E-File No. 2609



# State Program Managment Unit DELHI STATE HEALTH MISSION

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F1-18/37/2017-Estt./I/3366/2017

Dated: 27/09/2017

## Minutes of the Meeting of State Health Society (Delhi)

I am directed to forward the minutes of the meeting of State Health Society (Delhi) (No.2/24/2017-18) held under the Chairmanship of Chairman, State Health Society (Delhi) / Principal Secretary, Health & Family Welfare, GNCTD at Conference Hall No.3, Level-II, Delhi Secretariat on 19/09/2017 at 3:00 p.m.

This issues with the approval of Competent Authority.

State Program Officer Delhi State Health Mission

F1-18/39/2017-Estt.

Dated:

#### Copy to:

- 1. Principal Secretary(H&FW)/Chairman, SHS (Delhi)
- 2. Divisional Commissioner (Co-Chairperson), Govt. of NCT of Delhi.
- 3. Pr. Secretary (Finance), Govt. of NCT of Delhi
- 4. Pr. Secretary (Planning), Govt. of NCT of Delhi
- 5. Pr. Secretary (UD), Govt. of NCT of Delhi
- 6. Joint Secretary (NRHM), Ministry of H&FW, Govt. of India.
- 7. Secretary-cum-Director (Social Welfare), Govt. of NCT of Delhi
- 8. Director (ISM&H), Govt. of NCT of Delhi
- 9. Director (Education), Govt. of NCT of Delhi
- 10. Secretary (NDMC), New Delhi Municipal Council
- Additional Commissioner (Health), Municipal Corporation of Delhi (EDMC, SDMC & NDMC)
- Additional Commissioner (Slums), Municipal Corporation of Delhi (EDMC, SDMC & NDMC)
- 13. Additional Commissioner (Deptt. of Environmental Sanitation), Municipal Corporation of Delhi (EDMC, SDMC & NDMC)
- 14. Director (CHEB), Directorate of General of Health Services, Govt. of India

- 15. Director, Directorate General of Health Services, Govt. of NCT of Delhi
- 16. Regional Director, Health Services (East, West, North, South & Central)
- 17. Director, Directorate of Family Welfare, Govt. of NCT of Delhi
- 18. Dean, Maulana Azad Medical College, New Delhi
- 19. Chief Executive, Delhi Cantonment Board.
- Municipal Health Officer, Municipal Corporation of Delhi (EDMC, SDMC & NDMC)
- Director Health Administration, Municipal Corporation of Delhi (EDMC, SDMC & NDMC)
- 22. New Delhi Municipal Council
- 23. MOH Family Welfare, New Delhi Municipal Council
- 24. Chief Executive Officer, Delhi Jal Board
- 25. Director/Health of the Deptt, Community Health Department, National Institute of Health & Family Welfare
- 26. Director/Health of the Deptt., Community Health Department, Jawahar Lal Nehru University, New Delhi.
- 27. Director, National Institute of Communicable Diseases
- 28. Director (Medical), Employees State Insurance Corporation
- 29. Additional Director (HQ), Central Govt. Health Scheme, Govt. of India
- 30. Project Director, Delhi State AIDS Control Society
- 31. All State Program Officers (RCH-II including Immunization, T.B, Leprosy, Cancer Control, Blindness Control, Deafness Control, Iodine Deficiency, Mental Health Programs, National Vector Borne Disease Control Programs, National Tobacco Control Program, National Program for Health Care Elderly, NPCDCS, DSHM, Integrated Disease Surveillance Project & Pulse Polio Immunization)
- 32. NGO-SOSVA
- 33. NGO-UHRC
- 34. PA to Mission Director, Delhi State Health Mission

State Program Officer Delhi State Health Mission

Signature valid

Digitally signed by NU AN

Date: 2017 09.27 13:07:51 IST Reason. Approve

#### Minutes of the Meeting (2/24//2017-18)

Meeting of the Governing Body of the State Health Society (Delhi) was held on 19/09/2017 at 3 p.m. in the Conference Hall.3, Delhi Sachivalaya under the Chairmanship of Chairman, State Health Society (Delhi)

List of participants as per Annexure-1.

The proceedings and decisions are as follows:-

Agenda Point No. 1:-The minutes of the State Health Society (Delhi) meeting held on 09/05/2017 were confirmed.

Agenda Point No. 2:- Action taken report as per the minutes of the State Health Society (Delhi) meeting held on 09/05/2017 was presented for discussion as per following details:-

Point No.	Action Required	Action Taken	Observations / Direction of State Health Society (Delhi)		
2(vii)	Status of merger of National Mental Health Program (NMHP)	Merger is still pending.	State Health Society (Delhi) directed that the merger should be completed within 15 days.		
2(xiii)	Recruitment Rules (RR's) for various posts under NTCP, NPHCE and Routine Immunization	A committee has been constituted under the Chairmanship of Director General Heatlh Services as per copy placed at Annexure-2. Two meetings of the committee have been held till date.	Noted by State Health Society (Delhi).		
2(xv)	Employees Provident Fund	State Health Society (Delhi) and all Integrated District Health Society have been registered for as per the Employees Provident Fund and Miscellaneous Provision Act.  The benefits of the	State Health Society (Delhi) directed that all Integrated District Health Society should be requested to give a compliance certificate informing that all eligible personnel have been provided the benefit. Also the benefits of amnesty scheme has been availed. All societies should inform that only the employer share & administrative charges have been paid from		



Point No.	Action Required	Action Taken	Observations / Direction of State Health Society (Delhi)			
		amnesty scheme of the PF Department could be availed by all the societies.	Society accounts.			
2(xvi)	(b) Proposal for extending the benefit of Patient Care Allowance (PCA) to all categories involved in patient care under National Health Mission.	The file for extending PCA to all categories under National Health Mission is under submission. As per observations of Deputy Director (Finance), it has been directed to submit the proposal for approval by the Cabinet.	State Health Society (Delhi) directed that the matter should be expedited as per the existing provisions under Delhi Govt.			
2(xviii)	Setting up of State Rogi Kalyan Samiti Cell	The State Rogi Kalyan Samiti Cell has been constituted as per order placed at Annexure-3	1			
10	Application of amendments of Maternity Benefit Act, 1961.	[ - [ - [ - [ - [ - [ - [ - [ - [ - [ -	[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[			
12	Payment of wages to the manpower as per enhanced Minimum Wages.	As per approval of State Health Society (Delhi), all contractual engagement under State Health Society (Delhi) and all Integrated District Health Society are to be paid as per minimum wages notified by Labour Department, GNCTD. This has also been	SHS(D) approved the minimum wages as per the recruitment rules for the categories. The minimum wages for following categories were approved as per the current rate notified by Labor Department:-Lab Assistant @ Rs. 16,182/- p.m. OT Assistant @Rs. 16,182/- p.m. Dresser @ Rs. 14,698/- p.m. Driver @ Rs. 16,182/- p.m. Ophthalmic Assistant @ Rs.16,182/- p.m. Account Assistant @Rs. 17604 p.m.			



Point No.	Action Required	Action Taken	Observations / Direction of State Health Society (Delhi)		
		approved by Ministry of H&FW, GoI.  The applicability of the befrom date of minimum wages Department, GN 03/03/2017  A direction shall be Integrated District He and State Units to Statutory requirement Department orders is to time shall be follow			
19	Recruitment of Software Team from open Market	been taken. The file is	State Health Society (Delhi) directed that urgent action should be taken to ensure functionality of the existing modules.		

#### Agenda Point No. 3:- Submission of Statutory Audit Report 2016-17

- State Health Society (Delhi) was informed that the Statutory Audit for the financial year 2016-17 was conducted by M/s K.K. Goel & Associates.
- The synopsis of the audit for the F.Y. 2016-17 as per following details was submitted to State Health Society (Delhi).
- Audit report addressed to the Mission director, State Health Society Delhi
- Checklist for auditors of State Health Society
- Consolidated Balance sheet as on 31.03.2017
- Consolidated Income & Expenditure A/c for the year ended 31.03.2017
- Consolidated Receipt & Payment A/c for the year ended 31.03.2017
- Detail of unspent balances
- · Detail of advances
- Schedule of Cash & Bank Balances.
- The detailed report was submitted to SHS(D)

Key observations of the Statutory Audit along with the action taken was submitted to State Health Society (Delhi) as per following details:-

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S.No.	Observation made by Auditors	Reply / Action taken
	Fixed assets purchased by units are treated as expenditure and not shown as fixed assets of the society.	As per operational guidelines for financial management of GOI, only those articles will be treated as assets of the society which are procured, used and installed in the Office of the Society and will be capitalized in the balance sheet of the society.
1		Assets purchased for units/by units will not be capitalized in the books of the SHS or DHS. Expenditure on procurement and acquisition of such assets will be shown in the Income & Expenditure Statement on the Expenditure side (5.5.3)
2	Fixed assets purchased for state & district during the year treated as revenue exp. And charged to I&E a/c but also capitalized as fixed assets with equivalent credit to Capital fund. Fixed assets should have been directly capitalized and should have been included in Utilization Certificate.	As per operational guidelines for financial management of GOI, only those articles will be treated as assets of the society which are procured, used and installed in the Office of the Society and will be capitalized in the balance sheet of the society.  While reporting, the utilization certificate should include the expenditure as per Income & Expenditure Account as well as the amount of such Capitalized Assets. (It has often been noted that State overlook or miss out to reflect the capitalized assets in the UCs). (5.5.3)
3	Fixed assets register not maintained as per GFR, hence improvement is required.	Necessary directions given to the administrative department for maintain the fixed assets register as per GFR.
4	Inter office fixed assets/dead stocks transfers not supported with any accounting entry evidence and are not reconciled for both ends through accounts. Fixed assets physical verification also not conducted by SHS as	Necessary directions given to the administrative department maintaining the fixed assets register as per GFR.



S.No.	Observation made by Auditors	Reply / Action taken
	well as DHS.	
5	As per accounting policies of the society, no depreciation is to be charged on fixed assets.	As per operational guidelines there is no depreciation policy in NHM.
6	Customized tally accounting packaged is not implemented at State and DHS.	Proposal submitted to GoI for approval in the Supplementary PIP 2016-17 was not approved.
7	Expenditure incurred in certain scheme during pre-approved budget period has been merged with other approved scheme without having any direction to do so.	No such expenditure incurred during the f.y. 2016-17.
8	Inter office accounts reconciliation process is not in existence at state and DHS.	The accounts of state as well as district have been reconciled at the end of the year on receipt of audited Uc at state level and UC/SOE at district level.
9	In district level huge amount has been expended towards the payment made to beneficiaries regarding failure cases of sterilization but as per our opinion such expenditure should be recovered from the concerned doctor or takes an insurance policy for such purposes	Failure is due to uncontrolled reasons. Observation is not agreed.
10	No manual cash book has been maintained at SHS and DHS but as per GFR guidelines it should be mandatory maintained.	As per approval of Chairman, State Health Society (Delhi), cashbook is maintained on tally due to large number of accounts.
11	As per GFR guidelines all advances must be settled within maximum period of 90 days, but huge amount is standing since longer period, hence extra efforts is required for eliminated such	Noted. Directions issued to the concerned for settlement of long outstanding advances.



S.No.	Observation made by Auditors	Reply / Action taken
= -	advances as soon as possible.	1
12.	A difference of Rs. 25.40 crores is arising in the UC for NCD flexible pool.	A separate UC for the amount has been submitted which has already been accepted by the auditor and signed as well. Hence the observation can't be accepted.
13.	As per GFR 2017, Rule no -86 sub clause 2 PFMS shall be implemented till last level to track funds flow and unspent balances but we observed that PFMS has not been implemented wholly. As informed by management, it is not possible due to staff shortage in lower level. Hence we recommended that sufficient staff should be provided for smooth functioning of NHM.	Dedicated accounting personnel are not approved for lower level facility.
14.	While audit we found that interest has been distributed according to funds received in respective programs and treated as grants for next year.	No action required
15.	While audit we found that peripherals has not been prepared BRS hence closing bank balance cannot be verified with closing cash book balance.	
16.	While audit we found that EPF for the month of April-16 to December 2016 not deposited upto 31.03.2017 as per non /delay deposit of EPF is attract penalty as well as interest hence the statutory dues must be deposited on and or before the due date however as informed by management this amount has been deposited during the f.y.	5 1 12 <sup>32</sup> 253 T



S.No.	Observation made by Auditors	Reply / Action taken
	2017-18	
17.	There is opening difference amounting to Rs. 72,79,648.03 observed in Routine Immunization program compare to unspent balance sheet and UC for the f.y. 2016-17.	
18.	While audit we found that Service Tax/Vat amount has been paid to vendors during the f.y. 2016-17 but copy of challan not obtained. Hence we are unable to comment whether service tax/vat amount has been deposited in central government/State government account are not.	
NIDDCP		
19	Opening Balance is differ. As per Cash Book-2412315.27 As per Balance Sheet- 2412615.27 Difference- 300.00	The difference has been due to clerica mistake and has been rectified
20	The following expenditure has been made towards purchase of chemicals but quotation not obtained & purchase order also not given.	As advised by finance department w have taken quotations & purchased th chemicals with proper procedure thereafter.
21	In the following cases salary has been paid but TDS not deducted	All the deductions are made as pe Income Tax Laws
22	Declaration regarding no other income earned during the f.y. 2016-17 not obtained for all cases.	Noted.
NTCP		F 76
23	Two banks A/Cs were maintained instead of One bank account.	NTCP has merged with SHS (D) in 2016-17. So old bank account exists



S.No.	Observation made by Auditors	Reply / Action taken
		and letter for closing of the same already been submitted to the Bank.
NPHCE		The state of the s
24	During the course of audit we observed that Interest were not credited in the bank account during the F.Y 2016-17	First time Amount had been transferred in the Bank Account of NPHCE in 2016-17 and it is found that this account is not activated for interest by bank This has been rectified. Entire interest due till date has been credited to the account on 01/08/2017.
25	2015-16 an amt. of	Adjustment entry.

State Health Society (Delhi) directed that State Immunization Officer should reconcile the difference in the opening balance for 2016-17 at the earliest.

In lieu of observation at S.No. 13 & 15 by the Statutory Auditor, State Health Society (Delhi) directed that the possibility of hiring of the account functionary already approved under various program should be explored along with rationalization of work to ensure that all accounting requirement are fulfilled.

## Agenda Point No. 4: Status of Concurrent Audit 2017-18

State Health Society (Delhi) was informed that Concurrent Audit of SHS (D) has been done till July 2017. Audit Report as per Annexure-5 was submitted to State Health Society (Delhi) for appraisal.

Agenda Point No. 5:- Status of Income tax cases of State Health Society (Delhi) which came up for scrutiny by Income Tax Department

State Health Society (Delhi) was informed that accounts of State Health Society (Delhi) for the financial year 2015-16 has come under scrutiny by Income Tax Department.

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State Health Society (Delhi) observed that since the State Health Society (Delhi) deals with the funds from Govt. of India and State Govt. for activities related to health care of the public, its account may not be scrutinized. State Health Society (Delhi) directed that the matter should be taken up with higher authority in Income Tax Department.

# Agenda Point No. 6:- Renewal of contractual engagements of State Health Society (Delhi).

State Health Society (Delhi) was informed that contract of three contractual engagements of State Health Society (Delhi) has been renewed from 01/07/2017 to 31/03/2018 with the approval of Chairman State Health Society (Delhi) & contract of one employee has been renewed w.e.f. 01/04/2017 to 31/03/2018 consequent upon her resuming duty after completion of Maternity Leave.

State Health Society (Delhi) ratified the renewal as per **Annexure-6**.

# Agenda Point No. 7:- Operationalization of Mohalla Clinics by Delhi State Health Mission.

As per Cabinet Decision No. 2436 dated 22/10/2016, Cabinet has approved that the work of the management etc. of Aam Admi Mohalla Clinic (AAMC) be entrusted to Delhi State Health Mission instead of the Delhi Health Corporation Limited (DHCL) Annexure-7. The same has been approved by Hon'ble Lieutenant Governor.

As on date, 158 Aam Aadmi Mohalla Clinics have been operationalised in 11 districts of Delhi. Of these, 101 are functioning from rented premises, one in DUSIB Building and the rest in porta cabins fabricated by Public Works Department.

A file for approval by Chairman, Delhi State Health Mission for undertaking the implementation of Aam Aadmi Mohalla Clinic Project by State Health Society (Delhi) has already been submitted.

A dedicated account for funds from State Govt. for management of AAMC is already in place.

Formal handing over of the project by Director General Health Services has to be done.

State Health Society (Delhi) directed that State Program Management Unit should await the proposal from the Directorate General Health Services which is currently managing the implementation of Aam Aadmi Mohalla Clinic

#### Agenda Point No. 8:- Relieving of Mission Director

Dr. Tarun Seem, IRS who was on deputation in Delhi State Health Mission since 15<sup>th</sup> October, 2015 has been relieved on 11<sup>/th</sup> August, 2017 with the approval of Hon'ble LG.

State Health Society (Delhi) approved the repatriation of Mission Director, Delhi State Health Mission to his parent cadre.



## Agenda Point No. 9:- Financial progress under Delhi State Health Mission:

	Pool	Budget approve d includi ng Commi tted	Resou rce Envel ope	Openi ng Balan ce includ ing advan ces	Fund Recei ved d by SHS( D) uring the f.y. 2017- 18*	Total funds availa ble	Total Provisio nal Expendi ture till 31.08.201	Balan ce of Funds as on 31.08.1 7 includ ing Advan ces	% of Expendi ture against RE	% of Expendi ture against Total available balance
(Ar	mount in cror	es)								
1	RMNCH Flexible Pool	43.83	36.44	90.68	0.00	94.17	6.19	87.98	14.12	6.57
a.	RCH Flexible pool	23.17	18.98	76.24		76.23	1.75	74.48	7.55	2.30
C.	Routine Immuniza tion	17.28	14.12	5.20		5.20	1.00	4.20	5.79	19.23
C. 6	Pulse Polio	3.10	3.10	8.50		8.50	3.33	5.17	107.42	39.18
d	NIDDCP	0.28	0.24	0.74		0.74	0.11	0.63	39.29	14.86
	Undistrib uted GIA			3.50		3.50	0.00	3.50	37.27	11.00
2	HSS	209.26	133.22	81.62	0.00	81.62	30.01	51.61	14.34	36.77
b.	MFP			81.08		81.08	30.01	51.07		
b. i	NOHP	209.26	133.22	0.00		0.00	0.00	0.00	14.34	36.77
b. ii	NPPCD			0.54		0.54	0.00	0.54		
3	NUHM Flexible pool	96.72	84.62	32.23	32.16	64.39	11.05	53.34	11.42	17.16
4	CD flexible pool	34.09	31.53	10.56	21.12	31.68	4.14	27.54	12.14	13.07
a.	IDSP	1.58	1.51	0.35	1.01	1.36	0.14	1.22	8.86	10.29
b.	NVBDCP	0.82	0.63	6.22		6.22	0.04	6.18	4.88	0.64
c	NLEP	2.46	2.33	-0.07	0.47	0.40	0.19	0.21	7.72	47.50
d.	RNTCP	29.23	27.06	4.06	19.64	23.70	3.77	19.93	12.90	15.91
5	NCD flexible pool	12.12	10.51	7.51	0.00	7.51	0.28	7.24	2.27	3.66
a.	NPCB	7.03	5.65	1.83		1.83	0.26	1.57		
b.	NMHP	0.86	0.86	0.98		0.98	0.00	0.98		
c.	NPHCE	0.42	0.42	0.35		0.35	0.00	0.35	2.27	3.66
e.	NTCP	2.51	2.28	0.48		0.48	0.01	0.47		
g.	NPCDCS	1.30	1.30	3.87		3.87	0.01	3.87		



061.00	Pool	Budget approve d includi ng Commi tted	Resou rce Envel ope	Openi ng Balan ce includ ing advan ces	Fund Recei ved d by SHS( D) uring the f.y. 2017- 18*	Total funds availa ble	Total Provisio nal Expendi ture till 31.08.201	Balan ce of Funds as on 31.08.1 7 includ ing Advan ces	% of Expendi ture against RE	% of Expendi ture against Total available balance
	Infrastruc ture Maintainn ance (through DFW)	9.24	9.24			A CONTRACTOR OF THE CONTRACTOR		0.00	0.00	
6	State Specific Scheme	0.00	0.00	0.00	3.25	3.25	6.90	-3.66	#DIV/0!	212.31
a.	ASHA Incentive				3.25	3.25	4.61	-1.36		
b.	State Govt. Salary Part					0.00	2.30	-2.30	A-1979	
	Infrasture and maintanan ce**	9.24	9.24				4.46	-4.46	48.27	
	Total	405.26	305.56	222.60	53.28	279.37	56.13	223.25	13.85	20.09

Financial progress 2017-18 as per details in the table above were submitted to State Health Society (Delhi).

State Health Society (Delhi) directed that in view of the low expenditure till date all State Program Officer should submit a calendar of expenditure for the next two quarters to the Chairman, State Health Society (Delhi).

## Agenda Point No. 10:- State Program Implementation Plan 2017-18

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State Health Society (Delhi) was informed that approval for the State Health Society (Delhi) has been received vide Letter No. F. No 10(22)/2017-NHM-I dated 18.08.2017. Following key approvals were submitted for consideration of SHS (D):-

Monthly remuneration of the contractual engagements- As per the administrative approval, in principle 5% of the total Human Resource (HR) budget is approved as lump sum for increment and an additional 3% of the total Human Resource budget is approved as lump sum for HR rationalization (where proposed by the State). Exact amount of individual increment is to be decided by State in its Executive Committee. Only those Human Resource / Staff who have completed one year, will be eligible for increment. Human



Resource rationalization exercise and its principles including increments should be approved by Governing body.

State Health Society (Delhi) directed that the Executive Committee should be constituted as per guidelines at the earliest. The Executive Committee shall decide the quantum of increment which shall be ratified by Governing Body in its next meeting.

#### 2. Human Resource issues:

- (a) All service Human Resource has been approved under Health System Strengtheninga component of RCH flexible pool. State Health Society (Delhi) approved that a dedicated Program Officer for administrative control of human resource shall be nominated by Directorate of Family Welfare.
- (b) Ten Leprosy Assistant currently in position as per details in Annexure-8 have been approved for nine month only. As per the administrative approval, it has been informed that the State may like to recruit these personnel against equivalent positions of similar nature if deemed fit.
  - State Health Society (Delhi) directed that the State Leprosy Officer shall share the recruitment rules of the Leprosy Assistant with all the Program Officer for possible positioning of these personnel in other programs against post with similar qualification. In case they can't be repositioned, their services should be discontinued.
- (c) Contractual engagement under National Iodine Deficiency Disorder Control Program (NIDDCP): Five positions under NIDDCP have been approved on deputation. Currently, the contract of the existing personnel is valid upto 30/09/2017.
  - State Program Officer informed that the contractual engagement have been hired on contract as per approval by the Finance Department of GNCTD. Chairman (SHS) directed that the relevant file should be put up for decision on the matter.
- (d) Computer Data Entry Operator: As per the existing policy under National Health Mission, a lump sum amount has been approved for Computer Data Entry Operator. State to outsource the services to the extent possible. The existing personnel are to be paid through the lump sum amount approved.
  - State Program Officer (Monitoring and Evaluation) informed that the total amount required for enhancement of existing CDEOs has been approved along with the lump sum amount for enhancement of contractual engagement under National Urban Health Mission. This is being informed to the Program division in Ministry of H&FW, GoI and shall be dealt accordingly in the current year.
- (e) State Health Society (Delhi) was informed that some ongoing human resource (ASHA Coordinators and MIS Experts) have inadvertently not been approved in the current Program Implementation Plan. The positions are being continued as ongoing activities and a communication has been sent to MoHFW, GoI for clarification.



- Construction of Ambedkar Nagar Hospital: State Health Society (Delhi) was informed that in principle approval for construction of 600 bed hospital at Ambedkar Nagar has been received. Since, Rs.46 crores is available as committed unspent in the current financial year, no additional funds have been approved.
- 4. Blood collection and transport van: State Health Society (Delhi) was informed that one van @ Rs. 32 Lakhs has been approved for State Blood Transfusion Centre, GTB Hospital.
- 5. National Ambulance Service: State Health Society (Delhi) was informed that ongoing support for 120 Patient Transport Ambulance @ Rs.20,000 per ambulance per month & 100 Basic Life Support ambulances @ Rs.60,000 per ambulance per month for the first year of operation & Rs.40,000 per ambulance per month thereafter has been approved.

State Health Society (Delhi) approved that Rs. 875.80 Lakhs shall be provided to Centralized Accident & Trauma Services (CATS) as per the approvals received.

- 6. Seed Primary Urban Health Centres: State Health Society (Delhi) was informed that 63 Seed Primary Urban Health Centres have been approved for rentals (@ Rs 25,000/- per month), operational cost (@ Rs 15,000/- per month) alongwith ongoing Human resource.
- Untied Fund to Rogi Kalyan Samiti: A total of Rs. 2.87 crores has been approved as per following details:-
- (i) Rs. 50,000 per annum for 60 Seed Primary Urban Health Centres & 181 Delhi Govt. Dispensaries.
- (ii) Rs. 5 Lakhs per annum for 26 hospitals
- (iii) Rs. 2 Lakhs per annum for 16 maternity homes (8 of South Delhi Municipal Corporation & 8 of East Delhi Municipal Corporation)

State Health Society (Delhi) approved that the untied funds for the Municipal Corporation Health Facilities may be routed through Integrated District Health Societies as per current practice.

- Procurements of Municipal Corporation: State Health Society (Delhi) was informed that:-
- (a) Funds for procurement of drugs: Rs.128.95 Lakh for 20 M&CW Centres & Rs.127.82 Lakh for 7 Maternity Homes of East Delhi Municipal Corporation &Rs.234.28 Lakh for South Delhi Municipal Corporation has been approved.
- (b) Rs. 278.95 Lakhs have been approved for procurement of equipment for South Delhi Municipal Corporation.

State Health Society (Delhi) approved that the approved fund may be utilized as per guidelines. It also approved that the fund may be transferred to the respective Municipal Corporations for procurement as per approvals.



PPP for dialysis:- A fund of Rs.1439.08 lakhs have been approved for free dialysis
for BPL patients with the direction to adhere to NHM guidelines for setting up new
centres. The intervention is being coordinated under the administrative control of
Director General Health Services.

State Health Society (Delhi) directed that the project may be implemented as per approved guidelines under National Health Mission.

 Linen and Laundry management in Hospital – State Health Society (Delhi) was informed that re-validation of Rs. 50 Lakhs have been approved for outsourcing laundry services at MCH block of Guru Teg Bhahadur Hospital.

State Health Society (Delhi) approved that the project may be implemented as per direction from MoHFW, GoI.

ASHA Scheme: In the year 2017-18, a target 1000 ASHAs has been kept for NIOS Accreditation. One of the mandatory conditions is that the ASHAs can be trained only at the Accredited venues. State is trying for accreditation of the district level training venues and the unit level training venues will not be accredited in the CFY. As a result the ASHAs will be trained at the district level venues which are at some distance from their residence. Rs. 100/- being given to the will not be sufficient for their daily travel. In the urban scenario, residential training is not being planned and approval for the same has already been taken. The mobility for the district level training may be enhanced to Rs.200/- from Rs.100/-.

Total financial implications for 1000 ASHAs shall be Rs. 10.0 lakhs.

State Health Society (Delhi) approved the proposal to be submitted for approval to MoHFW, GoI.

#### Agenda Points No. 11 - RNTCP

 Regarding rectification in base salary of RNTCP Contractual Employees in "Approval of National Health Mission Programme Implementation Plan 2017-18

As per the document "Approval of National Health Mission Programme Implementation Plan 2017-18", there have been differences in the base salary of some of the following RNTCP Contractual employees working in Delhi State.

S.No.	Name of the Post	No.	per month for F.Y.	Base salary per month approved in the "Approval of National Health Mission Programme Implementation Plan 2017-18 (B)
			Amount in Rs.	
1	DEO (State TB Cell)	1	18940	18000
2	DEO IRL	2	15780	15000

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S.No.	Name of the Post	No.	2016-17 (A)	of National Health Mission Programme Implementation Plan 2017-18 (B)
3	DEO STF	1	Amount in Rs 18940	18000
3	Other DEO at STBC	1	15780	15000
4	DEO (Lower Slab) at District level	5	15780	15000
5	DEO (Middle Slab) at District level	9	17250	16425
6	DEO (Upper Slab) at District level	11	18940	18000

State Health Society (Delhi) was informed that the base salary of certain category of RNTCP contractual staff as per the coloumn 'A' in the above mentioned table was proposed & approved in supplementary PIP 2016-17 & the staff are taking this base salary since 1st April, 2016. But as per the "Approval of National Health Mission Programme Implementation Plan 2017-18" the base salary has been approved as per the column 'B' of the above mentioned table which is less than the actual base salary which the RNTCP contractual staff are taking w.e.f. 01.04.2016. A revised proposal for approval by MoHFW was approved for submission.

## 2. Proposal to increase remuneration of Supervisors (STS & STLS)

The base Salary of STS & STLS was proposed in PIP 2017-18 to be equivalent to the post of Senior DOTS Plus & TB HIV Supervisors (Basic from Rs. 17,000/- to Rs. 19,000/-) as per approval in SHS Meeting on 15-03-2016. State Health Society (Delhi) approved the enhancement from the additional 3% of the total HR Budget i.e. Rs 33.56 Lacs approved in c.f.y.

## Agenda Points-12: National Leprosy Eradication Program

## 1. Approval for ABSULS (ASHA Based Surveillance for Leprosy Suspects)

State Health Society (Delhi) was informed that ASHA based surveillance for Leprosy suspects was launched with effect from 1.7.2017 which is a multi-tiered monitoring system of the surveillance and confirmation of leprosy suspect cases by ASHA workers. There is need to involve ASHA in ASHA Based Surveillance for Leprosy Suspects .With reference to the letter received for approval for any survey or activity of ASHA vide letter no F-3-12/12/2014-ARC/I/3254/2017, a letter requesting for approval was sent and a reply is awaited

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## 2. Involvement of ASHA in Leprosy Case detection campaign

State Health Society (Delhi) was informed that NLEP will be conducting the Leprosy Case detection campaign w.e.f from 24<sup>th</sup> October 2017 to 6 November 2017. For this ASHA involvement along with health workers is imperative as the LCDC involves house to house campaign for leprosy cases. Since, the campaign will involve an expenditure of approximately one Crore rupees ,State Health Society (Delhi) directed that the campaign will be done only if extra fund is approved by the program divison in MoHFW, GoI.

#### Agenda Points No.-13: Immunization

- 1. State Health Society (Delhi) was informed that Intensified Mission Inderdhanush (IMI) campaign to vaccinate all missed children will commence w.e.f. 7<sup>th</sup> October 2017 to achieve the goal 100% immunization. The IMI will be carried out for 7 working days (excluding Sundays, Holidays and Routine Immunization days) on monthly basis. A head count survey, preparation of due list for mobilization of the children and access to the vaccination session, proper planning for IEC at all levels would be key to success of this special drive. Further, Minister (H&FW) Govt. of NCT of Delhi has approved holding of IMI in all districts of Delhi throughout the year, though the mandate of Ministry of Health and Family Welfare, GoI in 3 identified districts only (Shahdara, South East and North). So an additional amount of funds will be required to carry out the activity as Govt. of India will be funding only for 3 selected districts.
- State Health Society (Delhi) approved the submission of proposal to MoHFW, GoI as per following details for reconsideration in Supplementary PIP:
  - Under FMR B.1.1.3.6.1 Fund of Rs. 42 have been approved for AWWs for Head
    counts and due list preparation under Mission Indradhanush and Routine
    Immunization.SHS may approve for inclusion of link workers in areas where
    AWWs/ASHAs are not available.
  - Under FMR C.2.3.a Funds of Rs. 40.28 lakhs was projected for salary of Cold chain technicians it was not approved in ROP 2017-18. There are 11 district and cold chain technicians are required for maintenance of cold chain equipments. At present there is no cold chain technicians posted at State Vaccine Store. The State will be projecting salary of 12 Cold Chain technicians under Supplementary PIP for IMI. Bio medical engineers available under National Health Mission shall be utilized for maintenance of cold chain till the approvals are received from MoHFW, GoI.

### Agenda point No.14: Reproductive and Chid Health

State Health Society (Delhi) was informed that the approval for District Early Intervention Centre has been received under PPP mode. Modalities for tendering the same needs to be decided.

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State Health Society (Delhi) directed that the proposal may be submitted on file for approval by the Competent Authority.

State Health Society (Delhi) was informed that the State had also proposed for Human Resource for High Dependency Unit / Obstetrical Intensive Care Unit at Safdarjung hospital, Clarification required regarding its approval.

#### **NEEV:**

Newborn screening has been proposed with the acronym NEEV (neonatal early evaluation vision) with the following objectives in mind

- 1. Screening for visible birth defects
- 2. Screening for functional birth defects
  - -Retinopathy of prematurity
  - -Hearing evaluation
- 3. Screening for metabolic birth defects which include screening for congenital hypothyroidism, congenital adrenal hyperplasia and G6PD deficiency.

The proposal was proposed in the State Project Implementation Plan and shall be implemented in 31 birthing facilities in Delhi. This is under the National Scheme "Rashtriya Baal SwasthyaKaryakram" which is aimed at reducing morbidity and improving quality of life. The same was duly approved by the Secretary Health. State Health Society (Delhi) ratified the approval.

#### Agenda point No.15: Adolescent Health Counselors

Twenty seven Adolescent Health Counselors have been approved at four different remunerations. State Health Society (Delhi) approved that to ensure uniformity twenty seven Adolescent Health Counselors may be proposed by the State at a uniform rate within the approved budget.

#### Agenda point No.16: Reallocation of approved funds under IEC / BCC under RCH

State Health Society (Delhi) approved that the proposal for reallocation of funds to the district maybe submitted to Mission Director, Delhi State Health Mission on file.

#### Agenda point No.17

In the administrative approval of State PIP 2017-18, there are many discrepancies and at many places the approvals have been restricted.

State Health Society (Delhi) accorded in principle approval to include the discrepancies in the supplementary proposal for clarification by Ministry of Health and Family Welfare.

Meeting ended with the vote of thanks.

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#### Draft Minutes of the Meeting (2/24//2017-18)

Meeting of the Governing Body of the State Health Society (Delhi) was held on 19/09/2017 at 3 p.m. in the Conference Hall.3, Delhi Sachivalaya under the Chairmanship of Chairman, State Health Society (Delhi)

List of participants as per Annexure-1.

The proceedings and decisions are as follows:-

Agenda Point No. 1:-The minutes of the State Health Society (Delhi) meeting held on 09/05/2017 were confirmed.

Agenda Point No. 2:- Action taken report as per the minutes of the State Health Society (Delhi) meeting held on 09/05/2017 was presented for discussion as per following details:-

Point Action Required No.		Action Taken	Observations / Direction of State Health Society (Delhi)		
2(vii)	Status of merger of National Mental Health Program (NMHP)	Merger is still pending.	State Health Society (Delhi) directed that the merger should be completed within 15 days.		
2(xiii)	Recruitment Rules (RR's) for various posts under NTCP, NPHCE and Routine Immunization	A committee has been constituted under the Chairmanship of Director General Heatlh Services as per copy placed at Annexure-2. Two meetings of the committee have been held till date.	Noted by State Health Society (Delhi).		
2(xv)	Employees Provident Fund	State Health Society (Delhi) and all Integrated District Health Society have been registered for as per the Employees Provident Fund and Miscellaneous Provision Act. The benefits of the amnesty scheme of the PF Department could be availed by all the societies.	State Health Society (Delhi) directed that all Integrated District Health Society should be requested to give a compliance certificate informing that all eligible personnel have been provided the benefit. Also the benefits of amnesty scheme has been availed. All societies should inform that only the employer share & administrative charges have been paid from Society accounts.		
2(xvi)	(b) Proposal for extending the benefit of Patient Care Allowance (PCA) to all categories involved in patient	The file for extending PCA to all categories under National Health Mission is under submission. As per observations of Deputy	State Health Society (Delhi) directed that the matter should be expedited as per the existing provisions under Delhi Govt.		

Pint No.	Action Required	Action Taken	Noted by State Health Society (Delhi).		
	care under National Health Mission.	Director (Finance), it has been directed to submit the proposal for approval by the Cabinet.			
2(xviii)	Setting up of State Rogi Kalyan Samiti Cell	The State Rogi Kalyan Samiti Cell has been constituted as per order placed at Annexure-3			
10	Application of amendments of Maternity Benefit Act, 1961.	Maternity Benefit Act,	Noted by State Health Society (Delhi).		
12	Payment of wages to the manpower as per enhanced Minimum Wages.	As per approval of State Health Society (Delhi), all contractual engagement under State Health Society (Delhi) and all Integrated District Health Society are to be paid as per minimum wages notified by Labour Department, GNCTD. This has also been approved by Ministry of H&FW, GoI.	as per the recruitment rules for the categories. The minimum wages for following categories were approved as per the current rate notified by Labor Department:- Lab Assistant @ Rs. 16182 p.m. OT Assistant @Rs. 16182 p.m.		
19	Recruitment of Software Team from open Market	No final decision has been taken. The file is under submission to IT department.	State Health Society (Delhi) directed that urgent action should be taken to ensure functionality of the existing modules.		

#### Agenda Point No. 3:- Submission of Statutory Audit Report 2016-17

- State Health Society (Delhi) was informed that the Statutory Audit for the financial year 2016-17 was conducted by M/s K.K. Goel & Associates.
- The synopsis of the audit for the F.Y. 2016-17 as per following details was submitted to State Health Society (Delhi).
- · Audit report addressed to the Mission director, State Health Society Delhi
- · Checklist for auditors of State Health Society
- Consolidated Balance sheet as on 31.03.2017
- Consolidated Income & Expenditure A/c for the year ended 31.03.2017
- Consolidated Receipt & Payment A/c for the year ended 31.03.2017
- Detail of unspent balances
- · Detail of advances
- · Schedule of Cash & Bank Balances.
- The detailed report was submitted to SHS(D)

Key observations of the Statutory Audit along with the action taken was submitted to State Health Society (Delhi) as per following details:-

Sr. No.	Observation made by Auditors	Reply / Action taken
1	Fixed assets purchased by units are treated as expenditure and not shown as fixed assets of the society.	As per operational guidelines for financial management of GOI, only those articles will be treated as assets of the society which are procured, used and installed in the Office of the Society and will be capitalized in the balance sheet of the society.
		Assets purchased for units/by units will not be capitalized in the books of the SHS or DHS. Expenditure on procurement and acquisition of such assets will be shown in the Income & Expenditure Statement on the Expenditure side (5.5.3)
2	Fixed assets purchased for state & district during the year treated as revenue exp. And charged to I&E a/c but also capitalized as fixed assets with equivalent credit to Capital fund. Fixed assets should have been directly capitalized and should have been included in Utilization	As per operational guidelines for financial management of GOI, only those articles will be treated as assets of the society which are procured, used and installed in the Office of the Society and will be capitalized in the balance sheet of the society.
	Certificate.	While reporting, the utilization certificate should include the expenditure as per Income & Expenditure Account as well as the amount of such Capitalized Assets. (It has often been
		noted that State overlook or miss out to reflect the capitalized assets in the UCs). (5.5.3)
3.	Fixed assets register not maintained as per GFR, hence improvement is required.	Necessary directions given to the administrative department for maintain the fixed assets register as per GFR.

Sr. No.	Observation made by Auditors	Reply / Action taken
4.	Inter office fixed assets/dead stocks transfers not supported with any accounting entry evidence and are not reconciled for both ends through accounts. Fixed assets physical verification also not conducted by SHS as well as DHS.	Necessary directions given to the administrative department maintaining the fixed assets register as per GFR.
5.	As per accounting policies of the society, no depreciation is to be charged on fixed assets.	As per operational guidelines there is no depreciation policy in NHM.
6.	Customized tally accounting packaged is not implemented at State and DHS.	Proposal submitted to GoI for approval in the Supplementary PIP 2016-17 was not approved.
7.	Expenditure incurred in certain scheme during pre-approved budget period has been merged with other approved scheme without having any direction to do so.	No such expenditure incurred during the f.y. 2016-17.
8.	Inter office accounts reconciliation process is not in existence at state and DHS.	The accounts of state as well as district have been reconciled at the end of the year on receipt of audited Uc at state level and UC/SOE at district level.
9.	In district level huge amount has been expended towards the payment made to beneficiaries regarding failure cases of sterilization but as per our opinion such expenditure should be recovered from the concerned doctor or takes an insurance policy for such purposes.	Failure is due to uncontrolled reasons.  Observation is not agreed.
10.	No manual cash book has been maintained at SHS and DHS but as per GFR guidelines it should be mandatory maintained.	As per approval of Chairman, State Health Society (Delhi), cashbook is maintained on tally due to large number of accounts.
11.	As per GFR guidelines all advances must be settled within maximum period of 90 days, but huge amount is standing since longer period, hence extra efforts is required for eliminated such advances as soon as possible.	Noted. Directions issued to the concerned for settlement of long outstanding advances.
12.	A difference of Rs. 25.40 crores is arising in the UC for NCD flexible pool.	A separate UC for the amount has been submitted which has already been accepted by the auditor and signed as well. Hence the observation can't be accepted.
13.	As per GFR 2017, Rule no -86 sub clause 2 PFMS shall be implemented till last level to track funds flow and unspent balances but we observed that PFMS has not been implemented wholly. As informed by management, it is not possible due to staff shortage in lower level. Hence we recommended that sufficient staff should be provided for smooth functioning of NHM.	Dedicated accounting personnel are not approved for lower level facility.

Sr. No.	Observation made by Auditors	Reply / Action taken
14.	While audit we found that interest has been distributed according to funds received in respective programs and treated as grants for next year.	No action required
15.	While audit we found that peripherals has not been prepared BRS hence closing bank balance cannot be verified with closing cash book balance.	Since there is no account functionaries, BRS cannot be prepared.
16.	While audit we found that EPF for the month of April-16 to December 2016 not deposited upto 31.03.2017 as per non /delay deposit of EPF is attract penalty as well as interest hence the statutory dues must be deposited on and or before the due date however as informed by management this amount has been deposited during the f.y. 2017-18	EPF deposited till july-17 except Jan-17. Necessary direction issued to admin deptt. For generating the challan for the same.
17.	There is opening difference amounting to Rs. 72,79,648.03 observed in Routine Immunization program compare to unspent balance shown in balance sheet and UC for the f.y. 2016-17.	Unable to reconcile.
18.	While audit we found that Service Tax/Vat amount has been paid to vendors during the f.y. 2016-17 but copy of challan not obtained. Hence we are unable to comment whether service tax/vat amount has been deposited in central government/State government account are not.	Noted.
NID	DCP	
19	Opening Balance is differ. As per Cash Book- 2412315.27 As per Balance Sheet- <u>2412615.27</u> <b>Difference-</b> <u>300.00</u>	The difference has been due to clerical mistake and has been rectified
20	The following expenditure has been made towards purchase of chemicals but quotation not obtained & purchase order also not given.	As advised by finance department we have taken quotations & purchased the chemicals with proper procedure thereafter.
21	In the following cases salary has been paid but TDS not deducted	All the deductions are made as per Income Tax Laws
22	Declaration regarding no other income earned during the f.y. 2016-17 not obtained for all cases.	Noted.
NTC	CONTROL DOSC	
23	Two banks A/Cs were maintained instead of One bank account.	NTCP has merged with SHS (D) in 2016-17. So old bank account exists and letter for closing of the same already been submitted to the Bank.

Sr. No.	Observation made by Auditors	Reply / Action taken		
NPH	CE			
24	During the course of audit we observed that Interest were not credited in the bank account during the F.Y 2016-17	First time Amount had been transferred in the Bank Account of NPHCE in 2016-17 and it is found that this account is not activated for interest by bank. This has been rectified. Entire interest due till date has been credited to the account on 01/08/2017.		
25	As per audited balance sheet of 2015-16, an amt. of Rs.3450000.00 was shown as current liability. But on 01.04.2016 an entry was passed debiting the loan and crediting the grant, for which no supporting documents were on record.	The distribution of Grant was not final at that time and the amount was transferred as Loan but on 1.4.2016 this shall transferred in GIA by passing Adjustment entry.		

State Health Society (Delhi) directed that State Immunization Officer should reconcile the difference in the opening balance for 2016-17 at the earliest.

In lieu of observation at S.no.- 13 & 15 by the Statutory Auditor, State Health Society (Delhi) directed that the possibility of hiring of the account functionary already approved under various program should be explored along with rationalization of work to ensure that all accounting requirement are fulfilled.

## Agenda Point No. 4: Status of Concurrent Audit 2017-18

State Health Society (Delhi) was informed that Concurrent Audit of SHS (D) has been done till July 2017. Audit Report as per **Annexure-5** was submitted to State Health Society (Delhi) for appraisal.

# Agenda Point No. 5:- Status of Income tax cases of State Health Society (Delhi) which came up for scrutiny by Income Tax Department

State Health Society (Delhi) was informed that accounts of State Health Society (Delhi) for the financial year 2015-16 has come under scrutiny by Income Tax Department.

State Health Society (Delhi) observed that since the State Health Society (Delhi) deals with the funds from Govt. of India and State Govt. for activities related to health care of the public, its account may not be scrutinized. State Health Society (Delhi) directed that the matter should be taken up with higher authority in Income Tax Department.

## Agenda Point No. 6:- Renewal of contractual engagements of State Health Society (Delhi).

State Health Society (Delhi) was informed that contract of three contractual engagements of State Health Society (Delhi) has been renewed from 01/07/2017 to 31/03/2018 with the approval of Chairman State Health Society (Delhi) & contract of one employee has been renewed w.e.f. 01/04/2017 to 31/03/2018 consequent upon her resuming duty after completion of Maternity Leave.

State Health Society (Delhi) ratified the renewal as per **Annexure-6.** 

Agenda Point No. 7:- Operationalization of Mohalla Clinics by Delhi State Health Mission.

As per Cabinet Decision No. 2436 dated 22/10/2016, Cabinet has approved that the work of the management etc. of Aam Admi Mohalla Clinic (AAMC) be entrusted to Delhi State Health Mission instead of the Delhi Health Corporation Limited (DHCL) <u>Annexure-7</u>. The same has been approved by Hon'ble Lieutenant Governor.

As on date, 158 Aam Aadmi Mohalla Clinics have been operationalised in 11 districts of Delhi. Of these, 101 are functioning from rented premises, one in DUSIB Building and the rest in porta cabins fabricated by Public Works Department.

A file for approval by Chairman, Delhi State Health Mission for undertaking the implementation of Aam Aadmi Mohalla Clinic Project by State Health Society (Delhi) has already been submitted.

A dedicated account for funds from State Govt. for management of AAMC is already in place.

Formal handing over of the project by Director General Health Services has to be done.

State Health Society (Delhi) directed that State Program Management Unit should await the proposal from the Directorate General Health Services which is currently managing the implementation of Aam Aadmi Mohalla Clinic

## Agenda Point No. 8:- Relieving of Mission Director

Dr. Tarun Seem, IRS who was on deputation in Delhi State Health Mission since 15<sup>th</sup> October, 2015 has been relieved on 11<sup>/th</sup> August, 2017 with the approval of Hon'ble LG.

State Health Society (Delhi) approved the repatriation of Mission Director, Delhi State Health Mission to his parent cadre.

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Agenda Point No. 9 :- Financial progress under Delhi State Health Mission :

	Pool	Budget approved including Committ ed	Resour ce Envelo pe	Openin g Balance includi ng advanc es	Fund Receive d d by SHS(D) uring the f.y. 2017- 18*	Total funds availab le	Total Provisiona I Expenditu re till 31.08.2017	Balance of Funds as on 31.08.17 includin g Advanc es	% of Expenditu re against RE	% of Expenditure against Total available balance
			1	(Amou	nt in crores	)		L CS	,	
1	RMNCH Flexible Pool	43.83	36.44	90.68	0.00	94.17	6.19	87.98	14.12	6.57
a.	RCH Flexible pool	23.17	18.98	76.24		76.23	1.75	74.48	7.55	2.30
C.	Routine Immunization	17.28	14.12	5.20		5.20	1.00	4.20	5.79	19.23
C. 6	Pulse Polio	3.10	3.10	8.50		8.50	3.33	5.17	107.42	39.18
d	NIDDCP	0.28	0.24	0.74		0.74	0.11	0.63	39.29	14.86
	Undistributed GIA			3.50		3.50	0.00	3.50		
2	HSS	209.26	133.22	81.62	0.00	81.62	30.01	51.61	14.34	36.77
b.	MFP	209.26	133.22	81.08		81.08	30.01	51.07	14.34	36.77
b.i	NOHP			0.00		0.00	0.00	0.00		
b.i i	NPPCD			0.54		0.54	0.00	0.54		
3	NUHM Flexible pool	96.72	84.62	32.23	32.16	64.39	11.05	53.34	11.42	17.16
4	CD flexible pool	34.09	31.53	10.56	21.12	31.68	4.14	27.54	12.14	13.07
a.	IDSP	1.58	1.51	0.35	1.01	1.36	0.14	1.22	8.86	10.29
b.	NVBDCP	0.82	0.63	6.22		6.22	0.04	6.18	4.88	0.64
c	NLEP	2.46	2.33	-0.07	0.47	0.40	0.19	0.21	7.72	47.50
d.	RNTCP	29.23	27.06	4.06	19.64	23.70	3.77	19.93	12.90	15.91
5	NCD flexible pool	12.12	10.51	7.51	0.00	7.51	0.28	7.24	2.27	3.66
a. b.	NPCB NMHP	7.03	5.65	1.83		1.83	0.26	1.57	2.27	3.66
c.	NPHCE	0.86	0.86	0.98		0.98	0.00	0.98		
e.	NTCP	0.42 2.51	0.42	0.35		0.35	0.00	0.35		
g.	NPCDCS	1.30	1.30	0.48		0.48	0.01	0.47		
e.	Infrastructure Maintenance (through DFW)	9.24	9.24	3.87		3.87	0.01	0.00	0.00	
6	State Specific Scheme	0.00	0.00	0.00	3.25	3.25	6.90	-3.66	#DIV/0!	212.31
a.	ASHA Incentive				3.25	3.25	4.61	-1.36		
b.	State Govt. Salary Part					0.00	2.30	-2.30		
	Infrasture and maintanance*	9.24	9.24				4.46	-4.46	48.27	
	Total	405.26	305.56	222.60	53.28	279.37	56.13	223.25	13.85	20.09

Financial progress 2017-18 as per details in the table above were submitted to State Health Society (Delhi).

State Health Society (Delhi) directed that in view of the low expenditure till date all State Program Officer should submit a calendar of expenditure for the next two quarters to the Chairman, State Health Society (Delhi).

Agenda Point No. 10:- State Program Implementation Plan 2017-18

State Health Society (Delhi) was informed that approval for the State Health Society (Delhi) has been received vide Letter No. F. No 10(22)/2017-NHM-I dated 18.08.2017.

Following key approvals were submitted for consideration of SHS (D):-

1. Monthly remuneration of the contractual engagements- As per the administrative approval, in principle 5% of the total Human Resource (HR) budget is approved as lump sum for increment and an additional 3% of the total Human Resource budget is approved as lump sum for HR rationalization (where proposed by the State). Exact amount of individual increment is to be decided by State in its Executive Committee. Only those Human Resource / Staff who have completed one year, will be eligible for increment. Human Resource rationalization exercise and its principles including increments should be approved by Governing body.

State Health Society (Delhi) directed that the Executive Committee should be constituted as per guidelines at the earliest. The Executive Committee shall decide the quantum of increment which shall be ratified by Governing Body in its next meeting.

#### 2. Human Resource issues:

- (a) All service Human Resource has been approved under Health System Strengthening- a component of RCH flexible pool. State Health Society (Delhi) approved that a dedicated Program Officer for administrative control of human resource shall be nominated by Directorate of Family Welfare.
- (b) Ten Leprosy Assistant currently in position as per details in **Annexure-8** have been approved for nine month only. As per the administrative approval, it has been informed that the State may like to recruit these personnel against equivalent positions of similar nature if deemed fit.

State Health Society (Delhi) directed that the State Leprosy Officer shall share the recruitment rules of the Leprosy Assistant with all the Program Officer for possible positioning of these personnel in other programs against post with similar qualification. In case they can't be repositioned, their services should be discontinued.

(c) Contractual engagement under National Iodine Deficiency Disorder Control Program (NIDDCP): Five positions under NIDDCP have been approved on deputation. Currently, the contract of the existing personnel is valid upto 30/09/2017.

State Program Officer informed that the contractual engagement have been hired on contract as per approval by the Finance Department of GNCTD. Chairman (SHS) directed that the relevant file should be put up for decision on the matter.

(d) Computer Data Entry Operator: As per the existing policy under National Health Mission, a lump sum amount has been approved for Computer Data Entry Operator. State to

outsource the services to the extent possible. The existing personnel are to be paid through the lump sum amount approved.

State Program Officer (Monitoring and Evaluation) informed that the total amount required for enhancement of existing CDEOs has been approved along with the lump sum amount for enhancement of contractual engagement under National Urban Health Mission. This is being informed to the Program division in Ministry of H&FW, GoI and shall be dealt accordingly in the current year.

- (e) State Health Society (Delhi) was informed that some ongoing human resource (ASHA Coordinators and MIS Experts) have inadvertently not been approved in the current Program Implementation Plan. The positions are being continued as ongoing activities and a communication has been sent to MoHFW, GoI for clarification.
- 3. Construction of Ambedkar Nagar Hospital: State Health Society (Delhi) was informed that in principle approval for construction of 600 bed hospital at Ambedkar Nagar has been received. Since, Rs.46 crores is available as committed unspent in the current financial year, no additional funds have been approved.
- 4. Blood collection and transport van: State Health Society (Delhi) was informed that one van @ Rs. 32 Lakhs has been approved for State Blood Transfusion Centre, GTB Hospital.
- 5. National Ambulance Service: State Health Society (Delhi) was informed that ongoing support for 120 Patient Transport Ambulance @ Rs.20,000 per ambulance per month & 100 Basic Life Support ambulances @ Rs.60,000 per ambulance per month for the first year of operation & Rs.40,000 per ambulance per month thereafter has been approved. State Health Society (Delhi) approved that Rs. 875.80 Lakhs shall be provided to Centralized Accident & Trauma Services (CATS) as per the approvals received.
- 6. Seed Primary Urban Health Centres: State Health Society (Delhi) was informed that 63 Seed Primary Urban Health Centres have been approved for rentals (@ Rs 25,000/- per month), operational cost (@ Rs 15,000/- per month) alongwith ongoing Human resource.
- 7. Untied Fund to Rogi Kalyan Samiti: A total of Rs. 2.87 crores has been approved as per following details:-
- (i) Rs. 50,000 per annum for 60 Seed Primary Urban Health Centres & 181 Delhi Govt. Dispensaries.
- (ii) Rs. 5 Lakhs per annum for 26 hospitals
- (iii) Rs. 2 Lakhs per annum for 16 maternity homes (8 of South Delhi Municipal Corporation & 8 of East Delhi Municipal Corporation)

State Health Society (Delhi) approved that the untied funds for the Municipal Corporation Health Facilities may be routed through Integrated District Health Societies as per current practice.

8. Procurements of Municipal Corporation: State Health Society (Delhi) was informed that:-(a)Funds for procurement of drugs: Rs.128.95 Lakh for 20 M&CW Centres & Rs.127.82 Lakh for 7 Maternity Homes of East Delhi Municipal Corporation &Rs.234.28 Lakh for South Delhi Municipal Corporation has been approved.

(b) Rs. 278.95 Lakhs have been approved for procurement of equipment for South Delhi Municipal Corporation.

State Health Society (Delhi) approved that the approved fund may be utilized as per guidelines. It also approved that the fund may be transferred to the respective Municipal Corporations for procurement as per approvals.

9. PPP for dialysis:- A fund of Rs.1439.08 lakhs have been approved for free dialysis for BPL patients with the direction to adhere to NHM guidelines for setting up new centres. The intervention is being coordinated under the administrative control of Director General Health Services.

State Health Society (Delhi) directed that the project may be implemented as per approved guidelines under National Health Mission.

10. Linen and Laundry management in Hospital – State Health Society (Delhi) was informed that re-validation of Rs. 50 Lakhs have been approved for outsourcing laundry services at MCH block of Guru Teg Bhahadur Hospital.

State Health Society (Delhi) approved that the project may be implemented as per direction from MoHFW, GoI.

11. ASHA Scheme: In the year 2017-18, a target 1000 ASHAs has been kept for NIOS Accreditation. One of the mandatory conditions is that the ASHAs can be trained only at the Accredited venues. State is trying for accreditation of the district level training venues and the unit level training venues will not be accredited in the CFY. As a result the ASHAs will be trained at the district level venues which are at some distance from their residence. Rs. 100/- being given to the will not be sufficient for their daily travel. In the urban scenario, residential training is not being planned and approval for the same has already been taken. The mobility for the district level training may be enhanced to Rs.200/- from Rs.100/-.

Total financial implications for 1000 ASHAs shall be Rs. 10.0 lakhs.

State Health Society (Delhi) approved the proposal to be submitted for approval to MoHFW, GoI.

\_ contd-

# 1. Regarding rectification in base salary of RNTCP Contractual Employees in "Approval of National Health Mission Programme Implementation Plan 2017-18

As per the document "Approval of National Health Mission Programme Implementation Plan 2017-18", there have been differences in the base salary of some of the following RNTCP Contractual employees working in Delhi State.

Sr. No.	Name of the Post	No.	Existing Base salary per month for F.Y. 2016-17	Base salary per month approved in the "Approval of National Health Mission Programme Implementation Plan 2017-18 (B)	
			Am	ount in Rs.	
1	DEO (State TB Cell)	1	18940	18000	
2	DEO IRL	2	15780	15000	
3	DEO STF	1	18940	18000	
3	Other DEO at STBC	1	15780	15000	
4	DEO (Lower Slab) at District level	5	15780	15000	
5	DEO (Middle Slab) at District level	9	17250	16425	
6	DEO (Upper Slab) at District level	11	18940	18000	

State Health Society (Delhi) was informed that the base salary of certain category of RNTCP contractual staff as per the coloumn 'A' in the above mentioned table was proposed & approved in supplementary PIP 2016-17 & the staff are taking this base salary since 1st April, 2016. But as per the "Approval of National Health Mission Programme Implementation Plan 2017-18" the base salary has been approved as per the column 'B' of the above mentioned table which is less than the actual base salary which the RNTCP contractual staff are taking w.e.f. 01.04.2016. A revised proposal for approval by MoHFW was approved for submission.

## 2. Proposal to increase remuneration of Supervisors (STS & STLS)

The base Salary of STS & STLS was proposed in PIP 2017-18 to be equivalent to the post of Senior DOTS Plus & TB HIV Supervisors (Basic from Rs. 17,000/- to Rs. 19,000/-) as per approval in SHS Meeting on 15-03-2016. State Health Society (Delhi) approved the enhancement from the additional 3% of the total HR Budget i.e. Rs 33.56 Lacs approved in c.f.y.

#### Agenda Points-12: National Leprosy Eradication Program

## 1. Approval for ABSULS (ASHA Based Surveillance for Leprosy Suspects)

State Health Society (Delhi) was informed that ASHA based surveillance for Leprosy suspects was launched with effect from 1.7.2017 which is a multi-tiered monitoring system of the surveillance and confirmation of leprosy suspect cases by ASHA workers. There is need to involve ASHA in ASHA Based Surveillance for Leprosy Suspects .With reference to the letter received for approval for any survey or activity of ASHA vide letter no F-3-12/12/2014-ARC/I/3254/2017, a letter requesting for approval was sent and a reply is awaited

2. Involvement of ASHA in Leprosy Case detection campaign

State Health Society (Delhi) was informed that NLEP will be conducting the Leprosy Case detection campaign w.e.f from 24<sup>th</sup> October 2017 to 6 November 2017. For this ASHA involvement along with health workers is imperative as the LCDC involves house to house campaign for leprosy cases. Since, the campaign will involve an expenditure of approximately one Crore rupees ,State Health Society (Delhi) directed that the campaign will be done only if extra fund is approved by the program divison in MoHFW, GoI.

#### Agenda Points No.-13: Immunization

- 1. State Health Society (Delhi) was informed that Intensified Mission Inderdhanush (IMI) campaign to vaccinate all missed children will commence w.e.f. 7<sup>th</sup> October 2017 to achieve the goal 100% immunization. The IMI will be carried out for 7 working days (excluding Sundays, Holidays and Routine Immunization days) on monthly basis. A head count survey, preparation of due list for mobilization of the children and access to the vaccination session, proper planning for IEC at all levels would be key to success of this special drive. Further, Minister (H&FW) Govt. of NCT of Delhi has approved holding of IMI in all districts of Delhi throughout the year, though the mandate of Ministry of Health and Family Welfare, GoI in 3 identified districts only (Shahdara, South East and North). So an additional amount of funds will be required to carry out the activity as Govt. of India will be funding only for 3 selected districts.
- 2. State Health Society (Delhi) approved the submission of proposal to MoHFW, GoI as per following details for reconsideration in Supplementary PIP:
  - Under FMR B.1.1.3.6.1 Fund of Rs. 42 have been approved for AWWs for Head counts and due list preparation under Mission Indradhanush and Routine Immunization.SHS may approve for inclusion of link workers in areas where AWWs/ASHAs are not available.
  - Under FMR C.2.3.a Funds of Rs. 40.28 lakhs was projected for salary of Cold chain technicians it was not approved in ROP 2017-18.. There are 11 district and cold chain technicians are required for maintenance of cold chain equipments. At present there is no cold chain technicians posted at State Vaccine Store. The State will be projecting salary of 12 Cold Chain technicians under Supplementary PIP for IMI. Bio medical engineers available under National Health Mission shall be utilized for maintenance of cold chain till the approvals are received from MoHFW, GoI.

#### Agenda point No.14: Reproductive and Chid Health

State Health Society (Delhi) was informed that the approval for District Early Intervention Centre has been received under PPP mode. Modalities for tendering the same needs to be decided.

State Health Society (Delhi) directed that the proposal may be submitted on file for approval by the Competent Authority.

State Health Society (Delhi) was informed that the State had also proposed for Human Resource for High Dependency Unit / Obstetrical Intensive Care Unit at Safdarjung hospital, Clarification required regarding its approval.

#### NEEV:

Newborn screening has been proposed with the acronym **NEEV** (neonatal early evaluation vision) with the following objectives in mind

- 1. Screening for visible birth defects
- 2. Screening for functional birth defects
  - -Retinopathy of prematurity
  - -Hearing evaluation

 Screening for metabolic birth defects which include screening for congenital hypothyroidism, congenital adrenal hyperplasia and G6PD deficiency.

The proposal was proposed in the State Project Implementation Plan and shall be implemented in 31 birthing facilities in Delhi. This is under the National Scheme "Rashtriya Baal SwasthyaKaryakram" which is aimed at reducing morbidity and improving quality of life. The same was duly approved by the Secretary Health. State Health Society (Delhi) ratified the approval.

#### Agenda point No.15: Adolescent Health Counselors

Twenty seven Adolescent Health Counselors have been approved at four different remunerations. State Health Society (Delhi) approved that to ensure uniformity twenty seven Adolescent Health Counselors may be proposed by the State at a uniform rate within the approved budget.

## Agenda point No.16: Reallocation of approved funds under IEC / BCC under RCH

State Health Society (Delhi) approved that the proposal for reallocation of funds to the district maybe submitted to Mission Director, Delhi State Health Mission on file.

#### Agenda point No.17

In the administrative approval of State PIP 2017-18, there are many discrepancies and at many places the approvals have been restricted.

State Health Society (Delhi) accorded in principle approval to include the discrepancies in the supplementary proposal for clarification by Ministry of Health and Family Welfare.

Meeting ended with the vote of thanks.

Annexure 1

Attendance for the meeting of State Health Society (Delhi) held on 19.09.2017 at Delhi Secretariat

Sr. No			Deptt./ Organization		
1	Mr Raajiv Yaduvanshi	Principal Secretary	Deptt. of Health & Family Welfare		
2	Mr. Sachin Shinde	Mission Director	Delhi State Health Mission		
3	Dr. Sunil Kumar	RDHS (East)	East District		
4	Dr. Hema Kalha	Deputy Director	Ayush		
5	Sh. S.K. Gupta	Deputy Secretary	Finance		
6	Sh. Madhu N.	Statistical Officer	Planning		
7	Dr. N.K. Tangri	DHA	EDMC		
8	Dr. Kumud Bala	Deputy Health Officer	EDMC (HQ)		
9	Sh. Kuldeep Pakad	Special Secretary (UD)	UD		
10	Dr. K.S. Baghotia	Addl. Director-MHS	MHS-PH-III		
11	Dr. Sanjeev Arora	Medical Officer I/c	Delhi Jal Board		
12	Dr. Kirti Bhushan	Director Health Services	Directorate of Health Services		
13	Dr. J.P. Kapoor	Director Family Welfare	Directorate of Family Welfare		
14	Dr. Gautam Kumar	State Program Officer-	Directorate of Family Welfare		
15	Dr. Pankaj Kumar	Asstt Prof. NMHP	IHBAS-NMHP		
16	Dr. Reena Yadav	Program Officer-Imm	Directortate of Family Welfare		
17	Sh. Yogesh Kumar	Public Health Nursing	PHNO-PH-II		
18	Dr. Md. Imteyazul	SMO-Link Officer-PPP	Dialysis		
19	Dr. Devashish	CMO(SAG)-Addl.	NPCDCS		
20	Dr. Vibhor Dua	Central Coordinator	Directorate of Family Welfare		
21	Dr. J.C. Passey	Medical Director-RDHS	Lok Nayak Jai Prakash Hospital		
22	Dr. A.K. Mehta	M.D /RDHS (West)	Deen Dayal Upadhyay Hospital		
23	Mr. Harish Kumar	Deputy Director	Delhi State Health Mission		
24	Dr. Monika Rana	State Program Officer	Delhi State Health Mission		
25	Dr. Nutan Mundeja	State Program Officer	Delhi State Health Mission		
26	Dr. Suresh Seth	State Program Officer	Directorate of Family Welfare		
27	Ms. Sushma Shahi	Training Coordinator	Delhi State Health Mission		
28	Dr.Chitra Rathi	STR	USAID		
29	Dr. Anu Goel	CHEB	Directorate of CHEB		
30	Dr. Jyoti Sachdeva	State Program Officer	Directorate of Family Welfare		
31	Dr. Ruby Kurien	CMO-HQ (M&CW)	(M&CW)		
32	Mr. Virender Singh	SDM	Revenue Department		
33	Dr. S.K. Arora	State Program Officer	NTCP		
34	Dr. Ashwini Khanna	State Program Officer	RNTCP		
35	Dr. Satyajit Kumar	State Program Officer	Directorate of Family Welfare		
36	Dr. S.V. Madhu	State Program Officer	GTB Hospital		
37	Dr. Ritu Yadav	Medical Officer-	DHS		
38	Dr. Saurabh Mishra	DHO (HQ)	SDMC		
39	Dr. Gurdev Singh	CMO I/c	Delhi Cantonment Board		
40	Ms. Pratibha Gandhi	Consultant (RO)			
41	Dr. R. Chandrawati	Deputy DHA (M&CW)	NDMC		
42	Ms. Anita Arora	School Inspector	department of Education		
43	Dr. Bimlesh Yadav	State Program Officer	Directortate of Family Welfare		
44	Dr. Puneeta Mahajan	MD/RDHS North	Dr. BSA Hopspital		

Computer No. 2482



#### State Program Managment Unit DELHI STATE HEALTH MISSION

6th Floor, "A" & "B" wing, Vikas Bhawan-II, Civil LinesDelhi-54, Phone-23812902-04 Fax no. 011-23813540, E-mail-ID: dishmspmu@gmail.com

File. No. F1-18/28/2017-Estt. 1 3/67 20

Dated: 20.06.2017

#### OFFICE ORDER

am directed to convey the approval of competent authority for constitution of committee as per following details:

S.No	Designation	Designation in Committee
1	Directorate General of Health Services	Chairman
2	Mission Director, Delhi State Health Mission	Member
3	Director-Family Welfare	Member
4	Special Secretary-Health(Human Resources)	Member
.5	State Programme Manager, DSHM	Member Secretary

The TOR of the committee is as follows:

- To finalize the Recruitment Rules available for various posts under DSHM as per job responsibilities and prescribed qualification for the post.
- To approve the number of category wise Human Resource which may be hired under DSHM

the committee may complete the work by 20-09-2017.

This issues with approval of the competent authority.

State Programme Manager Delhi State Health Mission

Copy to:

L PS to Secretary, Health & Family Welfare (For information)

2. PS to Director General Health Services

3 PA to Mission Director, DSHM

Signature valid fare

Digitally Signed by Ma dtary-Health (Human Resources), BHATIA

Date 201 V06120 g001911dSManager, DSHM

Reason Approve

26564/2017/SPM

File No.F1-14/5/2016-Finance

Computer No. 2089



## State Program Managment Unit DELHI STATE HEALTH MISSION

6th Floor, "A" & "B" wing, Vikas Bhawan-II, Civil LinesDelhi-54, Phone-23812902-04 Fax no. 011-23813540, E-mail-ID: dshmspmu@gmail.com

File. No. F1-14/5/2016-Finance/ 7 3125 2017

Dated: 26/05/2017

#### NOTIFICATION

State Rogi Kalyan Samiti Cell is constituted for regular interface and monitoring of Rogi Kalyan Samities as per following details with the approval of Competent Authority:

Additional Director, HQ (DGHS)

State Programme Officer, DSHM

Medical Superintendent, Maharishi Valmiki
Hospital
Medical Superintendent, Jag Pravesh Chandra
Hospital
Deputy Director (Finance), DSHM
State Programme Manager, DSHM
State Finance Manager, DSHM
State Finance Manager, DSHM
State Finance Manager, DSHM
Convenor

#### The TOR of the Cell is as follows:

- 1. Facilitate formation and registration of the Rogi Kalyan Samitis
- To place the suggestions feedback received from the District/Hospital Rogi Kalyan Samitis before the State Health Society (Delhi)/Department of Health & Family Welfare, GNCTD for facilitating generic/specific changes required in the system for making delivery of health services better.
- The Cell shall also disseminate district/state directives, guidelines/circulars, memoranda issued by the competent authority from time to time.
- 4 Provide state level interface with concerned outside agencies like PWD, MCD, Horticulture, DJB etc.
- Independently and through the District cell monitor functioning of the RKSs.
- fo conduct inquiries on RKS complaints through district authorities and submit reports. Monitoring follow up action regarding VIP references regarding RKS.
- 7. Ensuring timely releases of funds and monitoring timely utilization of RKS funds.

29/29

Contd:

26564/2017/SPM

8. To receive/examine and evaluate the reports (including the SOEs /UCs/audit reports) from the District RKS cells and prepare consolidated reports for placement before the State Health Society (Delhi)/Department of Health & Family Welfare, GNCTD/State Program Management Unit.

File No.F1-14/5/2016-Finance

- 9. Administrative work related to RKS.
- 10. Any other function / responsibility assigned by the IDHS/SHS/DHFW, GNCTD.

This issues with the approval of competent authority.

State Programme Officer Delhi State Health Mission

#### Copy to:

- 1. PS to Secretary, H&FW, GNCTD
- 2. PA to DGHS
- 3. PA to Director, Family Welfare (DFW)
- 4. PA to MD, DSHM
- 5. All SPO's
- 6. Chairperson, All RKS's
- 7. Member Secretary, All RKS
- 8. Concerned officials

Signature valid

Digitally signed by NU MUNDE IA Date: 261X 05.26 Reason, Approve :02:54 IST

Annexure 4

E-File No.2482



#### State Program Managment Unit DELHI STATE HEALTH MISSION

6th Floor, "A" & "B" wing, Vikas Bhawan-II, Civil LinesDelhi-54, Phone-23812902-04 Fax no. 011-23813540, E-mail-ID: dshmspmu@gmail.com

File No- F1-18/28/2017-Estt. 1 3/4/2017

Dated: 07/06/2017

#### OFFICE ORDER

I am directed to convey the approval of State Health Society (Delhi) for the entitlements as per "The Maternity Benefit Amendment Act, 2017" to all the contractual engagements under DSHM.

The act shall be applicable to all the contractual engagements who were on 12 weeks maternity leave on 01/04/2017.

This issues with approval of competent authority.

State Programme Manager Delhi State Health Mission

#### Copy to:

- 1. PS to Secretary, Health & Family Welfare (For information)
- 2. PA to Special Secretary, DSHM
- 2. PS to Director General Health Services
- 3. PA to Mission Director, DSHM
- 4. Director, Family Welfare
- 5. Mission Director, All IDHS
- 6. All SPO's

Signature valid

Digitally signed by MA 41

Date: 2017 06.07 15:52:46 IST

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Reason





# Susheel K. Gupta & Co.

CHARTERED ACCOUNTANTS

Date: August 24, 2017

To, The Finance Director Delhi State Health Society Delhi

Reg: Concurrent Audit Report of Delhi State Health Society for the period July 01st, 2017 to July 31st, 2017.

Dear Sir,

I hereby enclose concurrent audit report of the Delhi State Health Society for the July Month of the Financial Year 2017-2018 as below-

- 1. Observations and Recommendations of the Auditor
- Audited Trial Balance
- 3. Audited Receipts & Payments A/c
- Audited Income & Expenditure A/c
- 5. Audited Balance Sheet
- Bank Reconciliation Statement

Thanking You

For Susheel K Gupta & Co Chartered Accountant

Susheel Kumar Gupta

Partner



# Susheel K Gupta & Co

CHARTERED ACCOUNTANTS

## Observations & Recommendations

Audit

. .

Concurrent

Auditee

State Health Society

Financial Year

2017 - 2018

**Audit Period** 

July 01st, 2017 to July 31st, 2017

#### 1. Budget Control Register:

During the period of our audit, it has been observed that Budget Control Register has been maintained by the society. As stated, this is a mandatory record as per GOI guidelines.

We recommend that this register must be maintained by the society to comply with GOI guidelines.

## 2. Non-Consumable register/Fixed Asset Register:

Non-consumable Register has been maintained.

### 3. Consumable Register

Consumable Register has been maintained.

### Indexing of Files:

It is observed that society has been maintaining index of files.

## Availability of Form GFR-19A:

It is observed that society is receiving confirmation of balances held at District and expenses incurred in the Form GFR-19A at the year end.

## Advances/ Age analysis:

The society has not been ageing the advances given to various units. It is recommended that society should maintain proper ageing of these advances in the format sent by the Centre Office and should be analysed for non-moving advances and be duly followed up for recovery. Further the fresh advances should be given only after analysing/comparing the advances lying with the units and the monthly expenditures.

#### 7. Advance to Others:

During the period of our audit we observed that The State Health Society had given advances for certain activities; however there is no movement or further advances given in the following mentioned activities;

Particulars	Opening Balance	Fresh Advances	Amount Utilized /Refunded	Closing Balance
Staff Advance	24,333/-	24,534/-	9,534/-	39,333/-
Advance to NLEP.	50,00,000/-	-	-	50,00,000/-
Advance to RNTCP	6,81,53,000/-	-	-	6,81,53,000/-
Advance to CAT's	2,89,29,276.83	-	-	2,89,29,276.83
Advance to MAIDS	56,69,340.52	50,00,0000/-	28,85,818.46/-	77,83,522.06/-
Advance to NBCC Ltd	32,85,37,553/-	-	-	32,85,37,553/-
Advance to PWD for Construction of DGD's	83,34,489/-	-	-	83,34,489/-

We recommend that balance of such advances should be duly reconciled advances from the respective authorities on regular intervals. Further, State should also obtain utilization of given advances on timely basis to ensure efficient allocation of advances.

There is difference in opining balance of the following heads Advance for Asha and State Government Salary, MFP Grant, NUHM Advances, Staff Advance, Advance to RCH for MEP due to rectification entries carried out after Statutory Audit.

#### 8. Staff Advance:

We recommend that the prepaid card system for petty cash expenses should be carried out at all levels to eliminate cash transactions.

#### 9. General Observations:

- a. We observed that proper narration has been mentioned in vouchers entered in Tally software.
- b. We observed that State Health Society is not ensuring the deposit of PF and ESI in respect of contract workers employed through manpower service provider which are working on their payroll. However, the same are duly remitted to the service provider along with service fees.

Susheel K Guptu & Co, Chartered Accountants - Continuation Sheet Concurrent Audit Report of State Health Society - May Month (2017-2018)

- c. We observed that certain payments in respect of GPF deducted are remaining outstanding in bank reconciliation for more than a month. It is advised that State Health Society should ensure timely deposit of PF in credit of concerned state officials.
- d. We Observed that State Health Society is not registered with the Service Tax Department for discharge its liability under Reverse Charge Mechanism.

Thanking You

For Susheel K Gupta & Co Chartered Accountant

Susheel Kumar Gupta M. No.: 098585

Date: August 24, 2017

Firm Registration No.: 018928N

Partner

## An Taken Report on the observation of Concurrent audit For the month of June & July-2017

A lon Taken Report of Concurrent Audit Observations For the Month ending on 31.07.2017

S.No	Subject	Observations	Reply	Remarks
1	Budget Control Register	During the period of our audit, it has been observed that the Budget Control Register has been maintained by the society. As stated, this is a mandatory record as per GOI guidelines.	Please check the observation. As per observation, no action required.  However, there is no format of Budget Control Register. However in FMR Budget is entered and % of expenditure is under approved budget.	
2.	Fixed Assets Register/ non consumable register	Non consumable register has been maintained	No action required.	
3.	consumable register	consumable register has been maintained	No action required.	
4.	Indexing of Files	It is observed that State Health Society has been maintaining indexing of files.	No action required.	
5.	Availability of Form GFR-19A	It is observed that society is receiving confirmation of balance held at District and expenses incurred in the Form GFR-19A at the year end.	No action required. The UC in the form of GFR-19 A is received duly audited by the statutory auditor after closure of books of accounts every year and then account for.	
6.	Advance /Age Analysis	The Society has not been ageing the advances given to various units. It is recommended that Society should maintain proper ageing of these advances in the format sent by the Centre office and should be analyzed for non-moving advances and be duly followed up recovery. Further the fresh advances should	Amount of advance given to district is tallied and regarding unspent balance, it is stated that expenditures are booked on the basis of audited Utilization Certificate at the end of the year which is also tallied.	

,		be given only after analyzing/Comparing the advances lying with the units and the monthly expenditure.		
7.	Advance to Others	During the period of our audit we observed that the state Health society had given advances for certain activities, however there is no movement or further advances given in the following activities.	The advance mention in question, some advances are ongoing and settlement takes place after obtaining the audited UC at the end of the year and some is adjusted or nil at the end of the year like staff advances.	
8.	Staff advances	We recommend that the prepaid card system for petty cash expenses should be carried out at all levels to eliminate cash transactions	From the f.y. 2016-17, no cash advances has been given to the staff. Prepaid cards are issued for imprest advance and transaction in cash is minimum or nil.	
9.	General observation			
a.	We observed that pro tally software	per narration in vouchers entered in	All entries entered in tally with narration.	
b.	ESI in respect of contr manpower service pro	is not ensuring the deposit of PF and act workers employed through ovider which are working on their same are duly remitted to the service ervice fees.	The deposit of EPF and ESI of outsourced staff is duly checked time to time and the statement of EPF and ESI deposit is in the file. The auditor may be check.	
c.	We observed that certain payments in respect of GPF deducted are remaining outstanding in Bank reconciliation for more than a month. It is advised that SHS should ensure timely deposit of PF in credit of concerned state officials.		All the payments related to the GPF is sent to the concerned PAO on time and they should not deposited the same for clearance. No action at SHS level.	
d.		is not registered with the Service tax arge its liability under Reverse Charge	Not applicable.	

## Details of Contractual Engagements of State Health Society (Delhi) whose contract has been renewed.

S.No.	Name	Designation	Contract renewal period
1.	Mr. Arvind Mishra	Communitization Officer	01/07/2017 to
2.	Mr. Alok Kumar Yadav	Logistics Consultant	31/03/2018
3	Ms. Alka Sharma	Accounts Assistant	01/04/2017 to 31/03/2018

#### DIRECTORATE GENERAL OF HEALTH SERVICES GOVT. OF N.C.T. OF DELHI F-17, KARKARDOOMA, SHAHDARA, DELHI-110032 PLANNING BRANCH

E-mail: emoplgdhs.delhi@nic.in F.10/955/2015/DHS/P&S/P.F.-U

Tel.: 011 - 22301248

Dated: 16/11/16

The Mission Director. Delhi State Health Mission. A&B Wing, 6th Floor, Vikas Bhawan - II. New Delhi - 110054

Sub: Engaging Delhi State Health Mission (DSHM) to establish, run and manage the AAMC initiative.

Sir.

Please find enclosed herewith a copy of Cabinet Decision No. 2438 dated 22/10/2016 vide which it was informed that the Cabinet has approved the work be entrusted to Delhi State Health Mission, instead of DHCL.

In this regard, it is submitted that, presently 101 AAMC in private rented premises and 4 in porta cabins have been set up. Further as per direction in the minutes of meeting dated 03/10/2016, regarding implementation of winter action plan for night shelter for year 2016-17, 4 moballa clinics in night shelter will be inaugurated by the Hon'ble Health Minister, GNCTD on 25/11/2016, for which PWD is already in process of establishing the clinics at said locations.

This is for your kind information and necessary action please.

This issues with prior approval of Director General of Health Services.

Yours faithfully,

I nel.: As above.

(Dr. Arun Banerjee) Addi. Director (plg.) Dated:

F.10/955/2015/DHS/P&S/P.F.-I/

Copy to:

- 1. OSD to Hon'ble Minister (Health), GNCTD, 7th Floor, A-Wing, Room No. 702, Delhi Secretariat, I.P. Estate, New Delhi-110002
- 2. All RDHS / ARDHS
- Dr. Nutan Mundeja, Project Coordinator, Delhi State Health Mission, 6th Floor. A&B Wing. Vikas Bhawan-2, Near Metcalf House, Civil Lines, Delhi-110054.
- 4. Sh. A.K. Rajdev, Chief Project Manager (Health), PWD, GNCTD, 6th Floor, MSO Building, I.P. Estate, New Delhi-110002
- 5. PS to Secretary (Health), H&FW Department, GNCTD, 9th Level, Delhi Secretariat, 1P Estate, New Delhi-110002.
- PS to DGHS.

(Dr. Arun Banerjee) Addl. Director (plg.)

Recapt No - 304048/2016/O/o Jt. Secy(O&M)-DH&FW

CONFIDENTIAL CABINET MATTER

GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI GENERAL ADMINISTRATION DEPARTMENT (CO-ORDINATION BRANCH)

DELHI SECRETARIAT, LP. ESTATE, NEW DELHI NUF 93/2016/GAGIUN/dsgadii/ Sci68 - Sci73

Dated. 21/ -/ p -2 o/ 6

TABLED ITEM

## CABINET DECISION NO. 2508 DATED 22 19:2910

Proposal for facilitating establishment of Aam Adami Mohalla Clinics (AAWC) in ports cabins at alles belonging to various land owning agencies of GNCTO and engaging Deini Healthcare Corporation Limited (DHCL) to establish, run and manage the AAMC initiative.

Degistori

The Council of Ministers considered the note of Secretary (H&FVI) After authorations, the Cabinet decided as below-

- (ii) Health Diopart/florid a propose in para-23(i) of the Calainet note seeking exemption from obtaining NGC from the concerned land owning eyency to position temporary ports cabin AAMC was not agreed to instead, the Cabinet directed that each Department shall immediately dispose of all panding NOC requests received from Health/Public Works Departments. The Departments shall review pending requests at the highest level to conclude the decision-making in a fortnight's
- Wherever AAMC works could not be started due to site childulees. Secretary (PVVI) shall identity alternative sites in the near vicinity within a fortnight and report back
- (iii) Any A/AMCs already constructed and being objected to by the local body for want of NOCs shall be relocated as soon as possible Secretary (PWD) shall be personally responsible to implement this
- The Department's proposal in para 23fff) on the management sic of AAMCs was approved with the modification that the work be entrusted to Delhi State Health Mission, instead of the DHCL

-944

(K. K. Sharma) Secretary to the Cabinet

Dated 24-70-201

No.1 35/2016/G/D/CN/dsgeailli 5060-5072

Secretary to Lt. Governor, Govt. of NCT of Delni.

- 2. Addi. Secretary to the Chief Minister, Govt. of NCT of Delha.
- Secretary to Dy. Chief Minister, Goyt, of NCT of Duffit.
- 4. Secretary to Minister, Labour, Govt. of NGT of Deini.
- Secretary to Minister, Health, Govt of NCT of Delhi.
- s. Sestable, to Minister, Tourism, Gost, of NCT of Delhi
- Secretary to Minister, Food and Supply, Gold of NCT of Delhi.
- Secretary (PWD), Govt, of NCT of Dehit, with request to upload ATR on CDMS. 9- Secretary (in & FW). Gove of NGT of Delth, with request to upload ATR on CDMS.
- 10. OSO to Chief Secretary, Govi. of NCT of Done
  - spat Orlices, Language Department, Govt, of NOT of Delhi for translation. Sould file.

	Details of Leprosy Assistant			
S.No	Name of the District	Name of the employee	Date of Initial Joining	Place of Posting
1	North	Rahul	01-11-2010	IDHS North
2	New Delhi	Rakesh Kumar Yadav	01-11-2010	Lady Harding Medical College
3	Shahdara	Renu Bala		Guru Teg Bahadur Hospital
4	West	Vijay Kumar		Deendayal Upadhyay Hospital
5	West	Ritu		Guru Govind Singh Govt Hospital
6	South.	Vikas Lunia	01-11-2010	CDMO SOUTH
7	North-West	Anjali Sharma		IDHS North-West
8	East	Suman Lata		LBS Hospital,Khichripur
9	Central	Harish Yadav		CDMO CENTRAL
10	North-East	Sonia Arora		DPMU (NED)



dshm spmu1 <dshmspmu1@gmail.com>

#### Agenda Points for Meeting of SHS(D) 19/09/2017

Fri, Sep 15, 2017 at 11:00 PM To: Additional Commissioner SDMC <addlcomm-sdmc@mcd.gov.in>, Chief Executive DCB <ceodelhicantt@gmail.com>, Chief Executive Officer <ceodelhi.djb@nic.in>, "Commissioner (EDMC)" <commissioner-edmc@mcd.gov.in>, "Commissioner (NDMC)" <commissioner-ndmc@mcd.gov.in>, "Commissioner (SDMC)" <commissionersdmc@mcd.gov.in>, DHA EDMC <dha.edmc@gmail.com>, DHA NDMC <dha.ndmc@gmail.com>, DHA SDMC <dha.sdmc@gmail.com>, "Director (Medical), Employees State Insurance C" <directorfw@yahoo.com>, "Director (Social welfare)" <dsw@nic.in>, Director CGHS <director\_cghs@ymail.com>, Director CHEB <dir.cheb@nic.in>, Director Community Health Department <csmch@mail.jnu.ac.in>, Director DFW <dirdfw@nic.in>, Director DHS <dirdhs@nic.in>, Director Education <diredu@nic.in>, Director ISM&H <ddhomoeopathy@yahoo.co.in>, Director NICD <dirnicd@gmail.com>, Director NIHFW Deoki Nandan <director@nihfw.org>, divcom <divcom@nic.in>, Dr S K Bansal <skbans@gmail.com>, "Dr. A. K. Saini" <dhs.del-nrhm@nic.in>, "JOINT SECRETARY (NRHM" <mehra.santosh2009@gmail.com>, MHO EDMC <mho-edmc@mcd.gov.in>, MHO NDMC <mho-ndmc@mcd.gov.in>, MHO SDMC <mho-sdmc@mcd.gov.in>, MHO SDMC <nkyorgsec@gmail.com>, MOH Family welfare NDMC <pkmcwcentre@gmail.com>, NGO SOSVA <sosva\_north@yahoo.com>, NGO SOSVA <sosva\_north@rediffmail.com>, NGO-UHRC <info@uhrc.in>, NGO-UHRC <siddharth@uhrc.in>, Polio Cell <poliocelldelhi@gmail.com>, "Pr. Secy (Finance)" <psfin@nic.in>, "Pr. Secy. (Planning)" <psplg.delhi@nic.in>, "Pr. Secy. (UD)" <psud@nic.in>, "Project Dir. DSACS" <delhisacs@gmail.com>, pshealth <pshealth@nic.in>, Secretary NDMC <secretary@ndmcmail.gov.in>, spofwelfare <spofwelfare@gmail.com>, STO Delhi <stodl@rntcp.org>, Principal Hfwtc <principalhfwtc@yahoo.co.in>, "sushma.goel450" <sushma.goel450@gmail.com>, drsushmagoel <drsushmagoel@yahoo.com>, addldhamcw <addldhamcw@yahoo.co.in>, pankaj sharma <pks701@gmail.com>, virender jain <virenderjain64@gmail.com>, cmopndt <cmopndt@gmail.com>, Dean MAMC <deanmamc.2012@gmail.com>, Rajeev Ahuja <rbahuja@gmail.com>, npcdcs delhi <npcdcsdelhi@gmail.com>, Stcc Delhi <ntcpdelhistate@gmail.com>, DSHM SPMU <dshmspmu@gmail.com>, dirsr-dhs.delhi@gov.in, NHMC&H NHMC <principalnhmc@gmail.com>, ARSH DFW <arshdfw@gmail.com>, "Dr. Bimlesh Yadav" <spomhdfw@gmail.com>, addlcomm-sdmc1 <addlcommsdmc1@mcd.gov.in>, psaddlmcd@gmail.com, "B.K." <jdplg@nic.in>, idspdelhi <idspdelhi@gmail.com>, Leprosy DGHS <dghsleprosy@gmail.com>, "Dr. sunil raheja" <drsmraheja@gmail.com>, disasterdhs <disasterdhs@gmail.com>, ntcp@gmail.com, Accounts Finance <dshmfinance@gmail.com>, socialmedicine communityhealth <csmchjnu@gmail.com>, sosva North <mngo.sosva@gmail.com>, Siddharth Agarwal <sids62@gmail.com>, dshm spmu1 <dshmspmu1@gmail.com>, SPM DSHM <dshmspm@gmail.com>

Respected sir/madam,

Please find enclosed files.

Regards PA to MD DSHM (011-23813540)

SHS 19092017.zip

## STATE HEALTH SOCIETY MEETING (DELHI)

No. 2/24/2017-18

## AGENDA POINTS

DATE: 19-09-2017 TIME: 3 PM

VENUE: Conference Hall-3 Level-II, Delhi Secretariat Agenda Point No. 1:-Confirmation of the minutes of the State Health Society (Delhi) meeting held on 09/05/2017.

Agenda Point No. 2:- Action taken report as per the minutes of the State Health Society (Delhi) meeting held on 09/05/2017.

Point	Action Required	Action Taken
No.		6
2(vii)	Status of merger of National	Merger is still pending.
_()	Mental Health Program (NMHP)	the deal and an the
2(xiii)	Recruitment Rules (RR's) for various posts under NTCP, NPHCE and Routine Immunization	A committee has been constituted under the Chairmanship of Director General Heatlh Services as per copy placed at <u>Annexure-1</u> . Two meetings of the committee have been held till date.
2(xv)	Employees Provident Fund	State Health Society (Delhi) and all Integrated District Health Society have been registered for as per the Employees Provident Fund and Miscellaneous Provision Act.  The benefits of the amnesty scheme of the PF Department could be availed by all the societies.
2(xvi)	(b) Proposal for extending the benefit of Patient Care Allowance (PCA) to all categories involved in patient care under National Health Mission.	under National Health Mission is under submission. As per observations of Deputy
2(xviii)	Setting up of State Rogi Kalyar Samiti Cell	The State Rogi Kalyan Samiti Cell has been constituted as per order placed at Annexure-2
10	Application of amendments of Maternity Benefit Act, 1961.	The amendment of Maternity Benefit Act 1961 as approved by State Health Society (Delhi) has been notified as per <u>Annexure-3</u>

12	Payment of wages to the manpower	As per approval of State Health Society
	as per enhanced Minimum Wages.	(Delhi), all contractual engagement under
		State Health Society (Delhi) and all
		Integrated District Health Society are to be
	1 11	paid as per minimum wages notified by
	1 18	Labour Department, GNCTD. This has also
	16	been approved by Ministry of H&FW, GoI.
19	Recruitment of Software Team	No final decision has been taken. The file is
	from open Market	under submission to IT department.

## Agenda Point No. 3:- Submission of Statutory Audit Report 2016-17

The Statutory Audit for the financial year 2016-17 was conducted by M/s K.K. Goel & Associates.

The synopsis of the audit for the F.Y. 2016-17 is enclosed as under:-

Audit report addressed to the Mission director, State Health Society Delhi

Checklist for auditors of State Health Society

Consolidated Balance sheet as on 31.03.2017

Consolidated Income & Expenditure A/c for the year ended 31.03.2017

Consolidated Receipt & Payment A/c for the year ended 31.03.2017

Detail of unspent balances

Detail of advances

Schedule of Cash & Bank Balances.

The detailed report is as per Annexure-4.

S.No.	Observation made by Auditors	Reply / Action taken
1	Fixed assets purchased by units are treated as expenditure and not shown as fixed assets of the society.	As per operational guidelines for financial management of GOI, only those articles will be treated as assets of the society which are procured, used and installed in the Office of the Society and will be capitalized in the balance sheet of the society.
		Assets purchased for units/by units will not be capitalized in the books of the SHS or DHS. Expenditure on procurement and acquisition of such assets will be shown in the Income & Expenditure Statement on the Expenditure side (5.5.3)
2	Fixed assets purchased for state & district during the year treated as revenue exp. And charged to I&E a/c but also capitalized as fixed assets with equivalent credit to Capital fund. Fixed assets should have been directly capitalized and should have been included in Utilization Certificate.	As per operational guidelines for financial management of GOI, only those articles will be treated as assets of the society which are procured, used and installed in the Office of the Society and will be capitalized in the balance sheet of the society.
		While reporting, the utilization certificate should include the expenditure as per Income & Expenditure Account as well as the amount of such Capitalized Assets. (It has often been noted that State overlook or miss out to reflect the capitalized assets in the UCs). (5.5.3)
3.	Fixed assets register not maintained as per GFR, hence improvement is required.	

4.	Inter office fixed assets/dead stocks transfers not supported with any accounting entry evidence and are not reconciled for both ends through accounts. Fixed assets physical verification also not conducted by SHS	Necessary directions given to the administrative department maintaining the fixed assets register as per GFR.
5.	as well as DHS.  As per accounting policies of the society, no depreciation is to be charged on fixed assets.	As per operational guidelines.
6.	Customized tally accounting packaged is not implemented at State and DHS.	Proposal submitted to GoI for approval in the Supplementary PIP 2016-17 was not approved.
7.	Expenditure incurred in certain scheme during pre-approved budget period has been merged with other approved scheme without having any direction to do so.	No such expenditure incurred during the f.y. 2016-17.
8.	Inter office accounts reconciliation process is not in existence at state and DHS.	The accounts of state as well as district have been reconciled at the end of the year on receipt of audited Uc at state level and UC/SOE at district level.
9.	In district level huge amount has been expended towards the payment made to beneficiaries regarding failure cases of sterilization but as per our opinion such expenditure should be recovered from the concerned doctor or takes an insurance policy for such purposes.	Failure is due to uncontrolled reasons. Observation is not agreed.
10.	No manual cash book has been maintained at SHS and DHS but as per GFR guidelines it should be mandatory maintained.	As per approval of Chairman, State Health Society (Delhi), cashbook is maintained on tally due to large number of accounts.
11.	As per GFR guidelines all advances must be settled within maximum period of 90 days, but huge amount is standing since longer period, hence extra efforts is required for eliminated such advances as soon as possible.	Noted. Directions issued to the concerned for settlement of long outstanding advances.

12.	A difference of Rs. 25.40 crores is	No action as arrived
100 To 100	arising in the UC for NCD flexible	The state of the s
	pool.	
13.	As per GFR 2017, Rule no -86 sub	Dedicated accounting personnel are
	clause 2 PFMS shall be implemented	personner are
	till last level to track funds flow and	
	unspent balances but we observed that	
	PFMS has not been implemented	
	wholly. As informed by management, it	
	is not possible due to staff shortage in	
	lower level. Hence we recommended	
	that sufficient staff should be provided	
	for smooth functioning of NHM.	
14.	While audit we found that interest has	No action required
	been distributed according to funds	1.0 detion required
	received in respective programs and	
	treated as grants for next year.	
15.	While audit we found that peripherals	Since there is no account
	has not been prepared BRS hence	family in DDG
	closing bank balance cannot be verified	prepared. BRS cannot be
	with closing cash book balance.	prepared.
16.	While audit we found that EPF for the	EPE denosited till inch 17
	month of April-16 to December 2016	EPF deposited till july-17 except
	not deposited upto 31.03.2017 as per	Jan-17. Necessary direction issued
	non /delay deposit of EPF is attract	to admin deptt. For generating the challan for the same.
	penalty as well as interest hence the	chanan for the same.
	statutory dues must be deposited on and	
	or before the due date however as	9 19
	informed by management this amount	
	has been deposited during the f.y. 2017-	
	18	
17.	There is opening difference amounting	Unable to reconcile.
	to Rs. 72,79,648.03 observed in Routine	to reconcile.
	Immunization program compare to	
	unspent balance shown in balance sheet	
	and UC for the f.y. 2016-17.	

18.	While audit we found that Service	Noted.
	Tax/Vat amount has been paid to	
	vendors during the f.y. 2016-17 but	
	copy of challan not obtained. Hence we	
	are unable to comment whether service	
	tax/vat amount has been deposited in	
	central government/State government	
NUDD OD	account are not.	
NIDDCP	N - Comment of the co	
19	Opening Balance is differ. As per Cash	The difference has been due to
	Book-2412315.27	clerical mistake and has been rectified
	As per Balance Sheet- 2412615.27	rectified
	Difference- 300.00	
	Difference <u>500.00</u>	
20	The following expenditure has been	As advised by finance department
	made towards purchase of chemicals	we have taken quotations &
	but quotation not obtained & purchase	purchased the chemicals with proper
	order also not given.	procedure thereafter.
	0.001 0.00 0.00 0.000	
		acto
21	In the following cases salary has been	All the deductions are made as per
	paid but TDS not deducted	Income Tax Laws
	P	
22	Declaration regarding no other income	Noted.
	earned during the f.y. 2016-17 not	
	obtained for all cases.	
NTCP		
23	Two banks A/Cs were maintained	NTCP has merged with SHS (D) in
	instead of One bank account.	2016-17. So old bank account exists
		and letter for closing of the same
		already been submitted to the Bank.
		minute to me summer

NPHCE		to the section
24	During the course of audit we observed that Interest were not credited in the bank account during the F.Y 2016-17	First time Amount had been transferred in the Bank Account of NPHCE in 2016-17 and it is found that this account is not activated for interest by bank. This has been rectified. Entire interest due till date has been credited to the account on 01/08/2017.
25	As per audited balance sheet of 2015-16, an amt. of Rs.3450000.00 was shown as current liability. But on 01.04.2016 an entry was passed debiting the loan and crediting the grant, for which no supporting documents were on record.	

Submitted for appraisal.

## Agenda Point No. 4: Status of Concurrent Audit 2017-18

Concurrent Audit of SHS (D) has been done till July 2017. Audit Report as per Annexure-5.

Submitted for appraisal.

# Agenda Point No. 5:- Status of Income tax cases of State Health Society (Delhi) which came up for scrutiny by Income Tax Department

Accounts of State Health Society (Delhi) for the financial year 2015-16 has come under scrutiny by Income Tax Department.

Submitted for information.

Agenda Point No. 6:- Renewal of contractual engagements of State Health Society (Delhi).

Contract of three contractual engagements of State Health Society (Delhi) has been renewed w.e.f. 01/07/2017 to 31/03/2018 with the approval of Chairman State Health Society (Delhi) & contract of two employees has been renewed w.e.f. 01/04/2017 to 31/03/2018 consequent upon their resuming duty after completion of Maternity Leave.

State Health Society (Delhi) is requested to ratify the renewal as per **Annexure-6**.

Agenda Point No. 7:- Operationalization of Mohalla Clinics by Delhi State Health Mission.

As per cabinet decision No. 2436 dated 22/10/2016, Cabinet has approved that the work of the management etc. of Aam Admi Mohalla Clinic (AAMC) be entrusted to Delhi State Health Mission instead of the Delhi Health Corporation Limited (DHCL) <u>Annexure-7</u>. The same has been approved by Hon'ble Lieutenant Governor.

As on date, 158 Aam Aadmi Mohalla Clinics have been operationalised in 11 districts of Delhi. Of these, 101 are functioning from rented premises, one in DUSIB Building and the rest in porta cabins fabricated by Public Works Department.

A file for approval by Chairman, Delhi State Health Mission for undertaking the implementation of Aam Aadmi Mohalla Clinic Project by State Health Society (Delhi) has already been submitted.

A dedicated account for funds from State Govt. for management of AAMC is already in place.

Formal handing over of the project by Director General Health Services has to be done.

State Health Society (Delhi) is requested to approve.

#### Agenda Point No. 8:- Relieving of Mission Director

Dr. Tarun Seem, IRS who was on deputation in Delhi State Health Mission since 15<sup>th</sup> October, 2015 has been relieved on 11<sup>/th</sup> August, 2017 with the approval of Hon'ble LG.

Submitted for approval of State Health Society (Delhi).

Agenda Point No. 9:- Financial progress under Delhi State Health Mission:

De	etails of Bu								ileanii i	VI15510II .	
(A	Pool	Budge t appro ved includi ng Comm itted	Reso urce Envel ope	Open ing Bala nce inclu ding adva nces	Fund Recei ved d by SHS( D) uring the f.y. 2017- 18*	Total funds avail able	Proof	.07.2	Balan ce of Fund s as on 31.07. 17 inclu ding Adva nces	% of Expend iture against RE	% of Expenditure against Total availab le balance
(A	RMNC	acs)		1					T		
1	H Flexible Pool	4383.0	3644.0	9067.	2 0.00	941 85	6.	535.6	8881. 8	1 12.22	5.68845
	RCH Flexible	2317.0	1898.0	7623.		762	3	142.7	7480.		1.87213
a.	pool	0	0	3		43	Э.	2	1	6.16	8
С	Routine Immuniz	1728.0	1412.0			520	.0				
C	ation Pulse	0	0	520.0	7	7		63.84	456.23		12.2756
.6	Polio	310.00	310.00	850.1	9	850 9	.1	326.7	523.43	105.4 5 0	38.4311
d	NIDDCP	28.00	24.00	73.53		73.5	53	2.37	71.16	8.47	3.22661 5
	Undistri buted GIA			349.6	3	349	.6	0.00	349.63		
		20926.	13322.	8162.		816	2.	1358.	6803.		16.6420
2	HSS	00	00	1	0.00			34	7	6.49	4
b.	MFP		12222	8108.	4	810 48	8.	1358. 34	6750.1	1	
b. i	NOHP	20027	13322. 00	0.00		0.00	)	0.00	0.00	6.49	16.6420 4
b. ii	NPPCD	20926. 00		53.63		53.6	3	0.00	53.63		
3	NUHM Flexible pool	9672.0 0	8462.0 0	3222.0	6 3216	6. 6438 62	8.	813.9	5624.6	8.42	12.6414
4	CD flexible pool	3409.0 0	3153.0 0	1056.9	9 0.00	1050	6.	353.4 5	703.51		33.4402

2	IDSP	158.00	151.00	35.27	1	35.27	12.49	22.78	7.90	35.4003 1
u	NVBDC	130.00	131.00	33.27		622.2	12.17	22.70	7.50	0.61210
b.	P	82.00	63.00	622.25		5	3.81	618.44	4.64	1
							4		12	- 1
c	NLEP	246.00	233.00	-6.76		-6.76	14.07	-20.83	5.72	208.087
		2923.0	2706.0			406.2	323.0		Bala .	79.5392
d.	RNTCP	0	0	406.20	1	0	9	83.11	11.05	3
5	NCD flexible pool	1212.0	1051.0	750.98	0.00	750.9 8	14.78	736.20	1.22	1.96820
	poor				0.00	183.5	1	7.00.20		
a.	NPCB	703.00	565.00	183.53		3	13.13	170.40		
b.	NMHP	86.00	86.00	97.96		97.96	0.00	97.96	1.22 1.9	1.96820
c.	NPHCE	42.00	42.00	34.58		34.58	0.00	34.58		The second secon
e.	NTCP	251.00	228.00	47.75		47.75	1.32	46.43		
g.	NPCDC S	130.00	130.00	387.16		387.1 6	0.33	386.83		
6	State Specific Scheme	0.00	0.00	0.00	3.25	3.25	389.6	386.37	#DI V/0!	11988.1
a.	ASHA Incentive				3.25	3.25	278.5 0	275.25	1011-	
b.	State Govt. Salary Part	ž.				0.00	111.1	- 111.12	hayan hayan	
	Infrastur e and maintana nce**	924.00	924.00				445.7	445.75	48.24	#DIV/0
	Total	40526. 00	30556. 00	22259. 89	3216. 00	25825 .52	3521. 93	22303. 59	8.69	13.6373

### Agenda Point No. 10:- State Program Implementation Plan 2017-18

Approval for the State PIP 2017-18 has been received vide Letter No. F. No 10(22)/2017-NHM-I dated 18.08.2017.

Some key approvals for consideration of SHS (D) are as follows:-

1. Monthly remuneration of the contractual engagements- It has been informed, in principle 5% of the total HR budget is approved as lump sum for increment and an additional 3% of the total HR budget is approved as lump sum for HR rationalization (where proposed by the State). Exact amount of individual increment is to be decided by State in its Executive Committee. Only those HR / Staff who have completed one year, will be eligible for increment.

It has been directed that HR rationalization exercise and its principles including increments should be approved by SHS Governing Body. Since, no Executive Committee is notified till date.

Submitted for SHS (D) for approval.

#### 2. Human Resource issues:

- (a) All service Human Resource has been approved under Health System Strengthening- a component of RCH flexible pool. A dedicated Program Officer for administrative control needs may be nominated for the activity.
- (b) Ten Leprosy Assistant currently in position as per details in <u>Annexure-8</u> have been approved for nine month only. It is informed that the State may like to recruit these personnel against equivalent positions of similar nature if deemed fit.
- (c) Contractual engagement under National Iodine Deficiency Disorder Control Program (NIDDCP): Five positions under NIDDCP have been approved on deputation. Currently, the contract of the existing personnel is valid upto 30/09/2017.
- (d) Computer Data Entry Operator: As per the existing policy under National Health Mission, a lump sum amount has been approved for Computer Data Entry Operator. State to outsource the services to the extent possible. The existing personnel are to be paid through the lump sum amount approved.
- (e) Some ongoing human resource (ASHA Coordinators and MIS Experts) have inadvertently not been approved in the current PIP. The positions are being continued as ongoing activities and a communication has been sent to MoHFW for clarification.

Submitted to State Health Society (Delhi) for direction.

3. Construction of Ambedkar Nagar Hospital: In principle approval for construction of 600 bed hospital at Ambedkar Nagar has been received. Since, Rs.46 crores is available as committed unspent in the current financial year, no additional funds have been approved.

Submitted for information.

4. Blood collection and transport van: One van @ Rs. 32 Lakhs has been approved for State Blood Transfusion Centre, GTB Hospital.

Submitted for information.

5. National Ambulance Service: Ongoing support for 120 Patient Transport Ambulance @ Rs.20,000 per ambulance per month & 100 Basic Life Support ambulances @ Rs.60,000 per ambulance per month for the first year of operation & Rs.40,000 per ambulance per month thereafter has been approved. This fund shall be provided to Centralized Accident & Trauma Services (CATS).

Submitted for approval.

6. Seed Primary Urban Health Centres: 63 Seed Primary Urban Health Centres have been approved for rentals (@ Rs 25,000/- per month), operational cost (@ Rs 15,000/- per month) and ongoing Human resource.

Submitted for information.

- 7. Untied Fund to Rogi Kalyan Samiti: A total of Rs. 2.87 crores has been approved as per following details:-
- (i) Rs. 50,000 per annum for 60 Seed Primary Urban Health Centres & 181 Delhi Govt. Dispensaries.
- (ii) Rs. 5 Lakhs per annum for 26 hospitals
- (iii) Rs. 2 Lakhs per annum for 16 maternity homes (8 of South Delhi Municipal Corporation & 8 of East Delhi Municipal Corporation)

Submitted for information.

- 8. Procurements of Municipal Corporation:
- (a)Funds for procurement of drugs have been approved for South Delhi Municipal Corporation & East Delhi Municipal Corporation.
- (b) Rs. 278.95 Lakhs have been approved for procurement of equipment for South Delhi Municipal Corporation.

Submitted for approval of State Health Society (Delhi) to release the approved amount to the respective Municipal Corporations for procurement as per approvals.

9. PPP for dialysis:- A fund of Rs.1439.08 lakhs have been approved for free dialysis for BPL patients with the direction to adhere to NHM guidelines for setting up new centres. The intervention is being coordinated under the administrative control of Director General Health Services.

Submitted to State Health Society (Delhi) for information.

10. Linen and Laundry management in Hospital – Re-validation of Rs. 50 Lakhs have been approved for outsourcing laundry services at MCH block of Guru Tek Bhahadur Hospital.

Submitted to SHS (D) for approval to implement the services as per direction of MoHFW.

11. ASHA Scheme: In the year 2017-18, a target 1000 ASHAs has been kept for NIOS Accreditation. One of the mandatory conditions is that the ASHAs can be trained only at the Accredited venues. State is trying for accreditation of the district level training venues and the unit level training venues will not be accredited in the CFY. As a result the ASHAs will be trained at the district level venues which are at some distance from their residence. Rs. 100/- being given to the will not be sufficient for their daily travel. In the urban scenario, residential training is not being planned and approval for the same has already been taken. The mobility for the district level training may kindly be enhanced to Rs.200/- from Rs.100/-.

Total financial implications for 1000 ASHAs being Rs. 10.0 lakhs.

Submitted for approval.

# 1. Regarding rectification in base salary of RNTCP Contractual Employees in "Approval of National Health Mission Programme Implementation Plan 2017-18

As per the document "Approval of National Health Mission Programme Implementation Plan 2017-18", there have been differences in the basic salary of some of the following RNTCP Contractual employees working in Delhi State.

		No.			Base	
		of			salary	
		San			per	
		ctio			mont	
		ned	Ex	Ex	h	
			isti	isti	appro	
		post	ng	ng	ved in	
		S	Ba	an	the	
			se	nu	"Appr	
			sal	al	oval	
			ary	sal	of	
		1.85	per	ary	Natio	
Sr.			mo	for	nal	
N	Name of the		nth	F.	Healt	e de la companya del companya de la companya del companya de la co
o.	Post		for	Y.	h	
			F.	20	Missi	i Alice
	3-5		Y.	16-	on	Name of the Control o
			20	17	Progr	E TOTAL TOTAL
			16-		amme	
			17		Imple	
				(R	menta	Annual salary approved in the "Approval of
				S.	tion	National Health Mission Programme
				in	Plan	Implementation Plan 2017-18
				lac	2017-	
				s)	18	(Rs. in lacs)
			"A			
			,,		"B"	218
		,	10			
	DEO (St.	1	18	2.2		0.75.00 0.00
1	DEO (State		94	2.2	10000	2.16
1	TB Cell)		0	7	18000	2.16

	-	2	15			1 2 2
			78	4.8		
2	DEO IRL		0	9	15000	3.86
		1	18			
			94	2.2		
3	DEO STF		0	7	18000	2.16
		1	15			
	Other DEO at		78	1.8		
3	STBC		0	9	15000	1.80
	DEO (Lower	5	15			
	Slab) at		78	12.		e e
4	District level		0	78	15000	9.80
	DEO (Middle	9	17		4	
	Slab) at		25	18.		8*
5	District level		0	63	16425	17.74
	DEO (Upper	11	18			
	Slab) at		94	25.		
6	District level		0	00	18000	23.80

The base salary of certain category of RNTCP contractual staff as per the coloumn 'A' in the above mentioned table was proposed & approved in supplementary PIP 2016-17 & the staff are taking this base salary from 1st April, 2016. But as per the "Approval of National Health Mission Programme Implementation Plan 2017-18" the base salary has been approved as per the column 'B' of the above mentioned table which is less than the actual base salary which the RNTCP contractual staff are taking w.e.f. 01.04.2016.

The base salary was fixed for 2016-17 after getting due approvals for supplementary PIP 2016-17, but the base salary in Approval of National Health Mission Programme Implementation Plan 2017-18" has been taken as per the approved ROP 2016-17.

## 2. Proposal to increase remuneration of Supervisors (STS & STLS)

The basic Salary of STS & STLS was proposed in PIP 2017-18 to be equivalent to the post of Senior DOTS Plus & TB HIV Supervisors (Basic from Rs. 17,000/- to Rs. 19,000/-) & it had been approved in SHS Meeting on 15-03-2016. An additional 3% of the total HR Budget i.e. Rs 33.56 Lacs is approved in ROP 2017-18 as lump sum for HR Rationalization which can be utilized for the rationalization as approved by SHS.

Agenda Points : NLEP

### 1. Approval for ABSULS ( ASHA Based Surveillance for Leprosy Suspects)

This year ASHA based surveillance for Leprosy suspects was launched with effect from 1.7.2017 which is a multi-tiered monitoring system of the surveillance and confirmation of leprosy suspect cases by ASHA workers. There is need to involve ASHA in ABSULS . With reference to the letter received for approval for any survey or activity of ASHA vide letter no F-3-12/12/2014-ARC/I/3254/2017, a letter requesting for approval was sent and we are awaiting a reply.

#### 2. Involvement of ASHA in LCDC

This year too NLEP will be conducting the Leprosy Case detection campaign w.e.f from 3<sup>rd</sup> October to 17<sup>th</sup> October as directed by GOI. For this ASHA involvement along with health workers is imperative as the LCDC involves house to house campaign for leprosy cases.

#### Agenda Points: Immunization

- 1. Intensified Mission Inderdhanush(IMI) campaign to vaccinate all missed children will commence w.e.f. 7<sup>th</sup> October 2017 under supervision and review of worthy Chief Secretary of Delhi to achieve the goal. The IMI will be carried out for 7 working days (excluding Sundays, Holidays and RI days) on monthly basis. A head count survey, preparation of due list for each mobilization of the children and access to the vaccination session, proper planning for IEC at all levels would be key to success of this special drive. Further, Minister (H&FW) Govt. of NCT of Delhi has approved holding of IMI in all districts of Delhi throughout the year against the mandate of Ministry of Health and Family Welfare, GOI in 3 identified districts only (Shahdara, South East and North). So an additional amount of funds will be required to carry out the activity as Govt. of India will be funding only for 3 selected districts. This is for appraisal and ratification by SHS.
- 2. Approvals as sought from GOI in PIP 2017-18 under various FMRs have not been approved or funds approved are insufficient so SHS may reiterate the approval for all the activities where the funds are insufficient, in supplementary PIP 2017-18. However few essential activities needs approval/ratification of SHS are as under:
  - Under FMR B.1.1.3.6.1 Fund of Rs. 42 have been approved for AWWs for Head counts and due list preparation under Mission Indradhanush and Routine. Immunization.SHS may approve for inclusion of link workers in areas where AWWs/ASHAs are not available, to be submitted in Supplementary PIP2017-18
  - Under FMR C.2.3.a Funds of Rs. 40.28 lakhs was projected for salary of Cold chain technicians it was not approved in ROP 2017-18.. There are 11 district and cold chain technicians are required for maintenance of cold chain equipments. At present there is no cold chain technicians posted at State Vaccine Store. The State will be projecting salary of 12 Cold Chain technicians under

Supplementary PIP for IMI. Till the time approval may be granted for outsourcing the mechanics through identified agencies or on daily wages.

#### Agenda points: Adolescent Health

Proposal sent to GOI in PIP 2017-18 for Rs. 496.54 Lac out of which Rs. 344.23 has been approved in ROP FMR B.10.3

Rs. 303.0 Lac has been allocated at State and Rs. 41.23 at Districts to undertake RMNCH+A activities including PC & PND .

No funds at District have been approved to undertake Interpersonal Communication (IPC) activities and Printing which are vital components of Public Awareness generation activities at District level.

Also, considering wide publicity needed for Intensified Mission Indradhanush, reallocation of fund of Rs. 106.4 Lac to the districts from existing approved pool of Rs. 303.0 Lac at State may be allowed to undertake a battery of activities including the Mid Media, Folk Program, IPC, Event Organization, Printing etc. under RMNCH+A.

#### Agenda Points : RCH

- Approval for District Early Intervention Centre has been received under PPP mode. Modalities for tendering the same needs to be decided.
- 2. State had also proposed for HR for HDU / Obs. ICU at Safdarjung hospital, Clarification required regarding its approval.

**NEEV**: Newborn screening has been proposed with the acronym **NEEV** (neonatal early evaluation vision) with the following objectives in mind

- 1. Screening for visible birth defects
- 2. Screening for functional birth defects
  - -Retinopathy of prematurity
  - -Hearing evaluation
- 3. Screening for metabolic birth defects which include screening for congenital hypothyroidism, congenital adrenal hyperplasia and G6PD deficiency.

The proposal was proposed in the PIP and is meant to be implemented in 31 birthing facilities in Delhi. This is under the National Scheme "Rashtriya Baal SwasthyaKaryakram" which is aimed at reducing morbidity and improving quality of life. The same was duly approved by the Secretary Health and is placed for ratification to the state health society.

Ongoing activities: All ongoing activities have been approved.

In the administrative approval of State PIP 2017-18, there are many discrepancies and at many places the approvals have been restricted.

Submitted to State Health Society (Delhi) for in principle approval to include them in the supplementary proposal for clarification.

Computer No. 2482



## State Program Managment Unit DELHI STATE HEALTH MISSION

6th Floor, "A" & "B" wing, Vikas Bhawan-II, Civil LinesDelhi-54, Phone-23812902-04 Fax no. 011-23813540, E-maii-ID: dshmspmu@gmail.com

File. No. F1-18/28/2017-Estt.

Dated: 20.06.2017

I am directed to convey the approval of competent authority for constitution of committee as per following details:

Designation	Designation in Committee
	Chairman
Directorate General of Health Services	Member
Mission Director, Delhi State Heath Hand	Member
- 'I Waltare	Member
Carretary-Health (Hullan Resource)	Member Secretary
State Programme Manager, DSHM	

The TOR of the committee is as follows:

- 1. To finalize the Recruitment Rules available for various posts under DSHM as per job responsibilities and prescribed qualification for the post.
- 2. To approve the number of category wise Human Resource which may be hired under **DSHM**

The committee may complete the work by 20-09-2017.

This issues with approval of the competent authority.

State Programme Manager Delhi State Health Mission

1.PS to Secretary, Health & Family Welfare (For information)

2.PS to Director General Health Services

3 PA to Mission Director, DSHM

Signature valid fare

Digitally somethy dtary-Health (Human Resources),

goon and Manager, DSHM BHATIA Date: 20012 Reason

Computer No. 2089



#### State Program Managment Unit DELHI STATE HEALTH MISSION

6th Floor, "A" & "B" wing, Vikas Bhawan-II, Civil LinesDelhi-54, Phone-23812902-04 Fax no. 011-23813640, E-mail-ID: dshmspmu@gmail.com

File. No. F1-14/5/2016-Finance/ 73125 2017

Dated: 26/05/2017

#### NOTIFICATION

State Rogi Kalyan Samiti Cell is constituted for regular interface and monitoring of Rogi Kalyan Samities as per following details with the approval of Competent Authority:

Additional Director, HQ (DGHS)
State Programme Officer, DSHM
Medical Superintendent, Maharishi Vahmiki
Hospital
Medical Superintendent, Jag Pravesh Chandra
Hospital
Deputy Director (Finance), DSHM
State Programme Manager, DSHM
State Finance Manager, DSHM

Chairperson
Member
Member (for a period of six month)
Member (for a period of six month)

Member Member Convenor

The TOR of the Cell is as follows:

- 1. Facilitate formation and registration of the Rogi Kalyan Samitis
- 2. To place the suggestions/feedback received from the District/Hospital Rogi Kalyan Samitis before the State Health Society (Delhi)/Department of Health & Family Welfare, GNCTD for facilitating generic/specific changes required in the system for making delivery of health services better.
- 3. The Cell shall also disseminate district/state directives, guidelines/circulars, memoranda issued by the competent authority from time to time.
- Provide state level interface with concerned outside agencies like PWD, MCD, Horticulture, DJB etc.
- 5 Independently and through the District cell monitor functioning of the RKSs.
- To conduct inquiries on RKS complaints through district authorities and submit reports. Monitoring follow up action regarding VIP references regarding RKS.
- Ensuring timely releases of funds and monitoring timely utilization of RKS funds.

Contd:

- · ·

- To receive/examine and evaluate the reports (including the SOEs /UCs/audit reports) from the District RKS cells and prepare consolidated reports for placement before the State Health Society (Delhi)/Department of Health & Family Welfare, GNCTD/State Program Management Unit.
- 9. Administrative work related to RKS.
- 10. Any other function / responsibility assigned by the IDHS/SHS/DHFW, GNCTD.

This issues with the approval of competent authority.

State Programme Officer Delhi State Health Mission

Copy to:

- 1. PS to Secretary, H&FW, GNCTD
- 2. PA to DGHS
  - 3. PA to Director, Family Welfare (DFW)
  - 4. PA to MD, DSHM
  - 5. All SPO's
- 6. Chairperson, All RKS's
  - 7. Member Secretary, All RKS
  - 8. Concerned officials

Digitally signed by AN MUNDE IA Date: 2 1 05.26 1:02:54 IST Reason.

E-File No.2482



### State Program Managment Unit DELHI STATE HEALTH MISSION

6th Floor, "A" & "B" wing, Vikas Bhawan-II, Civil LinesDelhi-54, Phone-23812902-04 Fax no. 011-23813540, E-mail-ID: dshmspmu@gmail.com

File No- F1-18/28/2017-Estt.

Dated: 07/06/2017

#### OFFICE ORDER

I am directed to convey the approval of State Health Society (Delhi) for the entitlements as per "The Maternity Benefit Amendment Act, 2017" to all the contractual engagements under DSHM.

The act shall be applicable to all the contractual engagements who were on 12 weeks maternity leave on 01/04/2017.

This issues with approval of competent authority.

gramme Manager

Delhi State Health Mission

#### Copy to:

- 1. PS to Secretary, Health & Family Welfare (For information)
- PA to Special Secretary, DSHM
- 2. PS to Director General Health Services
- 3. PA to Mission Director, DSHM
- 4. Director, Family Welfare
- 5. Mission Director, All IDHS
- 6. All SPO's

Signature valid

Digitally signed by M BHATIA

06. :52:46 IST



## Susheel K. Gupta & Co.

CHARTERED ACCOUNTANTS

Date: August 24, 2017

To, The Finance Director Delhi State Health Society Delhi

Reg: Concurrent Audit Report of Delhi State Health Society for the period July 01st, 2017 to July 31st, 2017.

Dear Sir,

I hereby enclose concurrent audit report of the Delhi State Health Society for the July Month of the Financial Year 2017-2018 as below-

- 1. Observations and Recommendations of the Auditor
- 2. Audited Trial Balance
- 3. Audited Receipts & Payments A/c
- 4. Audited Income & Expenditure A/c
- 5. Audited Balance Sheet
- 6. Bank Reconciliation Statement

Thanking You

For Susheel K Gupta & Co Chartered Accountant

Susheel Kumar Gupta

Partner



## Susheel K Gupta & Co

CHARTERED ACCOUNTANTS

#### Observations & Recommendations

Audit

à.

Concurrent

Auditee

State Health Society

Financial Year

2017 - 2018

**Audit Period** 

July 01st, 2017 to July 31st, 2017

#### 1. Budget Control Register:

During the period of our audit, it has been observed that Budget Control Register has been maintained by the society. As stated, this is a mandatory record as per GOI guidelines.

We recommend that this register must be maintained by the society to comply with GOI guidelines.

#### 2. Non-Consumable register/Fixed Asset Register:

Non-consumable Register has been maintained.

#### 3. Consumable Register

Consumable Register has been maintained.

#### 4. Indexing of Files:

It is observed that society has been maintaining index of files.

#### 5. Availability of Form GFR-19A:

It is observed that society is receiving confirmation of balances held at District and expenses incurred in the Form GFR-19A at the year end.

#### Advances/ Age analysis:

The society has not been ageing the advances given to various units. It is recommended that society should maintain proper ageing of these advances in the format sent by the Centre Office and should be analysed for non-moving advances and be duly followed up for recovery. Further the fresh advances should be given only after analysing/comparing the advances lying with the units and the monthly expenditures.





#### 7. Advance to Others:

During the period of our audit we observed that The State Health Society had given advances for certain activities; however there is no movement or further advances given in the following mentioned activities;

Particulars	Opening Balance	Fresh Advances	Amount Utilized /Refunded	Closing Balance
Staff Advance	24,333/-	24,534/-	9,534/-	39,333/-
Advance to NLEP .	50,00,000/-	1 -	-	50,00,000/-
Advance to RNTCP	6,81,53,000/-	-	-	6,81,53,000/-
Advance to CAT's	2,89,29,276.83	-	-	2,89,29,276.83
Advance to MAIDS	56,69,340.52	50,00,0000/-	28,85,818.46/-	77,83,522.06/-
Advance to NBCC	32,85,37,553/-	-	-	32,85,37,553/-
Advance to PWD for Construction of DGD's	83,34,489/-	-	-	83,34,489/-

We recommend that balance of such advances should be duly reconciled advances from the respective authorities on regular intervals. Further, State should also obtain utilization of given advances on timely basis to ensure efficient allocation of advances.

There is difference in opining balance of the following heads Advance for Asha and State Government Salary, MFP Grant, NUHM Advances, Staff Advance, Advance to RCH for MEP due to rectification entries carried out after Statutory Audit.

#### 8. Staff Advance:

We recommend that the prepaid card system for petty cash expenses should be carried out at all levels to eliminate cash transactions.

#### General Observations:

- a. We observed that proper narration has been mentioned in vouchers entered in Tally software.
- b. We observed that State Health Society is not ensuring the deposit of PF and ESI in respect of contract workers employed through manpower service provider which are working on their payroll. However, the same are duly remitted to the service provider along with service fees.



- c. We observed that certain payments in respect of GPF deducted are remaining outstanding in bank reconciliation for more than a month. It is advised that State Health Society should ensure timely deposit of PF in credit of concerned state officials.
- d. We Observed that State Health Society is not registered with the Service Tax Department for discharge its liability under Reverse Charge Mechanism.

Thanking You

For Susheel K Gupta & Co Chartered Accountant

Susheel Kumar Gupta

M. No.: 098585

Date: August 24, 2017

Firm Registration No.: 018928N

Partner

## Action Taken Report on the observation of Concurrent audit For the month of June & July-2017

A ...on Taken Report of Concurrent Audit Observations For the Month ending on 31.07.2017

S.No	Subject Observations		Reply	Remarks
1	Budget Control Register	During the period of our audit, it has been observed that the Budget Control Register has been maintained by the society. As stated, this is a mandatory record as per GOI guidelines.	Please check the observation. As per observation, no action required.  However, there is no format of Budget Control Register. However in FMR Budget is entered and % of expenditure is under approved budget.	
2.	Fixed Assets Register/ non consumable register	Non consumable register has been maintained	No action required.	
3.	consumable register	consumable register has been maintained	No action required.	
4.	Indexing of Files	It is observed that State Health Society has been maintaining indexing of files.	No action required.	-
5.	Availability of Form GFR-19A	It is observed that society is receiving confirmation of balance held at District and expenses incurred in the Form GFR-19A at the year end.	No action required. The UC in the form of GFR-19 A is received duly audited by the statutory auditor after closure of books of accounts every year and then account for.	
6.	Advance /Age Analysis	The Society has not been ageing the advances given to various units. It is recommended that Society	Amount of advance given to district is tallied and regarding unspent balance, it is stated that	
		should maintain proper ageing of these advances in the format sent by the Centre office and should be analyzed for non-moving advances and be duly followed up recovery. Further the fresh advances should	expenditures are booked on the basis of audited Utilization Certificate at the end of the year which is also tallied.	

		be given only after analyzing/Comparing the advances lying with the units and the monthly expenditure.		
7.	Advance to Others  During the period of our audit we observed that the state Health society had given advances for certain activities, however there is no movement or further advances given in the following activities.		The advance mention in question, some advances are ongoing and settlement takes place after obtaining the audited UC at the end of the year and some is adjusted or nil at the end of the year like staff advances.	
8.	Staff advances	We recommend that the prepaid card system for petty cash expenses should be carried out at all levels to eliminate cash transactions	From the f.y. 2016-17, no cash advances has been given to the staff. Prepaid cards are issued for imprest advance and transaction in cash is minimum or nil.	
9.	General observation			
3.	We observed that prop tally software	per narration in vouchers entered in	All entries entered in tally with narration.	
Э.	ESI in respect of contra manpower service prov	not ensuring the deposit of PF and ct workers employed through vider which are working on their ame are duly remitted to the service vice fees.	The deposit of EPF and ESI of outsourced staff is duly checked time to time and the statement of EPF and ESI deposit is in the file. The auditor may be check.	
3	deducted are remaining for more than a month.	in payments in respect of GPF g outstanding in Bank reconciliation It is advised that SHS should ensure credit of concerned state officials.	All the payments related to the GPF is sent to the concerned PAO on time and they should not deposited the same for clearance. No action at SHS level.	
	1	s not registered with the Service tax ge its liability under Reverse Charge	Not applicable.	
-	mechanism.			

Details of Contractual Engagements of State Health Society (Delhi) whose contract has been renewed.

S.No.	Name	Designation	Contract renewal period
1.	Mr. Arvind Mishra	Communitization Officer	01/07/2017 to 31/03/2018
2.	Mr. Alok Kumar Yadav	Logistics Consultant	
3.	Ms.Vandana Rawat	Steno cum Computer Assistant	01/04/2017 to 31/03/2018
4.	Ms. Alka Sharma	Accounts Assistant	

Annexure 7 > 1/289

MOST URGENT

#### DIRECTORATE GENERAL OF HEALTH SERVICES GOVT. OF N.C.T. OF DELHI F-17, KARKARDOOMA, SHAHDARA, DELHI-110032 PLANNING BRANCH

E-mail: cmopledbs.delbi@nic.in F.10/955/2015/DHS/P&S/P.F.-U

83831

Tel.: 011 - 22301248

Dated: 12 |ve

Phe Mission Director.
Delhi State Health Mission,
A&B Wing, 6<sup>th</sup> Floor,
Vikas Bhawan - II,
New Delhi - 110054

Sub: Engaging Delhi State Health Mission (DSHM) to establish, run and manage the AAMC initiative.

Sir.

To.

Please find enclosed herewith a copy of Cabinet Decision No. 2438 dated 22/10/2016 vide which it was informed that the Cabinet has approved the work be entrusted to Delhi State Health Mission, instead of DHCL.

In this regard, it is submitted that, presently 101 AAMC in private rented premises and 4 in porta cabins have been set up. Further as per direction in the minutes of meeting dated 03/10/2016, regarding implementation of winter action plan for night shelter for year 2016-17. 4 moballa clinics in night shelter will be inaugurated by the Hon ble Health Minister. GNCTD on 25/11/2016, for which PWD is already in process of establishing the clinics at said locations.

This is for your kind information and necessary action please.

This issues with prior approval of Director General of Health Services.

Yours faithfully.

Lncl.: As above.

(Dr. Arun Banerjee) Addl. Director (plg.) Dated:

1.10/955/2015/DHS/P&S/P.F.-U

Copy to:

- OSD to Hon'ble Minister (Health), GNCTD, 7th Floor, A-Wing, Room No. 702. Delhi Secretariat, I.P. Estate, New Delhi-110002
- 2. All RDHS / ARDHS
- Dr. Nutan Mundeja, Project Coordinator, Delhi State Health Mission, 6th Floor. A&B Wing, Vikas Bhawan-2, Near Metealf House, Civil Lines, Delhi-110054.
- Sh. A.K. Rajdev, Chief Project Manager (Health), PWD, GNCTD, 6th Floor, MSO Building, I.P. Estate, New Delhi-110002.
- PS to Secretary (Health), H&FW Department, GNCTD, 9<sup>th</sup> Level, Delhi Secretariat, 1P Estate, New Delhi-110002.
- 6. PS to DGHS.

(Dr. Arun Banerjee) Addl. Director (plg.)

Details of Leprosy Assistant						
S.No	Name of the District	Name of the employee	Date of Initial Joining	Place of Posting		
1	North	Rahul	01-11-2010	IDHS North		
2	New Delhi	Rakesh Kumar Yadav	01-11-2010	Lady Harding Medical College		
3	Shahdara	Renu Bala		Guru Teg Bahadur Hospital		
4	West	Vijay Kumar		Deendayal Upadhyay Hospital		
5	West	Ritu		Guru Govind Singh Govt Hospital		
6	South	Vikas Lunia	01-11-2010	CDMO SOUTH		
7	North-West	Anjali Sharma		IDHS North-West		
8	East	Suman Lata	04-04-2011	LBS Hospital,Khichripur		
9	Central	Harish Yadav		CDMO CENTRAL		
10	North-East	Sonia Arora	30-09-2014	DPMU (NED)		



## State Program Managment Unit DELHI STATE HEALTH MISSION

6th Floor, "A" & "B" wing, Vikas Bhawan-II, Civil LinesDelhi-54, Phone-23812902-04 Fax no. 011-23813540, E-mail-ID: dshmspmu@gmail.com

File No. F1-18/37/2017-Estt./ 1839 2017

Dated: 13 9 2017

#### **MEETING NOTICE**

Meeting (1/24/2017-18) of the Governing Body of the State Health Society (Delhi) will be held on 19-09-2017 at 03:00 PM in Hall No.3, Level-2, Delhi Secretariat, New Delhi-110002 under the Chairmanship of Chairman SHS (D)/ Secretary (H&FW), GNCTD.

Detailed Agenda shall follow.

Kindly make it convenient to attend the meeting.

Sachin Shinde (IAS)
Mission Director
Delhi State Health Mission

#### Copy to:

- 1. Secretary (H&FW)/Chairman ,SHS (Delhi)- for information
- 2. Divisional Commissioner (Co-Chairperson), Govt. of NCT of Delhi.
- 3. Pr. Secretary (Finance), Govt. of NCT of Delhi- with the request to nominate an officer for the meeting.
- Pr. Secretary (Planning), Govt. of NCT of Delhi with the request to nominate an officer for the meeting.
- 5. Pr. Secretary (UD), Govt. of NCT of Delhi- with the request to nominate an officer for the meeting.
- 6. Joint Secretary (NRHM), Ministry of H&FW, Govt. of India.
- 7. Secretary-cum-Director (Social Welfare), Govt. of NCT of Delhi
- 8. Director (ISM&H), Govt. of NCT of Delhi

- 9. Director (Education), Govt. of NCT of Delhi
- 10. Secretary (NDMC), New Delhi Municipal Council
- 11. Additional Commissioner (Health), EDMC SDMC, NDMC (Delhi)
- 12. Additional Commissioner (Slums), EDMC SDMC, NDMC (Delhi)
- 13. Additional Commissioner (Deptt. of Environmental Sanitation), Municipal Corporation of Delhi
- 14. Director (CHEB), Directorate of General of Health Services, Govt. of India
- 15. Director, Directorate of Health Services, Govt. of NCT of Delhi
- 16. Director, Directorate of Family Welfare, Govt. of NCT of Delhi
- 17. All Regional Director Health Services (RDHS)
- 18. Dean, Maulana Azad Medical College, New Delhi
- 19. Chief Executive, Delhi Cantonment Board.
- 20. Municipal Health Officer, EDMC SDMC, NDMC (Delhi)
- 21. Director Health Administration, EDMC SDMC, NDMC (Delhi)
- 22. MOH Family Welfare, New Delhi Municipal Council
- 23. Chief Executive Officer, Delhi Jal Board
- 24. Director/Health of the Deptt, Community Health Department, National Institute of Health & Family Welfare
- 25. Director/Health of the Deptt., Community Health Department, Jawahar Lal Nehru University, New Delhi.
- 26. Director, National Institute of Communicable Diseases, or his nominee
- 27. Director (Medical), Employees State Insurance Corporation
- 28. Additional Director (HQ), Central Govt. Health Scheme, Govt. of India
- 29. Representative of Department of Health & Family Welfare, GOI
- 30. Project Director, Delhi State AIDS Control Society
- 31. All State Program Officers (RCH-II including Immunization T.B, Leprosy, Cancer Control, Blindness Control, Deafness Control, Iodine Deficiency, Mental Health Programs, Diarrhea Control, National Vector Borne Disease Control Programs (Malaria, Filaria, Dengue, Japanese B encephalitis etc.), and Integrated Disease Surveillance Project), Pulse Polio Immunization
- 32. NGO-SOSVA
- 33. NGO-UHRC

Sachin Shinde (IAS)
Mission Director
Delhi State Health Mission