

1, 2004-05) *i.e.* pre-JSY period and India Human Development Survey-2 (IHDS-2, 2011-12).

The results of the study indicate that during the two IHDS rounds, institutional deliveries almost doubled, full ANC increased by 6 percentage points, proportion of deliveries being assisted by trained health personnel increased by 22.3 percentage points and post natal care check-ups (within 2 weeks) increased by 19 percentage points.

The findings of the study also establish that JSY has led to increased utilization of health services among all groups but especially among the poorer and underserved sections in the rural areas thereby reducing the prevalent disparities in maternal care.

The results of the study also indicate that the gap in access to healthcare between the marginalized group of women and those who are financially better-off has declined since the advent of the JSY program.

Budgetary allocation for family planning

1572. SHRI K. C. RAMAMURTHY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that major budget allocation for family planning is provided under the Budget Head 'Family Welfare and the National Health Mission';

(b) if so, the details of budgetary allocation, head-wise and year-wise, during the last three years and the current year;

(c) the formula being adopted by Centre and States in allocating funds to family planning;

(d) the details of money sanctioned, approved and released to various States to promote family planning during the last three years and the current year, year-wise and State-wise; and

(e) the monitoring mechanism in place to stop diversion/misuse of funds so allocated?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI FAGGAN SINGH KULASTE): (a) and (b) Yes, there is a budgetary allocation for family planning under the budget head 'Family Welfare and the National Health Mission'. Under National Health Mission (NHM), family planning is one of the major activities like other activities. The funds are approved activity-wise, however, the

funds are released to States under pools. As funds are released to States under pools considering all other activities covered under NHM, Details indicating State-wise approval/allocation under Family Planning from the F.Y. 2013-14 to 2016-17 are given in the Statement-I (*See* below).

(c) Public health being a State's subject, its implementation primarily lies with the State. Therefore, the formula adopted by the Centre in allocating the funds under NRHM-RCH Flexible Pool of NHM is given in the Statement-II (*See* below).

(d) The funds are released to the States under pools and not activity-wise. As per reply furnished against (a) and (b), the money sanctioned, approved to promote family planning for last 3 years and current year, year-wise and State-wise is at Statement-I.

(e) Besides provision of annual CAG audit, following monitoring mechanisms are in place to stop diversion/misuse of funds so allocated:-

- Annual Statutory Audit by CAG empanelled major CA audit firm;
- Concurrent Audit by CA audit firm;
- Implementation of Public Financial Management System (PFMS) developed by the office of the Controller General of Accounts (CGA) of Ministry of Finance for monitoring and management of funds on just in time basis.
- Submission of Financial Management Reports (FMRs) by the States /UTs.
- Release of subsequent instalments is based on the extent of utilisation of earlier funds released.
- Annual visits to States by Common Review Mission (CRM), which *inter-alia*, looks at financial system and mechanisms.
- Integrated monitoring visits by senior officials of the Ministry and National Health System Resource Centre (NHSRC).
- 2 or more signatories for all NHM accounts and Double Entry Accounting System are followed.

Statement-I

Details showing States/UTs-wise SPIP Approval towards Family Planning under NHM for the F.Ys 2013-14 to 2016-17

Sl. No.	States/UTs	Family Planning SPIP Approval			
		2013-14	2014-15	2015-16	2016-17
1	2	3	4	5	6
(A) High Focus States					
1.	Bihar	8,336.93	6,447.40	11,502.31	11,092.79
2.	Chhattisgarh	2,566.47	2,843.78	1,547.40	2,626.64
3.	Himachal Pradesh	484.11	781.57	611.26	458.23
4.	Jammu and Kashmir	312.80	450.19	450.01	976.35
5.	Jharkhand	2,663.83	3,880.46	4,451.43	376.16
6.	Madhya Pradesh	8,853.87	7,074.93	10,366.95	12,360.48
7.	Odisha	2,047.40	2,375.70	3,642.78	3,773.54
8.	Rajasthan	6,061.44	8,597.05	9,559.32	9,709.26
9.	Uttar Pradesh	7,843.22	8,165.49	13,234.62	15,526.91
10.	Uttarakhand	448.92	655.37	822.47	379.14
	TOTAL	39,618.99	41,271.94	56,188.55	57,279.50
(B) NE States					
11.	Arunachal Pradesh	222.53	122.45	48.78	96.98
12.	Assam	2,235.76	2,473.90	3,312.62	1,976.43
13.	Manipur	172.37	145.96	135.48	70.11
14.	Meghalaya	143.76	141.58	108.72	111.31
15.	Mizoram	136.07	103.02	159.26	63.67
16.	Nagaland	202.74	135.98	114.86	95.42
17.	Sikkim	39.38	58.93	20.40	24.95
18.	Tripura	178.84	177.39	173.86	95.20
	TOTAL	3,331.45	3,359.21	4,073.98	2,534.07

1	2	3	4	5	6
(C) Non-High Focus States					
19.	Andhra Pradesh	5,839.63	3,450.35	3,374.39	3,207.71
20.	Goa	76.30	42.65	61.39	35.75
21.	Gujarat	2,819.68	4,469.00	5,170.55	5,222.35
22.	Haryana	1,081.39	1,076.68	2,184.26	1,893.50
23.	Karnataka	3,424.40	2,915.18	3,102.90	3,760.27
24.	Kerala	654.98	552.61	501.32	513.26
25.	Maharashtra	5,068.60	4,178.52	4,865.99	6,204.42
26.	Punjab	1,065.60	841.92	807.72	813.54
27.	Tamil Nadu	2,982.15	2,029.54	2,871.82	3,704.51
28.	Telangana	-	2,382.24	2,342.22	2,539.27
29.	West Bengal	3,591.23	3,308.39	2,691.29	2,447.31
TOTAL		26,603.96	25,247.08	27,973.85	30,341.89
(D) Small States/UTs					
30.	Andaman and Nicobar Islands	42.15	41.28	54.47	-
31.	Chandigarh	14.60	29.03	25.14	36.09
32.	Dadra and Nagar Haveli	20.94	85.67	42.62	-
33.	Daman and Diu	8.49	10.76	14.70	-
34.	Delhi	430.13	512.18	436.90	129.90
35.	Lakshadweep	17.94	5.35	5.70	7.43
36.	Puducherry	86.57	105.75	55.06	-
TOTAL		620.81	790.02	634.59	173.42
GRAND TOTAL		70,175.21	70,68.25	88,870.98	90,328.87

Note:

1. SPIP- State Programme Implementation Plan.
2. The above data of Family Planning is comprises of Female Sterilisation, NSV camps, Compensation for male and female sterilisation, Spacing Methods, Other strategies/activities, Family Planning Training, BCC/IEC Activities towards FP, Procurement of equipment and Drugs for F.P., Printing of IUCD cards, FP manuals, guidelines etc. under NHM Scheme.

Statement-II*Formula for allocation of funds under NRHM-RCH Flexible Pool*

Family planning is the activity covered under NRHM-RCH Flexible Pool of NHM. The allocation of funds to the States under NRHM- RCH Flexible Pool is done on the basis of population with some additional weightage to states on account of socio-economic backwardness and health lag. The weightage to the States are as under:

Category States	Weightage
Large Empowered Action Group (EAG) States of UP, MP, Bihar, Rajasthan, Odisha	1.3
Jharkhand, Chhattisgarh (EAG States)	1.5
Eight NE States including Sikkim and 3 Hilly States (Uttarakhand, J&K and HP)	3.2
Small UTs (Lakshadweep, Daman & Diu, Dadra & Nagar Haveli and Andaman & Nicobar Island)	3.0
Other States/UTs received funds without any additional weightage	-

(a) RCH flexible pool: Allocation is done on the basis of total population of the State and rural area.

(b) Mission Flexible Pool / System strengthening under NRHM: Allocation is done on the basis of rural population and rural area.

Nation-wide emergency medical services

1573. SHRI K. K. RAGESH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has any reports about the functioning of Emergency Medical Services in India including the Centralised Accident and Trauma Services;

(b) whether such services are available in all the States;

(c) if so, the details thereof, if not, the reasons therefor; and

(d) whether there are any concrete proposals to ensure nation-wide good quality emergency medicine services in India and if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI ANUPRIYA PATEL): (a) to (d) Thirty one States/UTs have the