Assessment of Working of NRHM

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The working of National Rural Health Mission (NRHM) has been regularly assessed, inter-alia, through external surveys such as, National Family Health Survey (NFHS) and Sample Registration System (SRS). Institute of Economic Growth (IEG) conducted an evaluation of NRHM on behalf of the Planning Commission. Further, Common Review Missions (CRMs) also undertake a review of NRHM/NHM annually.

The details on different evaluations/assessments are available in public domain as under:

NFHS-4:

http://nrhm-mis.nic.in/SitePages/NFHS.aspx

SRS:

 $http://www.census india.gov.in/2011-Common/Sample_Registration_System.html$

CRM reports:

 $http:/\!/nhm.gov.in/monitoring/common-review-mission.html$

Under the National Health Mission (NHM), financial and technical support is provided to the States/UTs for strengthening their healthcare delivery system including support for provision of essential drugs free of cost to those who access public health facilities. An incentive of upto 5% additional funding (over and above the normal allocation of the State) under NHM is provided to those States that effectively implement free essential drugs initiative. All the States/UTs, including Maharashtra, have reported that they have notified free drug policy in their respective States/UTs. To improve availability of drugs, support is also provided for setting up IT infrastructure for supply chain management. Maharashtra has set up a Drug & Vaccine Distribution Management System with NHM support.

Under NHM, the local bodies are envisaged to play an important role in effective management of NHM schemes and programmes.

At village level Village Health Sanitation & Nutrition Committee (VHSNC) is constituted which function under the ambit of the Panchayati Raj Institution (PRI) and acts as a sub- Committee or a Standing Committee of the Gram Panchyat under the latter's oversight to empower panchayats with the understanding and mechanisms required for them to play their role in governance of health and other public services and to enable communities through their leadership to take collective action for the attainment of better health status in the village. It includes elected members of the panchayat resident in the village as its members.

A similar mechanism in urban areas is the Mahila Arogya Samiti (MAS). Untied funds are provided to the VHSNC and MAS on an annual basis to undertake their functions. At health facility level Rogi Kalyan Samities (RKSs) are constituted which, inter alia, supervise the implementation of National Health Programmes at the hospital and other health institutions that may be placed under its administrative jurisdiction and Improve participation of the Society in the running of the hospital. RKS includes representatives of PRIs and Urban Local Bodies (ULBs).

Further in every district, DISHA committees are constituted for monitoring of various Centrally Sponsored Schemes in the District. It also includes representatives from PRIs and ULBs

The Minister of State (Health and Family Welfare), Sh Faggan Singh Kulaste stated this in a written reply in the Rajya Sabha here today.

MV/LK

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