



MISSION DIRECTOR NATIONAL HEALTH MISSION, J&K

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**The Chief Medical Officer,
(Vice-Chairman, District Health Society),
(All).**

No: SHS/J&K/NHM/FMG/ 22245-99 Dated: 12-09-2018.
Sub: District Budget Sheets for the financial year 2018-19 under NHM.

Sir/Madam,

Consequent upon the approval conveyed to the State Programme Implementation Plan of NHM 2018-19 by Ministry of Health & Family Welfare, Govt. of India and subsequently approval conveyed by the Executive Committee State Health Society vide No. SHS/NHM/J&K/EC/21680-702 dated 08.09.2018 for release of funds to districts / other implementing agencies, kindly find enclosed herewith the detailed district wise / activity wise Budget Sheets for the financial year 2018-19 as per the district PIP of your district. The Approval of State Programme Implementation Plan 2018-19 and budget sheets 2018-19 have also been uploaded on the official website of the NHM, J&K (www.jknhm.com).

You are advised to prepare the block wise budget sheets of your district as per the activity wise allocation given in the district budget sheets enclosed herewith and provide the same to the concerned Block Medical Officers with the copy to this office **within 3 working days positively**. In case of any discrepancy or clarification, please feel free to contact the undersigned or Planning Section/ Financial Management Group of the State Health Society.

You are, therefore, advised to implement the approved activities strictly as per the targets / rates prescribed in the budget sheets after observing all codal formalities and subject to adherence of the following Key Conditionalities laid down by the Ministry of Health & Family Welfare GoI:-

1. District shall convey the block wise approvals to the blocks within 4 working days positively.
2. All buildings supported under NHM should prominently carry NHM logo in English/ Hindi & regional languages.
3. All ambulances supported under NHM to be branded as 'National Ambulance Service' and adhere to the colour, design and logo as communicated by MOHFW.
4. All MMUs to be branded as 'National Mobile Medical Unit' and adhere to the colour, design and logo scheme as communicated by MOHFW.
5. The support under NHM is intended to supplement and compliment and not to substitute state expenditure. All the support for HR will be to the extent of positions approved in the budget sheets of the current financial year.
6. **Release of funds would depend upon the following conditions: -**
 - Physical and financial progress made by the District.
 - Timely submission of Concurrent Audit Report and compliance to the observations made in the Statutory Audit Report.
 - Before the release of funds beyond 50% of the approvals for the year 2018-19, districts / other implementing agencies need to provide Utilization Certificates against the grant released.
 - Districts shall ensure implementation of EAT (Expenditure, Advance, Transfer) module of PFMS upto Block Level.
 - Districts shall ensure 100% ADHAAR seeding with respect to JSY beneficiaries, ASHAs, Family Planning beneficiaries, contractual staff.
 - Districts shall ensure submission of monthly report on physical progress against targets and expenditure including an analysis of adverse variances and corrective actions proposed to be taken.
7. ***The district shall not make any change in allocation amongst different budget heads without approval from State Health Society.***
8. All approvals are subject to the Framework for Implementation of NHM guidelines issued from time to time & the observations made.

9. The accounts of Districts / other institutions / organizations 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.

10. The Districts shall provide data for uploading following mandatory disclosures on the state NHM website:

- Facility wise deployment of all HR including contractual staff hired under NHM with name, designation, address and contact no. This information should also be uploaded on HMIS.
- Facility wise service delivery data particularly on OPD, IPD, Institutional Deliveries, C-sections, Major and Minor surgeries etc. on HMIS portal.
- MMUs- total number of MMUs, monthly schedule format and service delivery data on monthly basis capturing information on all fields mentioned in the specified format provided by the State Health Society.
- Patient Transport Ambulances and Emergency Response Ambulances- total number of vehicles, type of vehicles, registration number of vehicles, service delivery data including clients served and kilometers logged on monthly basis as per the format provided by the State Health Society.
- Buildings under construction/renovation –total number, name of the facility/hospital along with costs, executing agency and execution charges (if any), date of start & expected date of completion in specified format.
- Supportive supervision plan and reports shall be part of mandatory disclosures. Block-wise supervisory plan and reports should be uploaded on the website. No TA/DA to the officer/official will be sanctioned without submission of detailed tour notes to the District Health Society under intimation to this office.
- Facility wise list of package of services being provided through the U-PHCs & U-CHCs

11. Timely updation of RCH and HMIS data including facility wise reporting.
12. Districts/ other Health facilities shall ensure that JSY payments, ASHAs incentives, payments to the contractual staff, family planning compensations are made through Direct Benefit Transfer (DBT).
13. Line listing of high risk pregnant women, including extremely anaemic pregnant women and Low Birth Weight (LBW) babies.
14. Facility wise performance audit and corrective actions based thereon.
15. Performance Measurement system set up to be implemented for monitoring the performance of regular and contractual staff.
16. Baseline assessment of competencies of all SNs, ANMs, Lab Technicians to be done and corrective actions taken thereon.
17. District Health Societies to support both NUHM and NRHM. Parallel structures shall not be created for NRHM and NUHM.
18. District will adopt Competency based Skill Tests and transparency in selection and recruitment of all paramedical staff sanctioned under NHM.
19. Investments in U-PHCs must lead to improved service off take at these facilities, which should be established through a baseline survey & regular reporting through HMIS.
20. The UPHCs should provide the whole range of services enumerated in the NUHM Implementation Framework.
21. **With regard to the financial benefits to the contractual staff, following points are to be noted:**
 - a) *Remuneration of the existing contractual staff shall be paid as per the rates, drawn as on 31st March 2018 and for new incumbents, the remuneration shall be paid the base remuneration as mentioned in the District Budget Sheets 2018-19 against each category of post;*
 - b) *5% increment shall be applicable to all the contractual staff working at State/Divisional/District/Block Level including NUHM and Disease Control Programmes on the existing*

remuneration who have completed one year during the current financial year 2018-19. The effect of 5% increment shall be w.e.f 1st April 2018 and will be given to the staff from the date of completion of one year's Contractual Service;

c) Experience/ Loyalty Bonus is to be given as under:

- 10 % to those employees who have completed minimum 3 years;*
- 15 % for those who have completed 5 or more years;*

It will be part of the monthly remuneration which means that base remuneration for 2018-19 would include the base salary as on 31st March 2018 plus annual increment and loyalty i.e experience bonus based on the service of the employee. DDO shall ensure that the Loyalty/Experience Bonus is to be implemented as per Ministry of Health & Family Welfare, GoI instructions in the ROP 2018-19. The effect of Experience/ Loyalty Bonus shall be w.e.f 1st April 2018.

22. In addition to the mentioned above, the key conditionalities/ incentives & disincentives mentioned at page No. 6 to 12 of approval of State Programme Implementation Plan- Jammu & Kashmir 2018-19 are also the key conditionalities.

Yours faithfully

Encls: As stated above.


(Dr. Mohan Singh)
Mission Director
NHM, J&K

Copy for information to the:

1. Principal Secretary to Govt., Health & Medical Education Department, (Chairman, Executive Committee, SHS), Civil Secretariat, J&K.
2. District Development Commissioner (Chairman, District Health Society)_____ (All)_____.
3. Director Health Services, Jammu/Kashmir.
4. Director Family Welfare, MCH & Immunization, J&K.

5. Managing Director, J&K Medical Supplies Corporation, J&K.
6. Director (Planning), State Health Society, J&K.
7. Financial Advisor /Chief Accounts Officer, SHS, NHM, J&K.
8. State Nodal Officer, NHM, J&K.
9. Divisional Nodal Officer, NHM Jammu/Kashmir Division.
- 10.State Finance Manager/State Accounts Manager (s), State Health Society, J&K.
- 11.In charge official website. www.jknhm.com.
- 12.Office Copy.