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Organization & Infrastructure

1.1 MINISTER IN CHARGE

The Ministry of Health & Family Welfare is headed by Minister of Health & Family Welfare – Dr. Harsh Vardhan. He is assisted by Minister of State, Shri Ashwini Kumar Choubey.



Dr. Harsh VardhanHon'ble Union Minister for
Health & Family Welfare

Shri Ashwini Kumar Choubey

Minister for ily Welfare Hon'ble Union Minister of State for Health & Family Welfare

During the year 2018-19, Ministry of Health and Family Welfare was headed by Minister of Health and Family Welfare – Shri Jagat Prakash Nadda. He was assisted by the Ministers of State for Health and Family Welfare Shri Ashwini Kumar Choubey and Ms. Anupriya Patel.

1.2 INTRODUCTION

Ministry of Health & Family Welfare comprises the following two Departments, each of which is headed by a Secretary to the Government of India:

- (a) Department of Health & Family Welfare
- (b) Department of Health Research

1.3 ADMINISTRATION

The Department has taken new initiatives and steps to implement Government programmes and

policies in an efficient and time-bound manner as part of Government's commitment for better health care for all its citizens.

Administration Division is responsible for Personnel Management of the Department. It also attends to service related grievance of the staff in the Department of Health and Family Welfare.

Aadhaar based biometric attendance system has been introduced in the Department. E-office is also being implemented in a phased manner. All payments have been integrated into PFMS.

In order to expedite disposal of files this Ministry has started a motivational Scheme "Officer of the Month" w.e.f. from month of September, 2018. After the inception of this award scheme, the time taken by the officers for disposal of file has significantly reduced.

1.3.1 General Administration

Government e-Market place (GeM) has been encompassed for making procurement of goods and services in the Ministry.

The Ministry started using Government e-Marketplace (GeM) portal from January, 2017 for procurement of common use goods and services. The procurement worth Rs.8,74,10,342/was made during the F.Y. 2018-19 by General Administration of DoHFW. The General Administration of the Ministry has also adopted online e-tendering on Central Public Procurement Portal for various maintenance services, bringing efficiency and transparency in procedures and reducing paper usage.

1.4 CENTRAL HEALTH SERVICE(CHS)

The Central Health Service, which was constituted in 1963, was restructured in 1982 to provide medical manpower to various participating units like Directorate General of Health Services (Dte. GHS), Central Government Health Scheme (CGHS), Government of National Capital Territory (GNCT) of Delhi, Ministry of Labour, Department of Posts, etc. Since inception, a number of participating units like ESIC, NDMC, MCD, Himachal Pradesh, Manipur, Tripura, Goa, etc. have formed their own cadres. JIPMER, Puducherry which has become an autonomous body w.e.f. 14th July, 2008 has gone out of CHS cadre. Govt. of NCT of Delhi, which has made their own cadre namely Delhi Health Service (DHS) for Non-Teaching and GDMO doctors has also gone out of CHS cadre. At the same time, units like CGHS have also expanded. The Central Health Service now consists of four Sub-cadres and the present strength of each Subcadre is as under:

i.	General Duty Medical Officer Sub-	- 2249
	cadre	

- ii. Teaching Specialists sub-cadre 1502
- iii. Non-Teaching Specialists sub-cadre 595
- iv. Public Health Specialists sub-cadre 104

1.4.1 Recruitment in CHS

On the basis of Combined Medical Services Examination (CMSE) - 2017, dossiers of 717 candidates were received from UPSC including Reserve List. These 717 candidates have been allocated cadres viz: Ministry of Defence, Ministry of Railways, MCD, NDMC and Central Health Services on the basis of their Rank, Preference and availability of vacancies. A total of 216 candidates were allotted to CHS Cadre, out of them 202 candidates have been issued offer of appointments including revived offers of previous year CMSEs. Offer of appointment were issued in respect of 51 posts of Specialists Gr. III of Non-Teaching subcadre and 02 posts of Dental Surgeons.

Foundation Training Programme

The Third Foundation Training Programme for Central Health Service Officers was held from 27th August, 2018 to 6th October, 2018 at NIHFW, New Delhi and completed successfully.

1.4.2 Cadre Review

The Central Health Service, which was constituted in 1963, was restructured in 1982 keeping in view the recommendations of 3rd Pay Commission and other administrative consideration. In 1991, the cadre was again restructured keeping in view the recommendations of Tikku Committee. Thereafter, in 2004-05, a Part-Cadre review was done on the basis of the Report submitted by a one-man Committee under Shri S. Hariharan, a retired Deputy Secretary, MoH&FW to reduce stagnation of officers especially for promotion to Senior Administrative Grade (SAG) and Higher Administrative Grade (HAG). Some of the recommendations of the various Committees were implemented.

The Ministry had constituted a Cadre Review Committee on 20th March, 2015 under the Chairmanship of the then Additional Secretary (Health). All recommendations except unification of cadres have been accepted by the Government and accordingly the note for CoS has been forwarded to Cadre Review Division (CRD), DoPT after approval of the Competent Authority. Thereafter, some information was sought by CRD, which has also been forwarded to them. Presently, the matter is pending with CRD.

Shifting of doctors from Administrative posts to Non-administrative posts:

Necessary instructions have been issued vide this Ministry's O.M. dated 13.08.2018 for shifting of CHS doctors from administrative posts to non-administrative posts. As per said instructions, the age of retirement of the doctors belonging to Central Government entities including Central Health Service and Dental doctors under the Department of Health and Family Welfare shall be

62 years unless they exercise the option of posting to Teaching/Clinical /Patient Care etc. in case they desire to continue in service upto the age of 65 years. As on date 77 CHS doctors have been shifted from administrative posts to non-administrative posts.

1.4.3 Amendment in Dental Posts Recruitment Rules, 1997

Dental Posts Recruitment Rules, 1997 have been processed for amendment. Presently the amended RRs are being sent to the Govt. of India Press for printing.

1.4.4 Promotions

During the period under review, the details of promotions effected in respect of CHS officers to various grades are as under:

Sub-cadre	Designation of posts	No.
GDMO	Senior Medical Officer to Chief Medical Officer	33
	Chief Medical Officer to Chief Medical Officer (NFSG)	
	Chief Medical Officer (NFSG) to Senior Administrative Grade	70
TEACHING	Assistant Professor to Associate Professor	73
	Associate Professor to Professor	40
NON- TEACHING	Promotion of SAG level officers to Addl. DGHS (HAG) level post	10
Dental Doctors	Promotion of Dental doctors to various grades	8

1.4.5 Non-Functional Upgradation

Non-Functional upgradation at SAG level has been granted to 95 CHS Doctors (72- GDMO and 23 Teaching Sub-cadre) and at HAG level posts to 162 CHS doctors of GDMO sub-cadre.

1.4.6 Notifications of Appointments in CHS and Confirmation in Service

101 Notifications of appointment in CHS issued.

102 CHS officers are confirmed into service.

1.4.7 Deputation

Vacancy circular to fill up 65 posts on deputation basis has been advertised in all leading newspapers and Employment News.

1.4.8 Inclusion/Exclusion of Posts from CHS Cadre

120 new posts have been encadred in CHS cadre. No post has been decadred.

1.4.9 RTI

The number of RTI applications received in CHS Division is more than 280 and all have been disposed of within stipulated period of time.

1.4.10 Court Cases

41 Court Cases in CAT Benches/High Courts/ Supreme Court have been disposed of during period 1.1.2018 to 31.03.2019.

1.4.11 Consideration of representations of CHS officers for upgradation of ACRs/APARs

In terms of the guidelines issued by the Department of Personnel & Training vide O.M No. 21011/1/2005-Estt.(A) (pt. II) dated 14.05.2009 and O.M. No. 21011/1/2010-Estt.A dated 13.04.2010, 105 representations have been processed for consideration of competent authority and 75 of these cases stand disposed of.

1.4.12 Miscellaneous Issues

- i. 09 Non-Teaching Specialists are posted at Parliament House Annexe(PHA).
- ii. 64 CHS doctors are given rotational posting to serve in Andaman & Nicobar Islands.
- iii. 03 disciplinary cases have been disposed off.

- iv. 12 officers of GDMO sub-cadre have been granted study leave for pursuing higher studies.
- v. Clarification in regard to implementation of DACP to Veterinary Officers was issued to Department of Animal Husbandry, Dairy and Fisheries, Ministry of Home Affairs.

1.5 ACCOUNTING ORGANIZATION

1.5.1 General Accounting Setup

The Secretary is the Chief Accounting Authority. This responsibility is discharged with the help of the Chief Controller of Accounts (CCA) on the advice of the Financial Advisor of the Ministry. The Secretary certifies the appropriation accounts and represents the Ministry in the Public Accounts Committee and Standing Parliamentary Committee on Accounts.

1.5.2 Accounting set up in the Ministry

The MoHFW has two Departments i.e. Department of Health and Family Welfare and Department of Health Research. There is a common accounting wing for all the Departments of MoHFW and Ministry of AYUSH. The Accounts wing functions under the supervision of a Chief Controller of Accounts (CCA) who is assisted by a Controller of Accounts (CA), Deputy Controller of Accounts (DCA), Assistant Controller of Accounts (ACA) and 11 Pay and Accounts Offices(PAOs) (7 PAOs in Delhi and one each at Chennai, Mumbai, Kolkata and Puducherry). The responsibility of the Budget Division of the Ministry is also entrusted to the CCA.

1.5.3 Internal Audit Wing

The internal audit wing of the Department of Health and Family Welfare handles the internal audit work of all the departments of MoHFW and Ministry of AYUSH. There are more than 1042 units of the Health and Family Welfare, 58 units of AYUSH and 26 units of Department of Health Research.

The role of internal audit is growing and shifting from compliance audit confined to examining the transaction with reference to Government rules and regulations to more advanced technique of examining the performance and risk factor of an entity. Internal Audit Wing had conducted Audit of following number of schemes and Institutions implemented/working under MoHFW during 2017-18.

Health & Family Welfare	-	58
Health Research	-	03
AYUSH	-	03
Total	_	64

In 2017-18, 646 Audit Paras have been raised which highlighted financial propriety observations to the tune of Rs. 1262.05 Crore. A total number of 1136 paras were settled during 2017-18, Internal Audit Wing had conducted Audit Adalats for settlement of outstanding paras.

1.5.4 Bhavishya Pension Portal

It is a web responsive, pensioner's service developed to provide single-point web solution for pensioners to obtain comprehensive information relating to status of the pensions and other retirement benefits. Department of Pension & Pensioners' Welfare(P&PW) is working with a vision of ensuring active and dignified life for pensioner. The goal is to ensure payment of all retirement dues and delivery of Pension Payment Order(PPO) to retiring employees on the day of retirement itself. Towards this goal, the DoP&PW has launched an online Pension Sanction & Payment Tracking System called 'BHAVISHYA'. The system provides for online tracking of pension sanction and payment process by the individual as well as the administrative authorities. The system captures the pensioners personal and service particulars. The forms for processing of pension are submitted online. It keeps retiring employees informed about the progress of pension sanction through SMS/E-Mail. The system obviated delays

in payment of pension by ensuring complete transparency. All the PAOs and DDOs of the MoHFW have registered on the Bhavishya Portal.

1.5.5 Public Financial Management System (PFMS)

Hon'ble Prime Minster has emphasized the need for improved financial management in the implementation of Central Plan Schemes and also monitoring of the usage of funds up to the end level beneficiaries including information on end use of the funds.

The Public Financial Management System (PFMS) provides an end-to-end solution for processing payments, tracking, monitoring, accounting, reconciliation and reporting of funds. It has been decided to universalize the use of PFMS to cover all transactions/payments under the Central Sector Schemes. The office of the CCA keeps a close tab on these developments and implements them in a pro-active manner.

All PAOs under the Chief Controller of Accounts of this Ministry are already using PFMS portal for all schemes. Herein e-payments are being released through PFMS to all first level agencies.

1.5.6 Direct Benefit Transfer (DBT)

MoHFW is already implementing the scheme Janani Suraksha Yojna (JSY) under National Health Mission (NHM) on Direct Benefit Transfer.

1.5.7 Non Tax Receipt Portal Module

All PAOs under MoHFW are on board on Non Tax Receipt Portal Module (NTRP) Module of PFMS.

1.5.8 Implementation of Pension Module

To streamline pension related process, the Controller General of Accounts has created a module of pension in PFMS and it is integrated with Bhavishya Portal. The data from Bhavishya Portal is available with Pay & Accounts Offices through PFMS online and there is no need to download or upload the data for pension purpose. All the Pay

and Accounts Offices under MOHFW are on board the Pension Module and all the pension related payments are being made through PFMS.

1.5.9 CDDO Module

Controller General of Accounts has introduced the Cheque Drawings & Disbursing Office(CDDO) Module for smooth and transparent functioning. All the 49 CDDOs under MOHFW are on board the CDDO Module of PFMS.

1.5.10 Employee Information System (EIS)

Employee Information System (EIS) is a centralized module which is integrated with PFMS web based system/Package for Personnel Information and Payroll. It provides comprehensive structural facilities for Drawing and Disbursing Offices working for different Departments/Ministries of the Government of India.

Employee Information System has been implemented in all the Drawing and Disbursing Offices, who are preparing salary bills, under the jurisdiction of MOHFW.

1.5.11 General Provident Fund Module

All Pay and Accounts Offices and merged Drawing and Disbursing Officers under MOHFW are on board the GPF Module of PFMS. All the data pertaining to GPF has been transferred to GPF Module on PFMS.

1.5.12 Dashboard

An online budget dashboard has been developed in MoHFW on which daily pending bill reports and weekly pending bill reports are uploaded on regular basis.

1.5.13 Revision of Pension (7th CPC)

After the implementation of 7th CPC, the total number of revision of Pension cases were 18,396 out of which, PAOs have already revised 17,040 cases. The total percentage of Pension cases revised is 92.63%.

1.5.14 Finance Wing

The Division is responsible for the following functions: -

- Tendering financial advice and concurrence to proposals involving expenditure in respect of MOHFW as well as their autonomous and subordinate offices.
- b. Exercising expenditure control and management, ensuring rationalization of expenditure and compliance of economy measures in accordance with the instructions of the Department of Expenditure including regular monitoring of expenditure.
- c. The Division also administers detailed Demand for Grants i.e. Grant No. 42 for Department of Health and Family Welfare. This involves finalizing the budget estimates / revised estimates / estimating final requirement/surrender of saving, reappropriations and vetting of head wise appropriation accounts.
- d. Coordination, compilation, printing and laying of 'Detailed Demand for Grant (DDG)' of Ministry of Finance in Parliament.
- e. Coordination of all matters relating to the examination of the DDG by the Parliamentary Standing Committee on Finance.
- f. Monitoring of pending PAC/C&AG Audit Paras.
- g. Budgetary position regarding the Grants administered by the Division is given below:-

Demand No. 42

Demand of Health & Family Welfare
(Net allocation)

	BE 2017-18	RE 2017-18	BE 2018-19
Revenue	43843.70	48300.02	50079.60
Capital	3508.81	3250.83	2720.40
Total	47352.51	51550.85	52800.00

The best practices followed for effective expenditure control include : -

- Expenditure progress monitored on database with major head / scheme wise details on daily basis.
- b) MEQ/QEP is reviewed with concerned Programme Division on monthly basis.
- c) Regular and close monitoring resulted in finalization of substantial number of cases of Action Taken Notes (ATNs) in respect of C&AG audit para during the year.

1.6 IMPLEMENTATION OF THE RIGHT TO INFORMATION ACT, 2005

Under the Right to information Act, 2005, 54 Central Public Information Officers (CPIOs) and 29 Appellate Authorities(A/As) have been appointed in the MOHFW(Department of Health & Family Welfare).

In the light of directions of DOP&T, Shri Ashish V. Gawai, Deputy Secretary has been nominated as Nodal Officer to receive the requests for information under RTI Act, 2005 on behalf of all CPIOs for the MOHFW.

The facility of filing application and 1st Appeal under RTI Act, 2005 online through RTI online Web Portal developed by DOP&T has been introduced in Department of Health & Family Welfare w.e.f. 3rd June, 2013 and the general public is sending their RTI applications through this facility in large number.

During the period 01/01/2018 to 31/03/2019, 11879 RTI applications through R&I and online in the RTI Web-portal & 1132 RTI appeals through R&I and online in the RTI Web-portal have been received.

1.7 VIGILANCE

Vigilance Wing of the Department of Health and Family Welfare is under the control of a Joint Secretary to the Government of India who also works as part time Chief Vigilance Officer (CVO). The CVO is assisted by a Director (Vig.), an Under Secretary and Staff of Vigilance Section.

The Vigilance Division of the Ministry deals with vigilance and disciplinary cases having Vigilance angle against the officers of MOHFW, Dte.GHS, CGHS of the Departments of Health and Family Welfare and all autonomous Institutes under the administrative control of the Ministry where there is no independent CVO. The Vigilance Wing also monitors vigilance enquiries, disciplinary

proceedings having vigilance angle in respect of doctors and non-medical/technical personnel borne on the Central Health Service (CHS) and posted in P&T Dispensaries and other institution like Medical Stores Organizations, Port Health Organization, Labour Welfare Organization, etc. The vigilance cases of Department of Health Research (DHR) are also to be looked after by CVO, MoHFW.

In year 2018-2019, following number of actions have been taken/dealt with by Vigilance Division:

Sl. No.	Particulars Particulars	Number
1.	Charge Sheet Issued under Rule 14 of CCS (CCA) Rules	1
2.	Examination of Inquiry Report	6
4.	Instances of Appointment of IOs/POs	5
5.	Advice given to the other Divisions of the Ministry	13
6.	Instances of Suspension review/extension	7
7.	No. of complaints received from CVC for appropriate action and which are under examination/processed	33
8.	No. of CVC complaints (downloaded from CVC portal) disposed off	333
9.	Misc. complaints received from CBI for appropriate action	44
9.	Complaints disposed off	25
10.	Complaints received from other sources	116
10.	Complaints disposed off (including old cases)	121
11.	Cases sent to CVC for advice	6
12.	Cases sent to UPSC for advice	4
13.	Matter referred to DOPT for advice	3
14.	Cases referred to Law Ministry for advice	2
15.	RTI application received and disposed	30
16.	RTI appeal received and disposed	4
17.	No. of court cases processed during the period	5
18.	Vigilance Clearance granted during the period	4325
19.	Cases of Appointment of Chief Vigilance Officer/Vigilance Officer	5
20.	Penalty order prepared and issued	2
21.	Finalization of disciplinary case	1
22.	Bias petitions received from the charged officer	6
23.	Case of prosecution sanction forwarded to DoP&T.	1

The information in Probity Software developed by DoPT was updated by coordinating with all concerned divisions of the Ministry dealing with cadres.

MOHFW observed Vigilance Awareness Week 2018 from 29th October to 3rd November, 2018 with the theme for the year "Eradicate Corruption-Make a New India" as per directions of Central Vigilance Commission. Vigilance Awareness Week commenced with the Integrity Pledge administered to the officers/ staff of the Ministry by Smt. Anupriya Patel, Hon'ble Minister of State for Health and Family Welfare. Ministry also conducted various competitions among the officers and staff of the Ministry. Prizes were awarded to winners of competitions by Smt. Preeti Sudan, Secretary (HFW).

The organizations under this Ministry were directed to organize activities during the Vigilance Awareness Week 2018 by display of banners at vantage points, administering of pledge, interaction with public for redressal of their grievances, usage of generic medicines, surprise inspections, conducting seminars, workshops, debates among students, faculties, children of staffs/ officers, poster competitions, essay writing, quiz, painting competitions inculcating moral/ethical values, and vigilance awareness among the public in sync with the theme of the year 2018. Organizations have also been informed to organize outreach activities in remote area also. The focus of these programs is

to generate vigilance awareness, especially among students and children. The organizations were also requested to display the activities on their respective websites.

1.8 PUBLIC GRIEVANCE CELL

Public Grievances Redressal Mechanism is functioning in the MOHFW as well as in Subordinate/Attached Offices of the Dte GHS and CGHS, Central Government Hospitals, Autonomous Bodies under the Ministry and PSUs as per various guidelines issued from time to time by the Government of India through the Department of Administrative Reforms and Public Grievances.

Centralized Public Grievance Redress and Monitoring System (CPGRAMS) is an online web-enabled system over NICNET developed by NIC, in association with Directorate of Public Grievances(DPG) Department and of Administrative Public Reforms and Grievances(DARPG). It is a web based portal wherein a citizen can register his grievance online, directly with the concerned Ministries/ Departments. The Economic Advisor is the nodal officer for the Department of Health and Family Welfare and all Director/DS level officers have been made Nodal Officers for their respective divisions within the Department. Status of disposal of public grievances received during 2018-19 on CPGRAMS portal (as on 31.03.2019) is as follows:

Year	Opening Balance as on 01-04-2018	Grievance(s) received during 01-04-2018 - 31-03-2019	Grievance(s) disposed of during 01-04-2018 - 31-03-2019	Balance as on 31-03-2019
2018-19	1985	12964	12983	1966

Regular monitoring is conducted to ensure qualitative, quantitative and expeditious disposal of public grievances.

1.9 INFORMATION & FACILITATION CENTRE

To strengthen the Public Redressal Mechanism in the MOHFW, an Information & Facilitation

Centre is functioning adjacent to Gate No. 5, Nirman Bhawan. The Centre, inter-alia, provides information on:

- 1. Information and guidelines to avail financial assistance from Rashtriya Arogya Nidhi and Health Minister's Discretionary Grant.
- 2. Guidelines and instructions regarding issue of 'No Objection Certificate' to Indian doctors to pursue higher medical studies abroad.
- 3. Information and guidelines relating to CGHS and queries relating to the work of the Ministry.
- 4. Receiving petitions/suggestions on Public Grievances.

General queries relating to the Ministry that were received in the Information and Facilitation Centre were disposed of to the satisfaction of all concerned.

1.10 RURAL HEALTH INFRASTRUCTURE

1. Mobile Medical Units

Support to Mobile Medical Units (MMUs) under NHM, now encompassing both NRHM and NUHM, is a key strategy to facilitate access to public health care particularly for people living in remote, difficult, under-served and unreached areas.

As on March, 2019, States/UTs have 2160 mobile medical units which includes MMUs, Mobile health units, mobile medical/health vans, boat clinics, eye vans/ mobile ophthalmic units, dental vans under NRHM and NUHM. Approvals of Rs. 351.02 crore have been accorded to the 36 States/UTs including Operational cost and HR upto in 2018-19.

2. Free Diagnostic Service Initiative

Operational Guidelines on Free Diagnostics Service Initiative were developed in consultation with experts and the States and disseminated among States/UTs on 2nd July, 2015. The guidelines also contain model RFP documents for a range of PPPs such as Tele-radiology, Hub and Spoke model for Laboratory diagnostics and CT Scan diagnostics services in District Hospitals. In FY 2018-19, an approval of Rs. 1218.31 Crore was given for 33 States/UTs. Free Diagnostics Laboratory Services have been implemented in 32 States/UTs (In-house in 22 States/UTs and in PPP mode in 10 States/UTs). Free Diagnostics CT Scan services have been implemented in 24 States/UTs (In-house in 11 States/UTs and in PPP mode in 13 States/UTs and Free Tele-radiology services have been implemented in 10 States/UTs in PPP mode.

3. Biomedical Equipment Maintenance and Management Programme

To address the issue of non-functional equipment across public health facilities, comprehensive guidelines were designed on Biomedical Equipment Management & Maintenance Program (BMMP) and disseminated among States. In FY 2018-19, an approval of Rs. 298.57 crore was approved for 34 States/UTs. BMMP has been implemented in 28 State/UTs (22 States/ UTs in PPP mode and in 6 States/ UTs in In-House mode). The implementation of BMMP has helped in improving diagnostics services in health facilities by making equipment available with 95% uptime, thereby reducing cost of care and improving the quality of care in public health facilities.

4. My Hospital / MeraAspataal Initiative

'MeraAspataal' is a patient centric initiative which is simple intuitive and multilingual ICT based system that captures patients' feedback in a very short time on the services received from the public and private empanelled health facilities through user-friendly multiple channels such as Short Message Service (SMS), Outbound Dialling (OBD) mobile application and web portal. It was established with a goal to improve patient centric care by obtaining patients' feedback using technology based solutions.

MeraAspataal is currently functioning in 24 States. In 5 UTs it was initiated in September, 2016 with a mandate to integrate with CGHs and DHs. In 2018-19, 1698 facilities were integrated into MeraAspataal.

5. Infrastructure status (as on Dec 2018)

Facility	New Construction		Renovation/ Upgradation	
	Sanctioned	Completed	Sanctioned	Completed
SC	27423	20844	17182	14972
PHC	2635	2011	12126	11234
CHC	596	461	6485	5619
SDH	230	135	1113	942
DH	190	124	2757	2181
Others*	1517	2011	877	851
Total	32591	24550	40540	35799

^{*}These facilities are above SCs but below block level.

1.11 CENTRAL MEDICAL SERVICES SOCIETY (CMSS)

Central Medical Services Society (CMSS) has been set up as a Central Procurement Agency (CPA) for drug procurement and distribution for MOHFW. CMSS handles drugs procurement and distribution in a transparent and cost-effective manner. It has set up an IT enabled supply chain infrastructure and has set of warehouses at 20 locations.

Having commenced operations in 2016, CMSS has completed following procurements for centrally sponsored programmes:

Year	Total Procurement	Programme covered
2014-15	NIL	CMSS operation not started
2015-16	Rs. 52.85 Crores	FWP, NVBDCP
2016-17	Rs. 240.75 Crores	FWP, NVBDCP, RNTCP
2017-18	Rs. 1392 Crores	FWP, NVBDCP, RNTCP & NACP
2018-19	Rs. 2027.02 Crores	FWP, NVBDCP, RNTCP, NACP & NVHCP

During the year 2017-18, procurement worth about Rs. 1392 crores was finalized as compared to Rs. 240.75 Cr. for 2016-17. During the year 2018-2019, Procurement worth Rs. 2027.02 Cr. was finalized.

During the financial year 2018-19, following major activities have been undertaken:

- 1. Purchase order for Family Welfare Programme (FWP) for Condoms, Pregnancy Test Kit (PTK), Oral Contraceptive Pills (OCP), Emergency Contraceptive Pills (ECP), Tubal Rings and Condoms have been placed for Rs. 21,31,40,372.
- 2. Purchase orders for NVBDCP for total value of Rs. 160,29,01,955 have been placed.
- 3. Purchase orders for RNTCP have been placed for total value of Rs. 382,40,62,716.
- 4. Purchase orders for NACO have been placed for the total value of Rs. 75,67,099.
- 5. Tenders for other drugs for a total value of Rs. 1700 crores are under process.
- 6. All the 20 warehouses are fully functional and drugs and medicines pertaining to Family Welfare Programme, RNTCP, NVBDCP and NACO are being stored and distributed to the respective nodal officers of the programme.

The e-Aushadhi software is fully functional and all the receipt, inter warehouse transfers and issues are being undertaken through the ERP only.

Medical Store Organization (MSO)

The Medical Store Organization (MSO) was set up in 1942 as a subordinate wing of Directorate General of Health Services under the Ministry of Health & Family Welfare, MSO has 7 Government Medical Store Depots (GMSDs), in New Delhi, Mumbai, Kolkata, Chennai, Hyderabad, Karnal and Guwahati. These 7 GMSDs not only store and stock essential drugs and vaccines but also provide last mile logistic support and deliver stocks to healthcare units in the country. The

GMSDs provide storage and logistic to support important national programmes such as Universal Immunization Programme. MSO finalises rate contracts (RC) for drugs which are used by the various healthcare institutions in the country. Paramilitary forces and CGHS units in the country also use RCs and GMSDs for uninterrupted drug supply. About 1500 Government agencies utilize the supplies from GMSDs.

MSO website has now been refurbished with three level security audit and SSL security certification. Database and web application of MSO has been shifted to NIC Cloud. Drug & Vaccine Delivery Management System (DVDMS) is being implemented by CDAC. Registration of indenters on the new website has begun and the initial web portal is visible at url:http://uatdvdmsodelhi.dcservices.in. Lease line connections have been provided at all divisions of MSO and E-office has been implemented.

MSO has created identities and roles for senior officers at each GMSD at Central Procurement Portal (CPP). MSO has started e-Tendering for procurement of about 1500 generic drugs for the first time, through the CPP for greater accountability and openness in the process of tendering. Rate Contract for 525 generic drugs is being carried out by GMSD, Delhi is in advanced stage. Rate Contract for 503 generic drugs is being carried out by GMSD, Hyderabad is also, in advanced stage. Rate Contract for 23+8 patented drugs has been finalised and orders have been placed through various GMSDs on behalf of indenters and regular supplies are being received at all GMSDs. Procurement and timely distribution of OMM Vaccine and SI Vaccine for Haj pilgrims was carried out for session 2018 by 7 GMSDs. Tender for 2019 has been floated through the NIC e-portal. Procurement of Anti-malarial medicines and Kits for CRPF battalions during the year 2018-19 was finalised. Finalisation of Rate Contract for a period of 1 year for H1N1 drugs has been approved by the competent authority. MSO/ GMSDs procured various generic and patented

drugs worth Rs. 143 crores during the FY 2018-19. MSO/GMSDs also handled program stores worth Rs. 1310 crores.

1.12 EMPOWERED PROCUREMENT WING (EPW)

The EPW Division was carrying out procurement of drugs and commodities under various programme like Revised National Tuberculosis Control Programme (RNTCP), National Vector Borne Disease Control Programme (NVBDCP) and Immunization programme sunder externally aided components (World Bank/GFATM projects) and under domestic budgetary support. Except for the requirements of Immunizations Programme, other procurement is being done by Central Medical Service Society now.

EPW is also acting as a nodal division of MOHFW to implement Government policies related to public procurement. It coordinates Government policies related to implementation of GFR. Public Procurement Policy for Micro and Small Enterprises (MSEs) order-2012, Government e-Marketplace (GeM), DIPP, Make in India order inter alia.

1.13 COMMITTEE ON SEXUAL HARASSMENT

In so far as, the Complaint Committee on Sexual Harassment of Women at work places, Department of Health & Family Welfare, MoHFW is concerned, two complaints were referred to the Committee during the year 2018-19. The Committee after due process, in both cases, finalized the reports and then forwarded to concerned Administrative Divisions of the MOHFW for further action.

The Committee had recommended for sensitizing the officers and staff of the Ministry about the sexual harassment at work places by conducting regular workshops on gender sensitization. The acts which constitute sexual harassment of women at work places may be depicted through posters at appropriate places. The existence of "SHe BOX' and the constitution of Complaints Committee for

Sexual Harassment of Women at Workplaces may be also be made known to all through website of the Ministry.

In all, during the year 2018-19, the Committee met 12 times.

1.14 PERSONS WITH DISABILITIES

The representation of Persons with Disabilities (PwDs) and their welfare related issues are also being dealt by Welfare & PG Section of this Ministry. The representations of Persons with Disabilities in D/o Health & Family Welfare and its attached & subordinate offices, as on 01.01.2018 is as follow:

Groups	Total Emplo- yees	VH	нн	ОН
A	4604	0	1	69
В	4993	1	2	11
C (Excluding Sweeper)	8185	12	20	116
C (Sweeper)	938	0	0	3
Total	18720	13	23	199
Percentage		0.0694	0.1229	1.063

^{*} Information in r/o other PwD is not included.