HARYANA VIDHAN SABHA

; '

ł

COMMITTEE ON ESTIMATES

(2016-2017)

(FORTY FIFTH REPORT)

ON

BUDGET ESTIMATES

FOR 2015 2016

HEALTH DEPARTMENT



(Presented to the House on 10th March 2017)

HARYANA VIDHAN SABHA SECRETARIAT CHANDIGARH

2017

TABLE OF CONTENTS

ř

۲

-2

} 1

9

Con	position of Committee on Estimates	Pnges (111)
Intro	oduction	(v)
Rep	ort Health Department	1 37
Арр	endix	
I	Summary of recommend itions/observations of the Committee in respect of Health Department	38 39
2	Statement showing the outstanding recommend itions/ observations pertaining to the previous years	40-64

(111)

COMPOSITION OF THE COMMITTEE ON ESTIMATES FOR THE YEAR

(2016 2017

CHAIRPERSON

1 Shri Harvinder Kalyan MLA

MEMBERS

•--

2	Shri Jai Parkash MLA	Member
3	Shri Udai Bhan MLA	Member
4	Shri Hari Chand Midha MLA	Member
5	Sint Prem Lata MLA	Member
6	Shri Lalit Nagar MLA	Member
7	Shri Naresh Kaushik MLA	Member
8	Shri Bhagwan Dass Kabir Panthi MLA	Member
9	Shri Nagender Bhadana MLA	Member
SECRETA	ARIAT	

1 Shri R K Nandal Secretary

2 Shri Dinesh Kausluk Deputy Secretary

INTRODUCTION

- I the Chairperson of the Committee on Estimates his ing been inthorized by the Committee on this behalf signed this Report on the (i) Budget Estimates for the year 2015 2016 in respect of Health Department and (ii) Implementation of outstanding recommendations/observations of the Committee
- 2 A brief summary of the recommendations/observitions of the Committee is given in Appendix 1 and 11 in respect of the Health Department and Implementation of outstanding recommendations/observitions respectively. The summary is not exhaustive and for full recommendations or observations of the Committee reference be made to the main Report and the reports of previous years (for implementation) relating to the Departments concerned
- 3 A brief record of the proceedings of each meeting has been kept separately in the Vidhan Sabha Secretariat
- 4 The Committee are thankful to the Chief Secretary and other Additional Chief Secretaries/Principal Secretaries/Secretaries/representatives of the Departments who appeared before the Committee from time to time for their valuable assistance to the Committee
- 5 The Committee is also highly thankful and appreciates the working of the Secretary Deputy Secretary Branch Officials of the Harvana Vidhan Sabha Secretariat for their unstinted whole hearted co operation and assistance rendered by them

Harvinder Kalyan Chairperson Committee on Estimates

The 22nd February 2017

Report

Constitution of the Committee

1 The Committee on Estimates for the year 2016 2017 consisting of nine members was nominated by the Hon ble Speaker on having been authonzed by a motion moved and passed by the Haryana Vidhan Sabha in its sitting held on 15th March 2016 and notified vide Haryana Vidhan Sabha Secretariat Notification No EC 1/2016 17/26 dated 25th April 2016

Appointment of Chairperson

2 Shri Harvinder Kalyan MLA was appointed the Chairperson of the Committee

Sittings

3 The Committee held/fixed 51 meetings (at Chandigarh and outside Chandigarh) till the finalization of this Report

Implementation/Recommendations

The Committee scrutinized the replies received from the Government in 4 connection with the outstanding recommendations/observations made in their reports for the year 1995 96 1996 97 1998 99 2000 01 2001 02 2003 04 2006 07 2008 09 2010 11 2011 12 2012-13 2013 14 and 2014 15 pertaining to Public Health Engineering Health Mines & Geology Tourism Excise & Taxation Environment Development & Panchayats Rural Development Industries & Commerce Welfare of SCs & BCs Tourism Excise & Taxation Public Health Engineering Imgation Health Environment and Tourism Departments The Committee dropped the recommendations/ observations where it was satisfied with the action taken by the Government The observations of the Committee of the remaining recommendations/ observations in respect on these reports are contained in Appendix II of this Report

Selection of Departments

5 The Committee selected the following Departments with a view to scrutinize their Budget Estimates ----

2015-16

1 Health Department

2016 17

- 1 PW (B&R) Department
- 2 Transport Department and
- 3 Industries & Commerce Department

Scrutiny/Framing of Questionnaire/Oral Examination

6 (a) The Committee scrutinized the material and framed the questionnaire in respect of the Health Department for the year 2015 2016 and orally examined the representatives of the Health Department

(b) The Committee also scrutinized the material and framed the questionnaire in respect of the Industries & Commerce Department for the year 2016 17 and could not orally examined the department as the department failed to supply the replies to the questionnaire of the Committee till finalization of the report Therefore, Committee took a serious view and recommends that the replies asked by the Committee be supplied at the earliest

Supplementary Estimates

7 The Committee also scrutinized the Supplementary Estimates of Haryana Government for the year 2016 17 and examined the representatives of the Finance Department as well as other Department concerned with the demands and also prepared their reports thereon for being presented to the Vidhan Sabha on the date fixed therefore

General Observation Finance Departmen

8 The Committee while scrutinizing the replies received from the Government relating to the Departments pending paragraphs of previous reports concerning these Departments have expenenced that the replies thereof are not being sent by some of the departments in time inspite of the instructions issued by the Government from time to time

The Committee is of the view that the Finance Department should coordinate in this respect and reiterate these instructions to all the concerned Department so that replies are sent in time in order to streamline the functioning of the Committee

9 The Report of the Committee in respect of Health Department is in the following paras



3

-





.

12 Organisation Set Up

Health Department Haryana is headed by the Director General Health Services Harvana and is assisted by Oi & Additional Director General Health Services 5 Director Health Services One Additional Director (Administration) one Joint Director (Administration) at the Head Office There are 56 Hopitals 114 Community Health Centres and 485 Primary Health Centres in the State The head of health services at the district is Civil Surgeon while the civil Medical Officers/Medical headed Principal hospitals are bv Superintendents/Senior Medical Officers Community Health Centres and Primary Health Centres are headed by Senior Medical Officers and Medical Officers in charge respectively Officers and Medical Officers in charge respectively a) + time "

Organisational Workload mat / Cons. / 1110 11

Director General, Health Services, Haryana

The post of Director General Health Services is departmental post The DGHS work as the Head of the Department and looking after the work of all officers of the department. The officer in addition to administrative and financial powers is responsible for implementing all the schemes of the Health Department The officer works under the supervision direction and control of the Additional Chief Secretary Government to Haryana for the Health Department The DGHS is assisted by one Additional Director General 5 Director Health Services One Additional Director (Administration) and One r erv verr 1 1 11 11 Joint Director (Administration) 111 mitur 1 1 1 1 1 1 1

Civil Surgeon

1 I

1 11

in de rataria

HWIGEN, TOTAL responsible to Director General Health Services Her looks after the administration of staff of all categories working under his control and to carry out vanous health schemes and provide preventive promotive and curative services to the general public within his district 17111 6.1

Principal Medical Officer/Medical Superintendent

Principal Medical Officer/Medical Superintendent is the in charge of the civil hospitals and is concerned with day to day activities of the hospital. The PMO/MS reports to the Civil Surgeon for further necessary action

Senior Medical Officer is the in charge of the Community Health Centre and is concerned with day to day activities of the Community Health Centre The Senior Medical Officer reports to the Civil Surgeon for further necessary action ITTE CO í

Medical Officer is the in charge of the Primary Health Centre & Sub Health Centres under respective PHCs and is concerned, with day to day activities of the Primary Health Centre and Sub Health Centres under those PHCs The Medical Officer reports to the Senior Medical Officer in charge of their respective Community Centres

13 FUNCTIONS OF THE DEPARTMENT AND ITS SUBORDINATE OFFICES

Health department Haryana is constantly guided by the W H O definition of Health which states that Health is a state of complete physical mental and social well being and not merely an absence of disease or infirmity

Government of Haryana is committed to provide quality health care to all its citizens Health department has been constantly upgrading itself in terms of infrastructure human resource drugs equipment etc. Haryana Health Department is responding to the health needs of all categories of population including infants children adolescents mothers eligible couples and the elderly in addition to the sick and trauma victims. Also there is a constant endeavour to keep communicable and non communicable diseases in check and to have strong systems of recording reporting evaluating and planning

The departments aim is to improve the quality of life of people by providing better Health Services Heath department Haryana strives to help people improve their productivity and reduce risks of diseases and injury in a cost effective way. The department is guided by the VV H O principle of Universal Health. Ensuring that all people have access to needed promotive preventive curative and rehabilitative health services of sufficient quality to be effective while also ensuring that people do not suffer financial hardship when paying for these services.

The ultimate function of the department is to provide adequate accessible equitable quality healthcare services to all leading to the reduction of out of pocket expenditure on health of a common man

14 BROAD DETAILS ON WHICH THE ESTIMATES ARE BASED

1

The estimates are broadly prepared on the basis of the expenditure incurred

During the previous year and the new Services/Schemes being Proposed/launched by the Department The main principals on which the estimates are based are as follows

- Budget received to the Health Department from Finance
 Department in the starting of the financial year
- Department sends the Revised estimates to Finance Department when they are asked to do so
- In the revised estimates the excess budget is surrendered and demand of additional budget is raised by the Health Department to the Finance Department
- Demand of budget for the next financial year of plan schemes is to be generated on the basis of memorandum received from the vanous divisions/programs which are undertaken by the Health Department

- The expenditure on Establishment is calculated based on the sanctioned posts and likely to be recruited in the coming financial year based on the requisition sent to various recruitment agencies to cover the expenditure on pay and increments compensation allowances and re imbursement of medical expenses etc
- The expenditure on the account of Dearness Allowance is worked out on DA sanctioned by the State Government from time to time on the basis of pay of the staff
- The provision of Travelling Allowance is made to cover the expenditure of the touring officer/officials for the various journeys they have to undertake in the discharge of their official duties. This is generally based on the actual expenditure incurred during the past three years.
- The expenditure on Rent Electricity/Water Charges Stationary Stamps Telephone charges Swasthaya Mela etc is to be met from the contingencies The estimates are based on the average expenditure incurred during the past three years and the anticipated requirements due to increase/decrease in the activities of the Health Department

15 ANY OTHER INFORMATION THAT THE DEPARTMENT MAY THINK IT NECESSARY OR PROPER TO GIVE

PROGRESS MADE BY THE HEALTH DEPARTMENT SINCE 2014

1 New construction of PHCs/CHCs/Hospitals The following health institutions have been constructed under the new Government

Cıvıl Hospitais	Status	СНС	Status	РНС	Status
Panchkula	Work completed	Madina (Rohtak)	Work completed	Nıdana Tıgrı (Rohtak)	50% work done
Palwal	Work completed	Chhara (Jhajjar)	Nearing completion	Ismaila (Rohtak)	60% work done
jind	Nearing completion	Jhansa (Kurukshetra)	Work in progress	Dhotter (Sırsa)	Work in progress
Sıwanı (Bhıwani)	Nearing completion	Assandh (Karna!)	Nearing completion	Jui (Bhiwani)	50% work done
Bawanı Khera (Bhıwani)	Nearing completion	Bapolı (Panıpat)	Work in progress	Noona Majra (Jhajjar)	Work Completed
Narnaund (Hısar)	Nearing completion	Badoli (Palwai)	Work in progress	Kanonda (Jhajjar)	Work Completed
Charkhi Dadri (Bhiwani)	Nearing completion	Dubaldhan (Jhajjar)	Work completed	Patauda (Jhajjar)	Nearing completion

CHC-cum CH Pataudi (Gurgaon)	Nearing completion	Dıghal (Jhajjar)	Work completed	Bhambewa (Jhajjar)	Work completed
CHC-cum CH Nilokheri (Karnal)	Work in progress	Dhakla (Jhajjar)	Nearing completion	Jahajgarh (Jhajjar)	Work in progress
CHC-cum CH Jamalpur (Bhiwani)	Nearing completion	Bhattu Kalan (Fatehabad)	Nearing Completion	Tumbaheri (Jhajjar)	Nearing completion
		Badopal (Fatehabad)	Nearing Completion	Jassorkheri (Jhajjar)	Work in progress
		Hathın (Palwal)	Work completed	Hassinga (Fatehabad)	Nearing completion
		Rajaund (Kaithal	Work completed	Mehmra (Fatehabad)	Nearing completion

2 Upgradation of PHCs/CHCs/Hospitals

The following health institutions have been upgraded

Up gradation of Health Institution	Govt letter No	
75 Bedded Civil Hospital Ambala Cantt To	Memo No 23/70/2014-4 Blil Dated	
100 Bedded Civil Hospital	16 03 2015	
Sub Health Centre Sondhad to Community	Memo No 20/47/2009 4HBIII dated	
Health Centre distt Palwal	14 07 2015	
Primary Health Centre Alawalpur to	Memo No 23/41/2009-4HBIII dated	
Community Health Centre distt Palwal	15 07 2015	

3 Increase in OPD of Health Institutions as compared to 20174 -

In comparison to 2014 the OPD increased by around 11% till June 2015 The month on month comparison of OPD is as follows –

Month	New & Old	% age change	
	During Year 2014 15 (Prov)	During year 2013 14	
October	1496486	1436456	40
November	1722211	1357854	21 2
December	1656993	1360030	17 9
January	1605885	1379961	14 1
February	1743290	1413988	189
March	1900506	1817127	44
April	1863029	1651362	11 4
May	1897577	1822874	39

June	1715992	1678612	22
Total	15601969	13918264	10 8

4 Computerisation of Hospitals

- Hospital management information system is being rolled out in the state of Haryana in the first phase e उपचार has been implemented in
- General Hospital Sector 6 Panchkula
- CHC Raipur Rani
- PHC Barwala
- General Hospital Ambala Cantt Ambala (Registration)
- BPS Girls Medical College Khanpur Kalan Sonepat (Registration)

Under HMIS, the following are the benefits

- Unique patient ID and availability of EHR across all facilities in the State
- II Reduction in patient waiting time efficient queue management
- III Simplification and automation of manual processes
- v Transparency and availability of information related to services
- v Efficient grievance redressal mechanism
- vi Optimal utilization of infrastructure equipments facilities HR drugs & Consumables
- vii integration with external applications programmes and schemes
- viii Real time reporting efficient analytics and decision support
- f ix ℓ^{i} PACS for online view of X Ray images and interfacing with lab $f \mathcal{A}^{-1} = \mathcal{H}$ equipment for accurate lab tests reporting

HMIS will be implemented in all the district hospitals and medical college hospitals (except Kalpana Chavvla Medical College Hospital) of the state by March 2016 Once this is done by August 2016 HMS will be implemented in 30 PHCs and CHCs of the state covering total of 55 hospitals

5 reProvision of Tertiary Health care/services on PPP mode γ

 Provision of CT scan and MRI on Public 'Private Partnership mode State of art radiological diagnostic services shall be provided in the state on Public Private Partnership Mode Latest 15 tesla MRI and 16 slice CT scan machines are being installed under this prestigious project of govt of Haryana In the first phase the services of CT scan shall be operationalized at Civil Hospital Gurgaon in the coming few days while the MRI and CT scan shall be functional in Panchkula in the 3rd week of august and in Bhiwani and Faridabad in the last week of august The rates which have been finalised are much lower than those of PGIMER Chandigarh and GH sector 16 Chandigarh For *eg* CT head shall be charged around Rs 650 and MRI head shall be charged around Rs 1900 in the second phase this project is being extended to the remaining civil hospitals of Haryana The last date of bids for the second phase is 03 09 2015

- **Provision of CATH lab services on PPP mode** In a significant decision Government of Haryana has decided to provide the tertiary level cardiology services *i.e.* CATH Lab and Cardiac careunits on PPP mode Under this tertiary healthcare services like angiography angioplasty and 20 bedded cardiac care units shall be provided at Civil Hospital Arnbala Panchkula Faidabad and Gurgaon on PPP mode These services shall be provided at rates much cheaper than those in Private Hospitals with Quality and care more than that of private hospitals. The bids shall be invited on CGHS rates
- **Provision of Haemodialysis services on PPP mode** Government of Haryana has decided to provide haemodialysis services on PPP mode Und. his project the tertiary level health services shall be provided at the following Civil Hospitals
 - Ambala Cantt
 - Panchkula
 - Bhiwani
 - Faridabad
 - Hisar
 - Gurgaon

The bids shall be invited on the rates to be charged for dialysis. The purpose is to provide essential health services at rates which is much lower than those of private hospitals but quality much higher than them

6 Implementation of PCPNDT Act in the State of Haryana

Under the able leadership the PCPNDT act is being strictly implemented in the state of Haryana The following steps have been taken

- Campaign launched on direction of Hon ble Health Minister for inspection of all registered centres by team of three members throughout state from 1st 30th April 2015 During this campaign 915 inspections were done and based on inspections 18 show cause notices were issued 2 registrations were suspended 11 centres were sealed & one court case was launched in Sonepat
- II 3 a part of mass mobilization campaign **Pledge Ceremony** to save the girl child was held on 16 1 15 at 11 00 am throughout Haryana by Health Department with participation of all medical

para medical ANMs ASHAS Pvt Ultrasonologist at all PHCs/CHCs/SDH & DH

- III Beti Bachao and Beti Padhao Program was launched from Panipat by Hon ble Prime Minister on 22th Jan 2015 preceded by two days workshops at Panipat on 20st and 21st Jan 2015 This was advertised in the newspaper Pledge to Save the Girl Child was taken collectivity by approx 30 000 health personnel at all PHCs/CHCs/SDHs & DH all over Haryana on 16th Jan 2015 at11 00AM
- IV Statistics regarding enforcement of PC and PNDT Act

Sr No	Activities	Oct 2014 June 2015	Cumulative till June 2015
1	Registered Genetic clinics	71(4 Govt)	1603 (71 Govt)
2	Registered Genetic Counseling Centres	0	67
3	Genetic Labs	0	4
4	Inspections/raids	2368	21823
5	Machines seized & sealed	41	317
6	Distt Advisory Committee meetings	93	1528
7	Suspension/cancellation of registration of centres	53	500
8	Court cases in lower courts	28	129
9	No of persons convicted	7	62 (37 doctors)
10	No of doctors against whom charges framed by court	2	14
11	No of licenses of doctors cancelled from State Medical Councils	2 (till July 2015)	12 (till July 2015)
12	No of licenses of doctors suspended from state medical councils	3	4
13	Distt Task Force meeting	30	143
14	State Appropriate Authority Meetings	9	111
15	Appeals before SAA	6	85
16	Incentive for informer	1	14
17	State level workshop	0	3

7 Online Birth and Death Registration System - has been started in all over the state on 02 05 2015 and this has been linked with Aadhar Card The delayed registration of birth has also improved The data of online registration of birth and death and delayed registration is attached alongwith

8 Quality improvement as per NABH standards, (National Accreditation Board for Hospital and Healthcare Providers) is underway in various facilities in Haryana in District Hospitals Panchkula Rohtak Gurgaon Faridabad and Hisar and 8 Primary Health Centres GH Panchkula Laboratory is the first Laboratory in Northern India to be NABL accredited (ISO 15189 2012)

9 Upgradation/Modernization of Labs The Lab established in premises of Civil Hospital Panchkula has been accreditation by NABL (National Accreditation Board for Testing & Calibration Laboratories) which is a landmark step towards ensuring the quality lab services

- a New demand for the following equipments has been made in various districts
 - I Semi Auto Analyzer
 - II Binocular Microscope
 - III Five parts cell counter
 - v Fully Automatic Bio chemistry Analyzer
 - v Immuno Assay Analyzer
 - vi Semi Automated Unne Analyzer
 - vii Automated Blood Coagulation Analyzer
 - viii System for blood culture
 - IX Electrolyte Analyzer
 - x ELISA Reader cum washer
 - xi Bio safety cabinet

10 Achievement of Family Welfare Programme after formation of new **Government** - Haryana has recorded an appreciable achievement in Family Welfare Programme during the financial year 2014-15 and the Total Fertility Rate (TFR) of the state has come down from 2.3 to 2.2 as per data of Sample Registration System (SRS) 2013 conducted by the Centre State Haryana also received an award for decrease in Total Fertility Rate (TFR) from 2.3 to 2.2

The achievement of Family Welfare Programme during the financial year 2014 15 is appreciable with achievement of Tubectomy 92.5 percent IUCD (intra Utenne Contraceptive Device) including PPIUCD (Post Partum intra Utenne Device) 141.2 percent PPIUCD insertion 138.3 percent CC (Condom Contraceptive) 93.4 percent OP (Ural Pills) Cycles 115.3 percent There is increase in achievement of the above mentioned parameters in Financial Year 2014 15 from Financial Year 2013 14

PPIUCD insertion achievement is 139.3 percent which is probably second in India indicating that Family Welfare Programme has done a commendable job

The number of ACP cases of regular Multi Purpose Health Worker (Female) solved 526 $\,$

11 Recruitment /Regularization of Employees

Recruitment of Doctors

To mitigate the shortage of Doctors in the State Govt has taken the post of medical officers out of the preview of Haryana Public Services Commission and then the recruitment was handed over to Department of High Powered Selection Committee after 2008 Since then around 24 rounds of recruitment have been made Inspite of all these efforts the shortage could not be completely made The reason is that around 250 posts belonging to SC category remains vacant due to non-availability of the candidates under this category in the State This is inspite of the fact that special drive for SC recruitment were done in December 2013 and 2014 The SC of other State cannot be considered against these posts because reservation is a State subject nor we can de reserve these posts because it is not allowed by the law The status of recruitment in last few years is as under

Year	Posts of Medical Officers Advertised
2013	434
2014	504
2015	761

Regularization of Employees -

As on today there is no matter pending for regularization of the adhoc employees however during the year 2014 in the previous reign number of employees of different groups were regularized

1)	Group B	=	12
2)	Group 'C'	=	156
3)	Group 'D	=	5

However the Government decided to give following preference to the adhoc employees of Health Department working under the schemes like RCH/NRHC at the time of recruitment for regular posts by Haryana Staff Selection Commission

- i) Relaxation in age up to the 5 years and
- II) 20% weight age at the time of the interview

12 Enhancement/Salary/Honorarium of Employees of various categories under Health Department/NHM/Aids Control Society

There is no proposal for giving enhancement in the salary to the employees of Health Department however doctors working in district Mewat are being given @Rs 10 000/ for simple MBBS doctor and Rs 25 000/ for specialist degree holder doctor under NRHM letter no 1/761/NRHM/A4/2010/15639 dated 30 12 2010

16 Budget

The department was asked by the Committee to know about the total budget allocated to the department for the current financial year scheme/work/project wise together with the amount spent thereon upto 30th September 2015

The Department replied as under

The on line report of the total budget allocated scheme wise to the department for the financial year 2015 16 and amount spent up to 30th September 2015 is as under

Dia Cabanaa	Budget	Exp till	Non Plan Schemes	Budget	Exp till
Plan Schemes	Aliocated/ Revised				30th Sep
P 01 13 2210 01 001 98 51 N V District Staff Continuation of Staff for Civil Surgeons	561	100 08	N 51 13 2210 01 001 98 51 R V District Staff Continuation of Staff for Civil Surgeons	3091 11	1663 16
P 01 13 2210-01 001 99 51 N V Headquarter staff Improvement & Strengthening of Health Directorate	16	6 12	N 51 13 2210-01 001 99 51 R C Headquarter staff Improvement & Strengthening of Health Directrorate	10	1 19
P 01 13 2210 01 110 37 51 N V Haryana State Health Resource Centre for Quality Improvement of Health Institution & HMIS	5500	1625	N 51 13 2210 01 001 99 51 R V Headquarter staff Improvement & Strengthening of Health Directrorate	1106	565 72
P 01 13 2210-01 110 38 51 N V Mukhyamantro Muft Ilaaj Yojna	2900	522 75	N 51 13 2210 01 109 99 51 R V Other Health Scheme School Health services	633	315 1
P-01 13 2210-01 110 39 51 N V Indıra Bal Swasthaya Yojna	150	0	N 51 13 2210-01 110 49 51 R V Strengtheningh of Urban Hospitals and Dispensaries	21298 6	11400 33

P 01 13 2210-01 110-40 51 N V Urban Health Mission	1358 32		N51 13-2210-01 110 73 51 R V Blood Transfusion Centres	439 62	203 96
P-01 13 2210 01 110-41 51 N V Reduction in Infant Mortality Rate (INVIK) (TFC)	1302 63	-	N 51 13 2210 01 110 86 51 R V Oral Health Carefacilities in Primary Health Clinics	2234 13	1087 56
P-01 13 2210-01 110-42 51 N V Development of Health Infrastructure (TFC)	0		N 51 13 2210-01 110 97 51 R V T B Sanatoria other Hospitals/Clinic	1378 9	697 29
P-01 13 2210-01 110 43- 51 N V Implemention of NPCDCS and NPHCE	0	_	N 51 13 2210 03 103 91 51 R V continuance of P H Cs	15453 23	8031 93
P-01 13 2210 01 110 44 51 N V Strengthening/opening of De Addition centres	210 84	89 33	N 51 13 2210 03 104-99 51 R V Continuance of CHC Rural Referred Hospitals	5016	2533 57
P-01 13 2210 01 110-46 51 N V Out Sourcing of Support Services	3000	1376 9	N 51 13 2210-03 110 99 51 R V Continuance or Rural Hospital and Dispensary	6101	3152 48
P-01 13 2210 01 110-47 51 N V State Institute for Cancer Mantal T B and Respiratory Disease	100	0	N 51 13 2210 06 003 93 51 R V Training of Medical & Para Medical Staff	1035 83	513 87
P 01 13 2210 01 110 48 51 N V Providing Independent Feeder Line & Water Supply in Hospitals	250	40 76	N 51 13 2210 06 101 58 51 R V Other Disease Control Programme	1587 15	802 53
P 01 13 2210-01 110 49 51 N V Strengtheningh of Urban Hospitals and Dispensaries	114188	5291 17	N 51 13 2210 06 101 99 51 R V Malaria	12374 92	6197 82
P 01 13 2210-01 110 64- 51 N V Grant In Aid to Haryana Blood Transfusing Counci		60	N 51 13 2210 06 112 99 51 R V Nutrition and Health Education	152 72	76 66

	· · · · · · · · · · · · · · · · · · ·				
P-01 13-2210-01 110-65- 51 N V Rupak Rashtriya Utthan Evam Parivar Kalyan Yojna	50	10 82	N 51 13 2210-80 004-97 51 R V Health Statistics and Evaluation	198 3	99 3
P 01 13 2210 01 110 69 51 N V Financial Assistance for Bio Medical Waste Management	450	59 15	Total	72110 51	37342 47
P 01 13 2210-01 110 79 51 N V Purchase of Medicine ror the Hospitals	4090	0			L
P 01 13 2210-01 110-82 51 N V Grant in aid to New Scket Hospital Panchkula	210	52 5			
P-01 13 2210-01 110 86- 51 N V Oral Health Carefacilities in Primary Health Clinics	1920	964 93			
P-01 13 2210 01 110-84- 51 N V Grant in aid to St John Ambulance Association for replacement of old Ambulance	7	0			
P 01 13 2210 01 110 93 51 N V Grant in aid to Haryana Red Cross Blood Donation Services Rohtak and P G I Chandigarh	0	0			
P-01 13 2210 01 110 96 51 N V Improvement and Expansion of hospital	4500	121 26			
P-01 13 2210-03 103 98 51 N V Purchase of Medicines and Material for P H C/C H Cs	500	73 38			

P-01 13 2210-03 103 99 51 N V Opening/Continuation of Primary Health Purchase of Medicine for P H Cs	7850 82	1161 75
P 01 13 2210 03 110 98 51 N V Referred Hospital (M N P)	1796 41	673 33
P-01 13 2210-03 789 96 51 N V Opening/continuation of Sub Centres in Majority SC	0	0
P-01 13-2210-03 789 97 51 N V Purchase of medicines for Scheduled Castes Patients in Hospitals	3410	111 74
P-01 13 2210-03-789 98 51 N V Arogya Kosh for Schedule Caste Patients	0	0
P-01 13 2210 03 789 99 51 N V Jananee Suraksha Yojna for Schedule Caste	800	104 98
P-01 13 2210-06 003 93 51 N V Training of Medical & Para Medical Staff	20	0
P 01 13 2210 06 003 94- 51 N V Opening/Strengthening ANM/GNM Nursing/Training School	1	0
P-01 13 2210-06 101 91 51 N V Setting up of Opthalmic Ceil at Directorate Level	39 55	13 5

~

P-01 13 2210 06 101 99	854 25	312 79
51 N V Malaria		
P-01 13 2210-80-004-93 51 N V Establishment of Computer Cell in Health Department	132	26 28
P 01 13 2210-80 800 96 51 N V Strengthening of Civil Registration System	8	0
P 02 13 2210 01 110 36 51 N V Rashtriya Mazdoor Swasthya Bima Yojana for BPL Families	0	0
P 02 13 2210 01 110 68 51 N V Arogya Kosh for the Patients below Poverty Line	50 95	0
P 02 13 2210-03 103 84- 51 N V Grant in aid under NRHM	38263 86	16958 79
P 03 13 2210 06 101 85 51 N V Aids Control Progr∝mme	2067 6	1572 79
P 03 13 2210 06 101 86 51 N V National Goitre Control Programme	24 75	7 84
P-03 13 2210 80-800 97 51 N V Strengthening of the Office of the Chief Registrar of Death & Birth	0	0
Total	93873 78	32029 86

After going through the Written reply and oral examination of the representatives of the Department the Committee observed that the amount has been shown nil in the column of expenditure of some schemes Therefore, the committee recommends that detailed report for showing the expenditure nil be submitted to the committee within three months

17 Vacant Posts

In the reply to the questionnaire of the committee the information with regard to the vacant posts supplied by the department is as under

Sr No	Name of Post	Sanctioned	Filled	Vacant	Remarks/ Reasons
1	DGHS	2	1	1	
2	ADGHS	1	1	0	_
3	DHS Training/Lab / FW/Malaria/Dental	5	5	0	
4	DD(SS)+ Principal SIHFW PKL + Saket council	5	5	0	
5	Civil Surgeon/ PMO/ State Bactrologist/ Principal FW Trg Instt Rtk	30	25	5	Vacancy is due to Retirement/Promotion
6	Senior Medical Officer	460	408	52	
7	Senior Dental Surgeon	24	20	4	
8	DD(MM)	1	0	1	_
9	DD(Nursing)	1	1	0	
10	DD(M&E)	1	1	0	
11	Medical Officer	2705	2369	336	
	Sub Total A	3235	2836	399	

Group B

					and the second se
1	Dental Surgeon	624	563	61	Vacancy is due to Retirement/Promotion
2	DPHNO	12	7	5	
3	Mass Education & Information Officer	1	1	0	
4	Distt Family welfare Education Officer	6	2	4	
5	Biologist	17	8	9	
6	T O FSDU	1	1	0	
7	Technical Officer (Goitre)	1	1	0	
8	Asstt Director (Demo)	1	1	0	
9	Asstt Director (Nursing)	1	0	1	
10	Asstt Director (ICDS at RTK)	1	1	0	

24 F	Field Assistant	1	0	1	
25 (Chief Pharmacist	36	18	18	
26 F	Pharmacist	977	841	136	
27	Radiographer	271	123	148	
	Ophthalmic Assistant	175	56	119	
29	OTA	208	60	148	
30	ECG Technician	69	9	60	
31	Dietician	29	12	17	
32	Plumber	18	13	5	
33	Social Worker	7	5	2	
34	твни	36	12	2	
	Senior Laboratory Technician	35	3	32	
36	Lab Technician (G)	849	457	392	
37	Laboratory Attendant Class III	40	17	23	
38	Junior Statistical Nosologist	11	7	4	
39	Statistical Assistant	87	47	40	
40	Computer Clerk	195	89	106	
41	Dy Sudt (field)	55	29	26	
42	Assistant (field)	358	288	70	
43	Sr Scale Steno	20	3	17	
44	Jr Scale Steno	6	1	5	
45	Steno typist	198	35	163	
46	Clerk (Field)	681	316	365	
47	Sr Store Keeper	5	1	4	
48	Store Keeper	135	47	88	
49	Driver	391	229	162	
50	Dy Supdt (HQ)	8	8	0	
51	Inspection Officer (HQ)	2	2	0	
52	Asstt Incharge (HQ)	3	3	0	
53	Personnal Asstt (HQ)	2	2	0	
54	Assistant	88	85	3	_

~~

	Subtotal-C	14936	10085	4851	-
68	Material Manager (E I)	1	1	0	
67	Technical Assistant (EI)	1	1	0	
66	Electrician (EI)	20	10	10]
65	Duco Spray Painter (E I)	19	1	18	- ~
64	Refrigerator Mechanic (E I)	19	10	9	
63	Tailor (E I)	6	2	4]
62	Assistant Motor Mechanic (E I)	2	2	0	- z
61	Motor Mechanic(E I)	20 -	1	19	
60	Lift Operator (E I)	13	7	6]
59	Restorar (HQ)	6	6	0	
58	Steno typist (HQ)	10	1	9 <	
57	Clerk (HQ)	82	34	48] ~
56	Jr Scale Steno (HQ)	8	01	7	
55	Sr Scale Steno (HQ)	09	03	6	

Group D

1	Daftri (HQ)	10	9	1	Vacancy is due to
2	Peon (HQ)	53	1	52	Retirement/Promotion
3	Chowkidar (HQ)	1	1	0	-
4	Sweeper (HQ)	5	5	0	
5	Peon (Field)	728	530	198	
6	Ward Servant (Field)	1287	892	395	
7	Dresser (Field)	143	33	110	
8	Lab Attendant Class IV (Field)	27	13	14	
9	Field Worker (Malaria)	538	309	229	
	Subtotal D	2792	1793	999	

After going through the written reply and oral examination of the representatives of the Department the Committee desired that the department should make efforts to fill up the vacant posts at the earliest so as to avoid any adverse effect on the working of the department

18 Temporary Staff

The department was asked by the committee to know about the total number of temporary daily wages posts if any in the department category wise as on 30th September 2015 alongwith the mode of employment on these posts

ihe	re are no temporary/daily there is a provision in N	Wages posts IHM Detail o	in the departm of which is as t	ent However Inder	
Sr No	Designation	Total Sanction	Total Filled	Total Vacant	Mode of Employment
1	Specialists	53	32	21	<u> </u>
2	Doctors	223	128	95	1
3	Ayush Medical Officer Male/Female	426	373	53	
4	District Coordinator	21	21	0	-
5	Block Coordinator	113	100	13	-
6	Data Assistants	42	20	22	
7	Staff Nurses	2016	1763	253	-
8	Lab Technicians	266	240	26	
9	ANMs	3668	3382	286	
10	Pharmacists	354	328	26	
11	Physiotherapists	59	31	28	1
12	Data Entry Operator	139	100	39	1
13	Computer Assistants	106	94	12	-
14	Operation Theatre Assistant	4	4	0	
15	Programme Manager	6	2	4	-
16	Distt Programme Manager	21	20	1	
17	Distt Accounts Manager	21	19	2	-
18	Counsellor	24	20	4	-
19	Refrigerator Mechanic	12	10	2	
20	Nutrition Counsellor	5	0	5	1
21	Medical Social Worker	5	2	3	1
22	Accounts Assistants	333	305	28	1
23	Secretarial Assistant	21	20	1	District/ Contract basis
24	Messenger	21	21	0	1

The Department replied as under -

- 5

1 |-|-|-|-

L

25	Distt Monitoring & 2 Evelu, ation Officer	3	22	1	
26		98	464	34	
27	Epidemiologist 2	:1	15	6	
28	Data manager 2	:1	15	6	
29	Civil Registration Asstt 2	21	18	3	
30	Ophthalmic Surgeon 1		1	0	
31	Eye donation	ļ	4	0	
32	Para Medical Worker	23	18	5	
33	Ophthalmic Assistant	3	7	1	
34	Urban Health Consultant	22	11	11	
35	I A Cum Comp Asstt	107	91	16	
36	Nursing Sister	2	2	0	
37	Multi purpose Health worker (F)	8	6	2	
38	Radiographer	2	2	0	
39	Clerks	2	2	0	
40	Stenotypist	2	2	0	
41	Dhobi	2	2	0	
42	Law Officer	20	14	6	
43	Biomedical Engineer (divisional)	4	2	2	
44	Biomedical Engineer	21	18	3	
45	Coordinators(RBSK)	21	14	7	4
46	Audiologist & Speech therapist	21	4	17	-
47	Psychologist	21	9	12	1
48	Optometrist	21	11	10	4
49	Early Interventionist cum special educator	21	16	5	4
50	DEIC Manager	21	13	8	4
51	District Adolescent Health Officer	5	5	0	_
52	Adolescent Health Counselors	50	79	29	

/

,

66	C1 (7)		-	
53	EMTs	703	699	4
54	Fleet Manager	21	19	2
55	Control Room Operator	84	81	3
56	STS	74	73	1
57	STLS	52	50	2
58	ТВНV	92	71	21
59	Drivers	948	933	15
60	Stastical Assistant	1	1	0
61	Microbiologist	3	2	1
62	Sweepers	39	33	6
63	Class IV	127	104	23
64	Skill Lab (Nursing)	40	5	35
65	Skill Lab Trainer (Medical)	8	2	6
66	Epidemiologist/Public Health/Specialist	17	1	16
67	District Programme coordinator	17	1	16
68	Finance cum logistics consultant	17	5	12
69	Counsellor	17	4	13
70	Consultant Medicine	13	0	13
71	Sanitary Attendant	26	6	20
72	Hospital Attendant	26	8	18
73	Rehabilitation Worker	21	10	11
74	Dental Technician	21	7	14
75	Social Worker	21	11	10
76	Lab Technician	21	9	12
77	MO Dental	21	11	10
78	Staff Nurse	21	8	13
	Total	11403	10056	1347

During the course of oral examination by the committee the departmental representatives informed the committee that the recruitment procedure on outsourcing basis will be completed within one and a half month. The committee, therefore recommends that after making the recruitments, a report be submitted to the committee.

19 Embezzlements / Misappropriation of funds

On being asked by the committee regarding the number of complaints received and enquiry conducted regarding irregularities/embezzlements/misappropriation of funds against the officers/officials of the department during the last three years

The Department replied as under -

There are two such employees namely Smt Neelam Staff Nurse posted at Civil Hospital Gurgaon and Smt Sudesh Kuman Clerk posted at Civil Hospital Panchkula

After going through the written reply and oral examination of the representatives of the Department the Committee is not satisfied The committee, therefore recommends that latest report be submitted to the committee alongwith C H C, Gharaunda (Karnal)

20 Computerization

On being asked by the Committee

- (i) How many hospital have been Computerized and
- (ii) How many are yet to be computenzed and time by which these will be Computenzed with name and details of the same

The department replied as under

The computenzation of following hospitals is complete so far

- 1 Civil Hospital Panchkula
- 2 CHC Raipur Rani
- 3 PHC Barwala

ı.

- 4 BPC GMC Khanpur Kalan Sonipat
- 5 Civil Hopital Ambala Cantt (Registration only)

It is propo	It is proposed to computenze the following hospital -	ollowing hospital - ' "	ь н Г Г	1
(a)	By March 2016 – 16 [(a) By March 2016 – 16 Distnct Hospitals and 02 Medical Colleges	ical Colleges	
(a)	By August 2016 – 10	By August 2016 – 10 Sub Divisional Hospital 10 CHCs 09 PHCs and 01 Ayush Hospital	HCs 09 PHCs and 01 Ayı	ush Hospital
Phases		Gurgaon Hub	Kurukshetra Hub	Rohtak Hub
(Aug 2015 Jan 2016)	Jan 2016)	MC SHK Mewat	Distt Hospital Ambala	PGIMS Rohtak
	•	Diett Hoenital Gurgaon	Dist Hospital Kurukshetra	Distt Hospital Rohtak

ш (q)	3y August 2016 – 10	By August 2016 – 10 Sub Divisional Hospital 10 CHCs 09 PHCs and 01 Ayush Hospital	HCs 09 PHCs and 01 Ayu	sh Hospital	r
Phases		Gurgaon Hub	Kurukshetra Hub	Rohtak Hub	•••
(Aug 2015 Jan 2016)	2016)	MC SHK Mewat	Distt Hospital Ambala	PGIMS Rohtak	
		Distt Hospital Gurgaon	Distt Hospital Kurukshetra	Distt Hospital Rohtak	
		Distt Hospital Palwal	Ayush Hospital Kurukshetra	Distt Hospital Sonipat	
		Distt Hospital Mewat			
(Nov 2015 March 2016)	ch 2016)	MC SHK Mewat	Distt Hospital Kaithal	PGIMS Rohtak	-
		Distt Hospital Faridabad	Distt Hospital	Distt Hospital Fatehabad	
		Distt Hospital Rewari	Yamunanagar	Distt Hospital Hisar	
		Distt Hospital Jhajjar	Distt Hospital Panipat	Distt Hospital Bhiwani	
		Distt Hospital Narnaul		Distt Hospital Jind	
				Distt Hospital Sirsa	
(Abr 2016 – Aug 2016)	2016)	Sector 10 Gurgaon	SDH Ambala Cantt	SDH Narwana	
	•	FRU 1 Fandabad	SDH Jagadhan	SDH Naraingarh	
		FRU 2 Faridabad	CHC Nilokhen	SDH Charkhi Dadri	
		CHC Samalkha	CHC Kalka	CH Ballabgarh	
			CHC Shahbad	SDH Tohana	
			PHCs (Pinjore Morni Old	CH Hansi	
			Panchkula Hangola Kot	CH Bahadurgarh	
			Naakpur Surajpur Sec 26	CHC Safidon	
			Sec 19)	CHC Meham	
				CHC Dabwali	
		:		CHC Mahendergarh	
After going through t recommends that th	irough the written rep s that the latest pos	he written reply and oral examination of the representatives of the Department the Committee he latest position may be submitted to the committe	e representatives of the De	partment the Committee	

21 Infant Mortality Rate

In the reply to the questionnaire of the committee relating to the present death rate of infants in the State and the steps taken to reduce the infant mortality rate. The reply of the department is as under

The Infant Mortality Rate of the State as per the latest Sample Registration Survey 2013 (SRS 2013) is 41 per thousand live births and as per NFHS 4 it is 33 per thousand live births Various initiatives/programs/schemes to reduce the Infant Mortality Rate (IMR) initiated by the State include Facility Base Newborn Care (FBNC) – 22 Special Newborn Care Units (SNCUs 66 New Born Stabilizing Units and 318 New Born Care Corners (NBCC)

After going through the written reply and oral examination of the representatives of the Department the Committee recommends that the rate of infant mortality for male and female infants be submitted separately

22 Visit Abroad

The department was asked by the Committee to know about the names of Officers/Doctors who visited abroad during last three years and the name of countries The reply of the department is as under

Sr No	Name	Name of Country	
Dent	al Surgeons		
1	Dr Pumima	United State of America	
2	Dr Neetu Sıngh	Thailand Singapore	
з	Dr Promila Chaudhary	United State of America	
4	Dr Ekta Chopra	United State of America	
5	Dr Jyoti Deswal	Canada	
6	Dr Bulbul Kataria	Australia	
7	Dr Sudhır Kumar	Australia	
8	Dr Parveen Boora	United State of America	
9	Dr Shubhshree	United Kingdom	
10	Dr Nitender Kumar	United State of America	
11	Dr Shikha Gupta	Switzerland	

``

· · · · · · · · · · · · · · · · · · ·		
12	Dr Hans Raj Saini	Canada
13	Dr Vandna Dahiya	
14	Dr Sonia Verma	Canada
15	Dr Parveen Boora	United State of America
16	Dr Deepalı Gupta	United State of America
17	Dr Puneet Kaushik	Dubai
18	Dr Sunita	Australia
19	Dr Sonia	Canada United States of America
20	Dr Ekta Goyal	United State of America
21	Dr Parveen Boora	United State of America
22	Dr Shweta Bhadana	Thailand
23	Dr Preeti Mittal	Singapore Malaysia Sri Lanka
24	Dr Kırtı Chhabra	United Kingdom France Switzerland Italy
25	Dr Deepshikha Aggarwal	United State of America
26	Dr Meghna Sharma	Thailand
Medic	al Officers	
27	Dr Kuldeep Sai	Rusia
28	Dr parmod Sharma	USA
29	Dr Sandeep Batish	Thailand
30	Dr Kıranjeet Kaur	Australia
31	Dr Shamlal	
32	Dr Tajiner Sahanı	
Sr Me	dical Officers	
33	Dr VK Bansal	Dubal
34	Dr Suman Jain	Dubai

Dr Saroj Aggarwal Dr Neeru Kapoor	USA
Dr. Neeru Kappor	
	Dubai
Dr Rajiv Kapoor	USA
Dr Liza Joshi	Australia
)r Vikas Sandhır	Malaysia Singapore France Switzerland & Italy
Dr Bela Sharma	Australia
Dr Ashok Kumar Sharma	America
Dr Neelam Dogra	Canada
Dr Renu Beri	UK (England)
)r Archana Sehgal	Singapur
Dr Sanjay Dahiya	Dubai
Dr. Rita Banga	Canada
)r Aruna Sangwan	USA
Dr Vijay Garg	USA
Dr NK Arora	USA
)r Rajiv Vadhera	USA & England
)r Kamla Singh	UK (England)
)r Usha Sıngh	UK (England) Paris France Australia Italy Europe & USA
Dr Sonia Trikha	USA
Dr Deepika Gupta	UK
)r Renu Pahal	UK
)r Satish Aggarwal	Nepal
	r Liza Joshi r Vikas Sandhir r Bela Sharma r Ashok Kumar Sharma r Ashok Kumar Sharma r Neelam Dogra r Renu Beri r Archana Sehgal r Archana Sehgal r Sanjay Dahiya r Rita Banga r Aruna Sangwan r Aruna Sangwan r Vijay Garg r N K Arora r Rajiv Vadhera r Kamla Singh r Usha Singh r Sonia Trikha r Deepika Gupta r Renu Pahal

After going through the written reply and oral examination of the representatives of the Department the Committee desired that details about the official foreign visits undertaken by employees of health department togetherwith the expenditure incurred thereon be submitted to the committee within three months,

23 Encroachment of Property

The department was asked by the committee to supply the details of the Person/Parties who have encroached upon property of the department during the last three year alongwith action taken. The reply of the department is as under

As per the report of vanous Civil Surgeons in the State there are three places where people have encroached upon the property of Health Department which are as follows

- Community Health Cenre Kharkhoda (Sonipat) **(1)**
- Primary Health centre Nagina (Mewat) **(II)**
- Community Health Centre Hodal (Palwal) (111)

After going through the written reply and oral examination of the representatives of the Department the Committee recommends that action taken report in regard to encroachment of CHC Kharkhoda, PHC Nagina and C H C Hodal be submitted to the committee

24 New P H Cs, C H Cs/ Hospitals

To the questionnaire of the Committee regarding the names of the PHCs CHCs and Hospitals constructed during the last three years and of those which are still incomplete the existing status of the same the reply of the department is as under

Year	Hospitals	CHCs	PHCs	SHCs
2013	Trauma Centre Bahadurgarh	CHC-cum GH Kharkhoda	PHC Noorpur	SHC Jalap r
		CHC Kaul	PHC Murthal	SHC Malloka
		CHC firozpur Bangar	PHC Silan	SHC Ransika
		CHC Raipur Rani	PHC Dubeta	SHC Gharrot
		CHC-cum GH Guhla	PHC Bawwa	SHC Janchauli
		CHC Julana	PHC Jaurasi	SHC Bahin
		CHC cum GH Koslı	PHC Sikrawa	SHC Garhi Sarai

The sames of the DHCs. CHCs and Hospitals constructed during last three years are as

		CHC Kahanaur	PHC Brian	SHC Singar
	-		PHC Sihol	SHC Bissar
			PHC Fatehpuri	SHC Pattan Udaipuri
ŀ			PHC Jamalgarh	SHC Hırwarı
			PHC Sudaka	SHC Bhangoh
				SHC Barod
2014	Add Block of GH Namau	I CHC Alawalpur	PHC Rampura	SHC Ahrı
		H CHC Pundri	PHC Mandhana	SHC Uleta
	Kalanaur	CHC Saundhad	PHC Bigopur	SHC Kherakhalıpur
		CHC Kaul	PHC Bega	SHC Alduka
			PHC Deeghot	SHC Golpuri
			PHC Bhuiwana	SHC Mohhamdpur
-			PHC Alıka	SHC Dhulawat
			PHC Sehol	SHC Mohlaka
			PHC Kot	SHC Gogjaka
				SHC Pathralı
				SHC Marora
				SHC Rehna
				SHC Salahen
				SHC Gangaicha Jaat
				SHC Kanwarsika
				SHC Jaisinghur
				SHC Autha
				SHC Bawla
				SHC Gandun

•

			SHC Bukharka
2015		Khairati Khera	Pundri
			Bhighawali
			Jhattipur
			Atolapur
			Karhans
			Jaurasi Khas
			Kultana
			Rohat
			Nai Nangla
			Kotla
			Dehana
	Health Institution Builds	ngs which are incomplete/in P	rogress
Sr No	Civil Hospitals	Status	
1	100 bedded to 200 bedded CH Jind	Block A roof slab laid Plasteri roof slab completed in all 4 sto in progress Electrical and cont	rev Ramp and flooring
2	100 bedded CH Samalkha 1st Phase	70% Completed	
3	Additional block of CH Rewari	Work in progress	
4	50 bedded CH Tosham	Work in progress	
5	50 bedded CH Mohindergarh	Work in progress	
6	CH Palwal	Finishing in progress	
7	CH Panipat	Work in progress	
в	Additional block of CH Panipat	22% work completed	

	·····	
9	CH Sıwanı (50 bedded)	95% work completed
10	Additional block of CH Sohna (Gurgaon)	Work in progress
Comm	nunity Health Centres	
11	Mullana	Architectural drawings finalized recently
12	Dubaldhan	Work in progress
13	Jahajgarh	Work in progress
14	Chhara	Work in progress
15	Dhakla	Work in progress
16	Naraina	20% work completed
17	Bapolı	75% completed
Prima	ry Health Centres	
18	Talu	15% work com _r eted
19	Jui Kalan	50% work completed
20	Sandhwa	40% work completed
21	Tumbahen	Work in progress
22	Sahlawas	Work in progress
23	Patauda	Work in progress
24	Barna	Site recently available
25	Gudiani	Land not available
26	Karontha	5% completed
27	Pilana	Work in progress
28	Nındana Tıgrı	40% completed
29	Ismaila	20% completed
30	Ganga	Tender received on 21 11 14
_		

 31	Dhotter	Work completed & take over on 12 10 15
 Sub H	lealth Centres	
32	Chimni	Work in progress
33	Stwana	Work in progress
34	Sondhi	
35	Pindarsi	Site not available
36	Behlolpur	Site not available
37	Kheridablan	Site not available
38	Kainthal Khurd	Site not available
39	Dayalpur	Site not available
40	Anten	Site not available
41	Sirsia	Site not available
42	Kolapur	Site not available
43	Loharmajra	Site not available
44	Nosera	Work allotted but not started due to site is not cleared
45	Alawalpur	Land dispute alternate site recently received
46	Golpuri	Work completed
47	Pingwan	Feasible site not arranged by the Client Deptt
48	Jamalgarh	Land dispute
49	Nai	Work allotted but not started due to site is not cleared
50	Papra	Site dispute
51	Jehtana	Land dispute
52	Godhola	Work allotted but not started due to land not available
53	Punhana B	Land not made available by the client Deptt
54	Sunari	Work allotted but not started due to site is not cleared
1		

55	Utane	Work allotted but not started due to site is not cleared
56	Panchgauna	Work allotted but not started due to encroachment
57	Gogjaka	Bldg completed & painting in progress
58	Ferozepur Zhırka	Feasible site not arranged by the Client Deptt
59	Hırwarı	Work completed except painting
60	Jodhriyawass	Feasible site not arranged by the Client Deptt
61	Mahu	Work allotted but not started due to site is not cleared
62	Sultanpur	Work allotted but not started
63	Jhimrawat	Land disputed
64	Chirawata	Over all 60 & work comp (Court Case)
65	Rampur Khor	Work in progress
66	Pondri	Work in progress
67	Madnaka	Work in progress
68	Bhighawali	Work in progress
69	Baghpur	Work in progress
70	Sondhad II	Letter has been returned to client Deptt To hand over the site
71	Jarausi Khas	95% completed
72	Dubeta	Land Dispute
73	Ahulana	Land Dispute
74	Nızampur	Land Dispute

During the course of oral examination of the departmental representatives it came to the notice of the committee that PHC for village Barsat and Chaura in Gharaunda Constituency were sanctioned during the year 2002 but the same has not been started so far The committee, therefore, recommends that a detailed report in this regard be submitted to the committee within three months

© 2017

-

Published under the authority of the Haryana Vidhan Sabha and Printed by the Controller Printing and Stationery Haryana Chandigarh