

**GOVERNMENT OF INDIA  
HEALTH AND FAMILY WELFARE  
LOK SABHA**

UNSTARRED QUESTION NO:1287  
ANSWERED ON:18.07.2014  
JANANI SHISHU SURAKSHA KARYAKRAM  
Chaudhary Shri Haribhai Parthibhai;Devi Smt. Rama

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

- (a) whether the Government has reviewed/assessed the implementation of the Janani Shishu Suraksha Karyakram (JSSK) at various levels in the country;
- (b) if so, the details and the outcome thereof;
- (c) the shortcomings noticed during the said reviews/assessment; and
- (d) the corrective measures taken/being taken by the Government to remove the said shortcomings and plug the loopholes?

**Answer**

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. HARSH VARDHAN)

(a): Periodic reviews and field visits are undertaken at various levels to assess the implementation of Janani Shishu Suraksha Karyakram (JSSK) by the States.

Since the launch of JSSK, 5th, 6th & 7th Common Review Mission (CRM) have also independently reviewed the implementation of JSSK in 88 districts of selected States.

National Health Systems Resource Centre (NHSRC) has undertaken independent field visits in 45 districts of 21 States.

( b): The following observations are based on the reports of these visits:

# Policy articulations and dissemination of information on the entitlements is present in all states.

# The awareness about the entitlements of pregnant women under the JSSK scheme has improved.

# The JSSK entitlements for pregnant women and sick infants upto one year of age is operational across all states, resulting in considerable reduction in out of pocket expenditures.

# Free drugs, diagnostics, diet and assured home to facility transport as well as drop back has improved across all the states.

# OPD and IPD services are provided free of cost to all pregnant beneficiaries in all the states.

# The provision for free diagnostic facilities, including basic lab tests, for pregnant women has improved significantly in most of the states.

# Provision for blood for pregnant women and sick infants is available at all the District Hospitals visited.

# Free diet is being provided to the pregnant beneficiaries in most of the States.

( c ) The above reviews & field visits have also highlighted the following:

# Awareness & IEC on JSSK needs further improvement

# Close monitoring by State & District on any out of pocket expenditure

# Out of pocket expenditure on drug, diagnostics and referral transport for pick up or drop back is still existing

# Emphasis on entitlements for newborn and infants needs improvement

# Grievance Redressal is still weak and require strengthening across all states.

( d ) Steps taken by Govt. of India for effective implementation of JSSK are :

# Periodic Regional and State level Review meetings

# Communication through different channels with State Governments including letters, videoconferencing, etc

# Field visits by Central level teams to monitor the progress of implementation.

# Popularizing the Scheme through Information Education & Communication (IEC) & Behaviour Change Communication (BCC) strategies including mass media.

# Field level workers like ANMs and ASHAs are promoting this programme at the ground level through interpersonal communication

# Referral transport for pregnant women, sick neonates and infants is being provided by the States as per their local needs, using different models which include a network of emergency response vehicles using toll free number, government ambulances, available transport under public private partnership etc

# A mechanism of regular supportive supervisory visits to the states and districts to monitor the implementation of JSSK is also put in place and is effective in the implementation of the programme.