocks, districts and State and indicate expenditure incurred against allocated funds for General, SCSP and TSP during the previous year and projections for requirement of funds for each category viz. General, SCSP and TSP during the next year. The approved AWP&B proposals of States and UTs are uploaded on Department of School Education & Literacy website www.mdm.nic.in.

- vii) The Department has taken an initiative for providing flexi funds for new intervention relating to setting up of School Nutrition Gardens for addressing the problems of anemia and deficiency of Micronutrients amongst the school children. Supplementary nutrition is also provided to school children in Tribal identified areas with reported high level of malnutrition.
- viii) The Mid Day Meal Scheme is an ideal platform for promoting and conserving the composite culture of the country. The value of integration and communal harmony are taught to the children when they sit together and take mid day meal together irrespective of their caste, religion etc. Out of 25 lakh Cooks-cum-helpers engaged by States/UTs about 90% are women are from the socially and economically challenged segment of the society.
- ix) MDMS is a right based programme under National Food Security Act, 2013 for all the children studying in elementary classes in eligible schools, irrespective of their caste, religion etc.
- x) The sanction letter for release of central assistance for TSP also includes a condition that Utilization Certificate of grant will be submitted within three months of the closure of financial year.

Action Taken by the Ministry of Tribal Affairs

The allocations under schemes for welfare of STs have already been allotted a separate budget head 796 for avoiding possibility of diversion of funds.

Vetting Comment of Audit

Though the Ministry has allotted a separate budget head 796 for Tribal Area Sub-Plan as Minor Head, it did not furnish the efforts taken to ensure earmarking of funds into separate head at State level. The details of earmarking of fund into separate head at every level may be intimated to PAC.

Updated Reply of Ministry of Tribal Affairs

At the central level, allocations under schemes for welfare of STs have been allotted a separate budget head 796. Provision has also been made under the State TSP Guidelines issued by erstwhile Planning Commission in 2014 that funds under TSP shall be earmarked under a separate Minor Head below the functional major Head/Sub-Major Heads.

Action Taken by the Department of Health & Family Welfare

The State and District level maintenance of separate accounts for TSP funds under the National Health Mission (NHM) may not be feasible as under this programme the funds are provided for 18 different programs, each of which has Scheduled Tribe Sub Plan (STSP), Scheduled Caste Sub Pan (SCSP) and General component. Further, funds under NHM flow from State to 672 District Health Societies, 763 District Hospitals

and Sub-District units that comprise of 5396 CHCs, 25308 PHCs, 153655 Sub-Centers, 5,10,416 Village Health and Sanitation, Nutrition Committees (VHNSCs) and to various Implementing agencies for civil works, procurements etc.

However, the States are requested to report expenditure component wise separately through Financial Management Report (FMR). Further, the Utilization Certificates (UCs) are settled sanction and component wise.

Audit Vetting Comments

Ministry has not responded to the recommendation of the PAC on monitoring and Keeping track of fund utilization and progress in the implementation of the Scheme and strict adherence to earmarking of funds into separate head at every level. The same may be furnished to PAC.

Updated reply of the Department of Health & Family Welfare

Public Health and Hospitals is a State subject and its implementation also lies with the State Governments. However, Ministry has issued directions to State Governments by issuing D.O. letters for category wise reporting of expenditure. Some States viz. Guajrat, Uttar Pradesh, Haryana etc. have already started submitting Category wise Utilisation Certificates (UCs) in adherence to the guidelines.

This was also communicated to the States in the 1st Quarterly Performance Review Meeting held on 19th and 20th September, 2019 which was attended by Senior State Officials.

Observation/Recommendation

The Committee noted that despite the revised TSP guidelines and the recommendations of the Inter-Ministerial Committee to transfer unutilized TSP funds at the end of a financial year into a non-lapsable pool of TSP fund and allocation of proportionate funds from the Non-Lapsable Central Pool of TSP funds (NLCPTF) to the Ministry of Tribal Affairs for implementing schemes exclusively meant for development of STs, such a modality had not been devised at that time. The Ministry of Tribal Affairs had informed that the issue of Non-lapsable pool of funds was being handled by NITI Aayog in consultation with the Ministries concerned. The Ministry had simultaneously advocated the creation of a non-lapsable pool for TSP funds. The Committee had opined that concerted efforts should be made towards optimal utilisation of the allocated TSP fund within the given financial year and Non-lapsable pool for TSP fund be created at the earliest to pool funds that could not be utilized due to unforeseen eventualities and unavoidable circumstances, within the specific time period.

[Para No.3]

Action taken by the Ministry of Tribal Affairs

An online monitoring system has been put in place with web address <https://stcmis.gov.in>. The framework envisages monitoring of allocations for welfare of STs under the schemes, monitoring of expenditure vis-a- vis allocations, monitoring of physical performance and outcome monitoring. In the First phase, Central Ministries/Departments have been linked to the <https://stcmis.gov.in>. This online system captures the release data scheme-wise and also state-wise by the Central Ministries / Departments. As regards efforts towards optimal utilisation of the allocated TSP fund within the given financial year and creation of Non-lapsable pool for TSP fund, the same is to be decided at appropriate level in the Government.

Audit vetting comments

The efforts made by the Ministry to ensure optimum utilization of allocated TSP fund within the given financial year and to create non-lapsable pool for TSP fund may be intimated to PAC.”

Updated reply Ministry of Tribal Affairs

Nodal officers have been nominated in each line Ministry/Department and Ministry of Tribal Affairs is taking meetings with these nodal officers under the chairpersonship of Secretary (TA) to persuade the concerned Ministries/Departments for full utilization of allocated funds. NITI Aayog has observed that in India the system of cash-based budgeting is followed. However, Ministry of Tribal Affairs is deliberating with NITI Aayog for an appropriate decision with regard to optimum utilization of funds in line with the suggestions of PAC.

Observation/Recommendation

The Committee noted that full amount was not released for National Programme for Health Care for the Elderly (NPHCE), National Programme for Prevention & Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke (NPCDCS) due to high unspent balance in these programme under TSP. The Committee found that, in the case of NPHCE, there was lack of health care and training facilities and the Ministry of Health and Family Welfare had not conducted IEC and mass media activities to inform the elders of different health risks and treatments. In the case of NPCDCS, there was lack of activities for behaviour & Life style changes, non-screening of persons for early diagnosis, deficiency in treatment facilities and training activities, non-establishment of Tertiary Cancer Centre (TCCs); deficient treatment for infant diseases, etc. The Committee were of the view that had the Ministry formulated the comprehensive plan to spend the allocated fund under these programmes and diversify the expenditure on IEC activities, training and health centres, health counselling camps, screening and health

checkups, etc., there would not have been any unspent balance of funds and more importantly, these programmes would have achieved their goals. The Committee, therefore recommended that hence forth, while formulating a comprehensive plan for the implementation of these programme, the Ministry of Health & Family Welfare should take into consideration IEC activities for widening the reach of these programmes through awareness, trainings and health counselling, health centres and innovative and interactive activities etc., so as to ensure effective and efficient utilization of the allocated funds under NPHCE and NPCDCS for betterment of the intended beneficiaries.

[Para No.4]

Action taken reply of the Department of Health and Family Welfare

(i) National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS):

The Government of India is implementing National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) for interventions up to District level under the National Health Mission (NHM). It has focus on awareness generation for behaviour and life-style changes, screening and early diagnosis of persons with high level of risk factors and their treatment and referral (if required) to higher facilities for appropriate management for Non-Communicable Diseases (NCDs).

The programme was revamped after 11th Five Year Plan. During 12th FYP, the focus of the programme was on the PAN India coverage on health promotion, prevention, detection, treatment and rehabilitation services at decentralised level up to district hospital & below level under the overall umbrella of National Health Mission (NHM) for primary and secondary level health care services.

Strategy for implementation of the programme comprised focus on Health promotion, awareness generation and promotion of healthy life style, screening and early detection, timely, affordable and accurate diagnosis, access to affordable treatment, rehabilitation. Strategy for early diagnosis comprised opportunistic screening of persons above the age of 30 years for diabetes and hypertension, with health care facility, for village, sub-centre, CHC and District hospital.

Under the programme, testing, diagnosis and treatment facilities for cancer (Oral, Cervix, Breast), diabetes and hypertension are provided through different levels of healthcare by setting up NCD Clinics in District Hospitals and Community Health Centres (CHCs). The treatment is either free or highly subsidized for the poor and

needy. Till June, 2018; 525 District NCD Clinics, 2564 Community Health Centres NCD Clinics and 167 Cardiac Care Units have been set up under the programme.

A population level initiative for prevention, control and screening for common Non-Communicable Diseases (diabetes, hypertension and cancer viz. oral, breast and cervical cancer) has been rolled out in over 150 districts of the country in 2017-18 under NHM, as a part of comprehensive primary healthcare. Under the initiative, frontline health workers such as Accredited Social Health Activists (ASHA) and Auxiliary Nurse Midwives (ANM), inter alia, are leveraged to carry out screening and generate awareness about the risk factors of NCDs among the masses. Training modules for screening have been launched and distributed to the States. State-level trainings are organized for implementing the programme. Funds for training of health professionals i.e. MOs, ASHAs, ANMs, Staff Nurses, Multi Purpose Health Workers (MPHWs) are also being provided to States under the initiative.....Under NPCDCS, funds are also being allocated to the States/UTs in the State PIPs for awareness, training, health counselling to the health centres for innovative and interactive activities etc. for betterment of the intended beneficiaries including scheduled tribes. Budgetary allocation for IEC activities has also been increased from Rs.10 lakh per State NCD Cell to Rs. 70 lakh (24 bigger States) & Rs.50 lakh (small States/UTs). States have developed many modes for IEC viz. pamphlets, banners, posters, teaching manuals along with audio-visual and visual means. World Cancer Day and World Diabetes Day are also observed to generate public awareness to promote healthy lifestyle habits.

(ii) National Programme for the Health Care for the Elderly (NPHCE):

'NPHCE, since 2015-16, is being implemented under NCD flexible pool of National health Mission (NHM) for implementation of district and sub- district activities of the programme on the basis of Programme Implementation Plan (PIP) submitted by the States/UTs and examined by this Ministry. The flexible pool was introduced to utilize the optimum funds released under the pool for implementation of the activities and goals envisaged under the programme. However, observation of the Committee will be complied with while considering the IEC activities for widening the reach of NPHCE through awareness, training and health counselling, health centres and innovative and interactive activities etc.

Audit vetting comment

Utilisation of allocated funds against the allocation and achievement against the target may be intimated to PAC.

Updated reply of the Department of Health & Family Welfare

Allocation & Expenditure is given at Annexure: "A" Physical Target & achievement is attached at: Annexure: "B"

Observation/Recommendation

The Committee noted that monitoring of TSP of Central Ministries/Departments would be by the Ministry of Tribal Affairs and accordingly the Ministry was developing an online monitoring system for Central Ministries/ Departments. The system would encompass monitoring of fund allocations and expenditure and achievement of physical targets i.e. scheme-wise performance of each Ministry/Department. The Committee were of the view that in order to ensure implementation of programmes under TSP as per guidelines and also to ensure flow of benefits to the tribals, it is imperative for nodal units at the Central level as well as the State level to have real time information sharing system. The Committee had also opined that online monitoring system only at the Central Ministries/Departments would be incomplete and ineffective as the Ministry was unable to gain/collect/gather information on the actual needs of the tribals at the grass root level. The Committee, therefore, recommended that nodal units at the State level as well as District level be included in the online monitoring system that was being developed by the Ministry at the earliest. The Committee desired to be apprised of the status report in that within six months of the presentation of this report.

[Para No.9]

Action taken reply of the Ministry of Tribal Affairs

An online monitoring system has been put in place with web address <https://stcmis.gov.in>. The framework envisages monitoring of allocations for welfare of STs under the schemes, monitoring of expenditure vis-a- vis allocations, monitoring of physical performance and outcome monitoring. In the First phase, Central Ministries / Departments have been linked to the <https://stcmis.gov.in>. This online system captures the release data scheme-wise and also state-wise by the Central Ministries / Departments."

Audit vetting comment

The Ministry did not furnish the status of inclusion of the nodal units at the State level and District level in the online monitoring system that has been put in place. The same may be provided to PAC.

Updated reply of the Ministry of Tribal Affairs

There is multiplicity of schemes and agencies, multiple implementation guidelines, multiple physical and financial reporting structures. Also, within each State,

different Departments handle TSP funds. Thus, bringing synergy and effecting convergence is a grave challenge. However, Ministry of Tribal Affairs has given a project to Price Water House Cooper (PWC) to work out a monitoring framework to be incorporated in the online monitoring portal <https://stcmis.gov.in>.

Action taken reply of the Department of Health & Family Welfare

The Programme Implementation Plan (PIP) software developed with the support of NIC had some operational issues. Therefore, an enriched version of the software is being developed with the support of external agencies. This new software would facilitate the Ministry in receiving all future PIPs electronically with separate disclosure on activities related to Tribal Sub Plan (TSP). This software will act as an on line monitoring system and would facilitate to assess the actual needs of the tribal's at ground level."

Audit vetting comment

The latest status of the development and operationalization of the software may be intimated to PAC.

Updated reply of the Department of Health & Family Welfare

National Rural Health Mission (NRHM) was launched in 2005 to provide accessible, affordable and quality health care to the rural population especially the vulnerable sections. One of the key features of NRHM included interventions for improving health indicators. In 2013, the National Rural Health Mission (NRHM) was subsumed under the National Health Mission (NHM) as its Sub-Mission, along with National Urban Health Mission (NUHM) as the other Sub-Mission.

Under NHM, tribal areas enjoy relaxed norms as under:

- v. Relaxed norms for health facilities-The population norms for setting up Health Facilities in tribal areas are relaxed. Against the population norms of 5000, 30000, and 1,20,000 for setting up of Sub Centre, PHC and CHC respectively, in tribal and desert areas its 3000, 20,000 and 80,000. A new norm of "time to care" has also been adopted for setting up Sub Health Centres in tribal areas under which a Sub Health Centre can be set up within 30 minutes of walk from habitation.
- vi. States have been provided with the flexibility of relaxing the norm of one ASHA per 1000 population to one ASHA per habitation in Tribal/hilly and difficult areas.

- vii. While other States had Mobile Medical Units per 10.00 lakh populations subject to capping of 5 MMUs per district, for tribal and hilly states this could be relaxed as per need. The norms for MMU have been further revised to relax the norm where one MMU exceeds 60 patients per day in plain areas and 30 patients per day in tribal/hilly areas.
- viii. In addition, all tribal majority districts whose composite health index is below the State average have been identified as High Priority Districts (HPDs). These districts are to receive higher per capita funding, relaxed norms, enhanced monitoring and focussed supportive supervision and encouraged to adopt innovative approaches to address their peculiar health challenges.
 - The PIP software is in the process of development and after incorporating feedback of the States/UTs, the User Acceptance Test (UAT) and third party audit will be carried out before hosting the same into server. This process may take some more time; however, the Ministry is in the process of finalizing the software at the earliest.

Pending that, presently, all proposals under NHM from the States/UTs are received electronically in the form of e-mails and excel files etc. from the State/ UTs. Further, unique FMR code have been approved for each activity.

Observation/Recommendation

Audit had highlighted that planning for implementation of Schemes was deficient as the plans were formulated without specific consideration of tribal beneficiaries as required under TSP. The Committee felt the need to strengthen the planning process with the involvement of the community especially in tribal dominant blocks. The Committee had opined that it is imperative to identify and prioritize issues/concerns of the local community in the planning and decision making process. The Committee therefore had recommended that inputs/suggestions of local tribal community should be sought before finalizing the plan for implementation of any programme under the TSP. The Committee were of the view that such initiative would enable the implementing agency to pin point issues that need special attention and devote additional fund, human resources of the same and ensure flow of benefits to tribal communities under the respective programmes/schemes.

[Para No.12]

Action taken reply of the Ministry of Tribal Affairs

As per guidelines for State TSP dated 18.06.2014 issued by erstwhile Planning Commission it is stipulated that Tribal Welfare Department is the nodal department

authorized to lead the process of TSP development at the State level. While formulating State TSP, State Nodal Department shall ensure that TSP should be formulated at the District level by the District Planning and Monitoring Committee (DPMC). DPMC must reflect on the actual demand for the schemes / programmes that are to benefit STs, giving priority to equity aspect of their local aspirations and socio-economic backwardness.

While issuing Sanction orders by this Division, one of the conditions is that State Government shall ensure that concerned Panchayati Raj Institutions should be duly informed about the projects / programmes relating to Tribal Development to be implemented in the area of jurisdiction. State Government shall also ensure that meetings of Gram Sabha are conducted on regular interval as per norms in such areas.

Audit vetting comments

Ministry may intimate PAC about the mechanism put in place to ensure that inputs/suggestions of local tribal community have been sought and incorporated in the plan as recommended by the PAC.

Updated reply of the Ministry of Tribal Affairs

As stated above, while issuing Sanction orders by the Ministry, one of the conditions is that State Government shall ensure that concerned Panchayati Raj Institutions should be duly informed about the projects/programmes relating to Tribal Development to be implemented in the area of jurisdiction. State Government shall also ensure that meetings of Gram Sabha are conducted on regular interval as per norms in such areas.

Action taken reply of the Department of Health & Family Welfare

Under National Health Mission, bottom-up approach is expected for preparing the Programme Implementation Plans (PIPs) for States. The Framework for implementation of NHM provides for decentralised planning. Untied grants are provided to Village Health Sanitation and Nutrition Committees to enable local planning and action. Further, under NHM, States have been asked to provide higher per capita allocation to High Priority Districts that cover all Tribal Districts with composite health index below the State average.

Audit vetting comments

Reply of the Ministry does not address the recommendation of the PAC. Specific reply may be furnished to PAC.

Updated reply of the Department of Health & Family Welfare

Under the National Health Mission, support is provided to States/UTs for strengthening their healthcare system based on proposal incorporated in their State

Programme Implementation Plan (PIP). The State PIPs are envisaged to be an aggregate of the district/city health action plans, and include activities to be carried out at the state level.

District Health Action Plans developed through district based planning utilizing locally generated service data, civil registration etc is a key pillar under NHM. Decentralized planning using data has following benefits:

- It ensures active community participation including tribal population participation to identify local Health needs and ways to address them.
- It also enables mobilization of resources from sectors other than health.
- It brings community closer to the health system and provides a platform for interaction of community members with health service providers.
- It enables health system to get feedback from the community to improve quality of services and utilization of services offered.
- Programmes based on evidence are likely to be more effective and successful.

Letter has been issued to the states that the local tribal communities should be involved in the planning for development of health action plans in scheduled tribal districts. (Copy enclosed).

CHAPTER V

OBSERVATIONS/RECOMMENDATIONS IN RESPECT OF WHICH GOVERNMENT
HAVE FURNISHED INTERIM REPLIES

-NIL-

NEW DELHI:
7 December, 2022
16 Agrahayana 1944 (*Saka*)

ADHIR RANJAN CHOWDHURY
Chairperson,
Public Accounts Committee

(APPENDIX – II)

(Vide para 5 of Introduction)

ANALYSIS OF THE ACTION TAKEN BY THE GOVERNMENT ON THE OBSERVATIONS/RECOMMENDATIONS OF THE PUBLIC ACCOUNTS COMMITTEE CONTAINED IN THEIR EIGHTY FIFTH REPORT (SIXTEENTH LOK SABHA)

- (i) Total No of Observations/Recommendations - 13
- (ii) Observations/Recommendations of the Committee which have been accepted by the Government: - **Total: 08**
Percentage –61.54%
Para Nos. 2, 5, 6, 7, 8, 10, 11 and 13
- (iii) Observations/Recommendations which the Committee do not desire to pursue in view of the replies received from the Government: - **Total: Nil**
Percentage - 0%
-Nil-
- (iv) Observations/Recommendations in respect of which replies of Government have not been accepted by the Committee and which require reiteration: - **Total: 1**
Percentage– 38.46%
Para Nos. 1,3,4,9 and 12
- (v) Observations/Recommendations in respect of which Government have furnished interim replies: - **Total: Nil**
Percentage –0%
-Nil-