

159

**Minutes of the 14<sup>th</sup> Governing Body Meeting of State Health Society, Assam held  
on 1<sup>st</sup> August 2018**

The 14<sup>th</sup> Governing Body (GB) Meeting of State Health Society, Assam was held on 1<sup>st</sup> August 2018 at the Conference Hall of Office of the Chief Secretary, Block-C, Assam Secretariat, Dispur at 3-30 p.m. under the Chair of Smti T. Y. Das, IAS, Chief Secretary, Assam.

***The list of members present at Annexure-X.***

The GB discussed on the following Agenda Items:

1. Welcome address by Mission Director, NHM, Assam
2. Confirmation of minutes of the 13th Governing Body Meeting held on 13th Feb. 2018
3. Review of NHM Finances
4. ROP 2018-19 -Administrative approvals
5. State Performance of key impact indicators
6. Burden of Disease in Assam (Including health issues in TG and Chars)
7. Progress under NHM to tackle disease burden
  - a) RMNCH+A
  - b) Health Systems Building Blocks
  - c) DCP and NCD
  - d) State Government Initiatives
8. Approvals of Governing Body Issues
9. Concluding remarks from Chair

At the outset, the Mission Director, NHM welcomed all the members of the Governing Body for the meeting.

**Record of proceeding of the meeting:**

After threadbare discussion on the agenda items, the following resolutions were adopted.

**1. Confirmation of minutes of the 13th Governing Body Meeting held on 13th Feb. 2018:**

The Chairperson, GB acknowledged the timely conduct of the 14<sup>th</sup> GB meeting and confirmed the minutes of the 13<sup>th</sup> GB meeting. The Chairperson, GB suggested to circulate agenda of the meeting to the members in advance.

The Chairperson, GB also suggested that the State Health Mission meeting be held as per schedule.

***[Action: Consultant (Planning), NHM]***

## 2. Review of NHM Finances:

The Mission Director, NHM presented financial progress made under NHM and State Govt. Schemes implemented by State Health Society, Assam for the FY 2017-18 and 2018-19. The Governing Body noted the financial progress for the FY 2017-18 and 2018-19 (upto 30<sup>th</sup> June 2018).

### ➤ Financial Progress for the FY, 2017-18, NHM:

(Rupees in Crore)							
Particulars	RoP Approval	Approval of RE	Opening Balance	Sanction by Gol & GoA to SHS	Credit into Treasury	Total Fund Available	Provisional Exp. Upto March'2018
			1	2	3	4 = (1+3)	5
GOI	1,853.97	1,412.57	218.34	1,208.30	1,208.30	1,426.64	1,174.47
State Share	117.36	117.36	-	138.13	138.13	138.13	138.13
<b>Total</b>	<b>1,971.33</b>	<b>1,529.93</b>	<b>218.34</b>	<b>1,346.43</b>	<b>1,346.43</b>	<b>1,564.77</b>	<b>1,312.60</b>

% of Expenditure against Current Year Fund Sanction by Gol to SHS	97%
% of Expenditure against Fund Available	84%
% of Expenditure against Resource Envelope	86%

### ➤ Financial Progress for the F.Y. 2018-19 (upto 30<sup>th</sup> June 2018), NHM:

(Rupees in Crore)							
Particulars	RoP Approval	Approval of RE	Opening Balance	Sanction by Gol & GoA to SHS	Credit into Treasury (State Exchequer)	Total Fund Available	Exp. Till 30th June 2018
			1	2	3	4 = (1+3)	5
GOI	1,839.40	1,501.66	256.43	552.35	552.35	808.78	181.55
State Share	138.36	138.36	-	27.97	-	-	-
<b>Total</b>	<b>1,977.76</b>	<b>1,640.02</b>	<b>256.43</b>	<b>580.32</b>	<b>552.35</b>	<b>808.78</b>	<b>181.55</b>

% of Expenditure against Current Year Fund Sanction by Gol to SHS	33%
% of Expenditure against Fund Available	22%
% of Expenditure against Resource Envelope	11%

➤ Financial Progress of State Govt. Sponsored Schemes implemented by State Health Society, Assam

▪ State Budget, 2017-18

(Rs. in lakh)					
Sl. No.	Activity/Scheme	Total Budget Provision 2017-18	Amount Credited to SHS A/C	Amt. yet to be received	Utilisation as on March 2018
1	Corpus of Rs.50.00 Crores over next five year for Medical Support for Children below 14 years	500.00	500.00	-	16.50
2	Congenital Heart Disease of Children / Critical Care Cardiac Surgery for BPL & Aid to Kidney Patient	1,525.00	1,525.00	-	1,672.29
3	Arogya Nidhi	100.00	100.00	-	-
4	104 Helpline- Sarathi	100.00	100.00	-	100.00
5	108 Mritunjoy Ambulance	6,013.70	6,013.70	-	5,111.39
6	Operation of Sanjibani	750.00	750.00	-	896.35
7	Operation of Smile	25.00	25.00	-	56.53
8	State Support to Mental Health Programme	20.00	-	20.00	14.51
9	24X7 Riverine Ambulance Service	100.00	100.00	-	6.16
10	Atal Amrit Abhijan Universal Health Assurance	20,156.00	20,156.00	-	11,974.00
11	ASHA Welfare	200.00	200.00	-	101.66
12	Compensation of Wages to Pregnant Women Workers of Tea Gardens	1,800.00	-	1,800.00	-
13	Establishment of Children Hospital at Guwahati	100.00	100.00	-	-
14	Employees Health Insurance Scheme	150.00	150.00	-	-
15	Samarth Assam	100.00	100.00	-	4.27
16	Establishment of JE/AES treatment facility	80.00	-	80.00	-
17	Repairing & Renovation of GMCH Auditorium	30.00	-	30.00	-
18	Cancer Care Programme	20,000.00	20,000.00	-	-

154

(Rs. in lakh)					
Sl. No.	Activity/Scheme	Total Budget Provision 2017-18	Amount Credited to SHS A/C	Amt. yet to be received	Utilisation as on March 2018
19	Establishment of Dhubri Civil Hospital	236.29	236.29	-	-
20	Free Drugs & Consumable	10,000.00	10,000.00	-	8,046.00
<b>Total SOPD:</b>		<b>61,985.99</b>	<b>60,055.99</b>	<b>1,930.00</b>	<b>27,999.66</b>

• State Budget 2018-19 (up to June'2018):

(Rs. in lakh)							
Sl. No.	Activity/Scheme	Budget Provision	Amount Sanctioned	FoC issued	Amount Credited to SHS A/C	Amt. yet to be received	Utilisation as on June'2018
1	Congenital Heart Disease of Children / Critical Care Cardiac Surgery for BPL & Aid to Kidney Patient	874.03	-	-	-	874.03	118.40
2	Corpus of Rs.50.00 Crores over next five year for Medical Support for Children below 14 years	500.00	-	-	-	500.00	
3	104 Helpline	200.00	-	-	-	200.00	
4	108 Mritunjoy Ambulance	4,342.50	-	-	-	4,342.50	1,248.16
5	Operation of Sanjibani	800.00	-	-	-	800.00	
6	24X7 Riverine Ambulance Service	100.00	-	-	-	100.00	
7	Employees Health Insurance Scheme	500.00	-	-	-	500.00	
8	Free Drugs & Consumable	10,000.00	-	-	-	10,000.00	722.48
9	Atal Amrit Abhijan Universal Health Assurance	40,000.00	-	-	-	40,000.00	
10	Samarth Assam	400.00	-	-	-	400.00	4.92
11	Salary of JE/AES Treatment facility	80.00	-	-	-	80.00	
12	Repairing & Renovation of GMCH Auditorium	89.15	89.15	-	-	89.15	

153

(Rs. in lakh)							
Sl. No.	Activity/Scheme	Budget Provision	Amount Sanctioned	FoC issued	Amount Credited to SHS A/C	Amt. yet to be received	Utilisation as on June'2018
13	Compensation of Wages to Pregnant Women Workers of Tea Gardens	5,592.60	-	-	-	5,592.60	
14	Cancer Care Programme	25,000.00	25,000.00	-	-	25,000.00	
15	ASHA Welfare	200.00	-	-	-	200.00	
16	Arogya Nidhi	200.00	-	-	-	200.00	2.41
17	Operation of Smile	25.00	-	-	-	25.00	
18	Capacity Building on Prevention of Disaster Preparedness	1.00	-	-	-	1.00	
19	Support to Charitable PPP Hospital etc.	100.00	-	-	-	100.00	
20	Honorarium of ASHA	3,834.60	-	-	-	3,834.60	
21	NHM Employees Welfare Fund	1,000.00	-	-	-	1,000.00	
22	Swasthya Sewa Utsav	400.00	-	-	-	400.00	
23	State Support to Mental Health Programme	20.00	-	-	-	20.00	
<b>Total SOPD:</b>		<b>94,258.88</b>	<b>25,089.15</b>	<b>-</b>	<b>-</b>	<b>94,258.88</b>	<b>2,096.38</b>

### 3. ROP 2018-19 -Administrative approvals

The Mission Director, NHM highlighted the objectives of the NHM State Programme Implementation Plan 2018-19. The Governing Body noted the RoP approvals for the FY 2018-19.

#### ➤ Resource Envelope for the FY 2018-19:

Particulars	Financial Allocation (Rs. in Crores)	
	2017-18	2018-19
Gol Support	950.62	996.18
Assuming 20% incentive earned by State	105.63	249.05
<b>Total Gol support</b>	<b>1056.25</b>	<b>1245.23</b>
State Share (10%)	117.36	138.36

Particulars	Financial Allocation (Rs. In Crores)	
	2017-18	2018-19
Unspent Balance as on 1 <sup>st</sup> April	356.32	256.43
<b>Total Resource Envelope</b>	<b>1529.93</b>	<b>1640.02</b>
Less, Amount from unspent balance to be used for ongoing activities (committed expenditure)	132.30	107.05
<b>Fund available for New Approvals</b>	<b>1397.63</b>	<b>1532.97</b>

Total 7.2% increase in Resource Envelope in 2018-19 compared to 2017-18

➤ Summary of Approvals for the FY 2018-19:

(Rs in Lakhs)				
FMR	Budget Head	Total Amount Proposed	Total Amount Approved	%age against total approval
U.1	Service Delivery - Facility Based	10,891.53	9,995.33	5.05
U.2	Service Delivery - Community Based	9,758.63	6,734.23	3.40
U.3	Community Interventions	18,071.49	16,444.99	8.31
U.4	Untied Fund	6,609.10	5,783.84	2.92
U.5	Infrastructure	19,548.92	11,010.13	5.57
U.6	Procurement	37,613.02	29,088.88	14.71
U.7	Referral Transport	9,749.67	6,848.89	3.46
U.8	Service Delivery - Human Resource	51,818.40	50,329.05	25.45
U.9	Training & Capacity Building	4,132.76	3,512.33	1.78
U.10	Review, Research, Surveillance & Surveys	484.86	200.83	0.10
U.11	IEC/BCC	4,038.02	2,440.58	1.23
U.12	Printing	2,676.05	2,101.32	1.06
U.13	Quality Assurance	2,984.02	2,333.93	1.18
U.14	Drug Warehousing and Logistics	1,496.67	970.09	0.49
U.15	PPP	3,707.90	3,193.46	1.61
U.16	Programme Management	16,895.14	16,062.45	8.12
U.17	IT Initiatives for strengthening Service Delivery	533.35	221.30	0.11
U.18	Innovations	773.07	129.01	0.07
<b>Total</b>		<b>2,01,782.60</b>	<b>1,67,400.63</b>	<b>84.64</b>
Infrastructure Maintenance		19,670.00	19,670.00	9.95
Amount approved for ongoing activities out of Unspent Balance		10,705.59	10,705.59	5.41
<b>Grand total Approval</b>		<b>2,32,158.19</b>	<b>1,97,776.22</b>	<b>100</b>

➤ **New activities approved for the FY 2018-19:**

- ❖ Approved 878 Health & Wellness Centre as follows-
  - SC level H&WC = 691
  - Urban PHC level H&WC = 54
  - PHC level H&WC = 133
- ❖ New Community Health Centre at Nasatra, Barpeta
- ❖ 15 Nos. of New Primary Health Centre in ATCL Tea Garden area
- ❖ Upgradation of health facility to SDCH - (1) Gohpur FRU (Biswanath Sariali), (2) Pathsala SDCH (Barpeta), (3) Bhetagaon CHC to Bijni SDCH (Chirang) & (4) RNB Gossaigaon SDCH (Kokrajhar)
- ❖ Setting up of 6 HDUs in 100 bedded MCH wings (Dhemaj, Darrang, Jorhat, Nalbari, Karimganj and Nagaon)
- ❖ Strengthening of Bokajan CHC, Karbi Anglong
- ❖ Nutritional support to TB Patients by providing financial support
- ❖ LaQshya initiative (128 health institutions)
- ❖ Replacement of 75 numbers of existing "108 Ambulance"
- ❖ Establishment of 12 New KMC Unit at SNCUs
- ❖ Strengthening of existing in-house Pathological Services
- ❖ PGDHM Courses
- ❖ Upgradation of Labour Room in Barpeta Medical College
- ❖ State Resource Centre for New Born Care at GMCH
- ❖ Website for 25 District Hospitals under e-Prastuti standardization of websites (recommendation of 12<sup>th</sup> GB)

➤ **Conditionalities Framework – 2018-19:**

SN	Conditionality	Incentive/penalty	Source of verification	% Incentive/ Penalty
1.	Incentive or penalty based on NITI Aayog ranking of states on 'Performance on Health Outcomes'	<p>Based on the ranking which will measure incremental changes:</p> <ol style="list-style-type: none"> <li>1. The states showing overall improvement to be incentivized</li> <li>2. States showing no overall increment get no penalty and no incentive</li> <li>3. States showing decline in overall performance to be penalized</li> </ol> <p>% of incentive/penalty to be in proportion to overall improvement shown by the best performing state and the worst performing state: +40 to -40 points</p>	NITI Aayog report	+40 to -40

SN	Conditionality	Incentive/penalty	Source of verification	% Incentive/ Penalty
2.	Grading of District Hospitals in terms of input and service delivery	At least 75% (in Non EAG) and 60% (in EAG and NE states) of all District Hospitals to have at least 8 fully functional specialties as per IPHS: 10 points incentive Less than 40% in Non EAG and 30% in EAG to be penalized up to 10 points	HMIS and NITI Aayog DH ranking report	+10 to -10
3.	Operationalization of Health and Wellness Centers (HWC)	At least 5% of the total budget to be proposed for HWC and CPHC. State to operationalize 15% of SCs and PHCs as HWCs	State report NHSRC report	+20 to -20
4.	% districts covered under Mental health program and providing services as per framework	If 75% of the districts covered: 10 points If 50% districts in Non-EAG and 40% districts in EAG states: incentive 6 points Less than 40% EAG and less than 50% Non EAG to be penalized 6 points Less than 30% in EAG and 40% in Non EAG to be penalized 10 points	Report from Mental Health Division MoHFW	+5 to -5
5.	% of 30 plus population screened for NCDs	15% of 30 plus population screened for NCDs: 10 points incentive 7% of 30 plus population screened for NCDs: 6 points incentive Less than 3% of 30 plus population screened for NCDs: 6 points penalty Less than 2% of 30 plus population screened for NCDs : 10 points penalty (Out of total State population)	Report from NCD division MoHFW and State reports Any Survey data available	+5 to -5
6.	HRIS implementation	Ensure implementation of HRIS for all HRH (both regular and contractual) in the state. Salary invoice and transfer orders to be generated by HRIS. Line listing of all staff for all facilities to be available. HRIS data should match with HMIS reporting. Cases where it doesn't, state should provide reason and numbers. +10 to -10 for HRIS operationalization and +5 to -5 for synchronization with HMIS	HRIS (State) and HMIS report	+15 to -15

cls  
me

149

SN	Conditionality	Incentive/penalty	Source of verification	% Incentive/ Penalty
		State where data matches: 5 points incentive States where data doesn't match: 5 points penalty		
7.	Grading of PHCs (both Urban and rural) based on inputs and provision of the service package agreed	75% (in Non EAG) and (60% in EAG and NE) of the PHCs having 3 or more star rating: 5 points incentive 50% (in Non EAG) and 40% (in EAG and NE) PHCs having 3 or more star rating: 2 points incentive Less than 40% (in Non EAG) and 30% (in EAG and NE) of PHCs having 3 or more star rating to be penalized: 5 points	HMIS	+5 to -5

➤ **RoP Conditionalities:**

- ❖ The State must increase state health budget for primary healthcare by 10% every year. It also should strive to spend at least 2/3rd of the total budget on primary health care.
- ❖ HR Support:
  - The support under NHM is intended to supplement and support, and not to substitute State expenditure.
  - All the support for HR will be to the extent of positions engaged over and above the regular positions as per IPHS and case load.
  - States are encouraged to create sanctioned regular positions as per their IPHS requirement.
- ❖ Conditionalities for FY 2018-19 would be assessed only for those states where the full immunization coverage is at least 85% (EAG and NE State)
- ❖ State should adhere to the clauses mentioned in the MOU signed and achieve the agreed performance benchmarks.
- ❖ State to ensure regular meetings of State and District Health Missions/ Societies.
- ❖ Action points for the release of second tranche of funds:
  - Compliance with conditionalities as prescribed by Department of Expenditure (DoE) under the Ministry of Finance.
  - Ensuring timely submission of quarterly report on physical and financial progress made by the State.
  - Pendency of the State share, if any, based on release of funds by Government of India.
  - Timely submission of Statutory Audit Report and laying of the same before the General Body and intimation to the Ministry.

- 148
- Before the release of funds beyond 75% of BE for the year 2018-19, State needs to provide Utilization Certificates against the grant released to the State up to 2017-18 duly signed by Mission Director and Auditor.
  - State to open accounts of all agencies in PFMS and ensure expenditure capturing.
  - ❖ The accounts of State/ grantee institution/ organization shall be open to inspection by the sanctioning authority and audit by the Comptroller & Auditor General of India under the provisions of CAG (DPC) Act 1971 and internal audit by Principal Accounts Officer of the Ministry of Health & Family Welfare.
  - ❖ All IT solutions being implemented by the State must be EHR compliant.
  - ❖ The State must ensure mandatory disclosures on the state NHM website of all publicly relevant information as per previous directions of CIC and letters from MoHFW.
  - ❖ JSSK, JSY and other entitlement scheme
    - State must provide for all the entitlement schemes mandatorily. No beneficiary shall be denied any entitlement because of cost estimates/any other reason. If there are variations in cost, it may be examined and ratified by the RKS.
    - State/UT to ensure that JSY payments are made through Direct Benefit Transfer (DBT) mechanism through AADHAAR enabled payment system, through NEFT under Core Banking Solution or through A/C payee check.
  - ❖ The 18 major heads of the budget have been divided into three groups. In group-A there are budget heads for infrastructure, HR, Program management, Innovation, IEC and PPP. No additional funds could be added to the approvals under group A budget heads. Group B consists of Training, Quality assurance and Research and evaluations, from which funds cannot be taken out. Group C has the rest of the 9 heads, wherein State as per its requirement may reallocate funds from one head to another for approved activities with the approval of the executive committee and the Governing body of the State Health Society.

#### 4. State Performance of key impact indicators:

The Governing Body noted and acknowledged the significant improvement in the health indicators in the state i.e IMR, U5MR, NMR and MMR over the years, there figures are still high in comparison of the other NE States and other states of the country. MD, NHM informed that different interventions are taken up to improve the health indicators in the state.

Outcome Indicator		SRS, 2011-13	SRS, 2014-16	Achievement
Maternal Mortality Ratio (MMR) per lakh live births	Assam	300	237	63 points drop
	India	167	130	37 points drop

Outcome Indicators		SRS 2013	SRS 2014	SRS 2015	SRS 2016	Achievement in Last 3 Years
Under-5 MR	Assam	73	66	62	52	21 point drop
	India	49	45	43	39	10 point drop

Outcome Indicators		SRS 2013	SRS 2014	SRS 2015	SRS 2016	Achievement in Last 3 Years
Infant Mortality Rate (IMR)	Assam	54	49	47	44	10 point drop
	India	40	39	37	34	6 point drop
Neonatal Mortality Rate (NMR)	Assam	27	26	25	23	4 point drop
	India	28	26	25	24	4 point drop
Perinatal Mortality Rate (PMR)	Assam	28	26	24	20	8 point drop
	India	26	24	23	23	3 point drop

#### 5. Burden of Disease in Assam (Including health issues in TG and Chars):

The GB discussed about the burden of disease in the State. MD, NHM informed that now disease burden shifted from Communicable Disease to Non Communicable Diseases.

MD, NHM informed that special intervention has been taken up to reduced MMR, IMR, TFR in Tea Garden and Char areas. MD, NHM also informed the house that 15 nos. of New Primary Health Centre (PHC) is going to be established at 15 ATCL Tea Gardens of the State in addition to dedicated Mobile Medical Unit (MMU) services at the Tea garden areas. The Chairperson, GB acknowledges the step for primary health care services for Tea Garden population.

- a) The meeting discussed about the issue of teenage pregnancy in the State. MD, NHM informed that, 9 districts of Assam i.e. Goalpara, Dhubri, Bongaigaon, Morigaon, Chirang, Darrang, Nagaon, Barpeta & Karbi Anglong are amongst the top 50 districts in the Country identified for high teenage pregnancy. The Chairperson, GB directed to take necessary steps along with Police department, Social Welfare and Education Department to reduce teenage marriage in the State.

The Chairperson directed Police Department to submit district wise breakup to the Chairperson, GB in respect of spouse violence along with list of persons arrested linked with teenage marriage.

**[Action: Director General of Police, Assam & Consultant (RKSK), NHM]**

- b) The meeting expressed concern about the declining trend of sex ratio at birth published in the SRS report.

It was decided to use the Civil Registration System data to identify the locations where sex ratio at birth is low and take corrective actions under PC-PNDT Act.

**[Action: Director of Health Services (FW), Assam]**

#### 6. Progress under NHM to tackle disease burden:

The meeting noted the interventions and progress made under NHM.

ds  
ml

146

## 7. State Government Schemes implemented by NHM:

The GB noted the progress of State Govt. Schemes implemented by NHM, Assam.

## 8. Approvals of Governing Body: Issues

### (a) Functional of Newly Constructed Health facilities under NHM

The GB noted the functionalization of newly constructed health facilities (i.e MCH Wing- 3 nos, Model Hospital – 22 Nos, PHC- 25 Nos.) in the state.

*[Action: Special Consultant, NHM]*

### (b) Sanction of schemes against in-built savings of various approved schemes

The GB approved the schemes against in-built saving amount of various approved schemes under NHM (at Annexure-A). The GB approved the following 10 nos. of additional works undertaken involving an amount of Rs.64.36 Lakh from the savings amount of the PIP approved schemes under different FMR Codes:

List of 10 nos. of work:

Sl. No	A) Model Hospital (FMR Code of RoP: 2012-13 : B5.1.2)	Amount (Rs. in Lakh)
1	Addl. work for repairing of Bhaktardoba Model Hospital	12.76
2	Addl. work of Jengraimukh Model Hospital	9.00
	<b>B) Repairing and Renovation of 24x7 delivery PHC for the year 2012-13 (FMR Code :B.5.2 )</b>	
3	Installation of Deep Tube well at Lakhipur BPHC by DTH Rig Boring	0.80
4	Repairing and Renovation storm damage Mowamari Sub-Centre in Udalguri District	4.52
5	Electrical repair and renovation of Blood Bank in S.K. Roy Civil Hospital in Hailakandi District.	3.38
	<b>C) Construction of 100 bedded MCH wing with accommodation for staffs at existing Karimganj CH (FMR Code No.B 4.5.1.3 c of PIP:2012-13)</b>	
6	Repair & Renovation including installation of AC at Labour Room of 100 Bedded MCH Wing at Mangaldoi Civil Hospital in Darrang District	3.59
	<b>D) Renovation of RHBPC Complex(Electrical Works)" FMR Code B.5.5.b of PIP2012-13</b>	
7	Supply & installation of 5 KW Solar Power Plant at Amarapur PHC in Tinsukia District	6.60
8	Repair & Renovation of OT complex at Civil Hospital in Goalpara District	4.32
	<b>E) Construction of New PHC , PIP2012-13 (FMR Code B.5.2.2)</b>	

145

9	Balance Work of Gotipara PHC in Dhubri District	8.02
10	Balance Work at Ouguri PHC in Kamrup(M) District	11.38
	<b>Total(A+B+C+D+E) :</b>	<b>64.36</b>

The Chairperson, GB also directed to share the report of third party evaluation of Civil Works taken up under NHM in the next GB meeting

**[Action: Special Consultant, NHM]**

**(c) Sanction of schemes from amount returned by Districts**

The GB discussed about the schemes proposed to be taken up from unspent infrastructure fund refunded by the districts to the State Health Society. MD, NHM informed that unspent amount of Rs. 22.36 Crores has been refunded by the districts to the State Health Society.

The GB accorded approval for 37 nos. of schemes involving an amount of Rs.16.438 Crore out of the unspent infrastructure fund refunded by districts.

**List of 37 nos. of scheme:**

Sl. No.	Name of scheme	Amount (Rs. in Lakh)	Remarks
A	B	C	D
1	Estimate for providing safe drinking water in GNM School at Mangaldai for Rs. 3.00 Lakh, proposal submitted by DC, Darrang	3.00	The amount required for providing safe drinking water in GNM School.
2	Estimate for balance work of GNM School & Hostel Building Complex (Phase-I) at Kokrajhar for Rs.50,12,138.00, estimate submitted by PE (C), Bongaigaon	50.12	The work for GNM School and Hostel Building Complex (Phase-I) at Kokrajhar was allotted at a contract price of Rs. 456.29 Lakhs. 95% progress was achieved and expenditure incurred of Rs. 426.29 Lakhs. The work was withdrawn from the original Contractor due to occupation of the building by Army Personnel. The original estimate was prepared as per APWD SOR 2004-05. The estimate for balance work has been prepared as per SOR 2013-14 for completion of the remaining works. The increase in amount is mainly due to change of SOR.

Sl. No.	Name of scheme	Amount (Rs. in Lakh)	Remarks
A	B	C	D
3	Estimate for drain at Kohora Model Hospital for Rs.5,46,519.00	5.46	The Kohora Model Hospital has been completed and handed over. The expenditure incurred is Rs. 493.94 lakhs. The additional amount is required for construction of the stone masanory drain which is very much essential to drain out the rain water coming from the highway side as the Model hospital is located by the side of NH37 at lower level.
4	Estimate for balance addl. length of Boundary wall (832m) for Kachuadam Model Hospital for Rs.57,15,008.00	57.15	The Kachuadam Model Hospital has been completed and handed over. The expenditure incurred is Rs. 480.50 lakhs. The estimate for Model Hospital was prepared as model estimate where in 300 mtr length boundary wall was considered. In this case the total length of boundary wall required 832 mtr. The amount proposed for the remaining 532mtr length of boundary wall.
5	Drawing of HT Line for 350 Mtrs. for Dhaman Halmari PHC in Dibrugarh District for Rs.1.87 Lakh	1.87	The estimate was prepared as model estimate where drawal of HT Line was not considered. The HT line is at a distance of 350 Mtr from the PHC. To make the PHC functional drawal of HT line of 350 mtr is very much essential. The additional cost of drawing HT is required as per APDCL estimate.
6	Repair and renovation of Garubandha BPHC in Sonitpur District	53.81	The existing Hospital Building of Garubandha BPHC is a very old Assam Type Building which require major repair and renovation. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS
7	Construction of boundary wall with iron gate (main entrance) and construction of overhead tank at Badarpur PHC in Karimganj District	20.89	In the interest of safety of the PHC construction of boundary wall with entrance gate and overhead tank for running water supply are necessary. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS

cls  
ML

Sl. No.	Name of scheme	Amount (Rs. in Lakh)	Remarks
A	B	C	D
8	Repairing of Udharbond BPHC including Doctors Quarters in Cachar District	22.21	Repairing of Udharbond BPHC including Doctors Quarters is necessary for proper functioning of the BPHC. Provision made in the estimate are repairing of the Main hospital building including replacement of the damaged water supply system and replacement of damaged electrical wirings and fittings. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS
9	Repairing of Hatijan SC under Hapjan BPHC in Tinsukia District	6.18	The govt. building of Hatijan SC requires repairing for proper functioning. The SC is not under H&WC. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS
10	Repairing and Renovation of NBSU and 10 Bedded ward at Satrasal MPHC in Dhubri District.	3.48	The NBSU and 10 Bedded ward at Satrasal MPHC is in deplorable condition. In order to make the NBSU functional, the repairing of the same is proposed. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS
11	Repairing and Renovation of old District Drug store to be used as Urban Health Centre in Tinsukia District.	11.37	The amount required for renovation of the existing old District Drug Store to be used as Urban Health Centre in Tinsukia District. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS
12	Repairing and Renovation of Labour Room, gynaecology OT, Drainage System at Garmur SDCH in Majuli District.	14.91	The amount required for Repairing and Renovation of Labour Room, gynaecology OT, Drainage System at Garmur SDCH in Majuli District. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS
13	Repairing and Renovation of Hospital building at Bezera FRU in Kamrup District	26.30	The existing hospital building of Bezera FRU is very old Assam Type Building. In order to proper functioning of the FRU repairing of the hospital building is essential. Provision made in the estimate are repairing of the Main hospital building including replacement of the damaged water supply system and replacement of damaged electrical wirings and fittings. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS.

Sl. No.	Name of scheme	Amount (Rs. in Lakh)	Remarks
A	B	C	D
14	Repairing and Renovation of Hospital building at North Guwahati PHC in Kamrup District	23.16	The existing hospital building of North Guwahati PHC is very old Assam Type Building. In order to proper functioning of the FRU repairing of the hospital building is essential. Provision made in the estimate are repairing of the Main hospital building including replacement of the damaged water supply system and replacement of damaged electrical wirings and fittings. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS.
15	Repairing and Renovation of Borni Sub Centre damaged by Storm in Kamrup District.	7.79	The amount required for repairing the damages caused by storm of the Sub Centre to make the sub-centre functional. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS
16	Repairing and Renovation of GNM School & Hostel Building at Goalpara	15.61	The Hostel Building of GNM in Goalpara was completed in 2010-11. The amount required for repairing of roof leakage, toilet block and doors & windows. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS
17	Repair/Renovation of Main Hospital Building with construction of a new OPD building at Kawaimari FRU under Samaguri BPHC in Nagaon District.	61.48	The work mainly involves repair and renovation of the Main Hospital which includes repairing of the damaged water supply & sanitary systems and electrical works. The proposal also includes construction of a new OPD building for the FRU. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS
18	Drawing of HT line from 700 metres of Rajatila PHC in Cachar District.	2.97	The estimate for Rajatila PHC was prepared as model estimate and HT line from 700 mtr distance was not considered. The additional cost of drawing of HT line is as per APDCL estimate.

Sl. No.	Name of scheme	Amount (Rs. in Lakh)	Remarks
A	B	C	D
19	Construction of Community Health Centre (Model Hospital) at Jiyakur Reserve in Kamrup(R) District under NHM	170.29	The work for ( Model Hospital) at Jiyakur Reserve in Kamrup(R) District was allotted at a contract price of Rs. 482.46 lakhs. 20% progress was achieved and expenditure incurred of Rs. 97.31 lakhs. The work of Jiyakur Reserve Model Hospital was withdrawn from the original Contractor due to unsatisfactory progress. The original estimate was prepared as per APWD SOR 2010-11. The estimate for balance work has been prepared as per SOR 2013-14 for completion of the remaining works. The increase in amount is mainly due to change of SOR and GST.
20	Construction of Boundary Wall with Gate at District Drug Ware House in Dibrugarh District	11.58	The work for District Drug Ware House in Dibrugarh District was allotted at a contract price of Rs. 58.25. The work has been completed and handed over without boundary wall. The expenditure incurred is Rs. 25.50 Lakhs. For safety of the district drug ware house, construction of Boundary Wall is necessary. The estimate is prepared by Site Engineer, NHM and forwarded by Joint DHS.
21	Construction of Ornamental Grill at the open area of the ramp at MCH Wing at Dhemaji, Nalbari, Mangaldai & Karimganj	9.60	The work for MCH Wing at Dhemaji, Nalbari, Mangaldai & Karimganj was completed and handed over. There is no provision for ornamental grill work in the original estimate. In the interest of safety of the patients and the attendants coming to the MCH Wing, Ornamental Grill at the open area of the ramp in the MCH Wing is very much essential. The amount required for Construction of Ornamental Grill at the open area of the ramp at MCH Wing at Dhemaji, Nalbari, Mangaldai & Karimganj

Sl. No.	Name of scheme	Amount (Rs. in Lakh)	Remarks
A	B	C	D
22	Additional cost for Construction of PHC in Riverine /Char areas at Masaneralga in Dhubri District.	2.25	The work for Construction of PHC in Riverine /Char areas at Masaneralga in Dhubri District was allotted at a contract price of Rs. 96.00 Lakhs. 85% progress was achieved and expenditure incurred of Rs. 79.83 Lakhs. The work of Masaneralga Riverine PHC was withdrawn from the original Contractor due to unsatisfactory progress. The original estimate was prepared as per APWD SOR 2010-11. The estimate for balance work has been prepared as per SOR 2013-14 for completion of the remaining works. The increase in amount is mainly due to change of SOR.
23	Amount proposed for Const. of Grade-IV Qtr at the Model Hospitals in Kamrup, Nalbari & Barpeta District	29.09	Const. of Grade-IV Qtr at the Model Hospitals in Kamrup, Nalbari & Barpeta District was taken up from the saving amount of Model Hospital approved in ROP 2010-11. Completion of the work has been delayed for which penalty has also been imposed. As the approved fund in 2010-11 got lapse automatically and the amount is required to clear the liabilities.
24	Construction of Approach Road at Rani CHC	16.73	The Approach road for Rani CHC is in deplorable condition. During rainy season, the patients coming to the hospital are facing inconvenience due to deplorable condition of the approach road. It is proposed to construct the approach road with paver block finished. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS
25	Supply and Installation of ACs along with accessories in Model Hospitals in Dhubri & Goalpara District	9.89	In the original estimate of the Model Hospital at Bogribari in Dhubri District and Ambari & Matia in Goalpara District there was no provision of AC machines. In order to make the Model Hospital function, Installation of AC machine at Major OT, Minor OT, X-Ray Room, Ultrasound Room is essential.

Sl. No.	Name of scheme	Amount (Rs. in Lakh)	Remarks
A	B	C	D
26	Infrastructure Development of Orang BPHC in Udalguri District	122.96	The buildings of Orang BPHC are very old Assam Type building which requires major repair & renovation. In the interest of rendering proper Health care services, Infrastructure Development of the Orang BPHC is proposed. The proposal includes 1) Repair & Renovation of the main hospital Building with additional facilities like office cum drug store, 2 (Two) nos doctors chamber, 4- bedded isolation ward, Minor OT with 4 -bedded maternity ward. and morgue. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS.
27	Repair & Renovation of Alopai Char main hospital along with existing Staff quarters and construction additional staff quarters at Baghbor LAC in Barpeta District	52.00	The buildings of Alopai Char are very old Assam Type building which requires major repair & renovation. The proposal is for Repairing of the Main Hospital which includes repairing of the damaged water supply & sanitary systems and electrical works including new construction of 2 (Two) nos of Staff quarter. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS
28	Repair & Renovation of main hospital including additional staff quarter at Khutabari MPHC in Goalpara District	74.48	The MPHC was established in 1982 . The hospital is functioning without running water supply & electrification due to non-availability of electricity nearby the hospital. The residential quarters were damaged by the storm. The proposal includes repairing of the Main Hospital Building and damaged quarters with water supply & sanitary works including construction of Deep Tube well with RCC Staggering for running water supply and provision for internal & external electrification as electricity is available nearby the PHC. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS

Sl. No.	Name of scheme	Amount (Rs. in Lakh)	Remarks
A	B	C	D
29	Repairing and Renovation for upgradation of MPHC to PHC at Andherighat in Darrang District.	53.22	The existing hospital building and the staff quarters of Andherighat MPHC is very old and in dilapidated condition For upgradation of MPHC to PHC, repairing of the Main hospital which includes repairing of the damaged water supply & sanitary systems and electrical works of the Main Hospital and the residential quarters including new construction of new OT complex and septic tanks. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS
30	Repairing and Renovation for upgradation of MPHC to PHC at Bhokelikanda in Udalguri District.	29.30	The amount is required for repairing and renovation for upgradation of MPHC to PHC at Bhokelikanda in Udalguri District. The repairing work includes repairing of the Main Hospital Building, Toilet block, repairing of the damaged water supply system and electrical works including provision of additional facilities such as Laboratory, Store and Office room. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS.
31	Repair & Renovation of Main Hospital building including residential quarters and boundary wall at Kamarkuchi PHC under Barkhetri LAC in Nalbari district.	52.80	The proposal includes repairing of the Main Hospital Building and damaged quarters with water supply & sanitary works and electrification works including boundary wall at Kamarkuchi PHC under Barkhetri LAC in Nalbari district. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS.
32	Construction of Assam Typr Doctor Qtr(1unit),Nurses Quarter(2 unit),Grade IV Qtr(1 unit) along with boundary wall & Gate,Internal Road & Earth Filling at Ratanpur Miri MPHC in Majuli District.	121.51	The proposal is in the list of issues related to Majuli for which action to be taken.
33	Construction of Porch,New Building,Parking space and approach road at Barpeta Road FRU under Sorbhog LAC in Barpeta District.	131.68	Amount required for repairing & renovation of the main hospital building, new construction of office room including development of parking area and approach road.

Sl. No.	Name of scheme	Amount (Rs. in Lakh)	Remarks
A	B	C	D
34	Repair and Renovation of Maternity & Child Welfare Hospital at Dhirenpara, Guwahati in Kamrup Metro District.	69.72	<p>Maternity &amp; Child Welfare Hospital at Dhirenpara, Guwahati is one of the busiest hospital with heavy case load. In order to proper functioning of the hospital repairing works in the hospital building is required. Certain repairing works has been proposed as below:</p> <ol style="list-style-type: none"> <li>1) Repairing of water leakage/ seepage from expansion joint.</li> <li>2) Repairing/Renovation of damaged brick work</li> <li>3) Repairing/Renovation of Toilet Block including W/S and sanitary lines.</li> <li>4) Repairing of damaged door and window.</li> <li>5) Repairing of Roof sheet.</li> <li>6) Repairing of drainage surrounding the campus.</li> </ol> <p>The estimate is prepared by Site Engineer of NHM and forwarded by Jt. DHS.</p>
35	Strengthening of Kulshi SD in Kamrup ( Rural) District	41.98	<p>The amount is required for Strengthening of Kulshi SD in Kamrup (Rural) District. The proposal includes repairing of the Main Hospital Building mainly repairing of the civil, water supply &amp; sanitary systems and electrical works along with new construction of a 4-bedded labour room cum ward and Deep Tube well with RCC Staggering for running water supply. The estimate prepared by Site Engineer of NHM and forwarded by Jt. DHS</p>
36	Construction of GNM Schhol & Hostel Ph-II in Dima Hasao District	196.93	<p>The Phase-II construction work of GNM School and Hostel at Dima Hasao which was approved in ROP 2009-10 could not be taken up in time due to non completion of Phase-I work. The Phase-I work completed recently. As the approved fund in 2009-10 got lapse automatically and the amount is required for taking up the Phase-II work.</p>

Sl. No.	Name of scheme	Amount (Rs. in Lakh)	Remarks
A	B	C	D
37	Furniture & Equipments of GNM School & Hostel in Dima Hasao District	60.00	GNM School and Hostel Building (Phase-I) in Dima Hasao which was approved in ROP 2007-08. The work was executed by DHAC. The work has been completed recently. The amount provided for furniture & equipments in the estimate could not be utilized due to non completion of work. As the approved fund in 2007-08 got lapse automatically and the amount is required for providing furniture and equipments to the GNM School & Hostel Bldg.
<b>Total amount :</b>		<b>1643.78</b>	

The Chairperson, GB suggested to make uniform design of health infrastructure being developed and it should be as per SOR of APWD.

**[Action: Special Consultant, NHM]**

**(d) Withdrawal of schemes due to non-availability of land**

The GB agreed withdrawal of 131 nos. of works (i.e 1 CHC, 8 PHCs and 122 SCs at Annexure-D) which could not be taken up due to non availability of suitable land and to allot the same elsewhere as per norms and need.

The Chairperson, GB suggested that new schemes to be taken up after confirmation of the suitable land availability.

**[Action: Special Consultant, NHM]**

**(e) Infrastructure issues**

The GB noted the Infrastructure issues.

**(f) Shifting of Chandrapur CHC (Model Hospital) to Golakganj LAC**

The meeting discussed about shifting of Chandrapur CHC (Model Hospital) to Golakganj LAC. The Chairperson, GB suggested that the proposal to be placed before the next State Health Mission meeting.

**[Action: Special Consultant, NHM]**

**(g) MCH wing at Kokrajhar in the new Medical College**

The GB agreed the proposal for construction of MCH Wing along with the new Medical College, Kokrajhar and the Chairperson, GB requested to expedite the works. The Principal Secretary, Health & FW Department cum Co-Chairperson, GB informed that MCH Wing, Kokrajhar is a part of the Kokrajhar Medical College.

**[Action: Special Consultant, NHM]**

125

**(h) Creation of 6 District Programme Management Units (DPMU) in the proposed 6 New Health Districts**

The GB in-principle approved creation of 6 (six) District Programme Management Units (DPMU) under National Health Mission, Assam in new 6 districts of the State (i.e Biswanath, Charaideo, Hojai, Majuli, South Salmara Mankachar and West Karbi Anglong)

[Action: HRD Consultant, NHM]

**(i) Revision of TA-DA for NHM Employees**

The GB discussed the revised TA/DA norms as per the recommendations of 18th EC meeting held on 15<sup>th</sup> and 22<sup>nd</sup> June 2018 which were recommended by the TA/DA revision committee after comparing with the 7<sup>th</sup> Pay Commission, State Govt., RRC-NE (NHSRC, GoI) and Axom Sarva Siksha Abhiyan (at **Annexure-E**). TA on Transfer/Transfer allowance was not recommended by the 18<sup>th</sup> EC.

After threadbare discussion, the GB was appraised the revised TA/DA norms for NHM employees as per the recommendations of 18th EC meeting. GB advised referring the proposal to Fin. Department for approval and concurrence as ultimately expenditure is to be borne by State Govt.

➤ **Category of Posts:**

Level	Category of Posts	
	State Health Society	District Health Society
I-A	Chairperson, EC	Chairperson, District Health Society
	Mission Director, NHM	
	Executive Director, NHM	
	Director, Finance, NHM	
I-B	State Programme Officers, Vertical Programmes	Joint Director of Health Services, District Programme Officer and State Government Officers (Class-I) on deputation to District Health Society
	State Government (Class-I) Officers on deputation to State Health Society	
II	State Government Officers (Class-II) on deputation to State Health Society and full time Contractual Staff / Consultants of the State Health Society receiving monthly remuneration of Rs. 30000/- per month or more	State Government Officers (Class-II) on deputation to District Health Society and full time Contractual Staff / Consultants of the District Health Society receiving monthly remuneration of Rs. 30000/- per month and more
III	Other Contractual Technical / Clerical Staff / Staff on Deputation to the State Health Society receiving monthly remuneration of Rs. 15000/- and above and below Rs. 30000/- per month	Other contractual Technical / Clerical Staff / Staff on Deputation to the District Health Society receiving monthly remuneration less than Rs. 30,000/- per month and above Rs. 15,000/- per month.

134

Level	Category of Posts	
	State Health Society	District Health Society
IV	Other Contractual Technical / Clerical Staff of State Health Society receiving monthly remuneration below Rs. 15000/- per month	Other contractual technical / Clerical Staff of District Health Society receiving monthly remuneration less than Rs. 15,000/- per month

➤ Entitlement for journeys on tour:

Level	Entitlement
I	Air / AC I by Train / Allotted vehicle
II	Air / AC II by Train / Pool vehicle
III	AC III by train and by Air for journey to Barak Valley / Pool vehicle
IV	Sleeper class by train/ deluxe bus.
* Air journey may be allowed to Level 3 and Level 4 on approval of MD for journey outside the State.	

➤ Mileage allowance for journey by road:

By own car or taxi:	Rs.24/- per k.m (as per Central 7 <sup>th</sup> pay commission rates) for Level-I Category only
By Auto-rickshaw or Scooter:	Rs.12/- per k.m (as per Central 7 <sup>th</sup> pay commission rates)

➤ DA on Tour:

Level	Entitlement – Daily Allowance			
	Within State		Outside State	
	Existing Rate	Revised Rate	Existing Rate	Revised Rate
I-A	Rs. 300	Rs. 1,250	Rs. 750	Rs. 1,750
I-B		Rs. 1,250		Rs. 1,750
II	Rs. 200	Rs. 1,000	Rs. 500	Rs. 1,250
III	Rs. 150	Rs. 750	Rs. 400	Rs. 1,000
IV	Rs. 100	Rs. 500	Rs. 300	Rs. 750
DA on tour of District Officials within the District will be entitled as follows:				
➤ ½ DA for travel beyond 40 KMs and 1 full DA for travel beyond 80 KMs in a day with 6 hour absence from HQ.				

➤ Accommodation

Level	Entitlement - Accommodation			
	Within State		Outside State	
	Existing Rate (2006-07)	Revised Rate	Existing Rate (2006-07)	Revised Rate
I-A	Rs. 750	Rs. 4,000	Rs. 3,000	Rs. 7,000
I-B	Rs. 750	Rs. 3,000	Rs. 3,000	Rs. 6,000

Level	Entitlement - Accommodation			
	Within State		Outside State	
II	Rs. 500	Rs. 2,000	Rs. 2,000	Rs. 4,000
III	Rs. 300	Rs. 1,200	Rs. 1,500	Rs. 3,000
IV	Rs. 200	Rs. 800	Rs. 800	Rs. 1,500
NB: Subject to actual in respect of accommodation.				

MD, NHM was advised to move proposal for concurrence of Finance Department. The revised rates were found to be on the higher side.

**[Action: HRD Consultant, NHM]**

#### (j) Linking School admission with Immunization coverage

The GB opined to make the certificate of vaccination mandatory for admission of children in schools at entry level. MD, NHM informed that full immunization coverage for every child is important to keep away the vaccine preventable diseases in childhood and making certificate of vaccinations compulsory to get school admission in entry level shall definitely improve our immunization coverage. GB recommended to move the proposal to the Govt.

**[Action: Director of Health Services (FW), Assam]**

#### (k) NHM own building at Khanapara

The Chairperson, GB in-principal agreed the proposal for construction of NHM own building at SIHFW campus, Khanapara including state of the art infrastructure for state level meetings and trainings of the Health Department.

The GB noted the MD, NHM's submission of the current expenditure of Rs. 288 lakh per annum incurred towards the rent of present NHM office and proposal to construct a own building under Health & FW Department with State Budget funds which will accommodate the NHM Directorate along with state of the art facilities for state level meetings and trainings of the Health Department.

The Chairperson, GB has in principle approved the proposal and directed MD, NHM to submit detail proposal to the Government for necessary budget.

**[Action: Special Consultant, NHM]**

#### (l) Merging of State run schemes with Samarth Assam

The GB in-principal approved the proposal for merging of State run schemes (i.e 'Sushrushta', 'Assam Arogya Nidhi', 'Free treatment of Children with CHD', 'Snehasparsha', 'Samarth Assam') with the "Samarth Assam Society".

The Chairperson, GB suggested that proposal to be placed before the next State Health Mission meeting.

**[Action: Nodal Officer, Samarth Assam]**

132<sup>c</sup>

**(m) HR Rationalization Proposal**

The Governing Body approved the recommendations of the 2<sup>nd</sup> HR Rationalization Committee Meeting which has been approved by the 18<sup>th</sup> EC meeting (at Annexure-F) held on 15<sup>th</sup> and 22<sup>nd</sup> June 2018. The GB recommended that the HR rationalisation shall be undertaken for all cadres of NHM employees to ensure effective HR integration and for smooth Health system implementation.

**[Action: HRD Consultant, NHM]**

**(n) Creation of post for Staff Nurse and ANMs**

The GB in-principle approved the proposal for creation of regular Staff Nurse posts for PHCs level facilities as per IPHS Standards and regular ANM posts for newly created Sub Centres in the State. Detail proposal to be submitted to the Govt. *for approval*. The GB approved the proposal of MD, NHM that ANM under regular and NHM to be rationalized for newly created Sub Centres as per population norms from other health institutions till creation of new regular ANMs posts.

**[Action: HRD Consultant, NHM]**

**9. Other discussion points**

The meeting discussed about the recent news coverage on quality of drugs supplied in Government health facilities.

MD, NHM briefed about the facts of the news item and also described the quality control measures taken up by NHM for drugs procurement.

The meeting suggested to take legal action against the people spreading fake news and widely publish the action taken.

The meeting ended with vote of thanks from the Chair.




( T Y Das, IAS )  
Chief Secretary, Assam  
&  
Chairperson, Governing Body,  
State Health Society, Assam

31.8.2018

Copy to-

1. All members concerned, Governing Body, State Health Society, Assam.
2. Staff Officer to the Chief Secretary, Assam, Dispur, for kind appraisal of Chief Secretary, Assam & Chairperson, Governing Body, State Health Society, Assam.
3. P.S to the Hon'ble Minister, Health & FW Deptt., Assam, Dispur for kind appraisal of the Hon'ble Minister, Health & FW Deptt.
4. P.S to the Principal Secretary to the Govt. of Assam, Health & FW Deptt. Dispur for kind appraisal of the Principal Secretary, Health & FW Deptt.

  
(J.V.N. Subramanyam, IAS)  
Mission Director  
National Health Mission, Assam