GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

UNSTARRED QUESTION NO:402 ANSWERED ON:23.11.2012 IRREGULARITIES IN NRHM Ahir Shri Hansraj Gangaram

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the large number of incidents of irregularities and corruption cases have come to the notice of the Government in National Rural Health Mission (NRHM);

(b) if so, the details thereof, State-wise;

(c) the steps taken by the Government to control such incidents;

(d) whether the Government proposes to continue the NRHM despite large number of incidents of irregularities and corruption; and

(e) if so, the details thereof?

Answer

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ABU HASEM KHAN CHOUDHURY)

(a)& (b) : Some incidents of irregularities and corruption cases have come to the notice of the Govt. of India under National Rural Health Mission (NRHM). These have come from the States of Assam, Bihar, Haryana, Jammu & Kashmir, Orissa, Rajasthan and Uttar Pradesh etc. The complaints received are sent to State Governments for inquiry and necessary action.

(c) Complaints relating to implementation of NRHM as and when received are immediately brought to the attention of the State / UT Government for necessary action.

The following mechanisms have been put in place for adherence to improve financial discipline:

(i) Annual Statutory Audits;

(ii) Concurrent Audits;

(iii) Submission of quarterly Financial Monitoring Reports by the States;

(iv) Visits by the teams of the Financial Management Group of the Ministry to States for periodical reviews.

In addition to above, the CAG has agreed to the request of the Ministry to conduct annual transaction audits of the National Rural Health Mission (NRHM) in all the States from the Financial Year 2011-12 in order to identify the existing gaps, facilitate independent monitoring and timely corrective measures so that a quality and timely audit assessment becomes available to assist the State Governments in undertaking remedial measures and achieving the targets of NRHM.

In order to build financial management capacities in States, the following initiatives have been taken by the Ministry : -

(i) Model Accounting Handbooks for sub-district level finance / accounts personnel for Community Health Centres / Primary Health Centres, Village Health, Sanitation and Nutrition Committees (VHSNCs), Sub Centres, Rogi Kalyan Samitis (RKS) and Block Accountants have been prepared and circulated

(ii) Detailed operational guidelines on Financial Management have been prepared for adoption and implementation at State, district, block and village levels under the NRHM;

(iii) E-training modules on finance and accounts to help train finance personnel in all States have been disseminated;

(iv) E-transfers are being effected for fund releases to all States and Districts countrywide

(v) Guidelines and advisories on non-diversion of funds, and utilization of funds (RKS and VHSNC) have been sent to the States; and

(vi) Customised Tally ERP 9 accounting software has been implemented for maintaining NRHM Accounts in majority of the States / UTs.

(vii) The implementation of NRHM in States is reviewed through Joint Review Missions (JRMs), Common Review Missions (CRMs) and periodical reviews by the Ministry. The deficiencies / shortcomings noticed during the reviews are immediately brought to the notice of the States for remedial action.

(viii) The CPSMS System is being put in place to track the flow of funds and monitor expenditure.

(d) & (e): The decision to continue NRHM has to essentially depend on the overall impact of the programme in improving the health outcomes. The Government has decided to continue the NRHM programme keeping in view its success. NRHM has brought about accelerated reduction of IMR, MMR and TFR. The evaluations of NRHM have also been largely positive.

Although some incidents of financial irregularities have come to the notice of the Government, that certainly doesn't warrant closure of the programme. To check financial irregularities, steps as mentioned above (in part (c)) have been taken.