Integrated Child Development Scheme (ICDS)

Manual for District- Level Functionaries

2017

PREFACE

The purpose of this Development Manual for Integrated Child Development Scheme (ICDS) Services is to create an enabling mechanism for improved implementation of the Centrally Sponsored Scheme (CSS) at the cutting edge, leading to enhanced outcomes in nature and extent. Accordingly, it would act as a guide for implementation by the District Collector and key District-level functionaries, enable quick learning, implementation modalities, roles and responsibilities of the various functionaries as well as stakeholders etc.

This Manual is prepared with inputs from a combination of sources, including interaction with the Ministry of Woman and Child Development (MWCD), Government of India (GoI), review of extant framework issued in October 2012 and circulars issued till November 2017 by MWCD and discussions with the key personnel involved in implementation of the Scheme.

For greater direction, the guidelines cited must be referred to along with the SSA website (http://icds-wcd.nic.in/icds/) for guidance and clarification on implementation from time to time.

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1 Integrated Child Development Scheme (ICDS)

1.1 About the Scheme

Launched in 1975, Integrated Child Development Scheme (ICDS) is a unique early childhood development programme, aimed at addressing malnutrition, health and also development needs of young children, pregnant and nursing mothers.

ICDS consists of 4 different components, namely:

1. Early Childhood Care Education & Development (ECCED)
2. Care & Nutrition Counselling
3. Health Services
4. Community Mobilisation Awareness, Advocacy &Information, Education and Communication

The ICDS, Centrally Sponsored Scheme, is anchored by Ministry of Women and Child Development (MoWCD), Government of India (GoI). The Anganwadi Services (under Umbrella Integrated Child Development Services) is a Centrally Sponsored Scheme and the Government of India releases grants-in-aid to the States / UTs presently on the following cost sharing ratio between Centre and States/UTs:

Sl. No.	Contributors for the Scheme	Percentage of Cost Sharing (Centre & State)
i	States & UTs (With Legislature): • ICDS (General) [Salary/honorarium/programme components) • ICDS (Supplementary Nutrition Programme)	 60 : 40 50 : 50
Ii	NE States and Himalayan States (all components)	90 : 10
Iii	Union Territories (without Legislature) (all components)	100 : 0

1.2 Objectives of the Scheme

Objectives of the Scheme[1]are broadly classified as follows:

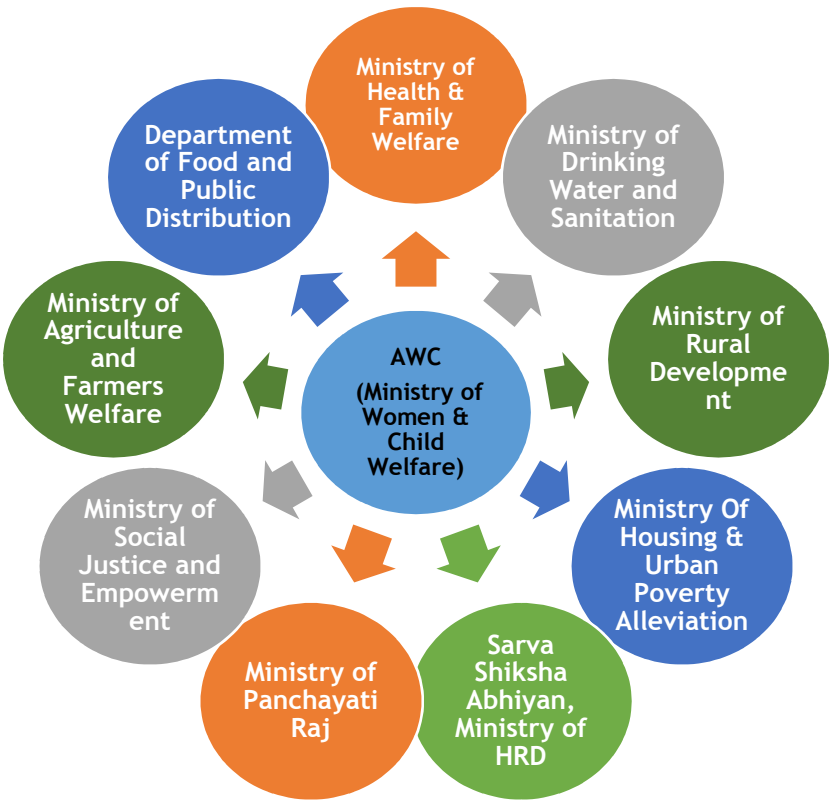
- **Institutionalise essential services and strengthen structures at all levels:**
  - Implementing ICDS in Mission mode to prevent under nutrition
  - Strengthen ICDS- AWC as the first village post for health, nutrition and early learning
  - Focusing on children under 3 years
  - Focusing on early child care and learning environment
  - Moving from outlays to child-related outcomes
  - Fostering decentralisation and community based locally responsive childcare approaches
- **Enhance capacities at all levels:**
  - Vertical integration of training of all functionaries to strengthen field based joint action and teamwork to achieve desired results and objectives
  - Establish national training resources centres at Central & State levels

- **Ensure appropriate inter-sectoral response at all levels:**
  - Ensure convergence at the grassroots level by strengthening partnerships with PRIs, Communities, Civil Societies to improve Child development services
  - Coordinate and network with all Government & Non- Government Organisations providing services for children
- **Raise public awareness and participation :**
  - Strengthen maternal and child care, nutrition and health education
  - Raise public awareness at all levels about vulnerabilities of children
  - Inform beneficiary group and public about availability of core services
  - Promote social mobilisation and voluntary action
- **Create database and knowledge base for Child development services:**
  - Strengthen ICDS Management Information System (MIS)
  - Use Information, Communication Technology (ICT) to strengthen the information base and share & disseminate information
  - Undertake Research and Documentation

1.3 Convergence of Different Ministries & Schemes

In implementation of the ICDS scheme, convergence is brought in between many Central Ministries[2] and their services are framed into the 4 different components of ICDS. The Ministries involved for convergence with ICDS is given in the figure below.

Figure 1: Convergence of Different Departments through Anganwadi Centres

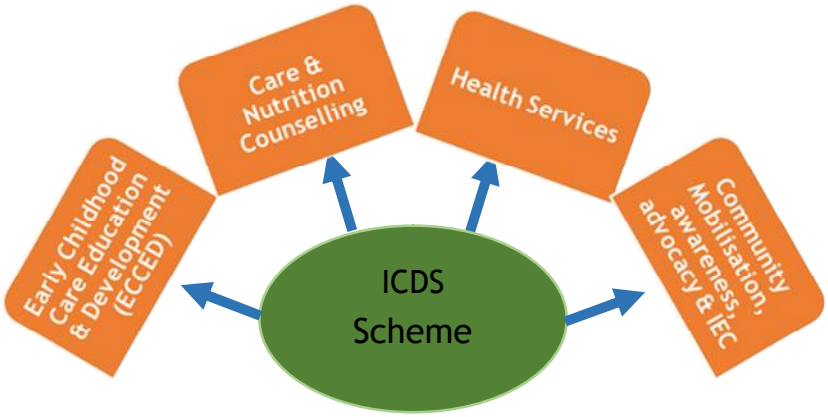


1.4 Scheme Component and Interventions

The scheme envisages interventions in four different components to achieve its objectives. The Scheme components are grouped into different services detailing the interventions that are suggested along with the activities to be carried out to enable achievement of the ultimate objectives of the Scheme.

The components and related interventions and the beneficiaries are detailed in this segment. Scheme Framework may be referred to for comprehensive information on these interventions[3]. The four components of the scheme are shown below.

Figure 2: ICDS Scheme Components



1.4.1 Early Childhood Care Education & Development (ECCED)

The services and interventions that are grouped into the Early Childhood Care Education & Development (ECCED) component are given in the table below along with activities to be carried out and the functionaries responsible for them.

Table 1: Interventions & Activities in Early Childhood Care Education & Development (ECCED)

Service & Target Beneficiaries	Interventions and Activities	Functionaries Responsible
Providing Early Childhood care and Education / Pre-school Non-formal Education The beneficiaries of this service are: - 0-6 year Children - Parents / Care givers	**Interventions:** - Guidance to Parents through Home visits - Early screening and referral - Monthly monitoring & promotion of child growth & Developmental milestones - Fixed Monthly village ECCE Days - Non-formal pre-school education: ○ Activity based ○ Semi-structured play & learning method - Quarterly monitoring & promotion of child growth & Developmental milestones **Activities:** - Provide Non Formal Pre-School Education to channelize child's energy and also offer substitute	Anganwadi Worker (AWW) / Second AWW cum Child Care & Nutrition Counsellor Supervisor is required to attend at least 2 EECE meetings per month

Service & Target Beneficiaries	Interventions and Activities	Functionaries Responsible
	care to younger, to free older Siblings, especially girls to attend school - Make children school ready with holistic development activities - Engage with Parents group / Mothers group to enable them train their children through play mode - Conduct ECCE day capacity building to parents and Grand Parents for increased parent led child leaning. Involve NGOs and School teachers in ECCE Days	
Supplementary Nutrition The beneficiaries of this service are: - 6 months to 6 Yrs. - Pregnant and Lactating Mothers	**Interventions:** - Morning Snack, Hot Cooked Meal and THR as per norms **Activities:** - Supplementary nutrition to be ensured for a minimum of 300 days in a year - Bridge between the Recommended Dietary Allowance (RDA) and the Average Daily Intake (ADI) of beneficiaries - The Supplementary Nutrition Rules are issued by MWCD in 2017[4]	AWW/ Second AWW/ Anganwadi Helper (AWH)/ Self Help Groups (SHGs)/ Others

1.4.2 Care and Nutrition Counselling

The services and interventions that are grouped into the Component of Care and Nutrition Counselling are detailed in the table below along with activities to be carried out and the functionaries responsible to carry out these activities.

Table 2: Interventions & Activities in Care and Nutrition Counselling

Service & Target Beneficiaries	Interventions and Activities	Functionaries Responsible
Infant & Young Child feeding (IYCF) Promotion & Counselling The beneficiaries of this service are: - Pregnant and lactating Mothers - Mothers of Children	**Interventions:** - IYCF practices comprise of breast feeding for first six months of life and appropriate complementary feeding - Skilled one to one counselling through home visits **Activities:** - Advice women on Food intake - Advice on breast feeding activity designed to give nutritional food to children - For optimal breast feeding practices linked to growth monitoring - Complementary Feeding - Home visits and follow-ups	AWW/Second AWW cum nutrition Counsellor/ Supervisors/ Accredited Social Health Activist (ASHA) / Auxiliary Nurse Midwife (ANM)

Service & Target Beneficiaries	Interventions and Activities	Functionaries Responsible
under 3 years		
Maternal Care Counselling The beneficiaries of this service are: - Pregnant and Lactating Mothers	**Interventions:** - Early registration of pregnancy - Counselling on diet, rest and IFA compliance during Home visits - Monitoring Weight gain - Examination for pallor and oedema and any danger signs - Home based counselling which is essential for new-born care, lactation support &counselling on spacing **Activities:** - Nutrition counselling to all the women in age group of 15 – 45 years - Counselling and Behaviour Change Communication (BCC) to women regarding: o Basic Health Care, Nutrition, Maternal Care and healthy food habits o Childcare, infant feeding practices, utilisation of health services, o Family planning and Environmental Sanitation - Lactation support includes support for initiation of breastfeeding through skilled counselling	ASHA/ ANM/ Medical Officer (MO) / Second AWW cum nutrition counsellor
Care, Nutrition, Health & Hygiene Education The beneficiaries of this service are: - P&L Mothers and other caregivers, - Community and families	**Interventions:** - Monthly health and nutrition education sessions - Education on improved caring practices – feeding, health and hygiene and psychosocial - Knowledge sharing for care during pregnancy, lactation and adolescence - Promotion of local foods and family feeding - Appropriatefood demonstration - Celebration of Nutrition week, Breastfeeding week, ICDS day etc. **Activities:** - Weighing of children 0-3 years on monthly basis and 0-6 years children on quarterly basis. - Maintain weight-for-age growth charts for all children 0-6 yrs. as per WHO Child Growth Standards. - Identifying growth faltering and appropriate counselling of care givers on optimal infant and young child feeding and health - Providing joint Mother and Child Protection card to each mother to track the nutritional status, immunization schedule and developmental milestones for both child and pregnant and lactating mothers	AWW/ Second AWW cum nutrition counsellor / Supervisor
Community	**Interventions:**	AWWs/ AWH/

Service & Target Beneficiaries	Interventions and Activities	Functionaries Responsible
based care and management of Underweight Children The beneficiaries of this service are: Moderately and severely under-weight children & their mothers / care givers	- 100% Weighing of all eligible children and identification of underweight children - Referral to NRCs/MTCs for children requiring medical attention - 12-day Nutritional counselling and care sessions for required children (Sneha Shivirs)&18-day home care and follow up during home visit **Activities:** - Providing hands on training on caring practices is given at "Sneha Shivirs" to mothers and caregivers of underweight children at AWCs for 12 days, followed by 18 days home practice. - Tracking of the weight growth of the children during the 18 days home practice through home visits.	Supervisors/ Mother's Group/ PRIs/ SHGs/ MO Additional Anganwadi Worker / Nutrition Counsellor ASHA and ANM as facilitators

1.4.3 Health Services

The services and interventions that are grouped into the Component of Health Services are detailed in the table below along with activities to be carried out and the functionaries responsible to carry out these activities.

Table 3: Interventions & Activities in Health Services

Service & Target Beneficiaries	Intervention and Activities Suggested	Functionaries Responsible
Immunization and Micronutrient Supplementation The beneficiaries of this service are: - 0-3 years - 3-6 years - P & PL Mothers	**Interventions:** - Regular fixed monthly VHNDs - Primary Immunization - Boosters - TT for Pregnant women - Vitamin A supplementation (9 months – 5 Years) - IFA supplementation (infants after 6 months of age) - Deworming as per guidelines & Counselling **Activities:** - Ensure immunization of pregnant women and infants. - Children to be given Vitamin A and Booster Doses as per the national immunization schedule - AWW to assist health functionaries for complete coverage. - Organising and conducting fixed day immunization sessions, known as "Village Health Nutrition Days (VHND)" at the AWC	ANM/MO/ ASHA/ AWWs as facilitators
Health Check-up	**Interventions:** - Antenatal Care (ANC)/ Post Natal Care (PNC)/Janani Suraksha Yojna (JSY) - Support for Integrated Management of Neonatal &	ANM/MO/ASHA/ AWWs

Service & Target Beneficiaries	Intervention and Activities Suggested	Functionaries Responsible
The beneficiaries of this service are: - 0-3 years - 3-6 years - P & PL Mothers	Childhood Illness (IMNCI)/ Janani Shishu Suraksha Karyakram (JSSK) - Identification of severely underweight children requiring medical attention& support community **Activities:** - Carry out regular health check-ups, recording weight, immunisation, support to community based management of malnutrition, treatment of diarrhoea, deworming and distribution of iron and folic acid and medicines for minor illness - AWC to control common ailments like fever, cold, cough, worm infestation etc. including medicines and basic equipment for first aid	
Referral Services The beneficiaries of this service are: - 0-3 years - 3-6 years - P & PL Mothers	**Interventions:** - Referral of severely underweight to health facility / NRCs - Referral for complications during pregnancy - Referral of sick new-borns and sick children **Activities:** - During health check-ups and growth monitoring sessions refer sick and malnourished children as well as pregnant lactating mothers in need of prompt medical attention, to the Health facilities	ANM/ MO/ ASHA/ AWWs

1.4.4 Community Mobilisation, Awareness, Advocacy & IEC

Table 4: Interventions & Activities in Community Mobilisation, Awareness, Advocacy & IEC

Service & Target Beneficiaries	Intervention and Activities Suggested Thereof	Functionaries Responsible
IEC, Campaigns and Drives etc. The beneficiaries of this service are: - Families & Community	**Interventions:** - Information dissemination & awareness generation on entitlements, behaviours & practices - Sharing of nutritional status of children at Gram Sabhas meetings - Linkage with VHSNC, Action Groups, Community **Activities:** - Sensitization and engagement of PRIs/SHGs/Mothers Committees on Nutrition & Child Development - Social mobilisation campaign in partnership with Song and Drama Division in tribal areas, rural areas - Use of mainstream media channels like TV, Radio, print media, newsletter etc. for propagating good practices of child & women health - Identifying local troupes to generate awareness	AWW/ Second AWW/ Supervisors/ Food and Nutrition Board (FNB)/ Dist. & Block Resource Centres/ ICDS Management

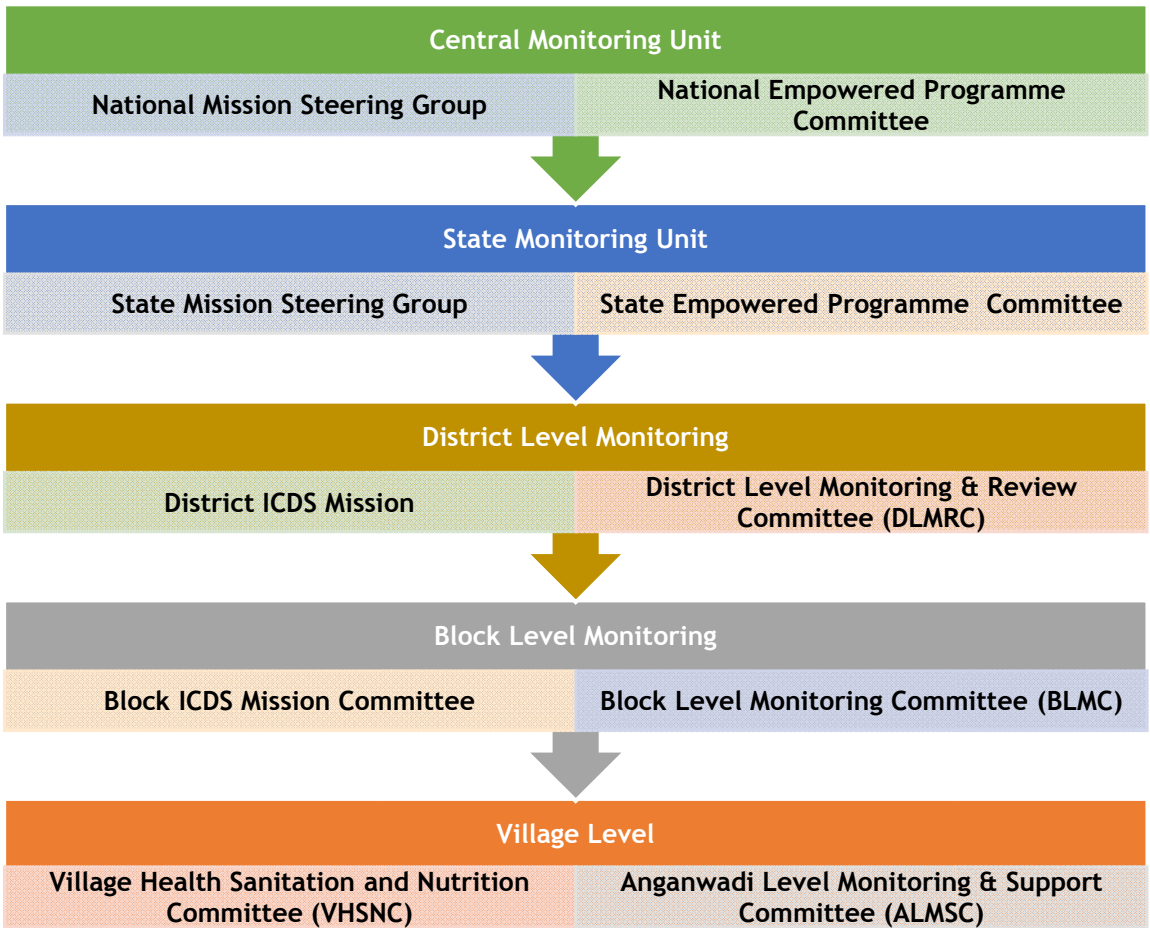
Service & Target Beneficiaries	Intervention and Activities Suggested Thereof	Functionaries Responsible
	about components of ICDS Scheme - Interpersonal Communication through home visits, the mothers-in-law, mother and other care givers are also sensitised to ensure appropriate care and feeding practices at home. - Voluntary Action for promoting ICDS schemes are invited for undertaking home visits and counselling.	

2 Organisational Setup

2.1 Project Monitoring Structure

The administrative structure[5] to implement this programme is a multi-layered set up starting from the Central level monitoring to community level monitoring at the village level, detailed monitoring guidelines are issued by the CMU[6]. Different monitoring committees are prescribed at each level as presented below:

Figure 3: Project Monitoring Structure



2.1.1 Monitoring Functions at Different Levels

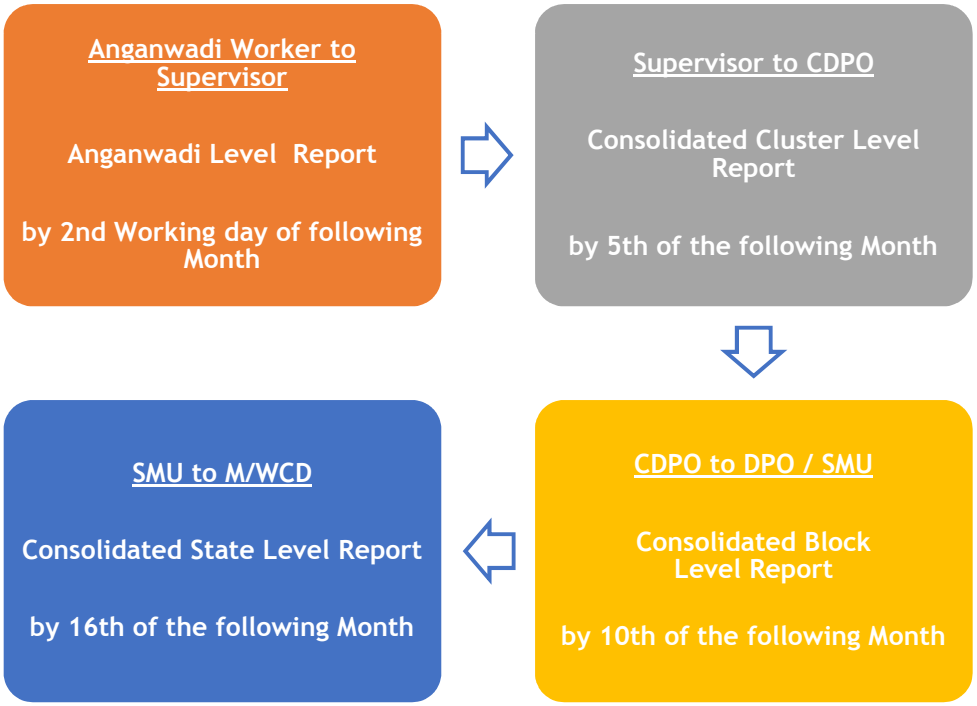
State Level Monitoring Functions[7]
• The work progression, supervision and monitoring of the scheme is carried out with the help of different academic Institutions such as Community Medicine Department of Medical Colleges, Home Science College and Schools of Social Work etc. • With the help of the above institutions, data from each district is collected and, analysed. The data analysis and project implementation progress is monitored in Monthly Progress Report (MPR) and Annual Progress Report (APR) which are submitted to the Monitoring & Evaluation Unit of the Ministry of Women and Child Development.
District Level Monitoring Functions

- At the district level, monitoring is carried out at 3 different levels in District:
  - District Magistrate / Collector and/or District Welfare Officer led monitoring
  - Block level monitoring by CDPO
  - Cluster level by the Supervisor
- Apart from Administrative monitoring, Community based monitoring mechanism are encouraged to bring in transparency and accountability in delivery of services.
- Time lines for submission of reports maintained on the integrated portal

2.1.2 Monthly & Quarterly Progress Reporting Flow:

Timelines for submission of Monthly Progress Reports[8] and Quarterly Progress Reports at different levels are detailed below.

Figure 4: Progress Reporting Flow



2.1.3 Rapid Reporting System

In the restructured and strengthened ICDS, revised Management Information System (MIS) for ICDS Scheme has been rolled out wherein new formats of registers and reporting (Monthly Progress Reports (MPR) and Annual Status Report (ASR) have been prescribed at AWW and CDPO level. This has been revamped and revised AW-MPR has introduced which replaces AW-MPR and AW-ASR.

National Informatics Centre (NIC), Delhi has developed web-enabled Rapid Reporting System earlier known as ICDS-MIS for use across all States/UTs for entry of revamped reporting formats at State / UT level.

It may be noted that each AWC will be assigned 11 digit unique code [2 digit for State Code + 3 digit for district code + 2 digit for ICDS project code + 2 digit for sector code + 2

digit for AWC code]. Seven digits of the 11 digit unique code for an AWC have already been communicated by the Ministry for implementation in the Sates/UTs. So only remaining 4 digits (2 digit code for Sector and 2 digit code for AWC) of the 11 digit unique code for each AWC, in a Sector, of the Project are to be assigned by the concerned State/UT.

The objective of the ICDS-RRS is to provide Design, Development, Implementation and Training for ICDS-RRS Application for real time entries and monitoring the physical and financial progress of the implementation of the ICDS Scheme.

2.2 Institutional Arrangement

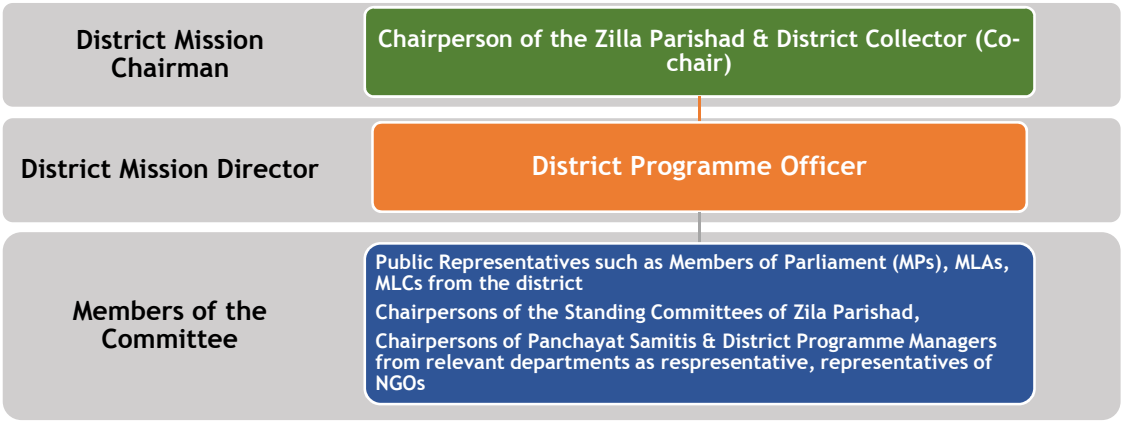
At the District level to involve Community at different levels, implementation framework prescribes Community based Monitoring Committees and also prescribes Administrative Committees to oversee implementation of the programme.

2.2.1 District Level

District ICDS Mission

At District Level, the District ICDS Mission is headed by the District Collector or Chairperson of Zilla Parishad as Chairperson or Co-chairperson of District ICDS Mission.T he composition of the committee of District ICDS Mission is detailed below. District Programme Officer acts as District Mission Director. The composition of the District Mission[9] that monitors progress is depicted below.

Figure 5: Institutional Structure at District Level



District Level Monitoring & Review Committee

At Administrative level at the District, the administrative committee is known as District Level Monitoring & Review Committee (DLMRC) on ICDS monitors the progress of the Scheme implementation. The committee shall meet once in a quarter or as convened by the Chairman and it submits the report to Chief Secretary / Secretary (WCD) outlining actions taken and support required from State Government.

The DLMRC[10] is headed by the District Collector / Magistrate as Chairperson and Chief Executive Officer (CEO) as Vice-Chairperson and the District Programme Officer (ICDS) is

the Member – Secretary and the District level officers of different departments, Member of Parliament, Member of Legislative Assembly and other committee members as suggested by ICDS implementation framework.

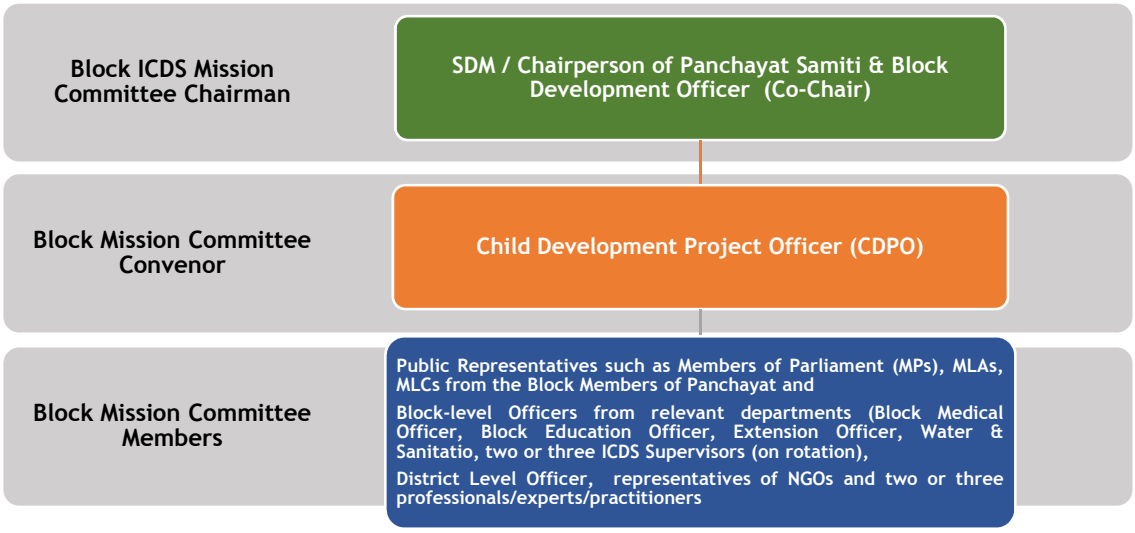
2.2.2 Block Level

Block ICDS Mission Committee

At Block Level, Block ICDS Mission Committee is headed by the SDM or Chairperson of the concerned Panchayat Samiti as Chairperson or Co-chairperson of Block ICDS Mission Committee

The composition of the committee is detailed below. The Child Development Project Officer (CDPO) is the Block Mission Committee Convenor. Administratively, Block Development Officer and Child Development Project Officer (CDPO) are responsible for conduct of the meetings and providing the committee with required information, co-ordination etc.

Figure 6: Institutional Structure at Block Level



Block Level Monitoring Committee (BLMC) on ICDS[11]

At Administrative level at the Block, the administrative committee is known as Block Level Monitoring Committee (BLMC) on ICDS monitors the progress of the Scheme implementation. The committee shall meet once in a quarter and it submits the report to District Committee with a copy to the State Directorate of ICDS. The Committee is suggested by Implementation Framework, the State Government can list the officials at Block level to represent suggested department in the Committee.

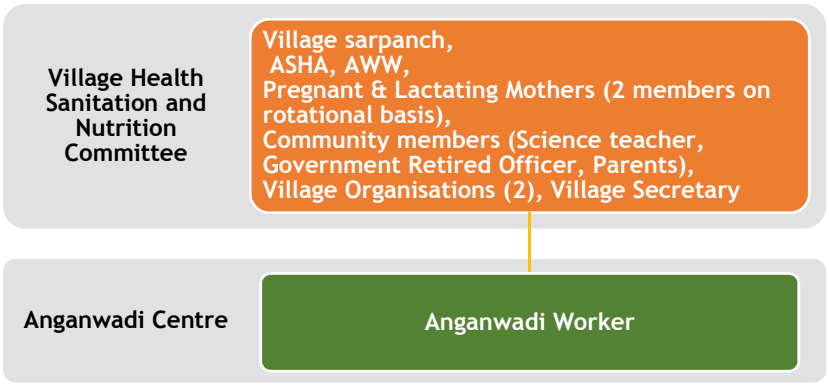
BLMC is headed by Sub Divisional Magistrate (SDM) as Chairperson and Block Development Officer as Vice-Chairperson. ICDS is represented by CDPO who supports the Committee.

2.2.3 Village Level

Village Health Sanitation and Nutrition Committee (VHSNC)

At Village Level, Village Health Sanitation and Nutrition Committee (VHSNC) is the Community monitoring centre and they are assisted by the Supervisor and Anganwadi Worker. VHSNC functions as sub-committee of Panchayati Raj Institution.

Figure 7: Institutional Structure at Village Level



Anganwadi Level Monitoring & Support Committee (ALMSC)

Anganwadi Level Monitoring & Support Committee (ALMSC) on ICDS with Gram Panchayat/Ward member as Chairperson and Anganwadi Worker as Convenor and other community based village members. The Committee will organise regular monthly meetings to discuss various issues in Anganwadi in the village or ward and copy of the minutes sent to Block Level Committee and CDPO.

3 Financial Resources and Flow of Funds

For approval of the Plans and funding of the project[12], the Districts prepare District Child Development Action Plan which is consolidated to prepare Annual Programme Implementation Plan (APIP) at the state level. The plans are prepared as per the prescribed norms in the Scheme.

Construction of AWC[13]:

For construction of an AWC building, as per the prescribed norms, an amount of Rs. 4.5 lakh is allocated for construction of new building and Rs. 1 lakh for renovation of the old building to make it child friendly. The cost is borne in 75:25 by Centre & State.

Rent of AWC:

The monthly rent budgeted for AWC / Mini-AWCs buildings at different locations are as follows:

Project Type	Monthly Rent
Rural and Tribal projects	Rs. 1,000/p.m.
Urban projects	Rs. 4,000/- p.m.
Metropolitan cities	Rs. 6,000/ p.m.

Supplementary Nutrition:

The cost norms for supplementary nutrition with annual indexation under the Anganwadi Services and Scheme for Adolescent Girls of the Umbrella ICDS Scheme is as below:

i. Supplementary nutrition cost norms under the Anganwadi Services:

Category	Amount per day per beneficairy
Children (6 – 72 months)	Rs. 8.00
Pregnant Women and Lactating Mothers	Rs. 9.50
Severely Malnourished children (6 – 72 months)	Rs. 12.00

ii. The supplementary nutrition cost norms for Adolescent Girls (out of school 11 – 14 years) covered under the Scheme for Adolescent Girls stands at Rs. 9.50/- per day per beneficiary, which is on par with the cost norms for Pregnant Women & Lactating Mothers under the Anganwadi Services.

Operational Costs:

Detailed Budgets available for Operational cost, for each component are detailed in the Scheme guidelines[14]

Flow of Funds:

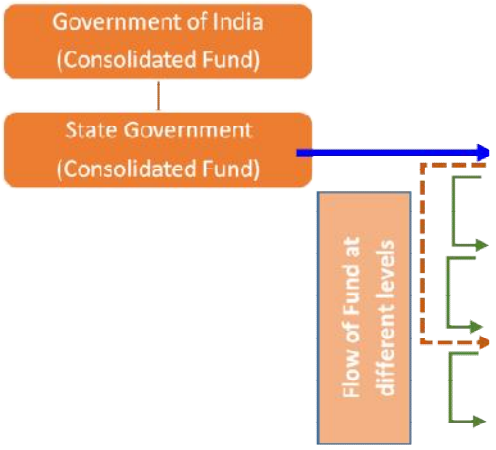
Based on State Annual Programme Implementation Plan (APIP), depending on the magnitude of the problem the fund allocation is made. The APIP of ICDS mission is jointly appraised by experts constituted jointly by National and State level societies. First instalment is released to the state after receipt of documents or commitments from State Government as per the technical and financial guidelines[15].

The fund is released to the State Child Development Societies, in two instalments:

- First instalment is released before15th April every year.
- Second instalment is released upon receipt of UC supported by required documents

The fund flow from the state to the VHNCs/PRIs/AWCs is presented below which is typically top to bottom. However, bottom-up approach is adopted in preparing APIP plan.

Figure 8: Fund Flow



4 Roles and Responsibilities

The Monitoring of the scheme is 4-Tier, comprising of District / Block / Cluster/ Village level through Community based Committees which are assisted by the administrative officers at District, Block, Cluster and Village Levels. The Roles and Responsibilities at different district functionaries are detailed in this segment. Monitoring and supervision guidelines[16] are issued by CMU.

4.1 District Level - District Collector

The Progress of the implementation is monitored by District Level Monitoring & Review Committee and also by District ICDS Mission and is reported to State level Mission.

The District Collector, being the Chairperson / Co-Chairperson of the District Committees has the responsibility to ensure fulfilment of the responsibilities of the Committees.

Table 5: Roles of District Collector

Role	Responsibilities
PLANNING	• Planning and preparation of District Child Development Action Plans including required budgets by compiling plans from all blocks of the district • Plan for budgets in association with District level committees • Submission of the District plans to the State level committee for incorporation into State Plan
Facilitation& Coordination	• Coordinate with State and Central Missions for release of budgets • Coordination and Convergence with Line departments / Programmes that includes Health, Education, Rural Development etc. • Actively promote and facilitate convergence of programmes at village level to provide best of the services to the beneficiaries
IMPLEMENTATION	• Ensure proper implementation of the programme

Role	Responsibilities
	○ Regularity of functioning of AWCs ○ Supply of essential items to AWCs – Medicine and PSE Kits, weighing scales, joint MCP card, WHO Growth Chart etc. • Provide leadership in implementation of the programme • Ensuring proper Grievance redressal mechanism by addressing the complaints received from Individuals, Community, PRIs etc. • Preparation of IEC action plan on issues like location of AWC and services available under ICDS, entitlement of beneficiaries and grievance redressal mechanism etc.
Monitoring& Evaluation	• Overall Project implementation Monitoring, with focus on: ○ Status of Operationalisation of Sanctioned projects and coverage ○ Coverage of beneficiaries: Block-wise analysis of beneficiaries of supplementary nutrition and pre-school education ○ Regularity in supply and quality of Supplementary nutrition at AWC and Comparison of feeding efficiency ○ Nutritional status of children 0-3 years and 3-6 years ○ Performance of non-formal pre-school provided at AWCs ○ Methods of delivery of Supplementary food at AWCs – engagement of SHGs ○ Methodology used for non-formal pre-school education at AWCs, use of locally developed learning aids, toy banks etc. • Convening Review meetings of **District Level Monitoring & Review Committee** once in a quarter and review progress based on Block level Monitoring Committees, Block Monthly Progress Reports and Block Annual Status Reports • Convene District ICDS Mission Committee meetings and discuss progress • Evaluation of the Outcome based indicators • Identifying low performing blocks and addressing the factors responsible • Review budget and budget analysis and ensure Fund flow and status of component-wise allocation and expenditures during the reported period and adherence to revised financial norms prescribed • Monitoring and supervision visits by CDPOs/Supervisors to AWCs as per and submission of reports • Prepare and submit periodical reports to the State Mission as per timelines • Convene monthly meetings of the District Committee
Institutional and Administrative Activities	• Approval of District Child Development and Nutrition Annual and Prospective plans • Approve fund transfer to Projects, VHSNCs and AWCs ○ Ensure availability of funds for Implementation, contingency etc. at district, block and AWC levels • Hiring of employees and technical experts as consultants on

Role	Responsibilities
	contractual basis as per the rules and procedures • Payment of honoraria to AWWs/AWHs and travelling allowance to Supervisor • AWC Infrastructure development through convergence with other schemes /programmes • Ensure transparency in procurement and accountability •

4.2 Role of Functionaries at Village Level / Cluster Level & Block Level

The CDPO is the Block level implementation head of Block ICDS Mission and the responsibilities are described below. Monitoring17 at CDPO and AWW level are detailed by CMU.

At the cluster level, the project implementation head is Supervisor who is responsible for implementation of ICDS scheme through Anganwadi Centres. Usually a supervisor is head of around 20 Anganwadi centres and reports to the CDPO of the Block. Roles and Responsibilities of the Supervisor are detailed in the table below.

Anganwadi level, is the grassroots level of the project implementation. Anganwadi Centre is manned by Anganwadi Worker assisted by Mini Anganwadi Worker and / or Anganwadi Helper. At the Anganwadi level, Anganwadi Level Monitoring and Support Committee (ALMSC) oversee and coordinate with AWW in implementation of the Project. Village Health Sanitation and Nutrition Committee (VHSNC) is the committee monitoring implementation of the scheme at Village Level, supporting the AWW and Supervisor in implementation of the programme

Table 6: Roles of Village, Cluster & Block Level Functionaries

Deliverable	Village Level	Cluster Level	Block Level
Officer Responsible	Anganwadi Worker	Supervisor	Child Development Project Officer (CDPO)
PLANNING	• Preparation of Village Child Development plan in coordination with VHSNC based on village requirement for approval of the plan • Prepare Monthly plan based on the children's requirement • Prepare Indent of the requirements	• Guide AWW in identifying village requirements and include them in Annual Plan and Monthly Plans • Prepare plans to meet the needs of children in the AWCs allocated to the Supervisor for implementation and Monitoring • Guide preparation of Village/gram/urban centre ICDS Mission plans • Collate the indents received for requirement of the SNP for AWCs	• Prepare plans to meet the needs of children in the Block • Guide preparation of Village/gram/urban centre ICDS Mission plans • Collate the indents received for requirement of the SNP
FACILITATION & COORDINATION	• Facilitate and coordinate with the MOs, LHVs, ANMs, SSA etc. for delivery of services • Coordinate with ALMSC and VHNC for awareness generation among beneficiaries about ICDS Services • Coordinate for proper distribution of nutrition supplements • Participate in VHSNC Meetings and Grama Sabhas and conduct Awareness Generation regarding services of the AWC	• Distribution of nutrition supplements • Organise fixed monthly Village Mother-Child day, • Convergence with ASHAs, ANMs, SSA and other service providers at village level • Collection of Feedback through ICDS accreditation systems and community public hearings • Coordinate with CDPO for Implementation and Monitoring of the scheme at Cluster level • Coordinate with CDPO for identification of required infrastructure, manpower and nutrient requirements • Facilitate maintenance of registers in prescribed formats	• Procure Nutrition Supplements • Attend at least 2 monthly Mother-Child Day linked to NRHM Village Health Day • Work with District administration for release of funds • Feedback from Supervisors on ICDS • Facilitate convergence with MOs, LHVs, ANMs, ASHAs and SSA • Coordinate with PRIs in overseeing and coordinating the delivery of services

Deliverable	Village Level	Cluster Level	Block Level
Officer Responsible	Anganwadi Worker	Supervisor	Child Development Project Officer (CDPO)
		• Coordinate with village leaders and local institutions such as Mahila Mandals, Panchayats, Primary Schools and Youth Clubs and involve them in ICDS programme • Ascertain the number of immunized children and report it to the CDPO. • Organize monthly meetings of AWW of her circle with the participation of concerned LHVs and ANMs.	
IMPLEMENTATION	• Survey of habitation and households • Preparation of MPRs on monthly basis with the details of the next month plans with details of SNP required, medical equipment required etc. based on the survey carried out on regular basis • Preparation of Annual plans for AWCs in coordination with Supervisor and CDPO • Ensure coverage of all eligible beneficiaries • Organise fixed monthly days as per guidelines • Provide Nutrition supplement to the children and pregnant women • Bridge Calorie gap by regular monitoring of under nourished	• Visit every Anganwadi once in a month • Guide AWW in conducting survey and listing beneficiaries • Help AWW develop interesting material to engage children • Visit homes of malnourished children and counsel parents along with AWW • Help AWW conduct various Days earmarked for specific purpose on monthly basis attend at least two ECCE Days every month • Ensure proper storage of food stocks, medicines, first aid kits etc. • Coordinate with the VHSNC • Overall Progress in Implementation with regard to ○ Coverage of all habitation/hamlets in the block ○ Cover all the eligible beneficiaries ○ Provide quality supplementary nutrition ○ Nutritional status of children –	• Overall Progress in Implementation with regard to ○ Coverage of all habitation/hamlets in the block ○ Cover all the eligible beneficiaries ○ Provide quality supplementary nutrition ○ Nutritional status of children – weighment, issue of joint mother and child protection cards, addressing moderate and severely undernourished children, measures being taken to address the issues ○ Number of AWCs providing THR, Morning Snack ○ Organising Village and Health Nutrition Days • Review overall implementation of the scheme at the block level with

Deliverable	Village Level	Cluster Level	Block Level
Officer Responsible	Anganwadi Worker	Supervisor	Child Development Project Officer (CDPO)
	and severely malnourished Children • Coordinate immunization of pregnant women and infants • Conduct of Sneha Shivirs as per guidelines of Implementation guidelines • Train children for holistic development to make them school ready • Conduct non-formal Pre-School activities using local learning and play material, maintaining toy banks, making learning joyful and interesting • Coordinate with NGOs/CBOs, SHGs, Mothers Groups / Mahila Mandals • Work with Medical teams at village level for awareness generation, immunisation, counselling etc. • Referral services for severely under-nourished / mal-nourished, sick children and children with communicable diseases and impairments • Carryout Home visits to fulfil the responsibilities under 4 components of the scheme • Ensure proper storage and	weighment, issue of joint mother and child protection cards, addressing moderate and severely undernourished children, measures being taken to address the issues ○ Number of AWCs providing THR, Morning Snack ○ Organising Village and Health Nutrition Days • Review overall implementation of the scheme at the Cluster level with the help of AWC – MPRs, Annual State Reports, AWC meeting minutes etc. • Ensure proper storage and distribution of Supplementary Nutrients and other medical kits and equipment that is required at AWC • Establishing and adhering to grievance redressal mechanism	the help of AWC – MPRs, Annual State Reports, AWC meeting minutes etc. • Coordinate with Supervisors and identify infrastructure, manpower and nutrient requirements • Payment of Honoraria to AWWs and AWHs and travelling allowance to Supervisors • Make arrangements for procurement, transportation, storage and distribution of Supplementary Nutrients and other medical kits and equipment that is required at AWC • Coordinate with other departments for delivery of the required outcomes • Guide the work of supervisor and AWCs • Ensure fund availability at Block level and flexi-fund at AWC level • Take measures for staff development • Establishing and adhering to grievance redressal mechanism

Deliverable	Village Level	Cluster Level	Block Level
Officer Responsible	Anganwadi Worker	Supervisor	Child Development Project Officer (CDPO)
	maintenance of the materials of AWC including Supplementary Nutrition, Medical Kits, Learning aids, equipment like weighing machines, Report cards etc. • Collection of feedback through ICDS accreditation systems and community public hearings • Maintenance of all the Records and Registers as prescribed		
MONITORING & EVALUATION	• Collection and review of the statistics at AWC level • Preparation of the monthly reports as per the schedules	• Review village level child related indicators and outcomes; identify and recommend specific interventions • Track Nutrition status of children with intensive support to lagging villages/habitations • Monitor and supervise activities of the AWC and other projects/personnel involved with Village ICDS Mission • Distribution of supplies and equipment to AWCs • Home visits of AWWs for counselling of Pregnant and lactating mothers, families of children under key health and nutrition issues • Compile monitoring reports of AWWs and share feedback • Observance of VHNDs and participation of AWW, ANM and PRI members • Check the entries of deaths and births in the survey register and the	• Track Nutrition status of children with intensive support to lagging villages/habitations • Distribution of supplies and equipment to AWCs • Home visits of AWWs for counselling of Pregnant and lactating mothers, families of children under key health and nutrition issues • Compile monitoring reports of Supervisors and share feedback • Observance of VHNDs and participation of AWW, ANM and PRI members • Methods of delivery of Supplementary nutrition at AWCs – engagement of SHGs • Methodology of providing non-formal pre-school education using learning aids, play material, toy

Deliverable	Village Level	Cluster Level	Block Level
Officer Responsible	Anganwadi Worker	Supervisor	Child Development Project Officer (CDPO)
		immunization register • Check the arrangement for storage, preparation and distribution of food and stocks of supplies and report shortages to the CDPO. • Monitor usage of Flexi-fund given to AWCs • Check regularity of functioning of AWCs	bank and other initiatives • Desist engagement of ICDS staff in other works • Identification of low performing AWCs and address factors responsible • Ensure preparation of the required reports at all levels
INSTITUTIONAL & ADMINISTRATIVE ACTIVITIES	• Maintenance of various Records and Registers	• Coordinating with the AWCs in the assigned area • Maintenance of the administrative records of the AWWs Prepare timely reports and submission to the District Committee	• Development of operational policy and time schedule for various activities • Hiring of the staff and experts on contractual terms to be done as per the rules and procedures • Review village/ habitation/ urban centre level budgets • Prepare timely reports and submission to the District Committee • Conduct ICDS Accreditation of Anganwadi Centres and Projects • Allocate and releases monthly and yearly budgets to each anganwadi centre. • Prepare a project report containing all the necessary and relevant baseline information. • Maintenance of registers and records at all levels and inspect these records • Prepare periodical Progress

Deliverable	Village Level	Cluster Level	Block Level
Officer Responsible	**Anganwadi Worker**	**Supervisor**	**Child Development Project Officer (CDPO)**
			Reports and furnish all information as and when required by State and Central ICDS Units.

5 Records and Registers

Basic Registers and Records to be maintained in the ICDS Scheme at different levels by the District Functionaries are detailed below. However, the records and registers are to be maintained as per the guidelines[18] and instructions of respective State Government / U.T. Administration.

Figure 9: Registers and Records to be maintained

Registers & Records by Anganwadi worker	Registers and Records by Supervisor at village level	Material and Records to be maintained at CDPO
•Family Register •Supplementary Food Stock Register •Supplementary Food Distribution Register •Pre-School Education Register •Pregnancy and Delivery Register •Immunisation and Village Health and Nutrition Day (VHND) •Vitamin A Biannual Rounds Register •Home Visits Planner •Referrals •Summaries (Monthly & Annual) •Weight Records of Children	•Monthly Progress Report •Annual Plans of the respective cluster •All the information collected from Anganwadi workers under supervisor's jurisdiction in the respective registers •Attendance and other administrative registers pertaining to AWWs	•Manual on ICDS/ICDS Booklet •Guidebook for AWWs/ Supervisors •Growth Monitoring Manual •Growth Chart Register •Compilation of Guidelines & Instruction of ICDS (Issued by State & GoI) •PSE Kit Material •NHED Kit Material •National Guidelines on Optimal IYCF practices •Booklet on SHG/Mahila Mandal & Community Participation •MPRs & MIS Manual •Records & Registers collected from Supervisors •Guide on MCP Card •Availability of Beti Bachao Beti Padhao Guidelines •Five tier Monitoring System Guidelines •Monitoring Guidelines

6 ICDS Implementation Checklist

Ministry has envisaged implementation of Information and Communication Technology to enable tracking of the Real Time Monitoring (ICT – RTM)[19] across the states implementing the scheme. For monitoring District level ICDS Implementation Index suggested by Central Monitoring Unit can be used as a checklist by the District Administration to monitor and measure the performance of the ICDS scheme implementation. This can be done Block wise for a comparative picture of performance across the blocks

Table 7: Implementation Checklist

ICDS Index	Indicator
ICDS Infrastructure Index	AWCs having Pucca Building
	AWCs own Building / Provided by State Government
	AWCs having adequate availability of Outdoor Space
	AWCs having adequate availability of Indoor Space
	AWCs having Drinking water facilities
	AWCs having Usable Toilet Facility
	AWCs having Separate Storage Space
	AWCs having Adequate Cooking Space
ICDS Training	AWWs received Job Training
	Supervisors received Job Training
	CDPOs received Job Training
ICDS Personal Profile Index	AWW Educated till Metric and Above
	AWW Belonging to Local Area
	Filled-in Position of AWWs
	Filled-in position of Supervisors
ICDS Service Delivery Index	AWCs having interruption in Distribution of Supplementary Nutrition
	AWCs having acceptability of Supplementary Nutrition
	Pregnant Women with Ante-Natal Check up
	Children getting Health Check-up
	AWWs having Accuracy of in Growth Monitoring
	AWWs giving counselling sessions based on Growth Monitoring
	Children Attending PSE Session
	AWCs providing good quality of Supplementary Nutrition
	AWCs having adequate availability of Educational Material for NHEd
	AWCs maintaining Health Cards
ICDS Continuous and Comprehensive Monitoring and Supportive Supervision Index	CDPOs monitoring the AWCs by Paying visits only
	CDPOs monitoring the AWCs by using checklists during visits
	CDPOs monitoring the AWCs by using MPR Performance Reports
ICDS Community Mobilisation and IEC Index	ICDS Projects having involvement of PRI Institutions
	ICDS Projects Organising Continual Education Sessions

Abbreviations

ALMSC	:	Anganwadi Level Monitoring and Support Committee
ANC	:	Antenatal Care
ANM	:	Auxiliary Nurse Midwifery
ASHA	:	Accredited Social Health Activist
AWC	:	Anganwadi Centre
AWH	:	Anganwadi Helper
AWW	:	Anganwadi Worker
BCC	:	Behaviour Change Communication
BLMC	:	Block Level Monitoring Committee
BPL	:	Below Poverty Line
CDPO	:	Child Development Project Officer
DLMRC	:	District Level Monitoring & Review Committee
ECCED	:	Early Childhood Care Education & Development
FNB	:	Food and Nutrition Board
ICDS	:	Integrated Child Development Scheme
IEC	:	Information, Education and Communication
IFA	:	Iron Folic Acid
IMNCI	:	Integrated Management of Neonatal and Childhood Illness
IYCF	:	Infant & Young Child Feeding
JSSK	:	Janani ShishuSuraksha Karyakram
JSY	:	JananiSurakshaYojna
LHVs	:	Lady Health Visitor
MGNREGS	:	Mahatma Gandhi National Rural Employment Guarantee Scheme
MO	:	Medical Officer
MTC	:	Malnutrition Treatment Centre
NGO	:	Non-Governmental Organisations
NHED	:	Nutrition and Health Education
NIPCCD	:	National Institute of Public Cooperation and Child Development
NRC	:	National Resource Centre
P&LW	:	Pregnant & Lactating Women
PNC	:	Post-Natal Care
PRI	:	Panchayati Raj Institutions
SDM	:	Special Divisional Magistrate
SHG	:	Self Help Groups
SNP	:	Special Nutrition Programme
SSA	:	Sarva Shiksha Abhiyan
THR	:	Take Home Ration
VHND	:	Village Health Nutrition Day
VHSNC	:	Village Health Sanitation and Nutrition Committee
WBNP	:	Wheat Based Nutrition Programme

Endnotes and References

1 Objectives of ICDS Mission as detailed in the Framework for Implementation

2 Convergence with different Ministries for ICDS Scheme are detailed in Annexure IX A of ICDS Mission – Framework for Implementation

3 The broad frame work documents and the Scheme related information can be accessed at www.wcd.nic.in, www.icds-wcd.nic.in along with the various guidance documents issued by the Central Monitoring Unit, National Institute Of Public Cooperation And Child Development (NIPCCD) can be accessed at http://nipccd.nic.in/cmu.htm

4 Nutrition Norms issued by MWCD can be accessed at http://icds-wcd.nic.in/icds/icdsimg/snrules2017.pdf

5 Chapter 5 - Institutional Arrangement of ICDS Mission - Framework for Implementation http://www.nipccd-earchive.wcd.nic.in/sites/default/files/PDF/Broad%20Framework%20of%20Implementation%20-%20ICDS%20Mission-MWCD-2010.pdf

6 Guidelines for Monitoring & Supervision of the Scheme Central Monitoring Unit (ICDS) published by National Institute Of Public Cooperation And Child Development (NIPCCD) can be found at http://nipccd.nic.in/cmu/monisup.pdf

7 Chapter 8 – Monitoring , Review and Evaluation of ICDS Mission - Framework for Implementation

8 Guidelines for ICT-RTM under Restructured ISSNIP issued by MWCDAccessible at http://icds-wcd.nic.in/issnip/ISSNIP-Web-Contents/LEFT%20SIDE%20TABS/1-Guidelines%20&%20Circulars/Guidelines%20for%20ICT-RTM%20under%20Restructured%20ISSNIP.pdf

9. Annexure XX of the ICDS Mission Framework for Implementation has details of the composition of DLMRC

10. Block Level Monitoring Committee (BLMC) on ICDS composition is detailed in Annexure-XX

11. Financial Resources and Flow of Funds of ICDS Mission Framework for Implementation

12. Guidelines for construction of Anganwadi Centres in convergence with MGNREGA funds http://www.wcd.nic.in/sites/default/files/icds_scheme.pdf

13. ICDS Mission, The Broad Framework for Implementation published by Ministry of Women and Child Development, Government of India.

14. The broad frame work documents and the Scheme related information can be accessed at www.wcd.nic.in, www.icds-wcd.nic.in

15. Monitoring and Supervision guidelines issued by CMU of ICDS in 2013-14: http://nipccd.nic.in/cmu/r28.pdf

16 Monitoring of ICDS projects at CDPO, AWW levels published by National Institute Of Public Cooperation And Child Development (NIPCCD) is available at http://nipccd.nic.in/cmu.htm

17 Anganwadi workers user manual for filling up of Registers and Records can be referred to at: http://icds-wcd.nic.in/icds/RevisedMIS /Users'%20Manual/ Users'%20Manual%20(English).pdf

18 Guidelines for ICT-RTM under Restructured ISSNIP issued by MWCD Accessible at http://icds-wcd.nic.in/issnip/ISSNIP-Web-Contents/LEFT%20SIDE%20TABS/1-Guidelines%20&%20Circulars/Guidelines%20for%20ICT-RTM%20under%20Restructured%20ISSNIP.pdf



ICDS – Protecting early childhood

"I was not aware that services offered at the AWC would include supplements also, it aided me during my pregnancy as I definitely felt better as compared to my last pregnancy when I didn't take any supplements ".

Sitabati Reang
Kathalbari VC, Dhalai, Tripura

Key Features of ICDS

- ✓ ICDS scheme aims to provide for nutritional care to young children, lactating and pregnant women
- ✓ According to World Health Organization (WHO), 1.3 million child deaths are caused by malnutrition every year in India.
- ✓ ICDS provides for the whole corpus of nutritional, immunization and pre-school educational need for the young child.

The demographic divided of India has been identified as one of its key strengths for economic development. About 65 % of our population lies in the working age group of 15-64 years. Moreover, the working age population is only expected to grow, by 2020 the median age of population in India would be 29 years. As the quality of human capital is one of the key determinants of economic growth, health care and particularly child health care becomes a key policy concern. A holistic approach is needed to protect and enhance the health of the children which will enable the country to reap the benefits the demographic bounty.

Keeping in mind the objective of early child care for future economic development, the Integrated Child Development Service (ICDS) scheme is one such programme which has been functioning since 1975, to provide for the basic and supplementary nutrition needs of young children between the years of 0-6 years. It is a centrally sponsored project which began with 33 block and 4891 Anganwadi Centres (AWC). The scheme has progressed at a tremendous pace; in 2015 fourteen lakh AWCs have been sanctioned. In this brief we provide a general overview of the scheme, including an emphasis on the service provided at the AWC.

There are five critical services which are offered under this scheme, all of which centre around the AWC. These sub schemes cover all the critical aspects of early child care i.e. nutrition, health care and early education. The scheme, due to its wide ambit of activities is spread across two ministries i.e. Ministry of Women and Child Development (MWCD) and Ministry of Health and Family Welfare (MHFW). Two components, immunization and Health checkups including referrals are implemented by MHFW, the rest of the services are provided by MWCD.

1 Pre-School-Education (PSE)

As the early years of the child are most critical for her/her motor and mental development preschool education (PSE) is provided to ensure adequate cognitive growth of the child in the later years. The objective of this sub-scheme is to focus on early development. Children between the age groups of 3 to 6 are to be provided Pre-School education before they enter Class 1. It is provided at the Anganwadi Centre, by the Anganwadi worker (AWWs) and includes non formal education and formative play activities like building blocks. Ever year, each AWC is allotted Rs. 3000 to procure a PSE kit which could include flash cards, building blocks, stuffed toys, simple puzzles among other components. An activity book and an assessment card per child are to be maintained by the AWWs to record the progress of the children.

2 Supplementary Nutrition



This sub scheme focuses on supplementary feeding and growth monitoring for prevention of Vitamin A deficiency & Nutritional Anaemia. Beneficiaries, children and pregnant and lactating (P&l) women are to be provided Supplementary Nutrition which is the difference between Recommended Dietary Allowance (RDA) and Average Dietary Intake (ADI) for 300 days in a year at the AWC.

In order to make sure that children are provided with the nutrition which is suited to their developmental requirements, children at the AWC are weighed regularly to track the amount and form of nutrition they need. Children between the ages of three and six are weighed quarterly and those below three years are weighed monthly. For 300 days of the year, all children are given supplementary nutrition consisting of 500 calories of energy and 12-15 grams of protein which, is provided in varied forms like Take Home Ration (THR), hot cooked meal or milk and fruits. Underweight children are provided with food consisting of 800 calories of energy and 20-25 grams of protein. P&L mothers, children between the ages of 6 months and 3 years and underweight children are provided with THR in the form of Micronutrient Fortified Food.

3 Immunization



The objective of the sub-scheme is to provide immunization to pregnant women and infants in order to protect them from six preventable diseases i.e., poliomyelitis, diphtheria, pertussis (whooping cough), tetanus, tuberculosis and measles. Beneficiaries are immunized on specific days in public health infrastructures (such as sub-centres, primary care centres). Iron and Vitamin "A" Supplementation (IFA tablets) are provided to children and pregnant women under the immunization programme. Record maintenance of the activities has to be done by the AWW.

4 Health Check and Referral Services



The objective of the sub-scheme is to focus on providing health care to children, antenatal care for expectant mothers and postnatal care for nursing mothers. At the Anganwadi, children, adolescent girls, pregnant women and nursing mothers are examined at regular intervals by the Lady Health Visitor (LHV) and Auxiliary Nurse Midwife (ANM) who diagnoses minor ailments and distributes simple medicines. An ANM/LHV is supposed to visit each AWC at least once a month, to check up on all the children and women of the centre.

5 Nutrition & Health Education:



The objective of the sub-scheme is to develop a Behaviour Change Communication (BCC) strategy for women so they can take care of their own health, nutrition and development requirements. Focused on women in the age group of 15-45 years, the program is implemented by AWWs who disseminate information about breast feeding colostrums feeding, treatment of diarrhoea/minor illness, preparation of oral dehydration solution, importance of education and institutional delivery amongst other health and social issues.

Anganwadi Centres (AWCs) – Cornerstone of ICDS

Anganwadi Centres have undergone a massive increase in number through ICDS. The AWC is instituted as a first stop for fulfilling the health and nutrition requirements of the women and children. An AWC is constructed based on the population requirement of the area. In rural and urban areas, one AWC is allotted to every population set of 400-800. Subsequently, 2 AWCs are allotted to population between 800-1600 and 3 AWCs are allotted to a population between 1600-2400. Thereafter, one AWC is added with each population set of 800. A mini AWC can also be set up for a population for 150-400. In rural communities and slum areas, a demand for AWC can be made in cases where forty or more than forty children under the age of six inhabit a settlement. The demand can be made to the District Programme officer appointed under the ICDS.

A strengthened and improved ICDS was approved in 2012, which created provisions for construction on Anganwadi through the scheme. A provision has been made for the construction of 2 lakh buildings, at the rate of Rs. 4.5 lakhs per building. The cost of the building would be shared in the ratio of 75:25 between the Centre and the State. In North Eastern (NE) regions, the cost distribution between the Centre and the State is 90:10. A building can also be rented for running an AWC, the rent paid in such a case would be Rs. 5000 per month.

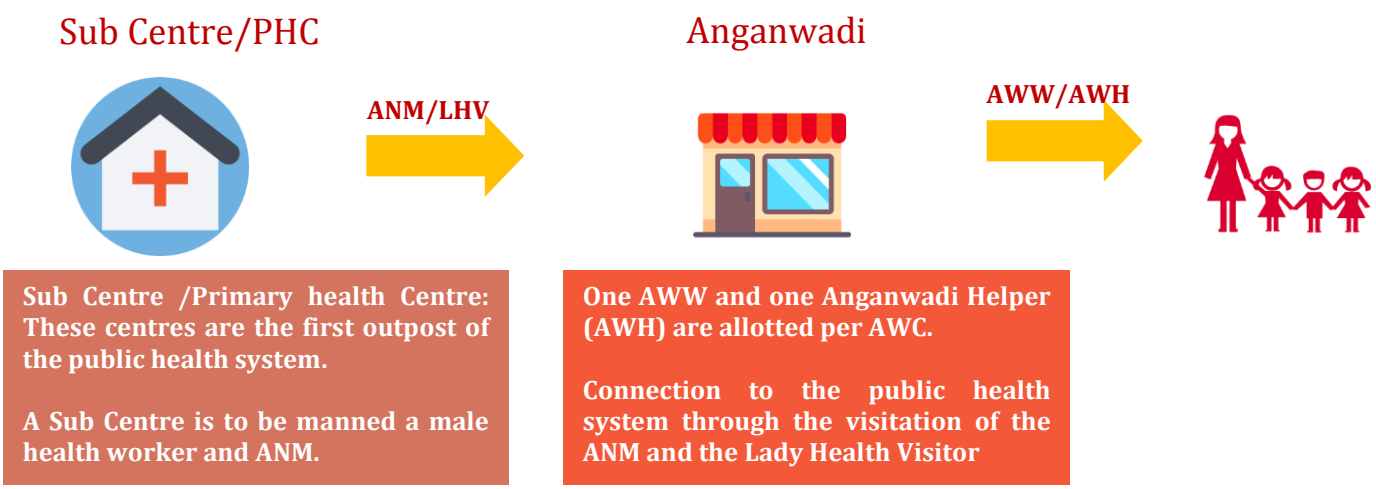
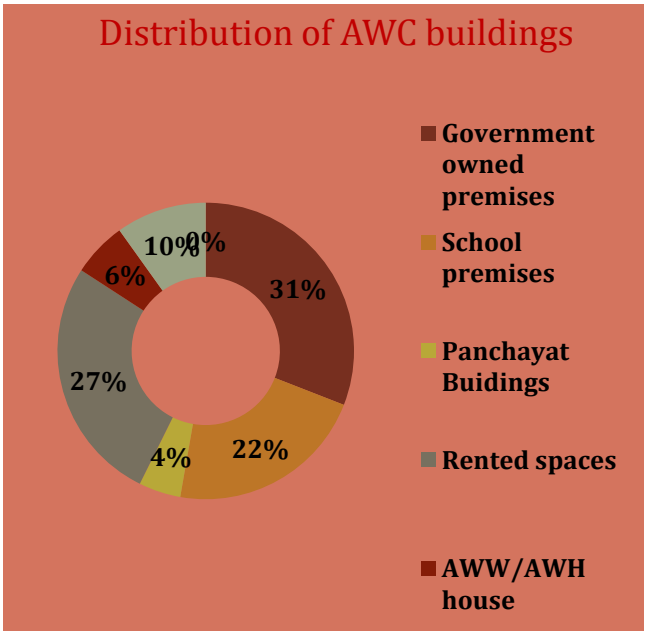


Figure 1: Anganwadi Centre and its role



✓ Out of the 12.5 lakh functional AWC/Mini AWC present in the county, fortunately the majority segment operates out of Government buildings. However since the buildings provided by the government are not enough, AWCs have to be set up in private and school buildings.

✓ 22% of AWCs operate out of school buildings and 27 % of AWC operate out of rented premises.

✓ AWWs and AWHs also rent out their homes for maintain and AWC, the rent which is paid is Rs. 5000 a month.

Convergence of ICDS and Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS)

According to certain estimates, about 2 lakhs* AWCs are functioning without pucca buildings. Children and pregnant/lactating women who use the facilities of an AWCs require a safe and strong structure to conduct their activities. In order to construct pucca building for AWCs, convergence has been sought between ICDS AND MGNREGS. An AWC, constructed under the convergence, would be of the size of 600 square feet. The entire expenditure would be under MGNREGS. The cost ratio for construction followed under MNREGS is 60:40, denoting payment of wages to material cost respectively. This cost ratio has to be maintained under the convergence. No contractual labour can be utilized for the construction; the work has to be carried out through the assigned implementing agency with job card holders of MNREGS. The maximum cost for the construction would be Rs. 5 lakhs; cost over and above the aforementioned amount would have to be provided by the ICDS. Funds from other sources like State Finance Commission, Scheduled Castes Sub Plan (SCSP), Tribal Sub Plan (TSP), 14th finance commission and any other scheme can also be utilized to complete the construction of the AWCS. Under this convergence model, 50 000 AWCs are to be constructed especially in the districts of West Bengal, Assam, Odisha and Telangana.

Implementation Structure of the scheme

The scheme functions through a five tiered implementation model involving the Centre, state, district and the block departments. The grass root activities are carried out by the AWC through AWW & AWH.

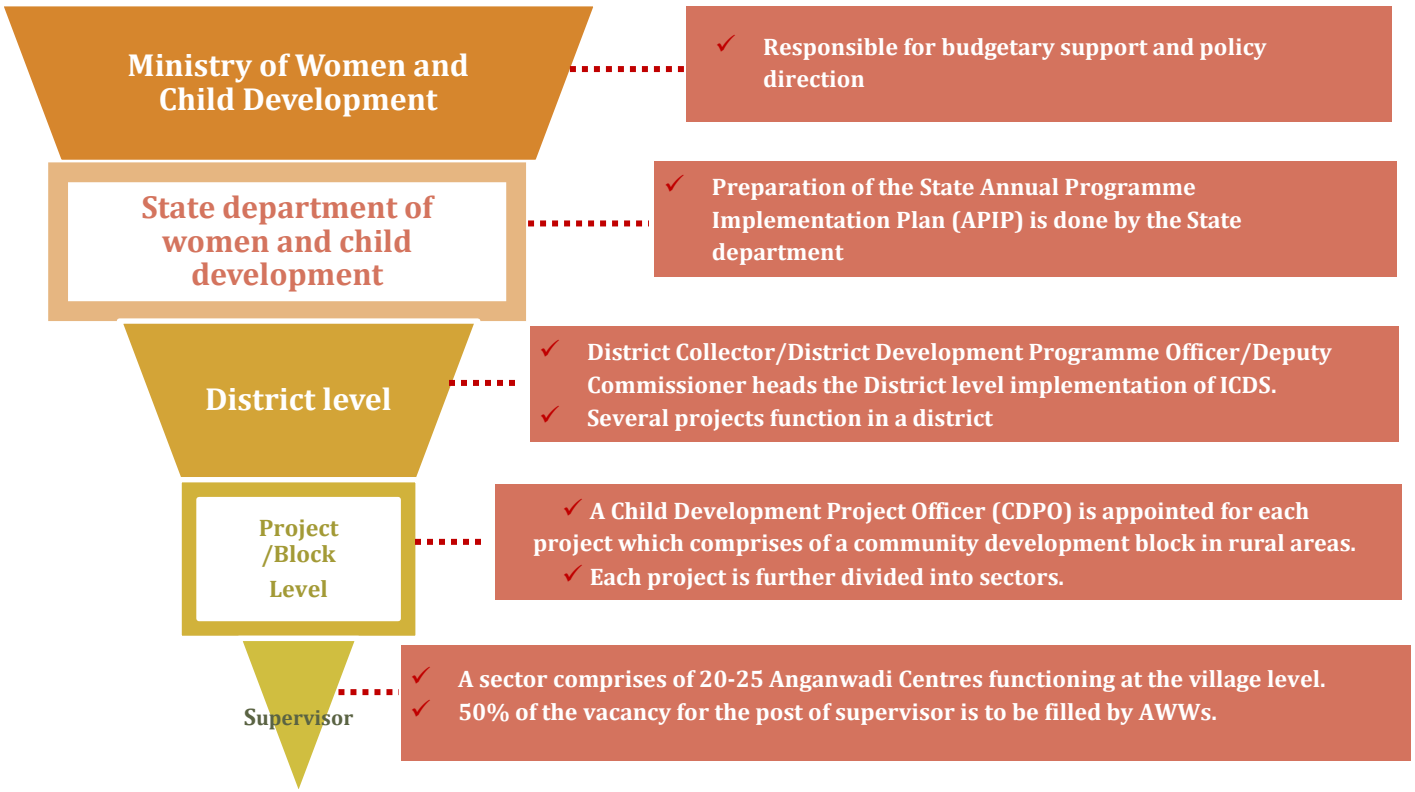


Figure 2: Implementation model of ICDS

Apart from ICDS, the AWC serves as the base for the implementation of two other schemes which are critical for maternal health and the well being of young adolescent girls.

1 Rajiv Gandhi Scheme for Empowerment of Adolescent Girls (RGSEAG) (SABLA): This scheme offers nutritional, health, skill development, hygiene support to the adolescent girls (AGs) between the ages of 11-18. Given below is the complete list of services which are to be provided by SABLA. Many of these services are facilitated by the AWW or are rendered at the AWC. Health cards of each (Ag) are also maintained at the AWC, the health cards contain information regarding the height, weight, nutrition intake and BMI of the concerned girl.

Service	Details	Service Provider	Target Age Group
Nutrition : Supplementary Nutrition	Supplementary nutrition containing 600 gms calories, 18-20 grams of protein in the form THR, for 300 days of a year	AWC	Out of school girls-(11-15) All girls (15-18)
Iron Folic Acid Supplementation	100 IFA to be supplied to each beneficiary on specific days of the year	AWW/ANM would give information about iron deficiency and how to combat it	All girls (11-18)
Health Check-up and Referral Services	Health check up of every (AG); height and weight to be recorded	Medical Officer/ANM Weighing scales to be provided by AWC	11-18
Nutrition and Health education	Information about balanced diet, nutritious food, cleanliness, healthy cooking	Imparted at the AWC by AWW/NGOs/Community Based Organizations (CBO)	11-18

Guidance on family welfare, Adolescent and Reproductive Sexual Health (ARSH), Child care, Home management	Reproductive and Sexual health, family welfare, legal rights, child care practices	Provided at the AWC through AWW/ANM/CBOs	Age appropriate information to 11-15 and 15-18
Life Skills and Accessing Public Services	Development of soft skills, general awareness, functional literacy, critical thinking	Convergence with Ministry of Youth Affairs, to be impacted by involvement of CBOs/NGOs	11-18
Vocational Training	Beneficiary to be imparted with minimum one trade related skill which should be relevant to the local surroundings	Through Ministry of Labour and Employment	16-18

Involvement of AWC in SABLA: Apart from the activities mentioned above, the AWC also supports SABLA through other methods like record keeping, provision of training kits and community mobilization. With each AWC, 15-25 girls are organized into a group which is known as a samooh. The samooh elects their peer leaders. Each samooh can assist the AWW in providing supplementary nutrition and preschool education (ICDS). This would partly fulfill the **Guidance on family welfare, child care and home management** component of SABLA. A training kit is also provided in each AWC, to make the girls understand key concepts of health, nutrition in an open and informal manner. The kit would contain interactive games and activities. The peer leaders overlook these activities. They also fill out the health cards of the girls, under the supervision of the AWW.

The AWW and AWH acts as key facilitator of this scheme on the ground and is assisted in the implementation of the scheme by peer leaders, representative of NGOs/CBOs. Similar to ICDS, at the block level, the implementation of the scheme is the responsibility of the CDPO.

Mobilization activities at the AWCs to promote healthier practices



Village Health & Nutrition Day (VHND): In each village, a day is devoted to health and nutrition has to be organized at the AWC, once every month. On the VHND, the AWWs along with other health functionaries encourage all the inhabitants, especially women and children to collect at the nearest AWC. At these assembly points, ANMs along with other members of PRI and the public health department are present. Villagers interact with the health officials; ask them for information regarding health issues. Services are also provided on those days which include registration of pregnancies, birth, and referral for ante natal care, immunization, booster shots, family planning counseling, contraception distribution and many more. Essentially, the VHND provides all the facilities especially for maternal and child care at one place, at one time for the whole community. The other aim of VHND is mobilize the community around health issues, so that more people are made aware of the available health services and consequently demand those services for their region/community. VHNDs are held on Wednesdays of a month, in order to bring about uniformity.



Kishori Diwas: A day is taken aside every three months, whereby all the adolescent girls provided a general health check up. The IFA supplement to the girls is provided on this day. The iron supplement is supplied by the AWC, under the CDPO. All the health cards are updated on this day, with fresh information regarding the height, weight and BMI of the girls. This day could also be used to generate awareness about the requirements of adolescents amongst the community at large.



Early Childhood Care and Education (ECCE) day: One day a month is to be organized as ECCE day at the AWC. On this occasion, the parents interact with the AWWs to discuss the progress of their child. This is also an opportunity for the worker to sensitize the parents and the community at large about the requirements of the early childhood and how to meet them. The projects of the children will be displayed, and the children could also participate in an activity for the benefit of the parents

2 Indira Gandhi Matritva Sahyog Yojana (IGMSY): The scheme focuses on promoting healthy pregnancies through monetary incentives. Pregnant women during their pregnancies and after birth are provided with some monetary benefit after fulfilling certain health requirements like checkups and intake of iron tablets. Only P&L women, who are 19 years and above can take advantage of this scheme for their first two live pregnancies, at present, the scheme is active in 53 districts of the country.

The monetary incentive is given in the form of direct transfer to the bank account/POS of the beneficiary the total monetary incentive which is given under the scheme is Rs. 6000 in two installments.

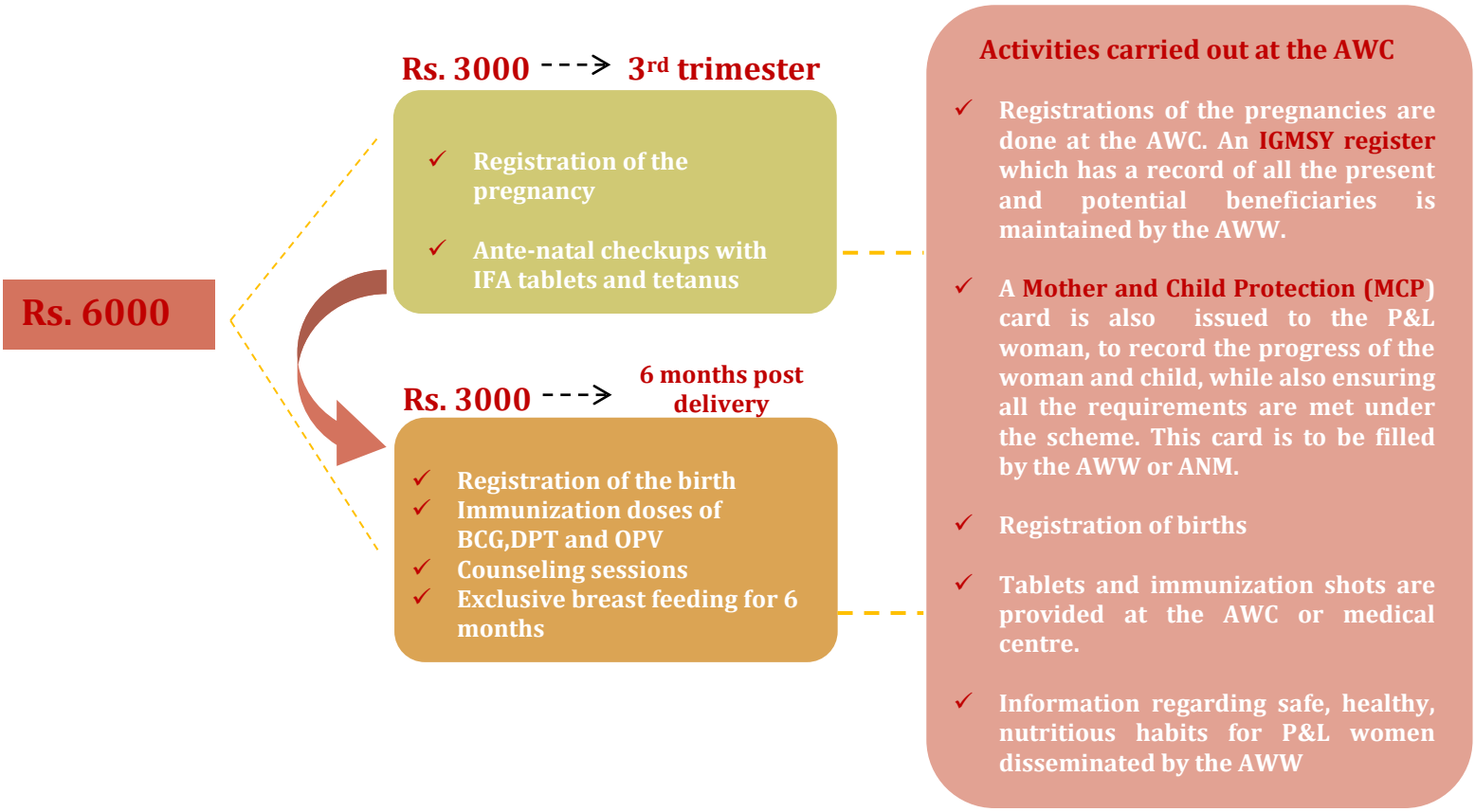


Figure 3: IGSMSY and the role of AWC

Human Resource convergence between ICDS and IGMSY: In order to incentivize AWWs & AWHs to promote IGSMY, each AWW is awarded Rs. 200 for the successful completion of all the steps by a beneficiary in the schema provided under IGSMY. The AWH also receives an amount of Rs. 100 per beneficiary for assisting the AWW. The records maintained by the AWW have to be checked by the Supervisor of the ICDS team and then forwarded to the CDPO for disbursal of cash transfer.

An Anganwadi Centre is envisaged as the focal point or the convergence of the all these scheme. All the services merge into each other to offer a holistic package for healthy development of women and children. A more concentrated effort is needed to strengthen the network of the AWCs, by augmenting infrastructural and human resource demands of these centres so that they can function as the focal point for fulfilling the health and nutritional requirements of the women and children. As far as human resource demands are concerned, it is all the more important to appreciate the work done by the AWWs and AWHS. They are the front line workers of the health system, supporting the women and children in

the critical periods of their lives. A range of activities are performed by the AWWs & AWHs which include record keeping, information dissemination, medical assistance and many more. It is clear that the grass root health structure is kept upright by the AWC through the AWWs; consequently awareness needs to create about the importance of their role.

Swaniti experience with Strengthening AWCs in Kathalbari VC

Tripura is one of the few states, which has done well in the health sector, ensuring successful functioning of Anganwadi Centres (AWCs) under ICDS in a short span of time. Progress has been witnessed in districts like South Tripura and West Tripura but the same has not been observed in North Tripura and Dhalai due to difficult topography. Swaniti Initiative, in partnership with Mr. Jitendra Chaudhury, the Honourable MP representing Tripura East Constituency in Lok Sabha has launched the SAGY Development Programme (SDP) in Kathalbari Village Committee (VC) in Dhalai District. The team visited Kathalbari VC to interact with various stakeholders across the habitations to understand the health care system prevalent in Kathalbari VC, major health issues of the region and functioning of AWCs.

At present, there are nine functional AWCs in Kathalbari VC, which cover all seven habitations. All the AWCs remain open from morning 7:00 am to 11:30 am. The team identified few gaps during their visit in the AWCs. Out of 9 AWCs, only one has a functional toilet and can procure water from the pipeline. Four AWCs do not have Kitchen Sheds. All the AWCs have weighing machines, some medicines for immediate health needs and provide daily meal to children, pregnant women and lactating mothers. There are 18 AWWs and AWHS, who are in-charge of all 9 AWCs in Kathalbari VC.

The team during their visit to Chandkumar Para AWCs observed that the centre does not have any additional health aids for first aid requirements such as Dettol anti-septic liquid, cotton, hand wash etc. Accordingly, the team requested the District Inspector of Social Welfare and Education (DISE)-ICDS Mr. Jyotinmoye Debnath to provide the followings to AWCs in Kathalbari VC as an initiative under SAGY village. Mr. Jyotinmoye Debnath submitted the proposal on the request from Swaniti for providing additional health aids for maintaining cleanliness and hygiene in AWCs like Dettol hand wash, antiseptic liquid to all AWCs in Kathalbari to Chief Minister and State Director of ICDS. The CM and Director approved the proposal and allocated Rs 650 every three months to avail these aids. The government order which states the allocation is attached in the annexure. The Anganwadi workers (AWWs) have received the amount from ICDS and purchased the items listed in the document as per their need. The team also advised the AWWs to conduct monthly meetings and discuss issues pertaining to their AWC.

*http://wcd.nic.in/sites/default/files/DOC020915%20cdi01092015_1.pdf

Annexure A: Order from Chief Minister to Maintain Cleanliness and Hygiene in all AWCs

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Fax No.0381-232-3980
E-mail- dswe_agt@yahoo.com
E-mail -icds.dswe@gmail.com

Government of Tripura
Directorate of Social Welfare & Social Education
Ujan Abhoynagar, Agartala.
Pin-799005

No.F.1 (3-61)-ICDS/SWE/2013/ 3427(71) Dated, Agartala, the 20.09.2016

MEMORANDUM

In order to maintain cleanliness and hygiene of the children in the Anganwadi Centers, the Department of Social Welfare & Social Education, Govt. of Tripura has decided to provide the following materials to each of the Anganwadi Center during the financial year 2016-17.

Sl. No.	Item	Quantity	Purpose
1	2	3	4
1	Hawai Chappal [Bata or equivalent quality, Size as per average need]	2 (Two) Pairs	For using while going to toilet / urinal point by children of AWC.
2	Hand Towel [Cotton Thread] 2 ft X 1.5 ft	1 (One) Pairs [for 3 months]	For using after washing hands.
3	Liquid Hand wash [Dettol or Lifeboy or equivalent quality] - 215 ml.	1 (One) bottle [for 3 months]	For washing hands.
4	Herpic - Toilet cleaner - 1 Lt.	1 (One) bottle [for 3 months]	For cleaning toilet
5	Toilet Brush	1 (One) No.	For cleaning toilet
6	Plastic Bucket - 12 Lt.	1 (One) No.	For keeping water in toilet
7	Plastic Mug - 1 Lt.	1 (One) No.	For using at the toilet

These are the contingency expenses of Anganwadi Centers which are to be made directly by the Anganwadi Workers for their Anganwadi Centers. There should be no central purchase by the CDPOs for their ICDS Project.

In this connection, all the CDPOs are requested to provide **Rs.650/-** (Rupees Six Hundred Fifty) only to each Anganwadi Worker with instruction to purchase above mentioned materials as per quantity for their respective Anganwadi Center **within 10 days** from the date of issue of this Memorandum. The above items should be available in the AWCs immediately after 'Durga Puja' holidays.

The CDPOs are also requested to send a report to the DISEs/DPOs immediately after completion of the above by the concerned Anganwadi Workers and ensure this through inspection/visit of the respective Anganwadi Centers through Supervisors.

The DISEs/DPOs & Addl. P.O. (SW & SE), TTAADC are requested to send compiled report of their respective District to this Directorate immediately after thorough proper monitoring.

Matter Most Urgent.

Director
Social Welfare & Social Education
Tripura

Integrated Child Development Services (ICDS)

INTEGRATED CHILD DEVELOPMENT SERVICES (ICDS):-

Tripura attained statehood in 1972.But welfare initiative for children,women,old and physically and mentally challenged people found institutional from only in 1979,with the establishment os Social Welafre and Social Education Department .Since then the Department has been implementing various programmes for the welfare of innumberable people of the weaker section.
May every child grow up smiling. With the objective of giving every child a conducive environment to grow up as a responsible citizen,the Government of Tripura announced ICDS to be universal programme on April 15,2006.However ,ICDS began it's journey years back in 1975 with only one ICDS project;by now number of ICDS project has reached upto 56.
The South Tripura district comprises of 8(eight)nos ICDS projects with 1291AWCs among all 6nos are rural project & only 02 Nos located at Urban area.

Children in the age group 0-6 years constitute around 158 million of the population of India (2011 census). These Children are the future human resource of the country. Ministry of Women and Child Development is implementing various schemes for welfare, development and protection of children.

Launched on 2nd October, 1975, the Integrated Child Development Services (ICDS) Scheme is one of the flagship programmes of the Government of India and represents one of the world's largest and unique programmes for early childhood care and development. It is the foremost symbol of country's commitment to its children and nursing mothers, as a response to the challenge of providing pre-school non-formal education on one hand and breaking the vicious cycle of malnutrition, morbidity, reduced learning capacity and mortality on the other. The beneficiaries under the Scheme are children in the age group of 0-6 years, pregnant women and lactating mothers. Objectives of the Scheme are:

- to improve the nutritional and health status of children in the age-group 0-6 years;
- to lay the foundation for proper psychological, physical and social development of the child;
- to reduce the incidence of mortality, morbidity, malnutrition and school dropout;
- to achieve effective co-ordination of policy and implementation amongst the various departments to promote child development; and
- to enhance the capability of the mother to look after the normal health and nutritional needs of the child through proper nutrition and health education.

Services under ICDS:-

The ICDS Scheme offers a package of six services, viz.

- Supplementary Nutrition
- Pre-school non-formal education
- Nutrition & health education
- Immunization
- Health check-up and
- Referral services

The last three services are related to health and are provided by Ministry/Department of Health and Family Welfare through NRHM & Health system. The perception of providing a package of services is based primarily on the consideration that the overall impact will be much larger if the different services develop in an integrated manner as the efficacy of a particular service depends upon the support it receives from the related services.

For better governance in the delivery of the Scheme, convergence is, therefore, one of the key features of the ICDS Scheme. This convergence is in-built in the Scheme which provides a platform in the form of Anganwadi Centres for providing all services under the Scheme.

F. No. 1-23/2011-TR
Government of India
Ministry of Women & Child Development
(ICDS Training Division)

1st Floor, Janpath Hotel,
Janpath, New Delhi-110001,
Dated: 6.7.2011

To

The Chief Controller of Accounts,
Principal Pay & Accounts Officer,
Ministry of Women & Child Development,
Shastri Bhawan, D-Wing, Ground Floor,
New Delhi-110001

Subject: **ICDS Training Programme- Release of Grants-in-Aid to the State Government of Tripura during 2011-12 for implementation of ICDS Training Programme – Regarding.**

Sir,

I am directed to convey the sanction of the president of India to the release of grant-in-aid of Rs. 31.02/- (Thirty One lakh Two Thousand Only) as **1st Instalment** to the State Government of Tripura for implementation of ICDS Training Programme 2011-12 The Grant in Aid is as per the revised financial norms contained in this Ministry's letter's NO. 11-13/2006-TR-1 dated 21.4.2009 regarding administrative approval and guidelines for implementation of ICDS Training Programme.

2. The payment is provisional and is subject to final adjustment in the light of audited figures of actual expenditure for the year as a whole vide Ministry of Financial letter No.2 (19) p.II/20 dated 9.10.64, as amended from time to time, addressed to all State Government, etc.

3. The expenditure is debitable to the Major Head '3601' Grants-in-Aid to state Government: 04-Grants for centrally Sponsored Plan Schemes (Sub Major Head): 358-Social Welfare-Child Welfare (Minor head):05 Integrated Child Development Services: 05.01General Component: 5.01.31 Grant-in-Aid (Plan) under Demand No. 105 of the Ministry of Women and Child Development for the year 2011-12.

4. The Amount of Grant-in Aid is finally adjustable in the books of the Principal Account Officers, Ministry of Women & Child Development, New Delhi. Payments to State Government would be arranged through the Reserve bank of India, Nagpur. The Accountant General will send intimation regarding receipt of the grant-in-aid to the Principal Accounts Officer, Ministry of Women and Child Development, D-Wing, Shastri Bhawan, Ground Floor, New Delhi.

5. The grant is subject to the terms and condition of the scheme of Integrated Child Development Services (ICDS).

6. The State is also requested to do the following :

a) Send expenditure reports on a quarterly basis.
b) Optimize the training capacity of the existing Training Centers.
c) Furnish achievements made against physical targets during 2010-11 on a quarterly basis.
d) Match physics progress and financial releases made.

7. Further releases will be made only after information is received on the above points.

8. This sanction issues with the concurrence of AS & FA (WCD) vide their Dy. No. 397 Dated 28.6.2011.

Yours Faithfully,

Rajesh Rajesh

(Rajesh Sharma)
Under Secretary to the Government of India
Tele-Fax 011-23362376/23368202

Copy forwarded to:-

1. The Secretary, dealing with ICDS Training Programme, Government of Tripura.
2. The Secretary, Department of Finance, Government of Tripura.
3. The Director, Dealing with ICDS Training Programme, Government of Tripura.
4. The Accountant General, Government of Tripura.
5. AD (WB)/CD-II Section/Guard File/Sanction Folder.
6. IFD, Shastri Bhavan, New Delhi.
7. The Pay & Accounts Officer, Ministry of Women & Child Development, New Delhi.

Evaluation Study on Integrated Child Development Schemes (ICDS)

Volume II
(Appendix)

PEO Report No.218



Programme Evaluation Organisation
Planning Commission
Government of India
New Delhi

March 2011

PEO Report No. 218

Evaluation Report
on
Integrated Child Development Services

Volume II
(Appendix)



Programme Evaluation Organisation
Planning Commission
Government of India
New Delhi-110001

March 2011

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Appendix Table 3.1: States/UTs -wise Status of Filled-in Institutional Level Questionnaires (%)

States/UTs	States/UTs Nodal ICDS Officer		DPO		CDPO	
	Study Sample	Received with partial information/Not Received (%)	Study Sample	Received with partial information/Not Received (%)	Study Sample	Received with partial information/Not Received (%)
Andhra Pradesh	1	100.0	4	75.0	19	52.6
Assam	1	100.0	4	100.0	10	90.0
Bihar	1	100.0	6	100.0	19	100.0
Chhatisgarh	1	0.0	3	66.7	8	25.0
Gujarat	1	0.0	4	100.0	12	33.3
Haryana	1	100.0	3	100.0	6	83.3
Himachal Pradesh	1	100.0	2	100.0	4	50.0
Jammu & Kashmir	1	100.0	2	50.0	7	100.0
Jharkhand	1	100.0	3	100.0	11	45.5
Karnataka	1	100.0	4	100.0	10	100.0
Kerala	1	100.0	3	100.0	8	100.0
Madhya Pradesh	1	100.0	7	100.0	17	64.7
Maharashtra	1	0.0	5	40.0	20	20.0
Orissa	1	0.0	5	60.0	17	52.9
Punjab	1	100.0	3	100.0	7	57.1
Rajasthan	1	100.0	5	100.0	13	84.6
Tamil Nadu	1	100.0	5	60.0	20	20.0
Uttar Pradesh	1	100.0	10	100.0	41	80.5
Uttrakhand	1	100.0	3	66.7	5	80.0
West Bengal	1	100.0	3	100.0	18	27.8

Appendix Table 3.1: States/UTs -wise Status of Filled-in Institutional Level Questionnaires (%) (Continued…)

States/UTs	States/UTs Nodal ICDS Officer		DPO		CDPO	
	Study Sample	Received with partial information/Not Received (%)	Study Sample	Received with partial information/Not Received (%)	Study Sample	Received with partial information/Not Received (%)
Delhi	1	0.0	1	100.0	2	0.0
Chandigarh	1	100.0	1	100.0	1	100.0
Arunachal Pradesh	1	100.0	2	100.0	3	66.7
Manipur	1	100.0	1	100.0	2	0.0
Meghalaya	1	100.0	1	100.0	2	50.0
Mizoram	1	100.0	1	100.0	1	100.0
Nagaland	1	100.0	1	100.0	3	100.0
Tripura	1	100.0	1	100.0	3	100.0
Sikkim	1	0.0	1	100.0	2	50.0
Dadar& Nagar Haveli	1	0.0	1	100.0	1	0.0
Daman & Diu	1	0.0	1	100.0	1	0.0
Goa	1	100.0	1	100.0	1	0.0
Puducherry	1	100.0	1	100.0	2	100.0
Lakshadweep	1	100.0	1	100.0	1	100.0
Andaman & Nicobar Islands	1	100.0	1	100.0	3	66.7
All India	35	77.1	100	89.0	300	61.0

Appendix Table 4.1: States/UTs -wise Sample Profile for ICDS- 2009

States/UTs	Sample districts	Sample projects				Sample AWCs				Child beneficiaries selected	Child non-beneficiaries selected	PW/LM beneficiaries selected	AG beneficiaries selected
		Tribal	Rural	Urban	Total	Tribal	Rural	Urban	Total				
Jammu & Kashmir	2	0	7	0	7	0	35	0	35	175	105	105	70
Himachal Pradesh	2	0	4	0	4	0	20	0	20	100	60	60	40
Punjab	3	0	7	0	7	0	35	0	35	175	105	105	70
Chandigarh	1	0	0	1	1	0	0	5	5	25	15	15	10
Uttrakhand	3	0	5	0	5	0	25	0	25	125	75	75	50
Haryana	3	0	5	1	6	0	25	5	30	150	90	90	60
Delhi	1	0	0	2	2	0	0	10	10	50	30	30	20
Rajasthan	5	0	11	2	13	0	55	10	65	325	195	195	130
Uttar Pradesh	10	0	40	1	41	0	200	5	205	1,025	615	615	410
Bihar	6	0	18	1	19	0	90	5	95	475	285	285	190
Sikkim	1	1	1	0	2	5	5	0	10	50	30	30	20
Arunachal Pradesh	2	3	0	0	3	15	0	0	15	75	45	45	30
Nagaland	1	1	1	1	3	5	5	5	15	75	45	45	30
Manipur	1	0	1	1	2	0	5	5	10	50	30	30	20
Mizoram	1	1	0	0	1	5	0	0	5	25	15	15	10
Tripura	1	1	1	1	3	5	5	5	15	75	45	45	30
Meghalaya	1	2	0	0	2	10	0	0	10	50	30	30	20
Assam	4	0	10	0	10	0	50	0	50	250	150	150	100
West Bengal	3	1	16	1	18	5	80	5	90	450	270	270	180
Jharkhand	3	4	6	1	11	20	30	5	55	275	165	165	110

Appendix Table 4.1: States/UTs -wise Sample Profile for ICDS- 2009 (Continued...)

States/UTs	Sample districts	Sample projects				Sample AWCs				Child beneficiaries selected	Child non-beneficiaries selected	PW/LM beneficiaries selected	AG beneficiaries selected
		Tribal	Rural	Urban	Total	Tribal	Rural	Urban	Total				
Chhattisgarh	3	3	4	1	8	15	20	5	40	200	120	120	80
Madhya Pradesh	7	6	10	1	17	30	50	5	85	425	255	255	170
Gujarat	4	2	10	0	12	10	50	0	60	300	180	180	120
Daman & Diu	1	0	0	1	1	0	0	5	5	25	15	15	10
Dadar & Nagar Haveli	1	1	0	0	1	5	0	0	5	25	15	15	10
Maharashtra	5	1	13	6	20	5	65	30	100	500	300	300	200
Andhra Pradesh	4	1	15	3	19	5	75	15	95	475	285	285	190
Karnataka	4	0	9	1	10	0	45	5	50	250	150	150	100
Goa	1	0	1	0	1	0	5	0	5	25	15	15	10
Lakshadweep	1	1	0	0	1	5	0	0	5	25	15	15	10
Kerala	3	0	7	1	8	0	35	5	40	200	120	120	80
Tamil Nadu	5	0	17	3	20	0	85	15	100	500	300	300	200
Puducherry	1	0	1	1	2	0	5	5	10	50	30	30	20
Andaman & Nicobar Island	1	1	1	1	3	5	5	5	15	75	45	45	30
All-India	**100**	**37**	**230**	**33**	**300**	**185**	**1,150**	**165**	**1,500**	**7,500**	**4,500**	**4,500**	**3,000**

Table: 5.1 Estimated Effective Coverage in Supplementary Nutrition Programme for Children under ICDS

States/UTs	Survey gap: proportion of children not registered as % to total eligible children as per census	Service gap: proportion of children not in the delivery registered as % to total number in survey register	Delivery gap: proportion of children not receiving SNP as % to total number in delivery register	Actual coverage (Proportion of children receiving food from AWC)		
				As % to children in survey register	As % to children in delivery register	As % to eligible children estimated (Census)
Andhra Pradesh	41.4	14.4	26.3	63.1	73.7	37.0
Assam	17.9	15.4	26.5	62.2	73.5	51.0
Bihar	52.5	30.3	47.4	36.6	52.6	17.4
Chhattisgarh	41.0	8.1	14.4	78.7	85.6	46.5
Gujarat	58.7	11.1	13.5	76.8	86.5	31.7
Haryana	47.3	32.2	48.1	35.2	51.9	18.6
Himachal Pradesh	15.8	35.4	22.9	49.9	77.1	42.0
Jammu & Kashmir	54.5	20.5	8.5	72.8	91.5	33.1
Jharkhand	14.9	48.8	11.7	45.2	88.3	38.5
Karnataka	8.4	32.3	19.6	54.4	80.4	49.9
Kerala	26.8	60.2	24.2	30.2	75.8	22.1
Madhya Pradesh	36.8	14.8	31.8	58.1	68.2	36.7
Maharashtra	41.8	7.1	30.4	64.7	69.6	37.6
Orissa	26.3	1.4	30.1	69.0	69.9	50.9
Punjab	53.9	29.7	40.9	41.6	59.1	19.2
Rajasthan	36.9	47.5	44.4	29.2	55.6	18.4
Tamil Nadu	43.4	35.9	24.2	48.6	75.8	27.5
Uttar Pradesh	39.8	7.8	59.4	37.4	40.6	22.5
Uttrakhand	46.1	29.5	18.1	57.7	81.9	31.1
West Bengal	18.2	23.3	21.7	60.0	78.3	49.1

Table: 5.1 Estimated Effective Coverage in Supplementary Nutrition Programme for Children under ICDS (Continued...)

States/UTs	Survey gap: proportion of children not registered as % to total eligible children as per census	Service gap: proportion of children not in the delivery registered as % to total number in survey register	Delivery gap: proportion of children not receiving SNP as % to total number in delivery register	Actual coverage (Proportion of children receiving food from AWC)		
				As % to children in survey register	As % to children in delivery register	As % to eligible children estimated (Census)
Delhi	59.1	34.1	43.6	37.2	56.4	15.2
Chandigarh	59.9	37.8	32.0	42.3	68.0	17.0
Arunachal Pradesh	0.0	18.6	5.6	76.8	94.4	76.8
Manipur	0.0	9.4	55.1	40.7	44.9	40.7
Meghalaya	42.8	10.6	20.2	71.4	79.8	40.8
Mizoram	39.2	0.0	8.2	91.8	91.8	55.8
Nagaland	17.2	25.3	17.6	61.6	82.4	51.0
Tripura	0.0	5.3	22.4	73.5	77.6	73.5
Sikkim	49.8	17.4	6.2	77.4	93.8	38.9
Dadar & Nagar Haveli	57.6	0.0	40.0	60.0	60.0	25.5
Daman & Diu	64.3	1.0	45.3	54.1	54.7	19.3
Goa	70.5	0.0	26.6	73.4	73.4	21.7
Puducherry	83.5	20.8	43.3	44.9	56.7	7.4
Andaman & Nicobar Haveli	30.5	25.4	0.0	74.6	100.0	51.8
All India	**37.9**	**21.6**	**36.0**	**50.1**	**64.0**	**31.1**

Table 5.2: Status of Effective Coverage of Supplementary Nutrition Programme for Children

States/UTs	Receiving food		Effective coverage as % of children recorded in delivery register	Not Receiving food due to constraints on		Awareness of food entitlement (%)
				Supply side	Demand side	
	As % of children recorded in delivery register	Average number of days per month		As % of children recorded in delivery register	As % of children recorded in delivery register	
Andhra Pradesh	73.7	16	47.2	26.3	0.00	86.39
Assam	73.6	2	5.9	24.3	2.12	40.11
Bihar	52.6	14	29.4	43.9	3.58	16.44
Chhattisgarh	85.6	19	65.1	13.1	1.33	17.97
Gujarat	86.5	19	65.7	11.9	1.64	66.48
Haryana	51.9	21	43.6	0.0	48.07	14.56
Himachal Pradesh	77.1	17	52.4	11.7	11.20	31.93
Jammu and Kashmir	91.5	18	65.9	7.0	1.44	10.91
Jharkhand	88.3	18	63.6	9.7	1.99	20.07
Karnataka	80.4	21	67.5	15.7	3.88	89.97
Kerala	75.8	20	60.7	14.0	10.46	95.89
Madhya Pradesh	68.2	14	38.2	27.3	4.45	14.51
Maharashtra	69.6	21	58.4	19.0	11.44	67.68
Orissa	69.9	21	58.8	30.1	0.00	17.46
Punjab	59.1	17	40.2	26.8	14.01	18.27
Rajasthan	55.6	15	33.4	29.6	14.84	25.92
Tamil Nadu	76.0	21	63.7	15.0	9.25	87.67
Uttar Pradesh	40.6	14	22.7	40.6	18.80	11.58
Uttrakhand	81.9	8	26.2	12.9	5.25	19.35
West Bengal	78.3	21	65.8	18.1	3.65	14.48
Delhi	56.5	22	49.7	0.0	43.55	14.06

Table 5.2: Status of Effective Coverage of Supplementary Nutrition Programme for Children (Continued...)

States/UTs	Receiving food		Effective coverage as % of children recorded in delivery register	Not Receiving food due to constraints on		Awareness of food entitlement (%)
				Supply side	Demand side	
	As % of children recorded in delivery register	Average number of days per month		As % of children recorded in delivery register	As % of children recorded in delivery register	
Chandigarh	68.0	22	59.9	-	-	-
Arunachal Pradesh	94.4	8	30.2	5.6	0.00	0.41
Manipur	44.9	12	21.6	55.1	0.00	12.59
Meghalaya	79.8	18	57.5	13.1	7.12	63.6
Mizoram	91.8	19	69.8	0.0	8.21	89.9
Nagaland	82.4	6	19.8	-	-	93.57
Tripura	77.6	17	52.8	12.7	9.65	17
Sikkim	93.8	14	52.5			9.27
Dadra & Nagar Haveli	60.0	24	57.6	-	-	92.38
Daman & Diu	54.7	23	50.3	-	-	81.17
Goa	73.4	20	58.7	-	-	100
Puducherry	56.7	22	49.9	-	-	100
Andaman & Nicobar Island	-	24	-	-	-	6.92
All India	**64.0**	**16**	**41.0**	**29.4**	**6.7**	**33.9**

Note: *Demand Side factors include:* AWC far away, Food quality is not good, Family does not allow, Loss of work/ no time & Not aware of services. *Supply side factors include:* Not distributed, most of the days the food is not available & AWC often remain closed.

Table: 5.3 Status of Effective Coverage of Supplementary Nutrition Programme for Pregnant Women & Lactating Mothers

States/UTs	Receiving food		Effective coverage as % of those recorded in delivery register	Not receiving Food due to constraints on		Awareness of food entitlement (%)
	As % of those recorded in delivery register	Average number of days per month		Supply side: As % of those recorded in delivery register	Demand side: As % of those recorded in delivery register	
Andhra Pradesh	87.8	10	35.1	5.9	6.2	70.4
Assam	7.7	0	0.0	87.6	4.7	6.8
Bihar	68.0	10	27.2	29.2	2.8	14.3
Chhattisgarh	76.8	16	49.2	23.2	0.0	17.0
Gujarat	76.5	14	42.8	11.3	12.2	42.1
Haryana	93.1	18	67.0	2.7	4.3	0.7
Himachal Pradesh	75.3	16	48.2	22.4	2.3	23.1
Jammu and Kashmir	90.4	16	57.9	7.8	1.8	21.6
Jharkhand	91.4	20	73.1	6.5	2.2	14.2
Karnataka	90.7	11	39.9	6.8	2.5	74.8
Kerala	93.8	19	71.3	1.8	4.4	87.7
Madhya Pradesh	78.4	8	25.1	16.6	5.0	8.1
Maharashtra	93.3	20	74.7	4.0	2.7	57.3
Orissa	90.1	20	72.0	8.8	1.1	15.1
Punjab	87.8	16	56.2	4.1	8.1	27.4
Rajasthan	83.8	4	13.4	10.2	6.1	24.0
Tamil Nadu	89.5	13	46.5	7.9	2.6	71.9
Uttar Pradesh	69.5	9	25.0	29.1	1.4	10.0
Uttaranchal	92.3	10	36.9	5.6	2.2	13.7
West Bengal	96.9	20	77.5	2.1	1.0	12.4

Table: 5.3 Status of Effective Coverage of Supplementary Nutrition Programme for Pregnant Women & Lactating Mothers (Continued...)

States/UTs	Receiving food		Effective coverage as % of those recorded in delivery register	Not receiving Food due to constraints on		Awareness of food entitlement (%)
				Supply side	Demand side	
	As % of those recorded in delivery register	Average number of days per month		As % of those recorded in delivery register	As % of those recorded in delivery register	
Delhi	89.4	14	50.1	0.0	10.6	8.1
Chandigarh	100.0	20	80.0	-	-	-
Arunachal Pradesh	63.3	7	17.7	36.0	0.7	0.0
Manipur	23.6	2	1.9	62.4	14.1	1.7
Meghalaya	66.5	14	37.2	23.8	9.7	32.8
Mizoram	100.0	17	68.0	-	-	100.0
Nagaland	92.3	7	25.8	3.1	4.7	82.5
Tripura	66.8	7	18.7	26.5	6.7	13.9
Sikkim	86.8	13	45.1	13.2	0.0	25.7
Dadra & Nagar Haveli	100.0	24	96.0	-	-	83.1
Daman & Diu	100.0	22	88.0	-	-	72.2
Goa	100.0	24	96.0	-	-	94.0
Puducherry	100.0	24	96.0	-	-	100.0
Andaman & Nicobar Island	74.2	15	44.5	11.7	14.1	1.2
All India	**78.3**	**12**	**37.6**	**18.4**	**3.3**	**26.8**

Note: *Demand Side factors include:* AWC far away, Food quality is not good, Family does not allow, Loss of work/ no time & Not aware of services. *Supply side factors include*: Not distributed, most of the days the food is not available & AWC often remain closed.

Table 5.4: Status of Effective Coverage of Supplementary Nutrition Programme for Adolescent Girls

States/UTs	Receiving food		Effective coverage as % of those recorded in delivery register	Not receiving food due to constraints on		Awareness of food entitlement
				Supply side	Demand side	
	As % of those recorded in delivery register	Average number of days per month		As % of those recorded in delivery register	As % of those recorded in delivery register	
Andhra Pradesh	44.5	3	5.3	53.7	1.9	40.7
Assam	42.8	3	5.1	49.8	7.4	37.3
Bihar	67.6	9	24.3	31.6	0.8	20.9
Chhattisgarh	26.3	3	3.2	68.6	5.0	16.8
Gujarat	91.9	17	62.5	4.9	3.3	80.3
Haryana	17.0	3	2.0	83.0	0.0	0.0
Himachal Pradesh	87.2	17	59.3	12.8	0.0	17.5
Jammu and Kashmir	89.8	17	61.0	10.3	0.0	8.4
Jharkhand	86.7	18	62.5	13.3	0.0	0.0
Karnataka	81.2	10	32.5	14.5	4.3	66.8
Kerala	95.6	20	76.4	4.5	0.0	98.1
Madhya Pradesh	89.1	7	24.9	10.1	0.8	6.5
Maharashtra	70.9	13	36.9	25.8	3.3	57.6
Orissa	0.4	0	0.0	99.0	0.7	0.2
Punjab	91.9	15	55.1	4.3	3.8	43.3
Rajasthan	93.0	6	22.3	6.4	0.6	30.9
Tamil Nadu	0.8	0	0.0	91.3	7.9	1.4
Uttar Pradesh	82.6	15	49.5	17.3	0.1	14.7
Uttrakhand	79.0	9	28.4	21.0	0.0	23.5
West Bengal	46.4	7	13.0	53.6	0.0	11.2
Delhi	100.0	21	84.0	-	-	-

Table 5.4: Status of Effective Coverage of Supplementary Nutrition Programme for Adolescent Girls (Continued...)

States/UTs	Receiving food		Effective coverage as % of those recorded in delivery register	Not receiving food due to constraints on		Awareness of food entitlement
				Supply side	Demand side	
	As % of those recorded in delivery register	Average number of days per month		As % of those recorded in delivery register	As % of those recorded in delivery register	
Chandigarh	-	-	0.0	-	-	-
Arunachal Pradesh	73.8	4	11.8	26.2	0.0	2.5
Manipur	30.6	3	3.7	65.4	4.0	11.8
Meghalaya	94.9	13	49.3	5.2	0.0	27.2
Mizoram	66.7	3	8.0	33.3	0.0	66.7
Nagaland	93.7	6	22.5	6.3	0.0	100.0
Tripura	100.0	10	40.0	-	-	18.7
Sikkim	0.0	0	0.0	100.0	0.0	0.0
Dadra & Nagar Haveli	100.0	23	92.0	-	-	100.0
Daman & Diu	100.0	24	96.0	-	-	90.0
Goa	100.0	22	88.0	-	-	87.5
Puducherry	100.0	10	40.0	-	-	100.0
Andaman & Nicobar Island	100.0	23	92.0	-	-	3.1
All India	**41.7**	**6**	**10.0**	**54.9**	**3.5**	**26.8**

Note: *Demand Side factors include:* AWC far away, Food quality is not good, Family does not allow, Loss of work/ no time & Not aware of services. *Supply side factors include:* Not distributed, Most of the days the food is not available & AWC often remain closed.

Table 5.5: Projected Shortfall/excess of AWCs by States/UTs

States/UTs/UTs	Average population per AWC as per norm	Requirement of AWC as per norm (in '000)	Actual Operational AWC (in '000) as on 31.3.2009, MWCD	Shortfall/Excess of AWC (in '000)	Shortfall/Excess to requirement (%)
Andhra Pradesh	780	105.6	73.0	32.6	30.8
Assam	763	38.6	36.8	1.7	4.5
Bihar	797	117.4	80.2	37.2	31.7
Chhattisgarh	705	33.0	34.9	-1.9	-5.7
Gujarat	756	74.9	43.8	31.2	41.6
Haryana	800	30.2	17.4	12.8	42.3
Himachal Pradesh	788	8.4	18.2	-9.9	-118.0
Jammu & Kashmir	767	14.7	18.8	-4.1	-28.1
Jharkhand	721	41.9	32.1	9.7	23.2
Karnataka	780	73.8	54.7	19.1	25.9
Kerala	797	42.4	32.2	10.2	24.0
Madhya Pradesh	739	93.0	69.2	23.8	25.6
Maharashtra	773	139.6	82.6	57.0	40.8
Orissa	734	54.0	41.8	12.3	22.7
Punjab	800	33.4	20.2	13.2	39.6
Rajasthan	762	84.7	50.9	33.7	39.8
Tamil Nadu	797	82.9	50.4	32.5	39.2
Uttar Pradesh	800	237.9	150.9	87.0	36.6
Uttrakhand	791	12.0	9.2	2.9	23.9
West Bengal	784	111.0	89.0	22.0	19.8
Delhi	800	21.2	6.1	15.1	71.2
Chandigarh	800	1.5	0.4	1.2	75.9
Arunachal Pradesh	607	2.0	4.3	-2.3	-116.8
Manipur	697	3.4	7.6	-4.2	-124.6

Table 5.5: Projected Shortfall/excess of AWCs by States/UTs/UTs (Continued...)

States/UTs	Average population per AWC as per norm	Requirement of AWC as per norm (in '000)	Actual Operational AWC (in '000) as on 31.3.2009, MWCD	Shortfall/Excess of AWC (in '000)	Shortfall/Excess to requirement (%)
Meghalaya	542	4.7	3.3	1.3	28.5
Mizoram	517	1.9	1.7	0.2	10.4
Nagaland	533	4.1	3.2	0.9	21.5
Tripura	707	4.9	7.4	-2.4	-49.3
Sikkim	738	0.8	1.0	-0.2	-23.1
Dadra & Nagar Haveli	613	0.5	0.3	0.2	48.1
Daman & Diu	774	0.3	0.1	0.2	66.7
Goa	800	2.0	1.1	0.9	44.2
Puducherry	800	1.5	0.7	0.8	54.2
Lakshadweep	517	0.1	0.1	0.1	39.3
Andaman & Nicobar Islands	775	0.6	0.7	-0.1	-16.0
All India	**775**	**1479**	**1044**	**435**	**29.4**

Appendix Table 6.3: Percentage of AWC Having Type of Housing Facility

States/UTs	Owned	Rented	Primary school	Others*
Andhra Pradesh	39.8	50	4.5	5.8
Assam	69.6	0	18.1	12.4
Bihar	16.1	55	12.5	16.5
Chhattisgarh	92.6	4.4	0	3
Gujarat	61.5	11.2	0.8	26.5
Haryana	28	33	14.4	24.7
Himachal Pradesh	10.1	30	2.6	57.3
Jammu and Kashmir	1.3	7.7	0	91
Jharkhand	43.4	34.8	2	19.8
Karnataka	65.3	7.2	6.2	21.4
Kerala	65	35	0	0
Madhya Pradesh	48.9	18.6	7.1	25.4
Maharashtra	68.5	8.1	9.6	13.9
Orissa	53.5	5.5	14.8	26.2
Punjab	11.6	0	23.8	64.6
Rajasthan	39.6	30.4	3.8	26.3
Tamil Nadu	85.6	6.5	1.4	6.5
Uttar Pradesh	6.7	3.2	70.2	20
Uttrakhand	35.2	1.9	40.5	22.4
West Bengal	34.5	4.4	16	45.2
Delhi	10.8	78.3	0	10.8
Chandigarh	60	0	0	40
Arunachal Pradesh	17	0	0	83
Manipur	48.1	0	0	52
Meghalaya	46.5	0	53.5	0
Mizoram	100	0	0	0

Appendix Table 6.3: Percentage of AWC Having Type of Housing Facility (Continued...)

States/UTs	Owned	Rented	Primary school	Others*
Nagaland	55.1	0	0	44.9
Tripura	100	0	0	0
Sikkim	94.3	0	0	5.7
Dadar & Nagar Haveli	100	0	0	0
Daman & Diu	100	0	0	0
Goa	40	60	0	0
Puducherry	20	60	20	0
Andaman & Nicobar Island	49.6	28.1	0	22.4
All India	**42.5**	**17.4**	**17.3**	**22.9**

* AWW/AWH house, Panchayat and Community building

Appendix Table 6.4: Percentage of AWC Have Adequacy of Space for Different Type of Activities

States/UTs	Cooking	Storage	Indoor activities
Andhra Pradesh	66.6	84.5	86.7
Assam	23	61.4	71
Bihar	17.5	17.8	50.2
Chhattisgarh	91	83.1	81.9
Gujarat	80.6	80.3	89.1
Haryana	33.7	25.4	88.9
Himachal Pradesh	67.5	41.5	78.8
Jammu and Kashmir	80.7	63.2	83.7
Jharkhand	66	73.9	48.5
Karnataka	75.2	78.1	79.1
Kerala	83.5	69.2	83.7
Madhya Pradesh	74.2	71.6	80.5
Maharashtra	66.1	67.3	89.8
Orissa	47.6	46.3	68.2
Punjab	48	52.9	76.2
Rajasthan	68.7	75	68.9
Tamil Nadu	92.6	91.8	86.5
Uttar Pradesh	28.9	27.6	63.2
Uttrakhand	36	30.6	78.8
West Bengal	50	54.5	47.4

Appendix Table 6.4: Percentage of AWC Have Adequacy of Space for Different Type of Activities (Continued...)

States/UTs	Cooking	Storage	Indoor activities
Delhi	10.8	9.2	18.3
Chandigarh	0	0	100
Arunachal Pradesh	32.3	63	44.6
Manipur	20	4	80
Meghalaya	59.4	52.9	80
Mizoram	60	40	80
Nagaland	11.3	52.7	71.3
Tripura	62.7	61.9	96.2
Sikkim	54.3	94.3	100
Dadar & Nagar Haveli	100	100	100
Daman & Diu	100	100	100
Goa	40	80	80
Puducherry	60	20	20
Andaman & Nicobar Island	91.6	83.3	77.6
All India	**55.6**	**57.5**	**71.8**

Appendix Table 6.5: Area of the Room Where Beneficiary Sit

States/UTs	Length(ft)	Breadth(ft)	Room(Sq Ft)
Andhra Pradesh	19	15	319
Assam	21	16	335
Bihar	19	13	266
Chhattisgarh	18	12	216
Gujarat	17	15	267
Haryana	20	15	328
Himachal Pradesh	14	11	160
Jammu and Kashmir	13	12	160
Jharkhand	20	14	299
Karnataka	20	17	350
Kerala	20	16	348
Madhya Pradesh	21	15	329
Maharashtra	21	15	343
Orissa	22	16	376
Punjab	16	14	236
Rajasthan	20	18	404
Tamil Nadu	23	15	374
Uttar Pradesh	20	15	315
Uttrakhand	17	15	270
West Bengal	20	14	300
Delhi	11	10	108
Chandigarh	22	14	322
Arunachal Pradesh	12	10	122
Manipur	22	23	520
Meghalaya	18	13	252
Mizoram	25	16	392
Nagaland	19	12	228
Tripura	35	17	636

Appendix Table 6.5: Area of the Room Where Beneficiary Sit (Continued...)

States/UTs	Length(ft)	Breadth(ft)	Room(Sq Ft)
Sikkim	23	18	424
Dadar & Nagar Haveli	20	17	343
Daman & Diu	14	13	187
Goa	12	12	152
Puducherry	17	13	225
Andaman & Nicobar Island	19	13	258
All India	**20**	**15**	**315**

Appendix Table 6.6: Percentage of AWC Having Source of Drinking Water

States/UTs	Piped	Hand pump	Others
Andhra Pradesh	38.7	37.6	23.7
Assam	8.1	75.1	16.8
Bihar	9.3	88.6	2.1
Chhattisgarh	5.6	88.4	6.1
Gujarat	69.4	18.8	11.8
Haryana	30.7	20.9	48.4
Himachal Pradesh	78.8	12.5	8.7
Jammu and Kashmir	21.8	41.5	36.8
Jharkhand	9.7	71.4	18.9
Karnataka	42.2	39.1	18.7
Kerala	36.6	5.9	57.5
Madhya Pradesh	16.5	76.1	7.4
Maharashtra	52.2	39.4	8.4
Orissa	5.1	90.7	4.3
Punjab	29.7	70.3	0
Rajasthan	36.5	48.3	15.3
Tamil Nadu	60.7	15.6	23.7
Uttar Pradesh	3	94.4	2.7
Uttrakhand	42.9	46.4	10.7
West Bengal	21.6	73.4	5.1
Delhi	90.8	9.2	0
Chandigarh	100	0	0
Arunachal Pradesh	87.6	0	12.4
Manipur	40	32	28
Meghalaya	13.5	13.5	72.9
Mizoram	60	0	40
Nagaland	26.3	48.9	24.9
Tripura	96.5	1.9	1.6

Appendix Table 6.6: Percentage of AWC Having Source of Drinking Water (Continued...)

States/UTs	Piped	Hand pump	Others
Sikkim	0	0	100
Dadar & Nagar Haveli	100	0	0
Daman & Diu	100	0	0
Goa	100	0	0
Puducherry	100	0	0
Andaman & Nicobar Island	94.3	0	5.7
All India	**28.4**	**58.8**	**12.9**

Appendix Table 6.7: Percentage of AWC Having Source of Drinking Water According to Distance

States/UTs	Within premise	Upto 50 M	> 50 meter
Andhra Pradesh	67.1	31.6	1.4
Assam	66.6	26.3	7.1
Bihar	37.2	52.6	10.2
Chhattisgarh	77.6	8.4	14
Gujarat	54.5	25.1	20.3
Haryana	65.8	6.2	28
Himachal Pradesh	77.4	12.5	10.1
Jammu and Kashmir	18.4	22.7	58.9
Jharkhand	62.8	26.9	10.3
Karnataka	55.3	41.7	3
Kerala	78.9	13.5	7.7
Madhya Pradesh	88.1	8	3.9
Maharashtra	57.9	33.7	8.4
Orissa	59	24.4	16.6
Punjab	57.1	37.7	5.2
Rajasthan	48.6	29.8	21.6
Tamil Nadu	70.9	27.2	1.9
Uttar Pradesh	75.5	22.5	2
Uttrakhand	61.7	38.3	0
West Bengal	74	19.2	6.8
Delhi	100	0	0
Chandigarh	100	0	0
Arunachal Pradesh	60.1	9.3	30.7
Manipur	80	20	0
Meghalaya	80	6.5	13.5
Mizoram	60	40	0
Nagaland	71.3	20	8.7
Tripura	28.3	70	1.6
Sikkim	100	0	0

Appendix Table 6.7: Percentage of AWC Having Source of Drinking Water According to Distance (Continued...)

States/UTs	Within premise	Upto 50 M	> 50 meter
Dadar & Nagar Haveli	100	0	0
Daman & Diu	100	0	0
Goa	40	20	40
Puducherry	100	0	0
Andaman & Nicobar Island	55.2	5.7	39.1
All India	**64.8**	**26.4**	**8.8**

Appendix Table 6.8: Percentage of AWC Having Toilet Facilities

States/UTs	Flush system	Pit/urinal	No facility
Andhra Pradesh	7.5	22.3	70.2
Assam	16.2	27.7	56.1
Bihar	3.2	12.5	84.3
Chhattisgarh	4.5	45.4	50.1
Gujarat	16.3	29.9	53.8
Haryana	40.8	1.7	57.5
Himachal Pradesh	22.6	74.8	2.6
Jammu and Kashmir	5.7	59.7	34.7
Jharkhand	0	31.2	68.8
Karnataka	9.8	25.1	65.1
Kerala	15.3	61.8	22.9
Madhya Pradesh	4.2	39.7	56.1
Maharashtra	22.4	36	41.6
Orissa	2.1	17.5	80.4
Punjab	23.3	17.7	59.1
Rajasthan	5.8	22.9	71.4
Tamil Nadu	60	19	21
Uttar Pradesh	3.6	13.3	83.1
Uttrakhand	46.7	8.9	44.4
West Bengal	1.8	26.7	71.5
Delhi	70.8	0	29.2
Chandigarh	100	0	0
Arunachal Pradesh	0	0	100
Manipur	40	24	36
Meghalaya	27.1	19.4	53.5
Mizoram	20	40	40
Nagaland	13.8	22.4	63.8
Tripura	40	0	60
Sikkim	100	0	0

Appendix Table 6.8: Percentage of AWC Having Toilet Facilities (Continued...)

States/UTs	Flush system	Pit/urinal	No facility
Dadar & Nagar Haveli	40	60	0
Daman & Diu	60	0	40
Goa	20	20	60
Puducherry	0	20	80
Andaman & Nicobar Island	0	69.3	30.8
All India	**12.4**	**26.1**	**61.5**

Appendix Table 6.9: Percentage of AWC Having Weighing Scales and Other Inventories

States/UTs	Weighing scale (baby)	Weighing scale (adult)	Utensils	Cooking vessels	Almirahs	Toys	Posters	PSE kits
Andhra Pradesh	78.6	60.5	91.4	81.7	58.6	53.2	85.3	64.4
Assam	87.5	10.4	41.9	39.9	38.2	23.6	48.4	26.2
Bihar	27.4	30.1	14.3	30.6	2.5	3.1	10	12.9
Chhattisgarh	87.4	31.7	37.1	52.4	20	39.9	41.7	23.8
Gujarat	87.5	44.7	51.8	58.2	29	44.4	73.7	63
Haryana	88.7	90.5	22.3	51.4	23.5	44.1	65.3	49.2
Himachal Pradesh	89.9	8.7	98.8	50.1	31.1	89.9	91.3	90.1
Jammu and Kashmir	16.4	1.7	49.2	31.1	9.7	9.6	32.1	20.1
Jharkhand	76.8	26.7	39.5	41.6	30.2	25.1	49.7	72.9
Karnataka	85.4	9.7	62.9	66.5	40.8	39.8	58.1	62.8
Kerala	76.1	48.3	86.8	88.5	75.7	66.4	80.9	66.5
Madhya Pradesh	84.1	60.5	51.6	60.9	49.4	27.2	36.1	33
Maharashtra	89.8	87	87.8	81.9	71.6	59.6	84.5	55.7
Orissa	91.8	50.2	40.6	45.3	25.3	40.3	58.9	52.3
Punjab	46.7	33.5	38.1	43	28.1	16.4	48.7	13.9
Rajasthan	58.5	43.5	56.1	53.1	36.6	7.8	33.4	21.6
Tamil Nadu	95.5	52.4	74.2	79.7	55.7	51.3	70.5	71.6
Uttar Pradesh	34.9	23.9	30.1	15.8	18.9	20.4	44.6	32.9
Uttrakhand	91.3	30.5	85.8	72.5	80.3	60.3	94.2	58.1
West Bengal	79.6	21.9	13.1	19.2	24.5	19.9	33.3	50.1
Delhi	18.3	60	0	0	60	27.5	29.2	27.5
Chandigarh	100	100	0	0	20	20	20	20
Arunachal Pradesh	6.3	0	3.1	0	6.2	0	6.2	0
Manipur	72	0	32	24	4	20	0	0
Meghalaya	87.1	80	40	53.5	40	33.5	60	46.5
Mizoram	20	60	100	100	100	20	40	60
Nagaland	41.2	41.2	28.9	11.3	6.3	17.6	22.4	22.4
Tripura	54.6	98.4	80.3	26.5	19.2	5.4	39.2	24.6

Appendix Table 6.9: Percentage of AWC Having Weighing Scales and Other Inventories (Continued...)

States/UTs	Weighing scale (baby)	Weighing scale (adult)	Utensils	Cooking vessels	Almirahs	Toys	Posters	PSE kits
Sikkim	94.3	48.7	0	0	34.3	11.3	5.7	0
Dadar & Nagar Haveli	60	100	100	100	100	60	100	60
Daman & Diu	20	100	100	100	100	60	100	80
Goa	100	100	100	100	100	80	100	60
Puducherry	80	80	80	40	40	60	80	80
Andaman & Nicobar Island	91.6	83.3	100	100	100	57.3	100	65.7
All India	**68.9**	**39.9**	**49**	**48.3**	**35.5**	**32.5**	**51.7**	**44**

Appendix Table 6.10: Percentage of AWCs Providing Different Types of Services Reported by the AWW

States/UTs	Supplementary nutrition	Immunization	Health check-ups	Referral services	Pre-school education	Nutrition & health education	Kishori Shakti Yojana
Andhra Pradesh	100	99	95.1	96.7	96.7	97.8	79.5
Assam	98.8	92.9	75.1	36.9	97.8	95.2	47.3
Bihar	97.5	98.7	18.9	73.5	66.4	96.1	88.5
Chhattisgarh	100	100	79.2	86.7	69.1	100	80.8
Gujarat	100	100	90.4	97.7	100	87.4	22.8
Haryana	100	100	100	83.3	98.3	87.2	16.4
Himachal Pradesh	100	98.6	89.9	69.9	100	100	90.1
Jammu and Kashmir	100	78.1	36	34.6	100	94.4	37.9
Jharkhand	100	83.7	73.9	22.7	100	93.5	89
Karnataka	100	100	89.7	76.6	98.7	98.7	86.3
Kerala	100	92.2	85	87.8	96.9	98.6	20.9
Madhya Pradesh	98.1	96.9	76.4	87.9	72.1	98.8	96.9
Maharashtra	99	99	86.1	97.4	100	100	96.2
Orissa	99.2	98.4	98.4	97.8	91.1	98.2	98.8
Punjab	100	100	88.7	86.6	93	100	76.6
Rajasthan	100	95.5	36	34.3	98.7	96.3	47.7
Tamil Nadu	98.6	85.9	86.8	92.1	96.3	98	65.2
Uttar Pradesh	100	94.9	35.9	20.3	63.6	86.3	82.8
Uttrakhand	100	96.1	78.3	29.2	100	91.1	56.1
West Bengal	99.5	55.4	54.9	14.3	99.5	96.2	7.1
Delhi	100	100	100	89.2	100	100	100
Chandigarh	100	100	100	100	100	100	0
Arunachal Pradesh	100	78.2	0	0	63.1	15.3	35.3
Manipur	100	84	28	80	100	100	0
Meghalaya	100	100	73.5	100	100	93.5	0
Mizoram	100	80	0	60	80	80	0

Appendix Table 6.10: Percentage of AWCs Providing Different Types of Services Reported by the AWW

States/UTs	Supplementary nutrition	Immunization	Health check-ups	Referral services	Pre-school education	Nutrition & health education	Kishori Shakti Yojana
Nagaland	100	54.8	17.6	86.3	88.7	88.7	0
Tripura	100	5.4	22.7	4.6	100	100	20.8
Sikkim	100	68.7	68.7	74.3	85.7	100	43
Dadar & Nagar Haveli	100	100	100	80	100	100	20
Daman & Diu	100	100	100	100	100	100	100
Goa	100	100	60	100	100	80	80
Puducherry	0	80	80	100	80	100	100
Andaman & Nicobar Island	100	71.9	77.6	0	91.6	80	94.3
All India	**99.4**	**91.4**	**66.1**	**62.9**	**87.8**	**94.9**	**67.1**

Appendix Table 6.11: Average Daily Time Spent By AWW (In Minutes)

States/UTs	Feeding	PSE	Record keeping
Andhra Pradesh	41	99	90
Assam	73	91	90
Bihar	46	60	120
Chhattisgarh	48	109	90
Gujarat	67	80	96
Haryana	27	88	92
Himachal Pradesh	29	95	90
Jammu and Kashmir	38	80	91
Jharkhand	58	120	89
Karnataka	44	101	94
Kerala	58	87	91
Madhya Pradesh	75	96	91
Maharashtra	63	104	90
Orissa	50	116	91
Punjab	40	91	90
Rajasthan	61	64	120
Tamil Nadu	58	96	103
Uttar Pradesh	38	58	121
Uttrakhand	41	104	90
West Bengal	48	117	90
Delhi	43	90	90
Chandigarh	40	120	90
Arunachal Pradesh	28	37	90
Manipur	40	65	90
Meghalaya	37	62	90
Mizoram	32	118	90
Nagaland	48	77	90
Tripura	48	89	90
Sikkim	48	68	120

Appendix Table 6.11: Average Daily Time Spent By AWW (In Minutes) (Continued...)

States/UTs	Feeding	PSE	Record keeping
Dadar & Nagar Haveli	48	120	90
Daman & Diu	40	114	90
Goa	42	72	90
Puducherry	10	78	120
Andaman & Nicobar Island	57	110	96
All India	**51**	**89**	**99**

Appendix Table 6.12: Percentage of AWW Involved In Other Government Scheme during Last Year

States/UTs	% AWW	Days	Hours/day
Andhra Pradesh	93.4	7	5
Assam	69.4	6	7
Bihar	91.8	21	7
Chhattisgarh	95.5	10	6
Gujarat	83.2	13	5
Haryana	87.5	9	7
Himachal Pradesh	88.5	14	6
Jammu and Kashmir	70.8	5	6
Jharkhand	71.9	12	7
Karnataka	89.5	8	7
Kerala	87.6	6	6
Madhya Pradesh	89.5	14	6
Maharashtra	97.5	21	4
Orissa	98.8	59	3
Punjab	51.8	4	7
Rajasthan	69.2	7	7
Tamil Nadu	80.7	6	6
Uttar Pradesh	82.2	16	7
Uttrakhand	69.9	7	7
West Bengal	58.4	13	6
Delhi	100	23	5
Chandigarh	100	12	8
Arunachal Pradesh	3.1	0	
Manipur	100	4	6
Meghalaya	13.5	1	6
Mizoram	0	0	
Nagaland	6.3	0	5
Tripura	81.9	6	6

Appendix Table 6.12: Percentage of AWW Involved In Other Government Scheme during Last Year (Continued...)

States/UTs	% AWW	Days	Hours/day
Sikkim	100	6	3
Dadar & Nagar Haveli	80	10	6
Daman & Diu	80	22	6
Goa	100	9	3
Puducherry	100	1	7
Andaman & Nicobar Island	28.1	2	8
All India	**82.1**	**14**	**6**

Appendix Table 6.13: Percentage of AWW Reporting Regularity of Visits of ANM

States/UTs	Yes	No
Andhra Pradesh	88.6	11.4
Assam	73.9	26.1
Bihar	27.2	72.8
Chhattisgarh	71.7	28.3
Gujarat	85.9	14.1
Haryana	98.5	1.5
Himachal Pradesh	86.1	13.9
Jammu and Kashmir	34.7	65.4
Jharkhand	72.3	27.7
Karnataka	79.7	20.3
Kerala	79.3	20.7
Madhya Pradesh	73	27
Maharashtra	84	16
Orissa	92.7	7.3
Punjab	97.3	2.7
Rajasthan	41.7	58.3
Tamil Nadu	71.7	28.3
Uttar Pradesh	33.4	66.6
Uttrakhand	72.5	27.5
West Bengal	37.4	62.6
Delhi	90.8	9.2
Chandigarh	100	0
Arunachal Pradesh	0	100
Manipur	4	96
Meghalaya	73.5	26.5
Mizoram	0	100
Nagaland	6.3	93.8
Tripura	1.9	98.1

Appendix Table 6.13: Percentage of AWW Reporting Regularity of Visits of ANM (Continued...)

States/UTs	Yes	No
Sikkim	54.3	45.7
Dadar & Nagar Haveli	100	0
Daman & Diu	100	0
Goa	80	20
Puducherry	80	20
Andaman & Nicobar Island	51.9	48.1
All India	**61.7**	**38.3**

Appendix Table 6.14 A: Percentage of AWCs Updated Different Types of Registers

States/UTs	Survey	Mother	Child	Attendance	Delivery	Child weight	Child growth chart	MPR	Food stock
Andhra Pradesh	64.2	77.9	84.3	83.6	65.9	47.2	44.4	61.5	75.3
Assam	53.1	52.2	76.1	87.4	65.6	22.5	64.4	85.9	63.8
Bihar	16.4	36.6	43.3	82.3	78.1	6.2	3.2	50.7	72.1
Chhattisgarh	55.9	55.6	87.8	91.3	71.6	65	69.6	70.2	77.2
Gujarat	22.1	40	27.1	54.5	58.8	23.5	20.7	58.5	54
Haryana	38	98.3	80	98.3	98.3	84.3	59.8	98.3	100
Himachal Pradesh	88.5	88.5	88.5	89.9	89.9	87.3	78.6	71.3	91.3
Jammu and Kashmir	6.2	7	52.5	68.6	65.1	3.3	2.7	27.4	79.8
Jharkhand	77.6	84.1	87.5	98.9	91.8	53	45.9	91.2	92.7
Karnataka	37.1	54.3	69.9	81.5	80	43.4	47.6	69.8	73.1
Kerala	70.8	68.7	72.5	70.4	72	66.6	63.5	61.5	70.4
Madhya Pradesh	48.6	59.6	66.3	88.1	78.1	61.8	52.1	77.8	79.4
Maharashtra	62.1	73.8	87.4	94.9	83.5	62	68.1	92.5	67
Orissa	67.6	83	76.9	87.6	83.7	63	65.3	83.1	86.5
Punjab	69.6	77.4	53	96.6	22.3	23.7	17.5	79.1	86.1
Rajasthan	5.1	40.7	43.8	71.3	17.9	16.9	9.9	50.7	89.6
Tamil Nadu	80.1	81	78.8	91.1	83.7	69.9	66.3	83.6	88.1
Uttar Pradesh	7.7	26	33.3	80.8	90	15.5	12.2	40.5	87.2
Uttrakhand	49.2	87	79.9	100	100	51.5	35.1	68	91.1
West Bengal	82	89.7	92.3	97.7	93.6	63.1	62.6	96.1	97.2
Delhi	78.3	56.7	89.2	78.3	56.7	67.5	56.7	78.3	89.2
Chandigarh	40	60	60	80	100	100	100	40	100
Arunachal Pradesh	6.3	4.7	15.5	15.6	0	0	0	0	17.1
Manipur	60	60	52	100	92	16	16	96	24
Meghalaya	67.7	54.1	67.7	67.7	67.7	54.1	40.6	13.5	67.7
Mizoram	20	80	100	100	100	60	60	80	80
Nagaland	42.6	17.6	66.1	74.9	74.9	27.4	6.3	11.3	77.4
Tripura	20	79.2	99.2	99.2	99.2	39.2	41.1	41.6	99.2

Appendix Table 6.14 A: Percentage of AWCs Updated Different Types of Registers (Continued...)

States/UTs	Survey	Mother	Child	Attendance	Delivery	Child weight	Child growth chart	MPR	Food stock
Sikkim	63	0	43	85.7	88.7	80	45.7	48.7	100
Dadar & Nagar Haveli	60	80	80	100	100	100	100	100	100
Daman & Diu	100	100	100	100	100	100	100	80	100
Goa	100	100	100	100	100	100	100	40	60
Puducherry	100	80	80	100	100	60	60	40	80
Andaman & Nicobar Island	86	100	100	100	94.3	35.2	41.2	91.6	100
All India	**45.8**	**59.2**	**65.7**	**84.9**	**76.6**	**42.3**	**41.2**	**68.2**	**79.9**

Appendix Table 6.14 B: Percentage of AWCs Updated Different Types of Registers

States/UTs	Immunization	PSE	KSY	Mothers meeting	Birth & death	Referral	Medicine stock
Andhra Pradesh	68.8	65.2	22.7	43.9	50.6	11.1	22.4
Assam	57.6	90.2	31.5	64.7	46.8	4.3	23.3
Bihar	52.4	34.6	44	36.6	8.4	1.6	4.5
Chhattisgarh	78.3	80.2	21.7	16.5	63.1	4.8	0.6
Gujarat	7.1	8.8	3.6	22.6	40.7	1.6	24.9
Haryana	96.7	56.4	100	96.7	95.6	33.2	36.7
Himachal Pradesh	98.6	87.1	73.4	88.5	78.8	20	60.3
Jammu and Kashmir	10.5	37.2	21.6	6.9	9.4	1.6	0.8
Jharkhand	64.4	81	89.3	74.7	71.1	8.7	9.4
Karnataka	80.9	50.8	16.9	59.7	56.7	27.3	54.9
Kerala	62.8	42.9	47.7	64.5	60.7	8.7	57.6
Madhya Pradesh	69.1	72.7	57.9	65.7	47.1	21.3	25.9
Maharashtra	83	68.7	77	69.1	71.9	68.9	59.9
Orissa	88.7	89.4	60.5	74.4	78.1	74.4	58.3
Punjab	60.1	77.4	67.2	51.5	49.5	0	0
Rajasthan	10.7	11.4	12.1	34.7	14.7	6.5	20.4
Tamil Nadu	60.6	82.6	72.1	79.1	73.2	46.1	79.9
Uttar Pradesh	38.4	51.3	76.7	55.2	30.2	5.4	23.8
Uttrakhand	42.2	53.5	61.5	44.5	27.6	0	47.1
West Bengal	65.7	64.4	16.9	94	71.4	3.1	54.2
Delhi	78.3	9.2	9.2	78.3	78.3	36.7	27.5
Chandigarh	80	80	0	80	80	60	60
Arunachal Pradesh	0	0	0	3.1	0	0	1.6
Manipur	40	64	0	4	52	0	20
Meghalaya	74.1	54.1	0	13.5	40.6	27.1	67.7
Mizoram	80	100	0	40	0	0	80
Nagaland	42.6	24.9	0	18.8	32.5	0	39.8

Appendix Table 6.14 B: Percentage of AWCs Updated Different Types of Registers (Continued...)

States/UTs	Immunization	PSE	KSY	Mothers meeting	Birth & death	Referral	Medicine stock
Tripura	22.9	19.2	83.1	59.2	1.9	0	36.2
Sikkim	20	43	0	65.7	65.7	0	0
Dadar & Nagar Haveli	100	100	100	100	100	100	80
Daman & Diu	100	100	100	80	100	40	60
Goa	40	100	0	20	100	0	0
Puducherry	80	0	100	100	80	0	0
Andaman & Nicobar Island	51.9	48.4	82.3	25.7	40.6	14.3	6
All India	**57.9**	**57.6**	**53.5**	**57.5**	**49**	**17.9**	**33.7**

Appendix Table 6.15: Percentage of AWC Received Medical Kit

States/UTs	Yes	No
Andhra Pradesh	91.4	8.6
Assam	83.7	16.3
Bihar	3.6	96.4
Chhattisgarh	0	100
Gujarat	93.9	6.1
Haryana	94.8	5.2
Himachal Pradesh	82.6	17.4
Jammu and Kashmir	0	100
Jharkhand	9	91
Karnataka	85.7	14.3
Kerala	70.3	29.7
Madhya Pradesh	19.1	80.9
Maharashtra	87.5	12.5
Orissa	78.2	21.8
Punjab	0	100
Rajasthan	72.7	27.3
Tamil Nadu	86.1	13.9
Uttar Pradesh	69.2	30.8
Uttrakhand	71.1	28.9
West Bengal	80.3	19.7
Delhi	49.2	50.8
Chandigarh	60	40
Arunachal Pradesh	83.1	16.9
Manipur	60	40
Meghalaya	80	20
Mizoram	100	0
Nagaland	77.4	22.6
Tripura	77.3	22.7

Appendix Table 6.15: Percentage of AWC Received Medical Kit (Continued...)

States/UTs	Yes	No
Sikkim	0	100
Dadar & Nagar Haveli	100	0
Daman & Diu	100	0
Goa	0	100
Puducherry	0	100
Andaman & Nicobar Island	0	100
All India	**62.4**	**37.6**

Appendix Table 6.16 A: Percentage of AWCs Reported Availability and Utilization of Medicine During Last One Year

States/UTs	Iron /Folic acid tabs (big)		Iron /Folic acid tabs (small)		Almebendazol/Mebedazol		ORS	
	Received (no.)	% Utilized	Received (no.)	% Utilized	Received (no.)	% Utilized	Received (no. in packet)	% Utilized
Andhra Pradesh	539	91.2	263	80	349	67	15	100
Assam	200	75	300	56.7	414	54.3	12	100
Bihar	282	94.4	429	100	375	18.7	32	91.6
Chhattisgarh	0	-	0	-	0	-	0	-
Gujarat	1175	48.7	1067	50	528	22.9	11	77.5
Haryana	517	97.6	527	99.1	203	58.5	14	97.9
Himachal Pradesh	442	49	578	63.4	185	48.5	27	86.5
Jammu and Kashmir	0	-	0	-	0	-	0	-
Jharkhand	981	97.5	0	-	78	100	10	100
Karnataka	129	88.8	59	84.6	290	43.3	7	81.9
Kerala	412	100	324	99.8	216	95	20	90.9
Madhya Pradesh	604	85.3	305	116.9	278	66.1	31	92.1
Maharashtra	563	74.6	810	123.8	314	55.2	24	84.4
Orissa	302	83.6	263	91.9	210	50	35	93.5
Punjab	0	-	0	-	120	100	0	-
Rajasthan	866	51.8	1003	74.2	381	40	29	80.4
Tamil Nadu	749	53.4	64	77.3	110	60	49	84.5
Uttar Pradesh	364	79.8	246	62.6	411	19.2	10	49
Uttrakhand	302	53.1	172	48.3	250	15.3	62	59.1
West Bengal	839	73	386	42.6	408	37.5	32	88.7
Delhi	40	55	0	-	0	-	0	-
Chandigarh	583	100	938	113.3	500	50	43	100
Arunachal Pradesh	0	-	0	-	450	79.9	0	-
Manipur	0	-	0	-	0	-	0	-
Meghalaya	546	54.1	454	56.5	202	81.9	13	94.8
Mizoram	0	-	525	480	0	-	10	40
Nagaland	0	-	0	-	347	35.1	0	-

Appendix Table 6.16 A: Percentage of AWCs Reported Availability and Utilization of Medicine During Last One Year (Continued…)

States/UTs	Iron /Folic acid tabs (big)		Iron /Folic acid tabs (small)		Almebendazol/Mebedazol		ORS	
	Received (no.)	% Utilized	Received (no.)	% Utilized	Received (no.)	% Utilized	Received (no. in packet)	% Utilized
Tripura	1000	-	50	80	439	60.2	59	98.3
Sikkim	0	-	0	-	0	-	0	-
Dadar & Nagar Haveli	185	100	188	98.7	417	39.6	11	95.3
Daman & Diu	2400	100	700	100	250	55	37	100
Goa	0	-	0	-	0	-	0	-
Puducherry	0	-	0	-	0	-	0	-
Andaman & Nicobar Island	0	-	0	-	0	-	0	-
All India	**581**	**67**	**479**	**96.6**	**357**	**39.2**	**29**	**87**

Appendix Table 6.16 B: Percentage of AWCs Reported Availability and Utilization of Medicine During Last One Year

States/UTs	Vitamin A		Paracetamol		Paracetamol cyrup		Metrogyl		Vitamin B complex	
	Received (no. in bottle)	% Utilized	Received (no.)	% Utilized	Received (no.in bottle)	% Utilized	Received (no.)	% Utilized	Received (no.)	% Utilized
Andhra Pradesh	0	-	361	62.8	3	76.2	348	35.6	0	-
Assam	1	100	327	55.3	4	81.8	109	55.5	0	-
Bihar	2	44.5	389	81	3	93.4	0	-	0	-
Chhattisgarh	0	-	0	-	0	-	0	-	0	-
Gujarat	1	100	561	33.5	1	34.7	100	22.3	189	50.7
Haryana	1	100	214	87.4	0	-	61	98.3	50	60
Himachal Pradesh	2	83.6	427	52.1	4	76.9	20	60	30	96
Jammu and Kashmir	0	-	0	-	0	-	0	-	0	-
Jharkhand	0	-	0	-	6	66.7	0	-	0	-
Karnataka	5	58	126	57.8	3	73.2	28	47.6	55	83
Kerala	1	100	829	94.6	2	97.9	20	64.7	20	60
Madhya Pradesh	2	83.9	264	38.4	3	73.8	105	69.5	31	69.4
Maharashtra	3	70.6	439	68.6	2	82	74	69.6	55	78.2
Orissa	4	81	132	46.8	3	84.7	30	61.3	100	100
Punjab	0	-	100	100	0	-	0	-	0	-
Rajasthan	2	42.7	385	50.9	2	55.7	384	7.8	23	62.9
Tamil Nadu	2	87.5	224	60.3	2	62	27	56	61	53.8
Uttar Pradesh	2	27.8	470	23.8	2	29.4	118	16	100	100
Uttrakhand	1	0	462	9.3	3	38	20	50	200	50
West Bengal	5	82.8	471	37.3	1	50.3	120	97.8	175	77.5
Delhi	0	-	0	-	0	-	0	-	0	-
Chandigarh	4	100	400	68.8	2	100	0	-	0	-
Arunachal Pradesh	0	-	257	90	1	69.1	150	100	0	-
Manipur	1	100	143	22.5	4	39.1	0	-	0	-
Meghalaya	5	69.4	252	69.3	2	82.4	0	-	20	52.5
Mizoram	7	81	350	100	0	-	0	-	64	91.6
Nagaland	0	-	118	28.9	1	89.9	0	-	0	-

Appendix Table 6.16 B: Percentage of AWCs Reported Availability and Utilization of Medicine During Last One Year (Continued…))

States/UTs	Vitamin A		Paracetamol		Paracetamol cyrup		Metrogyl		Vitamin B complex	
	Received (no. in bottle)	% Utilized	Received (no.)	% Utilized	Received (no.in bottle)	% Utilized	Received (no.)	% Utilized	Received (no.)	% Utilized
Tripura	0	-	381	15.8	1	52.8	58	93.2	30	66.7
Sikkim	0	-	0	-	0	-	0	-	0	-
Dadar & Nagar Haveli	2	100	440	90.9	1	80	0	-	20	100
Daman & Diu	5	85.2	120	63.7	4	100	20	50	25	96
Goa	0	-	0	-	0	-	0	-	0	-
Puducherry	0	-	0	-	0	-	0	-	0	-
Andaman & Nicobar Island	0	-	0	-	0	-	0	-	0	-
All India	**3**	**66.7**	**401**	**48**	2	63.3	**94**	**45.6**	**87**	**74.8**

Appendix Table 6.16 C: Percentage of AWCs Reported Availability and Utilization of Medicine during Last One Year

States/UTs	Eye ointment tubes		Betnovate		Iodine		Dettol		Cotton/Bandages	
	Received (no. in tube)	% Utilized	Received (no.)	% Utilized	Received (no.)	% Utilized	Received (no. in bottle)	% Utilized	Received (no. in piece)	% Utilized
Andhra Pradesh	8	68.2	2	60.7	2	54.6	2	72.2	2	52.6
Assam	5	71	0	-	12	0	0	-	2	79.3
Bihar	10	10	1	100	0	-	0	-	2	76.8
Chhattisgarh	0	-	0	-	0	-	0	-	0	-
Gujarat	9	37.4	3	13.9	7	39.7	7	57.6	5	30.6
Haryana	4	96.8	2	100	3	99.2	1	100	4	83.6
Himachal Pradesh	4	78.4	10	80	5	81.1	8	62.9	1	56.7
Jammu and Kashmir	0	-	0	-	0	-	0	-	0	-
Jharkhand	0	-	0	-	0	-	3	100	2	100
Karnataka	2	63.7	1	38.1	3	58.1	1	63.1	8	62.4
Kerala	7	93.9	4	85.1	1	91.8	1	100	1	97.4
Madhya Pradesh	9	60.9	4	85.5	4	97.2	2	32.3	7	77.5
Maharashtra	6	68	3	77.9	4	42.3	1	63.2	6	57.8
Orissa	9	81.9	2	85.9	3	68.3	3	75.8	5	89.1
Punjab	0	-	0	-	0	-	1	100	12	100
Rajasthan	7	56.1	5	32.8	5	43.8	3	50.2	6	34.7
Tamil Nadu	12	48.1	8	42.7	9	41.4	5	33.6	11	42.1
Uttar Pradesh	9	36.7	5	40.6	5	35.1	5	10.9	6	33.3
Uttrakhand	12	28.3	5	60.7	12	-	2	25	9	15.5
West Bengal	8	33.7	3	85.5	5	43.2	0	-	6	50

Appendix Table 6.16 C: Percentage of AWCs Reported Availability and Utilization of Medicine during Last One Year (Continued…)

States/UTs	Eye ointment tubes		Betnovate		Iodine		Dettol		Cotton/Bandages	
	Received (no. in tube)	% Utilized	Received (no.)	% Utilized	Received (no.)	% Utilized	Received (no. in bottle)	% Utilized	Received (no. in piece)	% Utilized
Delhi	0	-	0	-	0	-	0	-	0	-
Chandigarh	0	-	1	100	1	100	0	-	7	100
Arunachal Pradesh	5	91.2	2	89.3	1	100	1	100	2	79.3
Manipur	1	-	0	-	1	69.2	2	100	5	55.9
Meghalaya	5	77.9	1	100	6	64.7	0	-	7	87.4
Mizoram	0	-	1	100	3	100	6	100	5	90.5
Nagaland	4	60.8	0	-	2	48.2	0	-	6	22
Tripura	6	16.8	1	-	2	32.4	0	-	8	5.2
Sikkim	0	-	0	-	0	-	0	-	0	-
Dadar & Nagar Haveli	8	75	1	75	0	-	0	-	8	97.6
Daman & Diu	10	82.7	5	100	6	100	2	100	8	81.6
Goa	0	-	0	-	1	100	1	100	3	83.3
Puducherry	0	-	0	-	0	-	0	-	0	-
Andaman & Nicobar Island	0	-	0	-	0	-	0	-	0	-
All India	**8**	**51.2**	**4**	**52.4**	**4**	**47.2**	**2**	**54.7**	**6**	**48.2**

Appendix Table 6.17: Percentage of AWC Trained Adequately to Conduct PSE

States/UTs	Yes	No
Andhra Pradesh	94.4	5.6
Assam	93.4	6.6
Bihar	93.9	6.1
Chhattisgarh	98.7	1.3
Gujarat	94.4	5.6
Haryana	100	0
Himachal Pradesh	91.3	8.7
Jammu and Kashmir	98.4	1.6
Jharkhand	92.4	7.6
Karnataka	93.8	6.2
Kerala	82.9	17.1
Madhya Pradesh	91.2	8.8
Maharashtra	97.5	2.5
Orissa	94.4	5.6
Punjab	96.5	3.5
Rajasthan	98.7	1.3
Tamil Nadu	91	9
Uttar Pradesh	93.5	6.5
Uttrakhand	79.4	20.6
West Bengal	90.2	9.8
Delhi	100	0
Chandigarh	80	20
Arunachal Pradesh	64.7	35.3
Manipur	100	0
Meghalaya	93.5	6.5
Mizoram	100	0
Nagaland	100	0

Appendix Table 6.17: Percentage of AWC Trained Adequately to Conduct PSE (Continued…)

States/UTs	Yes	No
Tripura	99.2	0.8
Sikkim	85.7	14.3
Dadar & Nagar Haveli	80	20
Daman & Diu	80	20
Goa	100	0
Puducherry	80	20
Andaman & Nicobar Island	83.3	16.7
All India	**93.6**	**6.4**

Appendix Table 6.18: Percentage of AWC Provided Types of Services Reported by AWW

States/UTs	Percentage AWC implemented KSY scheme	Food/ SN	Health check-up	Immunization	Referral services	Deworming appendix tablets	Iron & folic acid	Family-life education
Andhra Pradesh	79.5	20.1	58.6	26.8	93.6	80.8	86.8	97.2
Assam	47.3	95	11	32.6	2.6	40.5	23.9	52
Bihar	88.5	100	36	67.2	7.4	15.2	25.5	55.3
Chhattisgarh	79	80.3	100	77.3	74.3	89	89.4	84.5
Gujarat	22.8	100	100	46.7	63.7	47.3	90	67.7
Haryana	16.4	100	95	17.1	95	95	95	100
Himachal Pradesh	81.4	100	100	79.4	52.4	86.2	98.6	89.3
Jammu and Kashmir	37.9	95.5	75.5	76.9	26.6	13.2	19	92.1
Jharkhand	89	100	56.8	47.5	5.9	31.9	57.3	63.6
Karnataka	85.6	100	80.3	79	66.6	65.6	66.6	67.8
Kerala	15	33.4	25.6	100	25.6	58.3	100	70.7
Madhya Pradesh	96.9	95.4	95.3	93.8	70.9	77.8	93.2	98.2
Maharashtra	96.2	85	91.8	95.6	87	84.3	96.9	85.1
Orissa	98.8	8.8	64.3	50.2	37.7	88.5	97.3	58.8
Punjab	76.6	100	83.7	70	73.6	73.6	70	100
Rajasthan	47.7	97.3	79.4	59.7	28.6	50.5	86.9	47.3
Tamil Nadu	65.2	28.5	73.3	62.5	70.4	64.2	85.2	87.7
Uttar Pradesh	82.8	99.3	64.5	83.5	30.8	63.9	48	79.2
Uttrakhand	56.1	100	58.8	93.1	7	80.8	96.6	90.5
West Bengal	6.4	7.4	18.6	0	25.4	33.7	72.3	26.1
Delhi	100	100	43.3	0	54.2	20	63.3	100
Chandigarh	0	0	0	0	0	0	0	0
Arunachal Pradesh	35.3	83.3	0	0	0	16.8	0	0
Manipur	0	0	0	0	0	0	0	0
Meghalaya	0	0	0	0	0	0	0	0
Mizoram	0	0	0	0	0	0	0	0
Nagaland	0	0	0	0	0	0	0	0
Tripura	20.8	100	0	0	9	13	13	13

Appendix Table 6.18: Percentage of AWC Provided Types of Services Reported by AWW (Continued…)

States/UTs	Percentage AWC implemented KSY scheme	Food/ SN	Health check-up	Immunization	Referral services	Deworming appendix tablets	Iron & folic acid	Family-life education
Sikkim	43	0	0	0	0	33.3	33.3	0
Dadar & Nagar Haveli	20	100	100	100	0	100	100	100
Daman & Diu	100	100	100	100	100	100	100	100
Goa	80	25	100	100	75	0	75	100
Puducherry	100	0	40	0	80	80	80	60
Andaman & Nicobar Island	94.3	100	21.5	0	0	6.3	70.3	6
All India	**66.6**	**79.9**	**69.6**	**69.4**	**50.4**	**63.3**	**70.5**	**77.1**

Appendix Table 6.19: Separate Programme for 15-45 Years Women Reported by AWW

States/UTs	% AWW reported separate programme for women aged 15-45 years	If no, do they attend NHE sessions with other women
Andhra Pradesh	13.8	5.7
Assam	14.4	54.5
Bihar	0	64.9
Chhattisgarh	30.4	32.9
Gujarat	45.7	38.7
Haryana	28	58.3
Himachal Pradesh	60	68.2
Jammu and Kashmir	47.6	73.5
Jharkhand	18.2	2.6
Karnataka	41.5	27.4
Kerala	74.3	46.9
Madhya Pradesh	36.7	33.3
Maharashtra	47.9	26.1
Orissa	25.2	50
Punjab	43.6	69.9
Rajasthan	20.1	42.6
Tamil Nadu	43.3	22.3
Uttar Pradesh	0	48.5
Uttrakhand	27.7	36.1
West Bengal	18.8	0.7
Delhi	21.7	76.6
Chandigarh	0	100
Arunachal Pradesh	3.1	15.8
Manipur	56	45.5
Meghalaya	80.6	33.3
Mizoram	0	0
Nagaland	46.4	4.6

Appendix Table 6.19: Separate Programme for 15-45 Years Women Reported by AWW (Continued…)

States/UTs	% AWW reported separate programme for women aged 15-45 years	If no, do they attend NHE sessions with other women
Tripura	28.1	24.1
Sikkim	0	
Dadar & Nagar Haveli	100	0
Daman & Diu	80	0
Goa	80	0
Puducherry	80	0
Andaman & Nicobar Island	17.3	0
All India	**26**	**36.2**

Appendix Table 6.20: Number of Visits by ANM/ LHV in AWC and Issues Discussed: Reported by AWW

States/UTs	Visits by ANM/LHV (no.)			What did he/she do? (%)			
	During last 30 days	During last 90 days	During last 6 months	Guidance for preparing growth charts	Record keeping	Target/priority setting	Link with administration
Andhra Pradesh	2	5	9	14.2	46.1	3.4	36.3
Assam	1	3	7	15.2	47.9	29.7	7.2
Bihar	1	3	6	0.7	88.7	10.6	0
Chhattisgarh	2	7	13	17.3	35.3	47.4	0
Gujarat	2	6	12	24.1	63.1	12.8	0
Haryana	3	9	18	22.5	77.5	0	0
Himachal Pradesh	1	4	7	0	55.1	44.9	0
Jammu and Kashmir	1	3	6	0.6	61.3	37.2	0.9
Jharkhand	1	3	5	36.4	29.4	34.2	0
Karnataka	2	5	9	32.5	50.8	11.5	5.2
Kerala	1	3	6	6.2	28.3	65.4	0
Madhya Pradesh	2	5	11	17.2	72.8	7.4	2.6
Maharashtra	2	4	9	25.5	57.2	15.9	1.4
Orissa	2	5	10	10.6	75.3	14.1	0
Punjab	1	5	9	0	100	0	0
Rajasthan	1	4	8	10.9	80.4	8.7	0
Tamil Nadu	1	4	9	24.7	48.3	18.8	8.2
Uttar Pradesh	1	3	5	4.3	83.1	12.6	0
Uttrakhand	1	3	6	0	58.6	41.4	0
West Bengal	1	2	4	41.6	25.1	33.3	0
Delhi	2	4	7	11.9	76.1	11.9	0
Chandigarh	2	5	10	0	100	0	0
Arunachal Pradesh	0	0	1	0	50	50	0
Manipur	0	1	2	0	69.3	15.3	15.3
Meghalaya	1	3	6	8.1	41.9	50	0
Mizoram	0	0	0				
Nagaland	0	0	0	7.8	92.2	0	0
Tripura	0	0	0	0	0	100	0

Appendix Table 6.20: Number of Visits by ANM/ LHV in AWC and Issues Discussed: Reported by AWW (Continued…)

States/UTs	Visits by ANM/LHV (no.)			What did he/she do? (%)			
	During last 30 days	During last 90 days	During last 6 months	Guidance for preparing growth charts	Record keeping	Target/priority setting	Link with administration
Sikkim	1	3	4	0	100	0	0
Dadar & Nagar Haveli	1	4	8	20	60	20	0
Daman & Diu	2	6	15	0	60	40	0
Goa	1	2	4	0	100	0	0
Puducherry	1	4	5	40	20	40	0
Andaman & Nicobar Island	1	3	5	31	39.2	29.8	0
All India	**1**	**4**	**8**	**16**	**61.5**	**18.4**	**4.1**

Appendix Table 6.21: Number of Visits by Supervisors in AWC and Issues Discussed: Reported by AWW

States/UTs	Visits by ICDS supervisor (no.)			What did he/she do? (%.)					
	During last 30 days	During last 90 days	During last 6 months	Ensuring supply of food	Ensuring supply of other material	Guidance for preparing growth charts	Record keeping	Target/ priority setting	Link with administration
Andhra Pradesh	1	2	4	5.9	2.5	3.3	85.2	1.6	1.6
Assam	1	2	4	8.6	5.6	8.6	52.4	13.6	11.2
Bihar	0	1	2	22.2	3.9	0.8	62.7	3.9	6.5
Chhattisgarh	1	3	6	6.6	6	1.4	75.3	6	4.8
Gujarat	1	3	6	11.1	7.2	11.6	54.7	13.7	1.6
Haryana	2	3	8	1.2	1.5	0	94	1.7	1.7
Himachal Pradesh	1	2	3	14.8	0	0	67.9	14.9	2.4
Jammu and Kashmir	1	2	4	23.8	3.2	0	69.1	3.9	0
Jharkhand	1	3	5	5.2	1.1	2.8	87.2	0	3.7
Karnataka	1	2	3	21.1	2.5	12.2	45	12.5	6.7
Kerala	1	3	6	12.3	8	9.3	48.1	22.4	0
Madhya Pradesh	1	3	6	8.1	10.5	2.3	69.7	6.3	3.3
Maharashtra	1	3	6	9	13	9.9	62.3	2.9	2.9
Orissa	1	2	5	14.1	1.3	15.2	64	2.1	3.3
Punjab	1	3	5	70.8	0	0	29.2	0	0
Rajasthan	1	2	5	3.2	3.9	9.8	60.3	18.6	4.2
Tamil Nadu	1	2	5	13.7	11	3.5	55.5	5.3	11
Uttar Pradesh	1	2	4	19.3	3.1	2.4	68	6.4	0.8
Uttrakhand	1	2	4	6.1	2.2	0	89.6	2.2	0
West Bengal	1	2	5	5.8	0.7	3.6	87.5	0	2.5
Delhi	2	3	6	11.9	0	0	88.1	0	0
Chandigarh	2	3	5	0	0	0	100	0	0
Arunachal Pradesh	0	0	0	0	0	0	50.5	49.6	0
Manipur	1	2	4	4	0	0	76	20	0
Meghalaya	1	2	5	30.6	0	15.7	22.4	31.3	0
Mizoram	1	3	6	20	0	40	20	20	0

Appendix Table 6.21: Number of Visits by Supervisors in AWC and Issues Discussed: Reported by AWW (Continued…)

States/UTs	Visits by ICDS supervisor (no.)			What did he/she do? (%.)					
	During last 30 days	During last 90 days	During last 6 months	Ensuring supply of food	Ensuring supply of other material	Guidance for preparing growth charts	Record keeping	Target/ priority setting	Link with administration
Nagaland	1	2	2	16.2	0	6.3	75.1	2.4	0
Tripura	1	3	6	18.1	17.3	0	64.6	0	0
Sikkim	1	3	5	0	0	0	76.7	0	23.4
Dadar & Nagar Haveli	1	3	7	20	0	20	40	20	0
Daman & Diu	1	3	6	0	0	40	60	0	0
Goa	1	3	6	20	40	0	40	0	0
Puducherry	1	1	1	0	0	0	66.7	0	33.3
Andaman & Nicobar Island	1	3	5	0	0	0	100	0	0
All India	**1**	**2**	**5**	**12.8**	**5**	**5.3**	**67.1**	**6.6**	**3.3**

Appendix Table 6.22: Number of Visits by CDPO/ ACDPO in AWC and Issues Discussed: Reported by AWW

States/UTs	Visits by CDPO/ACDPO (no.)			What did he/she do? (%)							
	During last 30 days	During last 90 days	During last 6 months	None	Ensuring supply of food	Ensuring supply of other material	Guidance for preparing growth charts	Record keeping	Target/ priority setting	Help in organising community meetings	Link with administration
Andhra Pradesh	0	1	1	0	2.5	4.2	0	88	3.2	0	2.1
Assam	0	0	0	4.1	8	0	0	19.1	20.6	27.4	20.9
Bihar	0	1	2	0.5	28	3.3	1.5	61.1	2.4	1.7	1.6
Chhattisgarh	0	0	1	25.5	14.9	2.7	0	30.4	7.2	2.2	17.2
Gujarat	0	0	1	0	5.1	4.7	7.6	61.6	17	0	4.1
Haryana	1	1	2	0	1.2	12.8	0	81.2	1.2	0	3.6
Himachal Pradesh	0	0	1	17.8	20.7	20.2	0	41.4	0	0	0
Jammu and Kashmir	0	0	1	1.2	5.1	1.3	0	71.4	0	0	21.1
Jharkhand	0	0	1	4.6	12.7	13.6	0	38.2	2.4	0	28.5
Karnataka	0	0	1	8.9	29.6	11.2	2.1	27.3	8.1	10.7	2
Kerala	0	0	1	24.8	0	0	0	0	3.8	71.4	0
Madhya Pradesh	0	1	1	0	9	2.4	2.7	42.9	11.6	3	28.5
Maharashtra	0	0	1	13.1	8.7	12.8	1.5	30.2	15.6	9.8	8.3
Orissa	0	0	1	2.8	11	0	6.2	46	8.5	7	18.6
Punjab	0	0	1	0	47.2	7	0	45.8	0	0	0
Rajasthan	0	0	1	22.2	16.3	9.3	3	39	3.7	0	6.4
Tamil Nadu	0	1	1	3.3	23.4	6.9	1.8	43.3	4	6.4	11
Uttar Pradesh	0	0	1	3.8	16.9	6	0	57.1	9	1.3	5.9
Uttrakhand	0	0	1	0	7.7	0	0	70.4	21.9	0	0
West Bengal	0	0	1	10	19.7	16.1	2.8	26.1	4.3	2.5	18.6

Appendix Table 6.22: Number of Visits by CDPO/ ACDPO in AWC and Issues Discussed: Reported by AWW (Continued…)

States/UTs	Visits by CDPO/ACDPO (no.)			What did he/she do? (%)							
	During last 30 days	During last 90 days	During last 6 months	None	Ensuring supply of food	Ensuring supply of other material	Guidance for preparing growth charts	Record keeping	Target/ priority setting	Help in organising community meetings	Link with administration
Delhi	1	1	2	0	0	0	0	75.7	12.2	12.2	0
Chandigarh	1	1	2	0	20	0	0	80	0	0	0
Arunachal Pradesh	0	0	0	0	0	7.4	0	11.3	0	73.9	7.4
Manipur	0	0	0	16.6	0	0	0	16.6	0	0	66.8
Meghalaya	0	1	2	0	9.6	20.2	0	0	40.4	29.8	0
Mizoram	0	0	1	0	80	0	0	20	0	0	0
Nagaland	1	1	1	0	52.6	3.3	0	25.4	18.6	0	0
Tripura	1	1	2	0	19.1	0	0	23.8	0	57.1	0
Sikkim	0	1	2	14.3	0	0	0	5.7	28.7	5.7	45.7
Dadar & Nagar Haveli	0	1	2	0	25	0	25	0	0	25	25
Daman & Diu	2	1	2	0	20	0	40	0	0	0	40
Goa	0	1	2	0	0	60	0	0	0	40	0
Puducherry	0	0	0								
Andaman & Nicobar Island	0	0	1	0	30.8	0	0	62.4	0	0	6.8
All India	**1**	**1**	**1**	**6**	**15.2**	**6.9**	**1.6**	**46.9**	**7.2**	**6.1**	**10.2**

Appendix Table 6.23: Number of Visits by Block Education Officers in AWC: Reported by AWW

States/UTs	Visits by block education officer (no.)			Visits by district project officer (no.)		
	During last 30 days	During last 90 days	During last 6 months	During last 30 days	During last 90 days	During last 6 months
Andhra Pradesh	0	0	0	0	0	0
Assam	0	0	0	0	0	0
Bihar	0	0	0	0	0	0
Chhattisgarh	0	0	0	0	0	0
Gujarat	0	0	0	0	0	0
Haryana	0	0	0	0	0	0
Himachal Pradesh	0	0	0	0	0	0
Jammu and Kashmir	0	0	0	0	0	0
Jharkhand	0	0	0	0	0	0
Karnataka	0	0	0	0	0	0
Kerala	0	0	0	0	0	0
Madhya Pradesh	0	0	0	0	0	0
Maharashtra	0	0	0	0	0	0
Orissa	0	0	0	0	0	0
Punjab	0	0	0	0	0	0
Rajasthan	0	0	0	0	0	0
Tamil Nadu	0	0	1	0	0	0
Uttar Pradesh	0	0	0	0	0	0
Uttrakhand	0	0	0	0	0	0
West Bengal	0	0	0	0	0	0
Delhi	0	0	0	0	0	0
Chandigarh	0	0	0	0	0	0
Arunachal Pradesh	0	0	0	0	0	0
Manipur	0	0	0	0	0	0
Meghalaya	0	0	0	0	0	0
Mizoram	0	0	0	0	0	0

Appendix Table 6.23: Number of Visits by Block Education Officers in AWC: Reported by AWW (Continued…)

States/UTs	Visits by block education officer (no.)			Visits by district project officer (no.)		
	During last 30 days	During last 90 days	During last 6 months	During last 30 days	During last 90 days	During last 6 months
Nagaland	0	0	0	0	0	0
Tripura	0	0	0	0	0	0
Sikkim	0	0	0	0	0	0
Dadar & Nagar Haveli	0	0	0	0	0	0
Daman & Diu	0	0	0	0	0	0
Goa	0	0	0	0	0	0
Puducherry	0	0	0	0	0	0
Andaman & Nicobar Island	0	0	0	0	0	0
All India	0	0	0	0	0	0

Appendix Table 6.24: Number of Visits by Sarpanch in AWC and Issues Discussed: Reported by AWW

States/UTs	Visits by sarpanch (no.)			What did he/she do? (%)								
	During last 30 days	During last 90 days	During last 6 months	None	Ensuring supply of food	Ensuring supply of other material	Guidance for preparing growth charts	Record keeping	Target/ priority setting	Help in organising community meetings	Link with administration
Andhra Pradesh	1	2	3	4.9	49.3	0.5	4.8	2	0.8	35.7	2
Assam	1	2	4	1.8	37.1	15.5	3.6	1.8	0	31.5	8.7
Bihar	1	3	5	9.3	48.6	14	0	22.1	2.8	0	3.2
Chhattisgarh	1	4	8	21.8	18	10.4	0	0	5.8	2.8	41.2
Gujarat	1	3	6	32.5	19	0	0	0	1	45.3	2.3
Haryana	2	4	6	6.5	48.7	30.5	0	3.5	0	10.8	0
Himachal Pradesh	1	3	6	25.4	3.3	24.7	0	1.5	0	34.1	10.9
Jammu and Kashmir	1	2	5	8.7	27.7	1.1	0	37.7	0	6.9	18
Jharkhand	0	0	0	24.3	0	0	0	0	32.9	42.9	0
Karnataka	1	2	3	15.1	13.2	4.6	6.5	9.6	0	42.1	9
Kerala	0	0	0	0	0	0	0	0	0	0	0
Madhya Pradesh	2	5	8	26.3	23.8	17.5	2.3	4.6	2.6	13.6	9.4
Maharashtra	1	4	6	28.3	41.3	8.5	5.3	0	0	11.9	4.7
Orissa	1	2	3	20.2	2.1	8.4	3.7	3.8	8.7	18.6	34.6
Punjab	2	7	11	53.3	24.4	18.7	3.7	0	0	0	0
Rajasthan	1	3	5	30.9	18.8	11.5	0	5.1	3.6	12.2	17.9
Tamil Nadu	0	1	2	9.5	13.7	0	1.6	3.2	0	66	6
Uttar Pradesh	1	3	5	19.3	30	11.9	0	13.5	4.4	5.9	15.1
Uttrakhand	0	1	1	11.2	0	25.7	0	47.8	5.5	0	9.8
West Bengal	0	0	1	3.8	0	3	0	0	0	16.2	77

Appendix Table 6.24: Number of Visits by Sarpanch in AWC and Issues Discussed: Reported by AWW (Continued…)

States/UTs	Visits by sarpanch (no.)			What did he/she do? (%)							
	During last 30 days	During last 90 days	During last 6 months	None	Ensuring supply of food	Ensuring supply of other material	Guidance for preparing growth charts	Record keeping	Target/ priority setting	Help in organising community meetings	Link with administration
Delhi	0	0	0	0	0	0	0	0	0	0	0
Chandigarh	0	1	2	0	0	33.3	0	0	0	33.3	33.3
Arunachal Pradesh	0	0	0	0	0	0	0	0	0	0	0
Manipur	0	0	0	0	0	0	0	0	0	0	0
Meghalaya	1	2	4	28.2	0	0	0	0	0	71.8	0
Mizoram	1	1	2	0	0	0	0	0	0	100	0
Nagaland	0	1	1	0	15.6	28.2	0	0	0	0	56.3
Tripura	1	3	5	1.3	3	3	27.5	0	0	62.3	3
Sikkim	0	1	2	63.4	0	0	0	0	0	30	6.6
Dadar & Nagar Haveli	0	1	1	50	25	0	0	0	0	25	0
Daman & Diu	0	1	2	33.3	33.3	0	0	0	0	33.3	0
Goa	0	1	1	0	100	0	0	0	0	0	0
Puducherry	0	0	0								
Andaman & Nicobar Island	0	0	0								
All India	**2**	**4**		**19.4**	**28**	**9.9**	**2.3**	**7.2**	**2.2**	**19.2**	**11.9**

Appendix Table 6.25: Number of Visits by Medical Officers in AWC and Issues Discussed: Reported by AWW

States/UTs	Visits by medical officer (no.)			What did he/she do? (%)			
	During last 30 days	During last 90 days	During last 6 months	Guidance for preparing growth charts	Record keeping	Target/priority setting	Link with administration
Andhra Pradesh	0	0	1	41.9	23.6	12.4	22.1
Assam	0	0	1	11	8.1	42.1	38.8
Bihar	0	0	0	19.2	9.2	0	71.7
Chhattisgarh	0	0	1	30.2	30.3	39.5	0
Gujarat	0	1	2	29.6	22.8	3	44.7
Haryana	0	0	1	46.5	0	3.5	50.1
Himachal Pradesh	0	0	1	0	100	0	0
Jammu and Kashmir	0	1	1	1.3	46	42.4	10.3
Jharkhand	0	0	0	13.4	33.5	8.9	44.2
Karnataka	0	1	2	55	6.1	19.7	19.2
Kerala	0	1	1	13.3	18.4	68.4	0
Madhya Pradesh	0	1	1	11.2	48.2	9.8	30.8
Maharashtra	0	1	2	25.9	5.7	15.3	53.1
Orissa	0	0	1	3.3	17.3	23.9	55.6
Punjab	0	1	1	7.8	0	0	92.2
Rajasthan	0	1	2	7.4	14.8	11.6	66.2
Tamil Nadu	0	1	2	43.8	10.9	21.7	23.7
Uttar Pradesh	0	0	0	17	27.5	17.2	38.2
Uttrakhand	0	0	0	0	0	39.1	60.9
West Bengal	0	0	0	19.6	18.3	18.3	43.7
Delhi	0	0	1	100	0	0	0
Chandigarh	0	1	2	0	0	0	100
Arunachal Pradesh	0	0	0	0	0	16.6	83.4
Manipur	0	0	0				
Meghalaya	0	1	1	42.5	0	57.5	0
Mizoram	0	0	0				
Nagaland	0	0	0	68.8	0	0	31.3

Appendix Table 6.25: Number of Visits by Medical Officers in AWC and Issues Discussed: Reported by AWW (Continued…)

States/UTs	Visits by medical officer (no.)			What did he/she do? (%)			
	During last 30 days	During last 90 days	During last 6 months	Guidance for preparing growth charts	Record keeping	Target/ priority setting	Link with administration
Tripura	0	0	0	30.3	0	69.7	0
Sikkim	0	0	0	0	100	0	0
Dadar & Nagar Haveli	0	1	2	0	0	40	60
Daman & Diu	0	0	1	0	20	20	60
Goa	0	0	0	100	0	0	0
Puducherry	1	1	2	60	20	20	0
Andaman & Nicobar Island	0	0	0				
All India	**0**	**1**	**1**	**26.4**	**17.9**	**18.7**	**37**

Appendix Table 6.26: Percentage of AWCs Getting Help from Panchayat

States/UTs	% AWW reported getting help from panchayat	Kind of help				
		Mobilize children & mother	Monitoring	Providing infrastructure	Others	Total
Andhra Pradesh	41.6	35.2	33.5	18.5	12.8	100
Assam	44.5	2.7	76.7	20.6	0	100
Bihar	55.3	20.6	71.1	8.3	0	100
Chhattisgarh	54.1	18.3	19.5	49.8	12.4	100
Gujarat	39	34.8	15.4	36.3	13.5	100
Haryana	24.4	6.8	19.3	73.9	0	100
Himachal Pradesh	65.9	13.3	41.4	45.4	0	100
Jammu and Kashmir	19	8.9	82.4	4.4	4.2	100
Jharkhand	4	0	50	0	50	100
Karnataka	58.2	27.2	32.3	34.7	5.8	100
Kerala	87.6	20.3	17.1	62.7	0	100
Madhya Pradesh	35.9	25.3	32.4	35.2	7.2	100
Maharashtra	49.3	16.5	29.7	51.2	2.6	100
Orissa	28.7	18.8	34.5	41.3	5.5	100
Punjab	61.4	11.2	25.4	40.3	23.1	100
Rajasthan	17.6	24.4	41.7	33.9	0	100
Tamil Nadu	34.9	10.3	9.4	34.8	45.6	100
Uttar Pradesh	29.7	19	54.6	14.9	11.6	100
Uttrakhand	9.7	0	40.2	19.6	40.2	100
West Bengal	40.8	44.2	9.7	41.4	4.8	100
Delhi	-	-	-	-	-	-
Chandigarh	-	-	-	-	-	-
Arunachal Pradesh	15.3	0	0	0	100	100
Manipur	0	-	-	-	-	-
Meghalaya	45.9	57.7	0	42.3	0	100
Mizoram	0	-	-	-	-	-
Nagaland	58.8	0	59.8	40.2	0	100

Appendix Table 6.26: Percentage of AWCs Getting Help from Panchayat (Continued…)

States/UTs	% AWW reported getting help from panchayat	Kind of help				
		Mobilize children & mother	Monitoring	Providing infrastructure	Others	Total
Tripura	62.9	0	0	100	0	100
Sikkim	51.3	28	28	44.1	0	100
Dadar & Nagar Haveli	80	25	0	50	25	100
Daman & Diu	60	100	0	0	0	100
Goa	40	0	100	0	0	100
Puducherry	0	-	-	-	-	-
Andaman & Nicobar Island	0	-	-	-	-	-
All India	**39.9**	**22.3**	**35.6**	**34.2**	**7.9**	**100**

Appendix Table 6.27: Percentage of AWCs Getting Help from Village Leaders/Committee

States/UTs	% AWW reported getting help from village leaders/committee	Kind of help				
		Mobilize children & mother	Monitoring	Providing infrastructure	Others	Total
Andhra Pradesh	33.6	25.8	49.3	11.8	13.1	100
Assam	74.3	14.7	68.3	15.5	1.5	100
Bihar	57.6	15	67	9.8	8.2	100
Chhattisgarh	28.9	32.1	38.1	10.8	19	100
Gujarat	19.5	53.8	9.6	29.6	6.9	100
Haryana	8	20.7	64.5	14.8	0	100
Himachal Pradesh	16.1	0	61.7	23.6	14.7	100
Jammu and Kashmir	33.8	10	45.3	44.7	0	100
Jharkhand	11	23.5	48.5	9.9	18	100
Karnataka	52.8	38.1	16.4	35.3	10.3	100
Kerala	49.5	27.2	22.3	50.5	0	100
Madhya Pradesh	30.3	31.5	13.5	31.8	23.2	100
Maharashtra	43.9	24.9	28.3	30.7	16.1	100
Orissa	42.5	13.8	40	40.3	5.9	100
Punjab	8.4	0	60	40	0	100
Rajasthan	15	8.6	68.3	0	23.2	100
Tamil Nadu	29.6	1.8	0.1	57.1	41	100
Uttar Pradesh	6.2	31.7	34.7	5.8	27.9	100
Uttrakhand	3.9	0	100	0	0	100
West Bengal	28.8	9.2	56.7	28	6.2	100
Delhi	0	-	-	-	-	-
Chandigarh	0	-	-	-	-	-
Arunachal Pradesh	15.3	0	0	0	100	100
Manipur	20	0	80.1	19.9	0	100
Meghalaya	59.4	44.6	21.8	33.7	0	100
Mizoram	20	0	100	0	0	100
Nagaland	46.3	5.3	0	76	18.8	100

Appendix Table 6.27: Percentage of AWCs Getting Help from Village Leaders/Committee (Continued…)

States/UTs	% AWW reported getting help from village leaders/committee	Kind of help				
		Mobilize children & mother	Monitoring	Providing infrastructure	Others	Total
Tripura	96.5	37.8	38.7	23.5	0	100
Sikkim	0	-	-	-	-	-
Dadar & Nagar Haveli	80	25	25	50	0	100
Daman & Diu	60	66.7	33.3	0	0	100
Goa	40	50	50	0	0	100
Puducherry	0	-	-	-	-	-
Andaman & Nicobar Island	0	-	-	-	-	-
All India	**31.1**	**21.7**	**40.8**	**25.7**	**11.8**	**100**

Appendix Table 6.28: Percentage of AWCs Getting Help from Women's Group

States/UTs	% AWW reported getting help from women's group	Kind of help				
		Mobilize children & mother	Monitoring	Providing infrastructure	Others	Total
Andhra Pradesh	18.5	19.2	61.6	15.3	3.9	100
Assam	50.2	14.8	62.4	0	22.8	100
Bihar	10.4	39.2	30.1	30.8	0	100
Chhattisgarh	93.3	7.8	33.6	42.8	15.9	100
Gujarat	36.8	79.1	7.4	11.3	2.3	100
Haryana	17	11.6	62.6	16.7	9	100
Himachal Pradesh	69.9	30.3	14.5	28.6	26.6	100
Jammu and Kashmir	39.6	18.4	3.3	69.8	8.5	100
Jharkhand	45.4	71.7	24.4	0	3.9	100
Karnataka	59.4	31.5	32.6	11.1	24.9	100
Kerala	84.1	40.1	40.7	8.9	10.4	100
Madhya Pradesh	48.1	44.9	26	20.8	8.3	100
Maharashtra	60.3	30.3	29.1	15.5	25.1	100
Orissa	58.6	37.3	35.3	4.1	23.3	100
Punjab	6.1	27.6	0	72.4	0	100
Rajasthan	35.3	30.5	14.5	41.2	13.8	100
Tamil Nadu	29.9	20.9	8.6	35.2	35.3	100
Uttar Pradesh	15.7	66.7	8.9	18.6	5.8	100
Uttrakhand	0	-	-	-	-	-
West Bengal	26.5	82.5	9.8	2.4	5.4	100
Delhi	32.5	33.3	0	33.3	33.3	100
Chandigarh	0	-	-	-	-	-
Arunachal Pradesh	0	-	-	-	-	-
Manipur	88.1	54.6	40.9	4.5	0	100
Meghalaya	39.4	16.4	50.8	0	32.8	100
Mizoram	20	100	0	0	0	100
Nagaland	33.8	85.6	7.2	7.2	0	100

Appendix Table 6.28: Percentage of AWCs Getting Help from Women's Group (Continued…)

States/UTs	% AWW reported getting help from women's group	Kind of help				
		Mobilize children & mother	Monitoring	Providing infrastructure	Others	Total
Tripura	21.1	8.9	91.1	0	0	100
Sikkim	28.7	50	50	0	0	100
Dadar & Nagar Haveli	80	50	25	25	0	100
Daman & Diu	80	50	0	50	0	100
Goa	20	0	100	0	0	100
Puducherry	0	-	-	-	-	-
Andaman & Nicobar Island	0	-	-	-	-	-
All India	**37.1**	**39.1**	**28**	**18**	**15**	**100**

Appendix Table 6.29: Percentage of AWCs Getting Help from Mothers of Beneficiary Children

States/UTs	% AWW reported getting help from mothers of beneficiary children	Kind of help				
		Mobilize children & mother	Monitoring	Providing infrastructure	Others	Total
Andhra Pradesh	28	19.6	18.1	17.9	44.4	100
Assam	82.7	11.4	47.1	0	41.5	100
Bihar	19.3	67.6	13.8	2	16.6	100
Chhattisgarh	57.5	50.5	6.7	19.1	23.6	100
Gujarat	56.2	55.5	22.1	1.5	20.9	100
Haryana	7.2	62.1	0	21.4	16.5	100
Himachal Pradesh	78.8	41.2	22	14.6	22.2	100
Jammu and Kashmir	42.8	57.7	10	0	32.3	100
Jharkhand	53.4	57.8	28.2	7	7	100
Karnataka	43.7	27	34.1	20.3	18.7	100
Kerala	94	38.2	39.3	3.7	18.7	100
Madhya Pradesh	46	68	14.4	12.2	5.4	100
Maharashtra	56.6	60.5	14.5	10.8	14.1	100
Orissa	61	51.5	25.3	5.1	18.1	100
Punjab	10.1	83.3	0	16.7	0	100
Rajasthan	35	41.5	33.6	2.6	22.3	100
Tamil Nadu	32.5	3.6	0	35.7	60.7	100
Uttar Pradesh	39.8	70.9	6.9	3.9	18.3	100
Uttrakhand	0	-	-	-	-	-
West Bengal	82	60.6	24.2	0	15.2	100
Delhi	50.8	21.3	36.1	21.3	21.3	100
Chandigarh	0	-	-	-	-	-
Arunachal Pradesh	0	-	-	-	-	-
Manipur	96	95.9	0	0	4.2	100
Meghalaya	59.4	32.7	56.5	10.9	0	100
Mizoram	100	60	0	40	0	100

Appendix Table 6.29: Percentage of AWCs Getting Help from Mothers of Beneficiary Children (Continued…)

States/UTs	% AWW reported getting help from mothers of beneficiary children	Kind of help				
		Mobilize children & mother	Monitoring	Providing infrastructure	Others	Total
Nagaland	77.6	22.6	32.1	37.2	8.1	100
Tripura	93	18.6	23.5	0	57.9	100
Sikkim	20	100	0	0	0	100
Dadar & Nagar Haveli	100	40	60	0	0	100
Daman & Diu	100	40	20	40	0	100
Goa	20	100	0	0	0	100
Puducherry	0	-	-	-	-	-
Andaman & Nicobar Island	45.7	74.5	13.1	0	12.4	100
All India	**48.4**	**50.3**	**21.2**	**7.7**	**20.9**	**100**

Appendix Table 6.30: Percentage of AWCs Getting Help from KSY Girls

States/UTs	% AWW reported getting help from KSY girls	Kind of help				
		Mobilizing children & mothers	Monitoring	Providing infrastructure	Others	Total
Andhra Pradesh	42.2	13.3	13.2	0	73.6	100
Assam	39.9	0	43.1	0	56.9	100
Bihar	59.3	25.2	24.2	9.6	41.1	100
Chhattisgarh	78.4	31.1	11.1	10.4	47.5	100
Gujarat	15.3	55	29.7	0	15.3	100
Haryana	13.6	6.1	0	0	93.9	100
Himachal Pradesh	38.8	3.1	0	22.5	74.5	100
Jammu and Kashmir	29.8	60.9	11.4	4.4	23.4	100
Jharkhand	62.3	48.3	13.3	4.2	34.2	100
Karnataka	56.5	20.2	27.1	27.7	25	100
Kerala	19.7	37.8	0	36	26.3	100
Madhya Pradesh	73	41.9	29.1	17.9	11.2	100
Maharashtra	64	64.6	7	0	28.4	100
Orissa	58.7	33.7	10.5	5	50.8	100
Punjab	3.5	0	100	0	0	100
Rajasthan	13.6	25.5	27.7	22.4	24.4	100
Tamil Nadu	17.5	45.8	12.1	0	42.1	100
Uttar Pradesh	49.3	43	16.6	3.5	37	100
Uttrakhand	0	-	-	-	-	-
West Bengal	5.9	9.7	38.2	20.2	31.9	100
Delhi	43.3	25	25	0	50	100
Chandigarh	0	-	-	-	-	-
Arunachal Pradesh	0	-	-	-	-	-
Manipur	0	-	-	-	-	-
Meghalaya	0	-	-	-	-	-
Mizoram	0	-	-	-	-	-

Appendix Table 6.30: Percentage of AWCs Getting Help from KSY Girls (Continued…)

States/UTs	% AWW reported getting help from KSY girls	Kind of help				
		Mobilizing children & mothers	Monitoring	Providing infrastructure	Others	Total
Nagaland	0	-	-	-	-	-
Tripura	20	0	13.5	0	86.5	100
Sikkim	0	-	-	-	-	-
Dadar & Nagar Haveli	20	0	100	0	0	100
Daman & Diu	100	40	0	40	20	100
Goa	0	-	-	-	-	-
Puducherry	0	-	-	-	-	-
Andaman & Nicobar Island	34	17.5	0	0	82.5	100
All India	**40.9**	**35.7**	**18.4**	**8.5**	**37.4**	**100**

Appendix Table 6.31: Average Age of AWWs and Distribution of AWW by Marital Status

States/UTs	Age	Marital status		
		Unmarried	Married	Widowed / Divorced
Andhra Pradesh	35	7.2	81.9	10.9
Assam	37	12.5	85.3	2.2
Bihar	37	2.2	92.2	5.6
Chhattisgarh	41	12.9	73.9	13.2
Gujarat	37	1.9	95.8	2.4
Haryana	41	0.8	95.3	3.9
Himachal Pradesh	36	1.2	87.5	11.3
Jammu and Kashmir	39	3.8	96.2	0
Jharkhand	36	6.6	87.3	6.1
Karnataka	36	15.5	80.1	4.4
Kerala	41	9.5	87.1	3.4
Madhya Pradesh	39	10.1	68	21.9
Maharashtra	42	2.9	88.7	8.4
Orissa	39	21.8	70.9	7.3
Punjab	39	13.6	78.6	7.8
Rajasthan	36	14.3	77.5	8.3
Tamil Nadu	47	8.1	86.8	5.1
Uttar Pradesh	37	6.8	83.5	9.6
Uttrakhand	33	6.8	93.2	0
West Bengal	42	12.4	85.4	2.2
Delhi	43	21.7	78.3	0
Chandigarh	47	0	60	40
Arunachal Pradesh	28	0	100	0
Manipur	45	0	84	16
Meghalaya	42	0	86.5	13.5
Mizoram	40	0	80	20
Nagaland	35	13.8	72.5	13.8

Appendix Table 6.31: Average Age of AWWs and Distribution of AWW by Marital Status (Continued…)

States/UTs	Age	Marital status		
		Unmarried	Married	Widowed / Divorced
Tripura	41	0	82.7	17.3
Sikkim	33	25.7	74.3	0
Dadar & Nagar Haveli	43	0	100	0
Daman & Diu	44	0	60	40
Goa	46	0	100	0
Puducherry	49	0	60	40
Andaman & Nicobar Island	40	20	80	0
All India	**39**	**8.5**	**83.8**	**7.8**

Appendix Table 6.32: Percentage Distribution of AWW by Level of Education

States/UTs	Illiterate	Below primary	Primary	Middle	Matric/High school	HS	Graduate & Above
Andhra Pradesh	1.2	0.7	9.3	13.7	48	10.5	16.8
Assam	2.2	0	0	11.1	56	26.1	4.6
Bihar	4.5	0.7	1.5	3.9	43.7	28.2	17.5
Chhattisgarh	0	0	27	16.3	18.2	25.2	13.4
Gujarat	0	3.1	9.5	11.2	30.9	27.9	17.6
Haryana	1.7	0	0	2	58.1	35.1	3.2
Himachal Pradesh	0	0	8.7	9.9	62.7	18.8	0
Jammu and Kashmir	0	0	0.5	18.3	37.3	43.1	0.8
Jharkhand	0	0	0	7.8	50.1	32.6	9.5
Karnataka	1.3	0	6.4	6.5	50.7	29.3	5.9
Kerala	3.1	0	1.6	1.7	43.9	43.4	6.2
Madhya Pradesh	1.2	0	3.3	17.6	33.7	29.4	14.8
Maharashtra	0	0	7.6	18.8	50.8	12.6	10.2
Orissa	0	0	1	15.7	36.6	11.8	35.1
Punjab	7	0	0	5.2	38.4	30.3	19.2
Rajasthan	0	3.1	19.2	48.8	17.1	10.6	1.2
Tamil Nadu	3.7	0	0	11	65.1	9.5	10.8
Uttar Pradesh	4.3	0	0	8.6	28.1	27	32.1
Uttrakhand	0	0	0	1.9	11.7	20.4	66
West Bengal	0	0	0	22.1	52.5	20	5.4
Delhi	0	0	0	9.2	21.7	41.7	27.5
Chandigarh	0	0	0	0	60	20	20
Arunachal Pradesh	15.3	0	50.8	9.4	24.6	0	0
Manipur	0	0	4	16	56	0	24
Meghalaya	0	0	0	80	20	0	0
Mizoram	0	0	0	20	80	0	0
Nagaland	0	0	0	40	46.3	13.8	0
Tripura	0	0	1.9	40.8	38.1	0	19.2

Appendix Table 6.32: Percentage Distribution of AWW by Level of Education (Continued…)

States/UTs	Illiterate	Below primary	Primary	Middle	Matric/High school	HS	Graduate & Above
Sikkim	14.3	28.7	28.7	22.6	0	5.7	0
Dadar & Nagar Haveli	0	0	0	0	80	20	0
Daman & Diu	0	0	0	20	60	0	20
Goa	0	0	0	20	80	0	0
Puducherry	20	0	0	0	60	20	0
Andaman & Nicobar Island	8.4	0	0	49.6	33.7	8.4	0
All India	**1.8**	**0.4**	**4.6**	**14.2**	**41.4**	**22.5**	**15**

Appendix Table 6.33: Percentage Distribution of AWW by Residence

States/UTs	Within the village	Other village within 5 Km	Other village more than 5 Km	Nearby town	Total
Andhra Pradesh	92.7	6.4	1	0	100
Assam	87.1	10.7	0	2.2	100
Bihar	98.6	1.4	0	0	100
Chhattisgarh	89	4.8	0	6.2	100
Gujarat	77.7	17.4	4.9	0	100
Haryana	96.7	1.7	0.8	0.8	100
Himachal Pradesh	69.9	30.1	0	0	100
Jammu and Kashmir	90.6	5.1	3.3	1	100
Jharkhand	87.8	10.4	1.8	0	100
Karnataka	96.8	3.2	0	0	100
Kerala	72.8	25.8	1.4	0	100
Madhya Pradesh	96.4	1.5	1.6	0.5	100
Maharashtra	88.9	7.2	2	2	100
Orissa	79.8	15.3	3.1	1.8	100
Punjab	85	8.9	3.4	2.7	100
Rajasthan	84.9	6.2	3.4	5.6	100
Tamil Nadu	43.9	29.2	13.9	13.1	100
Uttar Pradesh	80.3	17.5	1	1.2	100
Uttrakhand	68.8	31.2	0	0	100
West Bengal	52.9	23.1	17.1	6.9	100
Delhi	29.2	41.7	9.2	20	100
Chandigarh	60	40	0	0	100
Arunachal Pradesh	100	0	0	0	100
Manipur	84	0	0	16	100
Meghalaya	100	0	0	0	100
Mizoram	80	0	0	20	100
Nagaland	100	0	0	0	100

Appendix Table 6.33: Percentage Distribution of AWW by Residence (Continued…)

States/UTs	Within the village	Other village within 5 Km	Other village more than 5 Km	Nearby town	Total
Tripura	26.2	73	0.8	0	100
Sikkim	85.7	0	14.3	0	100
Dadar & Nagar Haveli	60	0	40	0	100
Daman & Diu	80	20	0	0	100
Goa	40	40	20	0	100
Puducherry	40	40	20	0	100
Andaman & Nicobar Island	94.3	5.7	0	0	100
All India	**81.5**	**12.5**	**3.5**	**2.5**	**100**

Appendix Table 6.34: Percentage of AWW Attended Training & Duration (In Days)

States/UTs	Job training		Refresher course in growth monitoring		Refresher course in pre-school education		Joint training with health worker		Skill training/special training	
	% of AWW attended	Duration (in days)	% of AWW attended	Duration (in days)	% of AWW attended	Duration (in days)	% of AWW attended	Duration (in days)	% of AWW attended	Duration (in days)
Andhra Pradesh	100	69	85.7	9	76.6	7	26.7	4	30.6	5
Assam	97.2	68	39.2	8	61.7	9	30.1	4	25.4	6
Bihar	91.7	51	84.2	11	95.2	11	94.9	2	2.2	6
Chhattisgarh	58.5	52	74.8	12	79.7	11	48.9	5	43.5	7
Gujarat	95.1	73	73.6	11	70.4	8	63.1	6	26.8	4
Haryana	100	62	82.8	14	76.8	11	91.9	6	28.4	4
Himachal Pradesh	52.5	88	73.9	11	73.9	10	47.9	5	43.7	4
Jammu and Kashmir	62	70	33	13	45.1	14	38.8	5	7.3	7
Jharkhand	100	45	46.3	10	33.9	8	12	7	11.3	7
Karnataka	64.1	42	64.4	4	63.8	7	70.8	4	29.1	2
Kerala	90.6	55	78.8	11	77.8	8	6.5	7	29.4	3
Madhya Pradesh	80.9	51	68.3	9	74	11	69	4	30.6	5
Maharashtra	99.7	72	81.7	12	82.1	12	69.7	7	45.3	5
Orissa	98.3	71	92.4	12	91.5	11	71.4	6	37.7	6
Punjab	29.2	61	92.8	14	90.1	14	90.1	10	93.9	10
Rajasthan	100	48	58.5	6	72.1	6	57.8	3	34.7	5
Tamil Nadu	96	33	83.4	7	94.3	8	75.7	5	62.7	4
Uttar Pradesh	57.1	43	46	7	64.3	12	58.4	3	29.7	6
Uttrakhand	85.4	37	89.2	7	98.1	10	56.4	5	36.4	5
West Bengal	98	66	77.2	8	84	7	23.2	5	7.4	5

Appendix Table 6.34: Percentage of AWW Attended Training & Duration (In Days) (Continued…)

States/UTs	Job training		Refresher course in growth monitoring		Refresher course in pre-school education		Joint training with health worker		Skill training/special training	
	% of AWW attended	Duration (in days)	% of AWW attended	Duration (in days)	% of AWW attended	Duration (in days)	% of AWW attended	Duration (in days)	% of AWW attended	Duration (in days)
Delhi	69.2	85	80	14	21.7	12	50.8	2	20	2
Chandigarh	80	90	100	15	100	15	100	1	60	11
Arunachal Pradesh	87.7	30	15.6	3	17.1	2	18.4	1	18.4	6
Manipur	96	76	76	6	80	7	16	1	64.1	6
Meghalaya	86.5	68	100	12	100	13	86.5	6	72.9	5
Mizoram	100	66	100	2	100	1	0		0	
Nagaland	100	60	100	7	100	7	66.3	3	31.3	3
Tripura	63.8	55	98.4	8	79.4	6	6.2	2	21.1	3
Sikkim	100	83	100	12	100	7	34.3	4	20	5
Dadar & Nagar Haveli	100	78	100	9	100	8	100	3	0	
Daman & Diu	60	80	60	4	80	6	60	2	0	
Goa	100	90	100	14	100	10	100	3	100	7
Puducherry	100	73	20	15	80	13	20	20	20	1
Andaman & Nicobar Island	83.3	47	57.3	8	0		0		0	
All India	**84**	**58**	**70.2**	**9**	**75.2**	**10**	**55.2**	**5**	**29.9**	**5**

Appendix Table 6.35: Percentage of AWW Received ICDS Handbook and Reasons for Not Used

States/UTs	Received ICDS hand book	Reffered ICDS hand book		Reasons for not reffering			
		Yes	No	Not relevant	Difficult to use	Know it very well	Other reasons
Andhra Pradesh	41.2	71	29	1.1	96.1	0	2.9
Assam	78.9	97.3	2.7	0	86.8	0	13.2
Bihar	59.2	66.1	33.9	0	98	0	2
Chhattisgarh	74.5	100	0	0	100	0	0
Gujarat	97.5	100	0	0	50.4	0	49.6
Haryana	84	70.2	29.8	0	100	0	0
Himachal Pradesh	88.7	100	0	0	100	0	0
Jammu and Kashmir	43	92.7	7.3	0	97.7	0	2.3
Jharkhand	21.4	100	0	1.4	98.6	0	0
Karnataka	75.7	56.1	43.9	25.7	66.5	7.9	0
Kerala	17.1	74.6	25.4	7.3	92.7	0	0
Madhya Pradesh	54	96.7	3.3	0	70	30	0
Maharashtra	71.7	90.7	9.3	2.6	86.6	4.8	5.9
Orissa	39.6	74.9	25.1	0	98	0	2
Punjab	3.4	100	0	0	100	0	0
Rajasthan	94.4	93.9	6.1	0	100	0	0
Tamil Nadu	88.4	97.1	2.9	7	82.8	0	10.2
Uttar Pradesh	75.4	87.8	12.2	2.1	88.6	0	9.3
Uttrakhand	89.2	100	0	0	100	0	0
West Bengal	40.1	86.6	13.4	7.4	90.6	2.1	0
Delhi	89.2	100	0	0	0	100	0
Chandigarh	80	100	0	0	100	0	0
Arunachal Pradesh	37	58.6	41.4	53.6	46.4	0	0
Manipur	8	100	0	17.4	78.3	0	4.3
Meghalaya	72.9	81.4	18.6	0	100	0	0
Mizoram	80	100	0	0	100	0	0
Nagaland	43.6	100	0	0	100	0	0

Appendix Table 6.35: Percentage of AWW Received ICDS Handbook and Reasons for Not Used (Continued…)

States/UTs	Received ICDS hand book	Reffered ICDS hand book		Reasons for not reffering			
		Yes	No	Not relevant	Difficult to use	Know it very well	Other reasons
Tripura	41.1	100	0	29.4	70.6	0	0
Sikkim	28.7	0	100	0	100	0	0
Dadar & Nagar Haveli	60	100	0	0	100	0	0
Daman & Diu	100	80	20	0	0	0	0
Goa	100	100	0	0	0	0	0
Puducherry	80	75	25	0	100	0	0
Andaman & Nicobar Island	40.6	85.3	14.7	0	100	0	0
All India	**62.1**	**86.8**	**13.2**	**4.1**	**90**	**3.4**	**2.5**

Appendix Table 6.36: Average Age of AWHs and Percentage Distribution Marital Status

States/UTs	Age	Marital status		
		Unmarried	Married	Widowed / Divorced
Assam	37	7	93.1	0
Bihar	36	10.3	77.6	12.2
Chhattisgarh	45	14	62	24
Gujarat	41	3.8	87.4	8.8
Haryana	44	0.8	79.9	19.3
Himachal Pradesh	41	0	86.1	13.9
Jammu and Kashmir	40	17.7	76.8	5.5
Jharkhand	35	11.5	77.8	10.7
Karnataka	43	7.5	64.1	28.4
Kerala	44	15.2	81.4	3.4
Madhya Pradesh	40	10.1	68.8	21.1
Maharashtra	43	2.4	74.9	22.6
Orissa	45	9.4	49.1	41.5
Punjab	45	9.3	65.2	25.5
Rajasthan	43	3.7	58.1	38.3
Tamil Nadu	43	11.5	64.1	24.4
Uttar Pradesh	36	10.9	78.2	10.9
Uttrakhand	36	3.4	81.9	14.7
West Bengal	39	3.8	72.2	24
Delhi	40	0	90.8	9.2
Chandigarh	49	0	80	20
Arunachal Pradesh	28	3.2	96.8	0
Manipur	39	12	56	32
Meghalaya	30	20	80	0
Mizoram	44	0	80	20
Nagaland	34	27.5	70.1	2.4

Appendix Table 6.36: Average Age of AWHs and Percentage Distribution Marital Status (Continued…)

States/UTs	Age	Marital status		
		Unmarried	Married	Widowed / Divorced
Tripura	35	34.6	65.4	0
Sikkim	30	34.3	65.7	0
Dadar & Nagar Haveli	40	0	60	40
Daman & Diu	30	60	40	0
Goa	38	0	100	0
Puducherry	44	0	80	20
Andaman & Nicobar Island	32	14	86	0
All India	**40**	**8.4**	**71.6**	**20**

Appendix Table 6.37: Percentage Distribution of AWH by Level of Education

States/UTs	Illiterate	Below primary	Primary	Middle	Matric/High school	HS & above
Andhra Pradesh	64.7	24.4	6.8	2.1	2	0
Assam	1.2	1.2	0	77.2	14.1	6.2
Bihar	42.5	12.9	11.3	15.8	16.5	1.1
Chhattisgarh	5.7	63.3	24.4	6	0	0.6
Gujarat	25.9	14.8	25.5	26.1	0	7.8
Haryana	60.5	2.4	17.2	17.3	2.7	0
Himachal Pradesh	9.9	8.7	36.5	18.9	26.1	0
Jammu and Kashmir	59.3	2.1	2.6	17.8	2.7	15.5
Jharkhand	4.4	13.5	17.4	48.6	12	4.2
Karnataka	55	35.4	9.6	0	0	0
Kerala	6.1	0	2.1	37.7	49.9	4.3
Madhya Pradesh	29.1	21.1	18.8	16.3	8.3	6.5
Maharashtra	10.3	20.8	23.8	38.1	5.8	1.3
Orissa	14.1	40.6	28.1	14.9	2.4	0
Punjab	56.8	6.1	15	11.7	10.4	0
Rajasthan	48.9	25.3	19.4	3.9	2.5	0
Tamil Nadu	31.1	15.8	21.5	19.6	9	3
Uttar Pradesh	18.3	0.5	19	52.4	7.1	2.7
Uttrakhand	1.9	3.9	14.5	71	5.3	3.4
West Bengal	2.3	7	23.2	64.6	2.9	0
Delhi	18.3	32.5	29.2	9.2	10.8	0
Chandigarh	40	0	40	20	0	0
Arunachal Pradesh	30.7	49.1	9.4	10.8	0	0
Manipur	0	0	4	68.1	0	28
Meghalaya	0	6.5	33.5	46.5	13.5	0
Mizoram	0	20	0	80	0	0
Nagaland	0	22.6	30.1	22.3	11.3	13.8
Tripura	35.4	2.7	3.5	58.4	0	0

Appendix Table 6.37: Percentage Distribution of AWH by Level of Education (Continued...)

States/UTs	Illiterate	Below primary	Primary	Middle	Matric/High school	HS & above
Sikkim	20	25.7	40	14.3	0	0
Dadar & Nagar Haveli	60	0	40	0	0	0
Daman & Diu	0	0	20	60	0	20
Goa	0	0	40	20	40	0
Puducherry	20	0	40	20	20	0
Andaman & Nicobar Island	14	0	22.7	63.3	0	0
All India	**26.2**	**15.8**	**17.3**	**30.4**	**7.8**	**2.6**

Appendix Table 6.38: Percentage Distribution of AWH by Residence

States/UTs	Within the village	Other village within 5 Km	Other village more than 5 Km	Nearby town	Total
Andhra Pradesh	99.6	0.4	0	0	100
Assam	74	23	3.1	0	100
Bihar	98.6	0.7	0.7	0	100
Chhattisgarh	98.6	0	0	1.5	100
Gujarat	97	3.1	0	0	100
Haryana	95.9	0	1.7	2.5	100
Himachal Pradesh	72.5	10.1	0	17.4	100
Jammu and Kashmir	96	2.6	0.8	0.5	100
Jharkhand	91.7	8.3	0	0	100
Karnataka	90.4	9.6	0	0	100
Kerala	78.5	17.7	3.8	0	100
Madhya Pradesh	96.7	2.8	0	0.5	100
Maharashtra	95.9	3.5	0.6	0	100
Orissa	97.4	2.6	0	0	100
Punjab	100	0	0	0	100
Rajasthan	93.6	2.7	0	3.8	100
Tamil Nadu	81	16.1	0	2.9	100
Uttar Pradesh	83.8	14.5	1.7	0	100
Uttrakhand	79.9	20.1	0	0	100
West Bengal	67.2	26.1	5.9	0.8	100
Delhi	78.3	21.7	0	0	100
Chandigarh	100	0	0	0	100
Arunachal Pradesh	66.3	3.1	15.3	15.3	100
Manipur	80	4	0	16	100
Meghalaya	100	0	0	0	100
Mizoram	80	0	0	20	100
Nagaland	100	0	0	0	100

Appendix Table 6.38: Percentage Distribution of AWH by Residence (Continued...)

States/UTs	Within the village	Other village within 5 Km	Other village more than 5 Km	Nearby town	Total
Tripura	44.3	55.7	0	0	100
Sikkim	85.7	0	14.3	0	100
Dadar & Nagar Haveli	100	0	0	0	100
Daman & Diu	100	0	0	0	100
Goa	100	0	0	0	100
Puducherry	20	60	20	0	100
Andaman & Nicobar Island	100	0	0	0	100
All India	**88.6**	**9.2**	**1.2**	**1**	**100**

Appendix Table 6.39: Investigators' Observations on Accuracy of Maintenance of Different Records (%AWC)

States/UTs	Maintenance registers	Maintenance of attendance	Recording individual growth cards
Andhra Pradesh	43.9	45.2	44.6
Assam	37.5	44.4	19.2
Bihar	10.8	21.8	1.7
Chhattisgarh	10	43.1	18.7
Gujarat	30.4	45.7	22.2
Haryana	94	95.1	95.5
Himachal Pradesh	60	71.3	54
Jammu and Kashmir	26.9	29	2.6
Jharkhand	59.6	73.9	36.9
Karnataka	36.4	52.8	28.2
Kerala	62.8	74.8	65.8
Madhya Pradesh	21.4	30.6	10.5
Maharashtra	73.4	88.1	70.8
Orissa	52.9	50.5	50
Punjab	71.3	71.3	0
Rajasthan	8.7	14.7	3.9
Tamil Nadu	71.3	69.8	58.8
Uttar Pradesh	33.5	55.4	7.3
Uttrakhand	49.7	55.4	9.7
West Bengal	56.4	75.4	27.1
Delhi	36.7	100	100
Chandigarh	0	0	0
Arunachal Pradesh	1.6	3.2	0
Manipur	44	80	0
Meghalaya	26.5	13.5	13.5
Mizoram	100	100	40
Nagaland	66.3	72.5	18.8

Appendix Table 6.39: Investigators' Observations on Accuracy of Maintenance of Different Records (%AWC) (Continued...)

States/UTs	Maintenance registers	Maintenance of attendance	Recording individual growth cards
Tripura	1.9	26.7	1.9
Sikkim	14.3	14.3	0
Dadar & Nagar Haveli	100	100	80
Daman & Diu	80	100	100
Goa	0	20	0
Puducherry	80	100	40
Andaman & Nicobar Island	25.4	33.7	5.7
All India	**41.4**	**53.9**	**28.2**

Appendix Table 6.40: Observation of the Investigator about Cleanliness of the AWC (% AWC)

States/UTs	Very clean	Satisfactory	Unclean/ Unhygienic
Andhra Pradesh	43.9	43.7	12.4
Assam	5.8	84.6	9.6
Bihar	7.8	77.4	14.8
Chhattisgarh	63.9	33	3.1
Gujarat	56.6	32.4	11
Haryana	59.1	40.9	0
Himachal Pradesh	57.6	42.4	0
Jammu and Kashmir	24.1	74.1	1.8
Jharkhand	17.5	62.6	19.9
Karnataka	37.4	57.9	4.7
Kerala	75.7	19.4	4.9
Madhya Pradesh	15.6	79.1	5.3
Maharashtra	45	50.7	4.3
Orissa	38.8	55.8	5.4
Punjab	16.2	80.5	3.4
Rajasthan	33.9	53.5	12.6
Tamil Nadu	61.4	27.5	11.1
Uttar Pradesh	21.4	73.8	4.8
Uttrakhand	54.6	45.4	0
West Bengal	11	60.9	28.1
Delhi	49.2	50.8	0
Chandigarh	20	80	0
Arunachal Pradesh	3.1	30.8	66.1
Manipur	76	20	4
Meghalaya	13.5	86.5	0
Mizoram	0	100	0
Nagaland	4.9	83.8	11.3

Appendix Table 6.40: Observation of the Investigator about Cleanliness of the AWC (% AWC) (Continued...)

States/UTs	Very clean	Satisfactory	Unclean/ Unhygienic
Tripura	0	96.7	3.3
Sikkim	48.7	37	14.3
Dadar & Nagar Haveli	100	0	0
Daman & Diu	100	0	0
Goa	0	80	20
Puducherry	60	40	0
Andaman & Nicobar Island	40	37.6	22.4
All India	**32**	**58.4**	**9.6**

Appendix Table 6.41: Observation of the Investigator about Cleanliness of Toilet (% AWC)

States/UTs	Very clean	Satisfactory	Unclean/Unhygienic
Andhra Pradesh	12.5	29.1	58.5
Assam	11.4	28	60.7
Bihar	0.4	4.9	94.8
Chhattisgarh	4.8	28.2	67
Gujarat	13.8	29.4	56.8
Haryana	3.6	37.3	59.1
Himachal Pradesh	44.8	41.4	13.9
Jammu and Kashmir	16.2	53.1	30.8
Jharkhand	5	27.4	67.6
Karnataka	17.4	24.4	58.2
Kerala	58.8	28.8	12.3
Madhya Pradesh	5.1	32.7	62.2
Maharashtra	14.1	38.1	47.8
Orissa	7.8	18.3	73.9
Punjab	0	35.4	64.6
Rajasthan	1.3	21.6	77.1
Tamil Nadu	31.6	29.1	39.3
Uttar Pradesh	1.1	24.7	74.3
Uttrakhand	5.3	25.3	69.4
West Bengal	2.7	44.5	52.9
Delhi	9.2	29.2	61.7
Chandigarh	20	80	0
Arunachal Pradesh	0	3.1	96.9
Manipur	8	48.1	44
Meghalaya	0	60	40
Mizoram	0	100	0
Nagaland	2.4	28.7	68.9

Appendix Table 6.41: Observation of the Investigator about Cleanliness of Toilet (% AWC) (Continued…)

States/UTs	Very clean	Satisfactory	Unclean/Unhygienic
Tripura	0	2.7	97.3
Sikkim	5.7	80	14.3
Dadar & Nagar Haveli	100	0	0
Daman & Diu	60	20	20
Goa	0	40	60
Puducherry	20	0	80
Andaman & Nicobar Island	11.6	49.3	39.1
All India	**9.9**	**28.7**	**61.3**

Appendix Table 6.42: Observation of the Investigator about Cleanliness of the Cooking Area (% AWC)

States/UTs	Very clean	Satisfactory	Unclean/Unhygienic
Andhra Pradesh	25.1	58.8	16.1
Assam	5.9	26.8	67.3
Bihar	3.2	51.2	45.7
Chhattisgarh	26.9	54.4	18.7
Gujarat	53.8	24	22.2
Haryana	6.7	9.2	84.1
Himachal Pradesh	40.2	59.8	0
Jammu and Kashmir	24.1	74.1	1.8
Jharkhand	4.6	60.1	35.4
Karnataka	14.2	66.7	19
Kerala	70.9	26	3.2
Madhya Pradesh	7.3	73.9	18.8
Maharashtra	20.5	55.6	23.9
Orissa	9.8	68.8	21.4
Punjab	0	88.3	11.7
Rajasthan	19.6	65	15.4
Tamil Nadu	51.5	36.2	12.3
Uttar Pradesh	4.9	34.9	60.2
Uttrakhand	12.6	40.2	47.2
West Bengal	2.8	53.2	44.1
Delhi	0	0	100
Chandigarh	0	40	60
Arunachal Pradesh	0	15.3	84.7
Manipur	56	20	24
Meghalaya	13.5	66.5	20
Mizoram	0	100	0
Nagaland	13.8	41.2	45.1

Appendix Table 6.42: Observation of the Investigator about Cleanliness of the Cooking Area (% AWC) (Continued…)

States/UTs	Very clean	Satisfactory	Unclean/Unhygienic
Tripura	0	60.3	39.8
Sikkim	0	31.3	68.7
Dadar & Nagar Haveli	100	0	0
Daman & Diu	100	0	0
Goa	0	80	20
Puducherry	60	40	0
Andaman & Nicobar Island	14.3	54.9	30.8
All India	**17**	**50.4**	**32.5**

Appendix Table 6.43: Investigators Observations on about Items of PSE (% AWC)

States/UTs	Toys	Building blocks	Counting frames	Paint/ brushes	Posters/ charts	Learning aids/ kits for non-formal education	Pamphlets	Story books/ picture books	Material made by AWW
Andhra Pradesh	53.1	36.1	40.6	30.8	82.4	71.4	63.5	69.2	40.3
Assam	48.5	44.1	60.6	49.7	83.5	57.1	53.4	76.8	50.7
Bihar	10.4	0	15.1	4.3	50.3	7.9	14.3	21.3	3.8
Chhattisgarh	75.2	49.5	68.9	16.8	75.6	58.4	60.5	62.8	14.8
Gujarat	85.7	68.1	62.6	33.8	75.8	45.8	20.8	32.4	27.3
Haryana	84.3	63.9	94.3	27.1	98.8	97.3	96	96.8	44.3
Himachal Pradesh	100	83.5	98.8	60.3	98.8	97.6	87.5	96.2	82.4
Jammu and Kashmir	60.2	44.8	48.3	3.3	85.4	51.5	76.2	79.5	78.8
Jharkhand	30.8	7	26	11.8	78.1	47	28.9	35.9	5.9
Karnataka	79.1	53.3	82.2	41.5	89.9	78.7	63.7	78.1	34.5
Kerala	96.9	95.1	96.9	69.3	95.1	96.9	79.9	87.7	29.6
Madhya Pradesh	44.3	19.8	48.9	8.8	73.9	47.1	39.9	38.7	30.1
Maharashtra	87.3	82	95.7	67.1	96.3	84.3	83.2	85.5	67.2
Orissa	86.8	77.6	89.8	56.9	91.3	87.4	84.5	87.3	40.9
Punjab	47.8	22.5	12.7	0	89.5	17.1	5.1	42.3	28.9
Rajasthan	69.4	27.6	36	8.3	81.5	41.8	52.6	52.8	40.5
Tamil Nadu	73.4	78.9	76.5	57.2	77.1	78.3	65.8	75.3	66.5
Uttar Pradesh	73.9	62.3	83.6	23.1	80.5	57.5	25.6	52.1	25.2
Uttrakhand	57.2	56.9	64.4	19.6	87.7	62.2	28.8	52.6	51.4
West Bengal	41.6	21.8	25.5	8.1	47.8	20.5	16.6	30.8	4.8
Delhi	60	18.3	49.2	0	70.8	60	60	49.2	10.8
Chandigarh	80	80	80	0	100	100	20	100	40
Arunachal Pradesh	9.4	3.1	3.1	0	15.5	6.2	0	3.1	0
Manipur	72	56	60	16	88.1	56	68.1	36	36
Meghalaya	93.5	93.5	100	40	86.5	86.5	52.9	86.5	87.1
Mizoram	100	100	40	0	80	0	0	100	20
Nagaland	53.8	62.6	65.1	4.9	68.7	43.8	2.4	13.8	72.5

Appendix Table 6.43: Investigators Observations on about Items of PSE (% AWC) (Continued…)

States/UTs	Toys	Building blocks	Counting frames	Paint/ brushes	Posters/ charts	Learning aids/kits for non-formal education	Pamphlets	Story books/pictur e books	Material made by AWW
Tripura	17.3	18.1	37.9	34.6	62.7	38.1	26.5	78.4	20
Sikkim	25.7	31.3	74.3	0	85.7	74.3	14.3	65.7	5.7
Dadar & Nagar Haveli	40	80	100	100	100	100	100	100	80
Daman & Diu	60	100	100	100	100	100	100	100	80
Goa	80	0	80	0	100	0	100	100	0
Puducherry	40	80	80	40	100	60	40	40	60
Andaman & Nicobar Island	94.3	63.6	80.3	60.6	100	94.3	52.2	100	66.3
All India	**62.3**	**47**	**60**	**28.5**	**77.7**	**55.8**	**46.5**	**57.5**	**33.2**

Appendix Table 6.44: Investigators' Observations on Medical Kits (%AWC)

States/UTs	% AWC having medical kits	% AWC found medical kits in proper order	% AWC found medical kits expired
Andhra Pradesh	83.2	60.3	7.2
Assam	79.9	77	26.3
Bihar	14.8	60.2	26
Chhattisgarh	0		
Gujarat	95.7	91.7	18.2
Haryana	76.6	97.8	2.2
Himachal Pradesh	100	97.6	18.6
Jammu and Kashmir	0		
Jharkhand	8	100	28.2
Karnataka	94.6	84.6	9.5
Kerala	6.3	100	52.8
Madhya Pradesh	22.3	64.6	16.2
Maharashtra	84.3	86.2	8.8
Orissa	76.7	70.8	13.7
Punjab	5.5	50	50
Rajasthan	64.9	84.5	20.8
Tamil Nadu	93.3	91.6	40.9
Uttar Pradesh	51.4	85.6	0
Uttrakhand	91.1	95.7	0
West Bengal	73.3	61.3	4.8
Delhi	49.2	100	0
Chandigarh	60	100	33.3
Arunachal Pradesh	58.4	60.5	0
Manipur	56	100	0
Meghalaya	72.9	91.1	0
Mizoram	100	40	0
Nagaland	66.1	96.3	17.1

Appendix Table 6.44: Investigators' Observations on Medical Kits (%AWC) (Continued…)

States/UTs	% AWC having medical kits	% AWC found medical kits in proper order	% AWC found medical kits expired
Tripura	93	18.6	57.9
Sikkim	0		
Dadar & Nagar Haveli	100		0
Daman & Diu	100	100	40
Goa	0		
Puducherry	0		
Andaman & Nicobar Island	0		
All India	**58**	**79**	**13.1**

Appendix Table 6.45: Investigation about the Display of Important Information on the Blackboards.

States/UTs	Full information written	Partial information written	Information not written
Andhra Pradesh	19.8	22.6	57.7
Assam	8.3	43.3	48.5
Bihar	1.8	13.9	84.4
Chhattisgarh	39.7	23.6	36.8
Gujarat	22.6	5.5	71.9
Haryana	22.5	1.7	75.9
Himachal Pradesh	56.2	2.4	41.4
Jammu and Kashmir	6.7	15.5	77.8
Jharkhand	11.6	11.9	76.5
Karnataka	31.3	35.9	32.8
Kerala	70.7	18.4	10.9
Madhya Pradesh	22.3	31.2	46.5
Maharashtra	39.1	46.4	14.5
Orissa	36.1	23.6	40.4
Punjab	0	0	100
Rajasthan	9.6	12.2	78.2
Tamil Nadu	60	27.4	12.6
Uttar Pradesh	8.7	13	78.3
Uttrakhand	11.1	7.3	81.6
West Bengal	4.5	19	76.5
Delhi	10.8	0	89.2
Chandigarh	20	0	80
Arunachal Pradesh	3.1	0	96.9
Manipur	0	52	48
Meghalaya	40.6	59.4	0
Mizoram	0	100	0
Nagaland	6.3	32.4	61.4

Appendix Table 6.45: Investigation about the Display of Important Information on the Blackboards (Continued…)

States/UTs	Full information written	Partial information written	Information not written
Tripura	0	19.2	80.8
Sikkim	0	20	80
Dadar & Nagar Haveli	100	0	0
Daman & Diu	100	0	0
Goa	0	0	100
Puducherry	80	0	20
Andaman & Nicobar Island	8.4	49.6	42.1
All India	**20.9**	**21.5**	**57.6**

Appendix Table 6.46: Percentage of AWC Has Been Beneficial to the Community

States/UTs	Very beneficial	To some extent	Not at all beneficial
Andhra Pradesh	88.8	9	2.1
Assam	39	58.5	2.4
Bihar	38.6	52.9	8.5
Chhattisgarh	87	11.7	1.3
Gujarat	93.3	5	1.7
Haryana	67.9	23.2	8.9
Himachal Pradesh	90	10	0
Jammu and Kashmir	72.9	24.3	2.9
Jharkhand	54.6	43.6	1.8
Karnataka	84.7	14.3	1
Kerala	91.7	8.3	0
Madhya Pradesh	79.9	17.8	2.4
Maharashtra	74.1	25.9	0
Orissa	40.5	51.8	7.7
Punjab	69.6	26.1	4.4
Rajasthan	76.2	18.5	5.4
Tamil Nadu	88.5	10	1.5
Uttar Pradesh	70.7	26.8	2.5
Uttrakhand	92	6	2
West Bengal	66.7	32.2	1.1
Delhi	100	0	0
Chandigarh	100	0	0
Arunachal Pradesh	4	92	4
Manipur	30	40	30
Meghalaya	56.3	43.8	0
Mizoram	30	60	10
Nagaland	75	25	0

Appendix Table 6.46: Percentage of AWC Has Been Beneficial to the Community (Continued…)

States/UTs	Very beneficial	To some extent	Not at all beneficial
Tripura	65.2	26.1	8.7
Sikkim	50	45	5
Dadar & Nagar Haveli	100	0	0
Daman & Diu	80	20	0
Goa	0	100	0
Puducherry	100	0	0
Andaman & Nicobar Island	73.3	26.7	0
All India	**70.4**	**26.5**	**3**

Appendix Table 6.47: Percentage of Children (Aged Below 6 Year) Suffered from the Most Common Diseases during Last One Year

States/UTs	None	Diarrhea/dysentery	Cough/Cold & common fever	Others
Andhra Pradesh	32.5	15.4	45.2	6.9
Assam	4.9	9.8	73.2	12.2
Bihar	31.8	14.8	45	8.5
Chhattisgarh	35.1	11.7	49.4	3.9
Gujarat	28.3	23.3	35	13.3
Haryana	48.2	7.1	41.1	3.6
Himachal Pradesh	57.5	10	30	2.5
Jammu and Kashmir	44.3	10	30	15.7
Jharkhand	1.8	0.9	90	7.3
Karnataka	10.2	17.4	71.4	1
Kerala	16.7	2.8	80.6	0
Madhya Pradesh	50.9	7.7	38.5	3
Maharashtra	23.9	7.6	62.4	6.1
Orissa	5.4	17.9	72.6	4.2
Punjab	75.4	2.9	18.8	2.9
Rajasthan	79.2	3.1	13.1	4.6
Tamil Nadu	53.5	4.5	37.5	4.5
Uttar Pradesh	33.8	18.4	39	8.9
Uttrakhand	26	6	60	8
West Bengal	1.7	7.2	87.2	3.9
Delhi	80	0	15	5
Chandigarh	50	0	50	0
Arunachal Pradesh	0	56	36	8
Manipur	30	10	60	0
Meghalaya	0	18.8	81.3	0
Mizoram	0	0	100	0
Nagaland	12.5	12.5	43.8	31.3
Tripura	17.4	30.4	52.2	0

Appendix Table 6.47: Percentage of Children (Aged Below 6 Year) Suffered from the Most Common Diseases during Last One Year (Continued…)

States/UTs	None	Diarrhea/dysentery	Cough/Cold & common fever	Others
Sikkim	0	30	65	5
Dadar & Nagar Haveli	40	10	50	0
Daman & Diu	50	0	50	0
Goa	0	0	100	0
Puducherry	80	10	10	0
Andaman & Nicobar Island	0	0	100	0
All India	**31.1**	**11.7**	**50.9**	**6.2**

Appendix Table 6.48: Community Leader's Perception about Percentage of IMR of Change during Last One Year

States/UTs	Can't say	Increased	Decreased	Remained same
Andhra Pradesh	1.1	0.5	95.7	2.7
Assam	1.2	0	97.6	1.2
Bihar	4.8	2.7	88.4	4.2
Chhattisgarh	3.9	1.3	92.2	2.6
Gujarat	2.5	2.5	90.8	4.2
Haryana	5.4	0	82.1	12.5
Himachal Pradesh	12.5	0	50	37.5
Jammu and Kashmir	4.3	1.4	80	14.3
Jharkhand	0	0	100	0
Karnataka	9.2	5.1	82.7	3.1
Kerala	8.3	0	86.1	5.6
Madhya Pradesh	8.3	0	79.3	12.4
Maharashtra	16.8	4.1	77.7	1.5
Orissa	0.6	0	92.9	6.6
Punjab	11.6	0	85.5	2.9
Rajasthan	13.1	1.5	80.8	4.6
Tamil Nadu	21	9.5	60.5	9
Uttar Pradesh	3.2	2	83.1	11.7
Uttrakhand	2	0	98	0
West Bengal	0.6	0	98.9	0.6
Delhi	0	0	90	10
Chandigarh	10	0	90	0
Arunachal Pradesh	4	0	96	0
Manipur	0	30	60	10
Meghalaya	18.8	0	75	6.3
Mizoram	50	0	50	0
Nagaland	12.5	6.3	12.5	68.8
Tripura	8.7	0	91.3	0
Sikkim	0	0	100	0

Appendix Table 6.48: Community Leader's Perception about Percentage of IMR of Change during Last One Year (Continued…)

States/UTs	Can't say	Increased	Decreased	Remained same
Dadar & Nagar Haveli	10	0	90	0
Daman & Diu	0	0	90	10
Goa	0	0	100	0
Puducherry	0	0	100	0
Andaman & Nicobar Island	0	0	100	0
All India	**6.5**	**2**	**85.1**	**6.4**

Appendix Table 6.49: Community Leader's Perception about Percentage of CMR of Change during Last One Year

States/UTs	Can't say	Increased	Decreased	Remained same
Andhra Pradesh	1.1	0.5	96.3	2.1
Assam	0	0	98.8	1.2
Bihar	3.7	2.7	88.9	4.8
Chhattisgarh	3.9	1.3	93.5	1.3
Gujarat	2.5	2.5	90.8	4.2
Haryana	5.4	0	85.7	8.9
Himachal Pradesh	10	0	57.5	32.5
Jammu and Kashmir	2.9	0	81.4	15.7
Jharkhand	0	0	100	0
Karnataka	8.2	6.1	82.7	3.1
Kerala	8.3	0	86.1	5.6
Madhya Pradesh	8.3	0.6	79.9	11.2
Maharashtra	15.7	5.1	76.1	3.1
Orissa	0.6	0	93.5	6
Punjab	7.3	0	89.9	2.9
Rajasthan	13.9	2.3	79.2	4.6
Tamil Nadu	9.5	5	76	9.5
Uttar Pradesh	2.2	1	85.1	11.7
Uttrakhand	4	0	96	0
West Bengal	0	0	100	0
Delhi	0	0	90	10
Chandigarh	10	0	90	0
Arunachal Pradesh	0	0	100	0
Manipur	0	30	60	10
Meghalaya	6.3	0	87.5	6.3
Mizoram	50	10	40	0
Nagaland	12.5	6.3	18.8	62.5

Appendix Table 6.49: Community Leader's Perception about Percentage of CMR of Change during Last One Year (Continued…)

States/UTs	Can't say	Increased	Decreased	Remained same
Tripura	8.7	0	87	4.4
Sikkim	0	0	100	0
Dadar & Nagar Haveli	0	0	100	0
Daman & Diu	20	0	80	0
Goa	0	0	100	0
Puducherry	0	0	100	0
Andaman & Nicobar Island	0	0	100	0
All India	**5.2**	**1.7**	**86.9**	**6.2**

Appendix Table 6.50: Percentage of Community Leader Help in AWCs Activities

States/UTs	Yes	No
Andhra Pradesh	60.6	39.4
Assam	42.7	57.3
Bihar	18	82
Chhattisgarh	85.7	14.3
Gujarat	31.7	68.3
Haryana	37.5	62.5
Himachal Pradesh	65	35
Jammu and Kashmir	57.1	42.9
Jharkhand	48.2	51.8
Karnataka	49	51
Kerala	13.9	86.1
Madhya Pradesh	47.9	52.1
Maharashtra	64	36
Orissa	20.8	79.2
Punjab	30.4	69.6
Rajasthan	43.9	56.2
Tamil Nadu	36.5	63.5
Uttar Pradesh	67.5	32.5
Uttrakhand	70	30
West Bengal	52.8	47.2
Delhi	40	60
Chandigarh	70	30
Arunachal Pradesh	12	88
Manipur	70	30
Meghalaya	56.3	43.8
Mizoram	40	60
Nagaland	75	25

Appendix Table 6.50: Percentage of Community Leader Help in AWCs Activities (Continued…)

States/UTs	Yes	No
Tripura	69.6	30.4
Sikkim	15	85
Dadar & Nagar Haveli	50	50
Daman & Diu	80	20
Goa	80	20
Puducherry	0	100
Andaman & Nicobar Island	20	80
All India	**48.1**	**51.9**

Appendix Table 6.51: Community Leaders Contribution Regarding the Following Activities

States/UTs	Selection of location of AWC and providing space	Getting space for AWC	Selection of beneficiaries	Provided fans, chairs, durries/mattresses, etc	providing fuel	Help & support in construction, repair and maintenance of AWC/toilets	Storage facilities for ration/equipment	Solving problems/difficulties of AWCs	provided aids/ materials to conduct pre-school activities	Motivating community to avail services	Admitting children in school
Andhra Pradesh	56.1	54.4	49.1	43	31.6	32.5	47.4	67.5	61.4	71.9	80.7
Assam	48.6	25.7	42.9	17.1	14.3	25.7	17.1	82.9	37.1	68.6	62.9
Bihar	50	41.2	44.1	29.4	26.5	11.8	20.6	41.2	29.4	58.8	64.7
Chhattisgarh	68.2	68.2	56.1	77.3	68.2	63.6	68.2	57.6	81.8	60.6	60.6
Gujarat	44.7	39.5	55.3	39.5	18.4	34.2	13.2	68.4	23.7	39.5	57.9
Haryana	71.4	61.9	76.2	42.9	23.8	23.8	23.8	61.9	38.1	66.7	66.7
Himachal Pradesh	73.1	53.9	53.9	69.2	61.5	57.7	65.4	88.5	46.2	65.4	65.4
Jammu and Kashmir	55	52.5	50	32.5	47.5	35	42.5	72.5	45	85	82.5
Jharkhand	5.7	3.8	26.4	9.4	1.9	0	5.7	88.7	5.7	41.5	49.1
Karnataka	83.3	81.3	60.4	64.6	62.5	77.1	68.8	81.3	62.5	72.9	79.2
Kerala	80	80	80	80	80	80	80	80	100	80	80
Madhya Pradesh	53.1	58	65.4	59.3	38.3	45.7	45.7	72.8	39.5	67.9	81.5
Maharashtra	45.2	45.2	40.5	32.5	17.5	43.7	27	60.3	31.8	44.4	61.9
Orissa	51.4	45.7	37.1	28.6	17.1	37.1	48.6	57.1	37.1	60	68.6
Punjab	19.1	38.1	19.1	61.9	61.9	33.3	47.6	28.6	33.3	61.9	28.6
Rajasthan	38.6	35.1	47.4	17.5	24.6	26.3	29.8	68.4	50.9	91.2	86
Tamil Nadu	46.6	41.1	34.3	52.1	31.5	48	30.1	50.7	50.7	48	53.4
Uttar Pradesh	30.2	29.4	58.8	32	11	12.9	21.3	48.5	29.4	77.6	77.2
Uttrakhand	28.6	31.4	62.9	22.9	31.4	14.3	31.4	31.4	22.9	74.3	57.1
West Bengal	21.1	13.7	53.7	15.8	2.1	6.3	9.5	86.3	0	35.8	55.8

Appendix Table 6.51: Community Leaders Contribution Regarding the Following Activities (Continued…)

States/UTs	Selection of location of AWC and providing space	Getting space for AWC	Selection of beneficiaries	Provided fans, chairs, durries/mattresses, etc	providing fuel	Help & support in construction, repair and maintenance of	Storage facilities for ration/equipment	Solving problems/difficulties of AWCs	provided aids/ materials to conduct pre-school activities	Motivating community to avail services	Admitting children in school
Delhi	37.5	50	87.5	25	12.5	25	12.5	75	25	87.5	75
Chandigarh	100	100	100	100	14.3	100	100	100	100	100	100
Arunachal Pradesh	100	100	0	0	33.3	0	0	33.3	0	0	33.3
Manipur	57.1	42.9	28.6	14.3	14.3	28.6	0	57.1	57.1	28.6	85.7
Meghalaya	77.8	22.2	11.1	11.1	11.1	0	11.1	77.8	66.7	55.6	77.8
Mizoram	50	75	50	0	0	100	75	100	0	75	50
Nagaland	91.7	75	25	33.3	33.3	66.7	58.3	83.3	33.3	41.7	50
Tripura	81.3	68.8	68.8	50	18.8	75	37.5	87.5	25	81.3	75
Sikkim	0	0	0	0	0	66.7	0	66.7	33.3	100	33.3
Dadar & Nagar Haveli	60	80	60	60	40	60	40	80	80	100	100
Daman & Diu	75	62.5	62.5	25	12.5	50	37.5	75	37.5	100	87.5
Goa	100	100	50	12.5	0	0	0	100	37.5	100	50
Andaman & Nicobar Island	0	0	33.3	0	0	0	0	100	0	0	66.7
All India	**45.2**	**42.2**	**50.6**	**37.2**	**25.1**	**31.5**	**32.2**	**64.2**	**37.6**	**63.9**	**68.8**

Appendix Table 7.1: Status of Supplementary Nutrition (Food)

States/UTs	Receiving food		Awareness of food entitlement (%)
	% Child	Average number of days	
Andhra Pradesh	73.7	16.0	86.2
Assam	73.5	2.0	40.1
Bihar	52.6	14.0	16.4
Chhattisgarh	85.6	19.0	18.0
Gujarat	86.5	19.0	66.5
Haryana	51.9	21.0	14.6
Himachal Pradesh	77.1	17.0	31.6
Jammu and Kashmir	91.5	18.0	10.1
Jharkhand	88.3	18.0	20.1
Karnataka	80.4	21.0	90.0
Kerala	75.8	20.0	95.1
Madhya Pradesh	68.2	14.0	14.5
Maharashtra	69.6	21.0	67.7
Orissa	69.9	21.0	17.5
Punjab	59.1	17.0	18.3
Rajasthan	55.6	15.0	25.9
Tamil Nadu	75.8	21.0	87.7
Uttar Pradesh	40.6	14.0	11.5
Uttrakhand	81.9	8.0	19.4
West Bengal	78.3	21.0	14.5
Delhi	56.4	22.0	14.1
Chandigarh	68.0	22.0	0.0
Arunachal Pradesh	94.4	8.0	0.4
Manipur	44.9	12.0	12.6
Meghalaya	79.8	18.0	63.6
Mizoram	91.8	19.0	89.9
Nagaland	82.4	6.0	93.6

Appendix Table 7.1: Status of Supplementary Nutrition (Food) (Continued...)

States/UTs	Receiving food		Awareness of food entitlement(%)
	% Child	Average number of days	
Tripura	77.6	17.0	17.0
Sikkim	93.8	14.0	9.3
Dadar& Nagar Haveli	60.0	24.0	92.4
Daman & Diu	54.7	23.0	81.2
Goa	73.4	20.0	100.0
Puducherry	56.7	22.0	100.0
Andaman & Nicobar Islands	-	24.0	6.9
All India	**64.0**	**16.0**	**33.8**

Appendix Table 7.2: Immunization Status of Children (12-23 months)

(Figures in %)

States/UTs	BCG	Measels	All vaccination
Andhra Pradesh	95.3	74.9	49.6
Assam	73.0	66.6	37.0
Bihar	73.9	53.1	39.8
Chhattisgarh	88.3	70.7	54.0
Gujarat	91.6	74.0	55.2
Haryana	82.3	80.7	74.8
Himachal Pradesh	100.0	88.6	73.0
Jammu and Kashmir	97.0	86.7	78.0
Jharkhand	83.7	65.9	51.1
Karnataka	88.6	75.4	63.4
Kerala	100.0	88.4	79.7
Madhya Pradesh	86.1	65.5	48.9
Maharashtra	100.0	88.3	65.1
Orissa	83.2	73.7	59.1
Punjab	88.4	79.7	67.9
Rajasthan	70.5	58.4	31.9
Tamil Nadu	99.1	90.9	86.7
Uttar Pradesh	71.0	41.5	29.9
Uttrakhand	91.4	75.6	63.6
West Bengal	94.0	82.2	67.4
Delhi	89.6	89.6	63.6
Chandigarh	100.0	100.0	100.0
Arunachal Pradesh	65.1	34.6	19.1
Manipur	100.0	100.0	100.0
Meghalaya	82.8	100.0	82.8
Mizoram	75.4	100.0	75.4
Nagaland	96.8	81.2	78.0

Appendix Table 7.2: Immunization Status of Children (12-23 months) (Continued..)

(Figures in %)

States/UTs	BCG	Measels	All vaccination
Tripura	80.1	72.8	69.4
Sikkim	100.0	100.0	100.0
Dadar& Nagar Haveli	100.0	100.0	100.0
Daman & Diu	100.0	100.0	100.0
Goa	100.0	59.3	59.3
Puducherry	100.0	100.0	100.0
Andaman & Nicobar Islands	100.0	95.0	95.0
All India	**84.4**	**67.2**	**51.2**

Note: * Children who are fully vaccinated i.e. those who have received BCG, measles and three doses of DPT and Polio vaccine

Appendix Table 7.3: Status of Children's Weight

(Figures in %)

States/UTs	Weighed at birth	Whether child is getting weighed regularly		
		Yes, once in every month	Yes, once in every three months	Others
Andhra Pradesh	74.6	80.2	3.3	16.6
Assam	55.3	20.3	29.4	50.3
Bihar	13.8	6.6	0.1	93.3
Chattisgarh	65.6	86.0	0.8	13.2
Gujarat	59.8	79.2	11.8	9.0
Haryana	60.6	46.3	2.0	51.7
Himachal Pradesh	82.2	71.5	6.4	22.2
Jammu and Kashmir	14.6	12.9	3.4	83.7
Jharkhand	39.3	50.4	4.1	45.5
Karnataka	47.1	31.3	12.1	56.7
Kerala	99.6	75.5	10.8	13.7
Madhya Pradesh	49.6	58.3	8.6	33.1
Maharashtra	88.8	93.0	2.3	4.8
Orissa	69.4	93.9	3.5	2.7
Punjab	55.4	7.7	2.0	90.4
Rajasthan	36.4	35.6	13.5	50.9
Tamil Nadu	95.5	76.0	8.7	15.3
Uttar Pradesh	10.5	2.1	2.5	95.4
Uttrakhand	7.0	25.7	1.3	73.0
West Bengal	58.8	55.6	17.3	27.1
Delhi	48.4	69.0	0.0	31.0
Chandigarh	65.5	91.3	8.7	0.0
Arunachal Pradesh	0.5	0.0	0.0	100.0
Manipur	74.4	32.5	1.3	66.2
Meghalaya	52.2	37.5	11.4	51.1
Mizoram	83.0	74.0	17.5	8.5
Nagaland	41.2	11.4	14.1	74.5

Appendix Table 7.3: Status of Children's Weight (Continued...)

(Figures in %)

States/UTs	Weighed at birth	Whether child is getting weighed regularly		
		Yes, once in every month	Yes, once in every three months	Others
Tripura	73.8	56.3	7.6	36.1
Sikkim	68.4	79.7	15.8	4.5
Dadar& Nagar Haveli	80.5	95.4	0.0	4.7
Daman & Diu	89.2	95.8	0.0	4.2
Goa	96.4	84.7	0.0	15.3
Puducherry	96.9	34.3	37.2	28.6
Andaman & Nicobar Islands	94.5	70.7	10.9	18.4
All India	**46.5**	**43.17**	**6.83**	**50.0**

Appendix Table 7.4: Child had Diarrrhea and Action Taken by Mother

(Figures in %)

States/UTs	Child had diarrhea	Action taken reported by mother					
		Increased the intake of fluids	Reduced the intake of fluids	Reduced the intake of food	Gave homemade 'ORS'	Procured ORS from AWC	Continued with normal food and fluids
Andhra Pradesh	23.6	16.6	6.5	10.7	3.6	7.8	6.3
Assam	20.0	6.2	2.3	3.0	8.5	2.8	10.5
Bihar	16.1	1.5	2.4	4.7	3.6	3.2	3.6
Chhattisgarh	34.1	12.8	4.9	12.2	18.6	11.1	9.3
Gujarat	51.7	12.6	11.0	15.5	9.9	17.2	14.8
Haryana	24.9	15.1	15.4	19.6	4.9	8.1	11.2
Himachal Pradesh	9.6	6.8	0.0	2.4	7.7	6.8	5.3
Jammu and Kashmir	26.3	24.2	15.4	24.9	21.2	11.0	14.6
Jharkhand	5.2	3.0	2.0	2.3	1.8	1.2	1.6
Karnataka	25.2	11.4	2.1	5.9	6.7	9.2	0.2
Kerala	18.0	14.6	3.1	7.6	5.7	10.8	10.9
Madhya Pradesh	32.7	11.4	8.5	9.6	9.2	13.2	16.4
Maharashtra	28.2	14.2	4.5	10.5	18.3	11.8	8.2
Orissa	22.3	18.7	4.4	14.7	10.3	7.0	5.2
Punjab	20.9	13.0	2.9	4.6	1.8	2.1	9.2
Rajasthan	66.5	30.0	6.1	4.0	5.4	36.2	27.4
Tamil Nadu	48.4	14.6	9.9	12.6	17.4	13.6	9.7
Uttar Pradesh	41.4	20.2	9.5	21.9	22.4	2.2	9.4
Uttrakhand	45.5	0.4	5.4	19.5	15.2	3.3	4.6
West Bengal	6.1	4.8	1.8	1.7	2.7	1.4	3.8
Delhi	10.9	10.9	4.5	10.9	8.6	10.9	10.9
Chandigarh	4.4	4.4	0.0	0.0	0.0	0.0	0.0
Arunachal Pradesh	55.1	12.8	5.9	16.8	18.8	0.7	23.8
Manipur	36.4	16.9	3.5	18.2	15.5	0.0	13.9
Meghalaya	32.3	24.7	15.9	24.1	32.3	35.5	35.5
Mizoram	33.9	3.6	10.0	10.0	10.0	7.3	12.4
Nagaland	40.0	11.9	11.6	19.3	23.4	7.7	11.9

Appendix Table 7.4: Child had Diarrrhea and Action Taken by Mother (Continued...)

(Figures in %)

States/UTs	Child had diarrhea	Action taken reported by mother					
		Increased the intake of fluids	Reduced the intake of fluids	Reduced the intake of food	Gave homemade 'ORS'	Procured ORS from AWC	Continued with normal food and fluids
Tripura	14.2	4.2	1.8	5.2	2.3	9.4	6.1
Sikkim	61.2	52.3	26.4	27.9	48.2	17.3	12.9
Dadar& Nagar Haveli	15.2	9.3	0.0	0.0	4.7	6.0	12.3
Daman & Diu	25.7	22.2	3.5	7.7	11.1	0.0	19.6
Goa	35.2	10.9	10.9	0.0	11.9	10.9	28.0
Puducherry	21.1	6.3	0.0	0.0	5.7	0.0	0.0
Andaman & Nicobar Islands	1.0	1.0	0.0	0.0	1.0	0.0	0.0
All India	**30.7**	**14.3**	**6.3**	**12.2**	**12.4**	**7.7**	**9.2**

Appendix Table 7.5: About Child's Deworming (For Children above 12 Months of Age)

(Figures in %)

States/UTs	Child started deworming	Source		If no, why?		
		AWC/ANM	Others	AWW/ANM didn't provide	Not aware	Others
Andhra Pradesh	19.6	84.1	15.9	12.2	19.4	68.3
Assam	44.3	14.5	85.5	7.6	14.4	78.0
Bihar	39.1	17.4	82.6	19.3	42.8	37.9
Chattisgarh	30.9	81.1	18.9	12.0	38.0	50.0
Gujarat	12.0	84.9	15.1	4.8	12.6	82.5
Haryana	24.8	87.1	12.9	7.7	12.7	79.5
Himachal Pradesh	18.8	81.9	18.1	22.7	36.8	40.6
Jammu and Kashmir	14.8	72.8	27.2	32.4	33.7	34.0
Jharkhand	43.7	85.8	14.2	4.8	19.1	76.2
Karnataka	19.0	83.2	16.8	9.5	23.6	66.9
Kerala	80.8	15.7	84.3	6.4	36.8	56.7
Madhya Pradesh	18.8	95.3	4.8	10.6	44.1	45.4
Maharashtra	46.9	99.0	1.1	7.6	16.1	76.3
Orissa	45.2	65.3	34.7	6.3	17.4	76.3
Punjab	7.4	45.6	54.4	41.0	45.1	13.9
Rajasthan	16.1	92.1	7.9	4.4	53.0	42.6
Tamil Nadu	32.6	54.4	45.6	11.0	49.1	39.9
Uttar Pradesh	11.8	73.9	26.1	24.7	42.1	33.3
Uttrakhand	10.5	100.0	0.0	35.6	49.3	15.2
West Bengal	31.4	56.0	44.0	9.6	14.0	76.4
Delhi	18.8	87.8	12.2	10.3	17.7	72.0
Chandigarh	77.4	100.0	0.0	26.9	0.0	73.1
Arunachal Pradesh	15.9	44.4	55.6	13.3	5.9	80.8
Manipur	71.5	0.0	100.0	2.5	0.0	97.5
Meghalaya	9.7	100.0	0.0	4.6	3.8	91.5
Mizoram	47.3	48.6	51.5	10.4	14.5	75.1
Nagaland	38.3	59.6	40.4	9.6	30.3	60.1
Tripura	71.8	8.8	91.2	28.1	17.3	54.6

Appendix Table 7.5: About Child's Deworming (For Children above 12 Months of Age) (Continued...)

(Figures in %)

States/UTs	Child started deworming	Source		If no, why?		
		AWC/ANM	Others	AWW/ANM didn't provide	Not aware	Others
Sikkim	30.7	90.7	9.3	10.7	2.1	87.2
Dadar& Nagar Haveli	83.8	100.0	0.0	0.0	0.0	100.0
Daman & Diu	79.3	100.0	0.0	0.0	0.0	100.0
Goa	3.8	0.0	100.0	48.2	4.0	47.9
Puducherry	17.4	54.1	45.9	18.0	12.0	70.0
Andaman & Nicobar Islands	37.4	98.0	2.0	5.5	5.6	88.9
All India	**26.8**	**64.0**	**36.0**	**15.1**	**31.5**	**53.4**

Appendix Table 7.6: Children Consuming Iron and Folic Acid Tablets

(Figures in %)

States/UTs	Child took tablets regularly	Child getting IFA tablets from AWC
Andhra Pradesh	29.1	34.0
Assam	0.0	0.7
Bihar	0.7	3.1
Chattisgarh	14.0	33.3
Gujarat	16.8	22.1
Haryana	16.4	33.6
Himachal Pradesh	38.5	43.8
Jammu and Kashmir	10.1	11.3
Jharkhand	8.6	11.2
Karnataka	29.7	39.6
Kerala	0.7	6.6
Madhya Pradesh	13.8	17.9
Maharashtra	39.3	46.6
Orissa	8.1	13.3
Punjab	2.3	6.3
Rajasthan	7.1	10.6
Tamil Nadu	14.3	18.3
Uttar Pradesh	4.2	8.1
Uttrakhand	2.7	6.7
West Bengal	4.5	6.2
Delhi	18.7	23.9
Chandigarh	6.1	10.5
Arunachal Pradesh	0.7	1.6
Manipur	8.7	8.7
Meghalaya	6.6	10.0
Mizoram	31.2	31.2
Nagaland	11.2	12.8

Appendix Table 7.6: Children Consuming Iron and Folic Acid Tablets

(Figures in %)

States/UTs	Child took tablets regularly	Child getting IFA tablets from AWC
Tripura	1.0	4.9
Sikkim	0.0	0.0
Dadar& Nagar Haveli	28.8	28.8
Daman & Diu	37.1	46.6
Goa	0.0	3.8
Puducherry	6.3	26.0
Andaman & Nicobar Islands	16.5	39.8
All India	**11.9**	**16.7**

Appendix Table 7.7 : Mothers Reporting Initiated Breastfeeding After Child Birth

(Figures in %)

States/UTs	Within one hour	Within one day
Andhra Pradesh	75.0	14.1
Assam	73.2	20.8
Bihar	7.7	54.5
Chhattisgarh	41.6	45.2
Gujarat	38.5	50.1
Haryana	31.8	49.6
Himachal Pradesh	60.6	27.8
Jammu and Kashmir	42.6	36.6
Jharkhand	27.8	56.9
Karnataka	61.5	17.2
Kerala	73.0	25.4
Madhya Pradesh	45.4	39.9
Maharashtra	74.3	18.4
Orissa	77.5	20.7
Punjab	9.3	19.9
Rajasthan	23.1	50.3
Tamil Nadu	65.1	29.6
Uttar Pradesh	20.6	28.0
Uttrakhand	28.3	29.9
West Bengal	30.8	62.3
Delhi	39.3	24.1
Chandigarh	25.3	69.9
Arunachal Pradesh	75.2	20.8
Manipur	75.7	19.3
Meghalaya	75.8	24.2
Mizoram	100.0	0.0
Nagaland	37.7	32.0

Appendix Table 7.7: Mothers Reporting Initiated Breastfeeding After Child Birth

(Figures in %)

States/UTs	Within one hour	Within one day
Tripura	32.3	44.1
Sikkim	85.6	13.1
Dadar& Nagar Haveli	70.7	29.3
Daman & Diu	50.0	45.8
Goa	96.4	3.6
Puducherry	60.0	33.7
Andaman & Nicobar Islands	5.0	84.0
All India	**42.8**	**33.0**

Appendix Table 7.8: Children Aged 3-6 Years Attending PSE Able to do the Following PSE Activities

(Figures in %)

States/UTs	Read simple words	Count numbers	Write alphabets/words	Tell stories	Recite poems	Drawing/painting/clay modelling
Andhra Pradesh	89.0	93.5	78.7	79.0	65.6	33.1
Assam	92.1	91.4	82.3	57.7	40.6	52.2
Bihar	54.2	71.1	39.7	27.5	33.5	2.3
Chhattisgarh	73.2	84.6	32.9	34.5	71.2	7.7
Gujarat	55.7	87.1	32.9	33.2	64.3	34.7
Haryana	70.7	70.2	41.4	44.0	31.2	9.7
Himachal Pradesh	94.9	94.9	51.4	84.3	91.1	37.8
Jammu and Kashmir	87.5	87.2	71.2	76.9	87.5	15.7
Jharkhand	88.5	90.6	74.5	52.6	69.5	14.8
Karnataka	88.2	93.7	74.9	83.4	89.7	39.1
Kerala	93.0	97.0	81.1	89.1	92.0	84.1
Madhya Pradesh	87.6	84.2	45.4	79.2	66.5	33.2
Maharashtra	93.2	94.1	47.0	77.0	92.1	36.6
Orissa	74.4	88.2	54.0	73.8	64.7	23.8
Punjab	85.1	83.6	57.8	58.5	65.2	6.6
Rajasthan	63.7	84.1	25.6	59.3	58.5	21.7
Tamil Nadu	91.4	94.3	51.1	91.9	92.8	51.2
Uttar Pradesh	42.9	79.0	31.8	45.0	30.7	13.7
Uttrakhand	80.9	93.6	54.7	27.5	44.7	16.6
West Bengal	93.4	94.7	66.1	68.2	94.8	18.3
Delhi	54.2	82.6	50.5	50.5	63.2	36.0
Chandigarh	100.0	100.0	32.8	14.6	100.0	7.3
Arunachal Pradesh	64.7	54.1	43.4	22.1	16.7	21.3
Manipur	91.6	94.0	86.2	45.8	62.8	30.8
Meghalaya	73.1	87.2	75.3	21.9	29.4	63.6
Mizoram	73.0	77.8	53.0	35.8	44.4	41.8
Nagaland	84.6	74.8	66.1	59.0	49.4	63.0

Appendix Table 7.8: Children Aged 3-6 Years Attending PSE Able to do the Following PSE Activities (Continued...)

(Figures in %)

States/UTs	Read simple words	Count numbers	Write alphabets/words	Tell stories	Recite poems	Drawing/painting/clay modelling
Tripura	76.7	74.9	38.4	25.9	33.1	15.6
Sikkim	60.4	95.1	96.9	62.2	81.4	47.4
Dadar& Nagar Haveli	75.8	95.3	48.3	31.6	90.6	31.6
Daman & Diu	87.9	100.0	45.7	45.7	100.0	33.4
Goa	45.4	100.0	25.7	79.5	100.0	73.4
Puducherry	51.5	100.0	35.3	67.7	67.7	35.3
Andaman & Nicobar Islands	100.0	100.0	87.6	53.0	85.2	52.0
All India	**71.1**	**85.7**	**49.0**	**58.6**	**58.7**	**24.8**

Appendix Table 7.9: Children Aged 3-6 Years Attending PSE Carrying the Following Good Habits

(Figures in %)

States/UTs	Wash hands after using toilet	Wash hands before & after meals	Use soap to wash hands	Respect elders
Andhra Pradesh	85.7	88.4	57.7	58.4
Assam	61.9	90.2	77.4	88.5
Bihar	76.0	70.8	53.2	70.9
Chhattisgarh	55.1	84.3	38.0	65.8
Gujarat	87.8	92.1	63.2	62.5
Haryana	67.3	69.0	66.4	56.3
Himachal Pradesh	87.9	83.2	78.0	75.9
Jammu and Kashmir	92.4	92.9	86.0	91.0
Jharkhand	98.6	97.8	64.8	84.8
Karnataka	58.0	75.8	32.2	71.7
Kerala	75.7	87.2	75.2	84.7
Madhya Pradesh	82.5	84.4	70.9	86.9
Maharashtra	89.2	94.4	70.3	78.6
Orissa	58.7	75.0	40.3	54.1
Punjab	72.3	70.7	67.4	66.3
Rajasthan	83.2	86.9	53.4	54.8
Tamil Nadu	74.9	91.0	69.5	82.6
Uttar Pradesh	92.4	88.4	63.4	72.4
Uttrakhand	98.7	96.2	70.1	78.7
West Bengal	93.6	97.1	52.3	80.4
Delhi	82.7	82.7	84.9	77.2
Chandigarh	89.9	100.0	84.4	76.7
Arunachal Pradesh	68.1	59.9	69.7	48.6
Manipur	95.8	96.7	94.3	88.8
Meghalaya	93.2	100.0	100.0	100.0
Mizoram	79.5	84.3	32.7	86.9
Nagaland	85.0	85.8	73.2	73.3

Appendix Table 7.9: Children Aged 3-6 Years Attending PSE Carrying the Following Good Habits (Continued...)

(Figures in %)

States/UTs	Wash hands after using toilet	Wash hands before & after meals	Use soap to wash hands	Respect elders
Tripura	97.4	100.0	85.8	73.4
Sikkim	93.5	98.7	71.6	89.9
Dadar& Nagar Haveli	95.3	95.3	95.3	95.3
Daman & Diu	100.0	100.0	100.0	100.0
Goa	100.0	100.0	100.0	100.0
Puducherry	67.7	67.7	100.0	67.7
Andaman & Nicobar Islands	100.0	100.0	46.1	100.0
All India	**82.4**	**86.9**	**61.2**	**73.1**

Appendix Table 7.10: Status of Supplementary Nutrition (Food)

States/UTs	Receiving food		Awareness of food entitlement (%)
	% PW/LM	Average number of days	
Andhra Pradesh	87.8	10	70.4
Assam	7.7	0	6.8
Bihar	68.0	10	14.3
Chhattisgarh	76.8	16	17.0
Gujarat	76.5	14	42.1
Haryana	93.1	18	0.7
Himachal Pradesh	75.3	16	23.1
Jammu and Kashmir	90.4	16	21.6
Jharkhand	91.4	20	14.2
Karnataka	90.7	11	74.8
Kerala	93.8	19	87.7
Madhya Pradesh	78.4	8	8.1
Maharashtra	93.3	20	57.3
Orissa	90.1	20	15.1
Punjab	87.8	16	27.4
Rajasthan	83.8	4	24.0
Tamil Nadu	89.5	13	71.9
Uttar Pradesh	69.5	9	10.0
Uttrakhand	92.3	10	13.7
West Bengal	96.9	20	12.4
Delhi	89.4	14	8.1
Chandigarh	100.0	20	-
Arunachal Pradesh	63.3	7	0.0
Manipur	23.6	2	1.7
Meghalaya	66.5	14	32.8
Mizoram	100.0	17	100.0
Nagaland	92.3	7	82.5

Appendix Table 7.10: Status of Supplementary Nutrition (Food) (Continued...)

States/UTs	Receiving food		Awareness of food entitlement (%)
	% PW/LM	Average number of days	
Tripura	66.8	7	13.9
Sikkim	86.8	13	25.7
Dadar & Nagar Haveli	100.0	24	83.1
Daman & Diu	100.0	22	72.2
Goa	100.0	24	94.0
Puducherry	100.0	24	100.0
Andaman & Nicobar Islands	74.2	15	1.2
All India	**78.3**	**12**	**26.8**

Appendix Table 7.11: Status of TT Vaccine during Pregnancy

States/UTs	PW aware about pre-natal care at AWC	PW took TT	Source			If no, why?		
			AWC/ANM	Government hospital	Others	Not available with ANM	Not aware	Others
Andhra Pradesh	87.2	87.2	72.0	18.0	10.0	26.7	9.5	63.7
Assam	82.3	82.3	42.6	22.9	34.5	51.6	5.1	43.3
Bihar	59.1	59.1	78.3	12.3	9.4	40.0	50.3	9.7
Chhattisgarh	77.1	77.1	78.4	15.6	5.9	56.8	37.8	5.5
Gujarat	85.0	85.0	59.4	31.2	9.4	58.1	16.4	25.5
Haryana	84.9	84.9	78.6	2.1	19.3	6.3	19.5	74.2
Himachal Pradesh	86.4	86.4	40.2	52.8	7.0	90.4	0.0	9.6
Jammu and Kashmir	62.9	62.9	7.7	78.8	13.5	9.2	23.8	67.0
Jharkhand	82.5	82.5	79.6	15.5	5.0	68.3	5.8	25.9
Karnataka	95.8	95.8	65.2	25.6	9.2	0.0	9.9	90.1
Kerala	100.0	100	0.0	62.3	37.8	0.0	0.0	0.0
Madhya Pradesh	79.6	79.6	69.9	24.3	5.8	52.1	22.9	25.0
Maharashtra	95.8	95.8	68.0	16.3	15.7	0.0	56.2	43.8
Orissa	86.7	86.7	79.6	15.3	5.1	55.8	14.7	29.5
Punjab	82.5	82.5	30.4	36.6	33.0	22.0	8.8	69.2
Rajasthan	65.9	65.9	78.1	20.6	1.4	49.7	35.4	14.9
Tamil Nadu	94.6	94.6	14.0	72.7	13.3	0.0	41.3	58.7
Uttar Pradesh	58.1	58.1	62.0	22.3	15.7	39.7	33.9	26.4
Uttrakhand	81.9	81.9	53.2	30.1	16.7	17.1	46.3	36.6
West Bengal	84.9	84.9	44.9	53.5	1.6	36.6	0.0	63.4

Appendix Table 7.11: Status of TT Vaccine during Pregnancy (Continued...)

States/UTs	PW aware about pre-natal care at AWC	PW took TT	Source			If no, why?		
			AWC/ANM	Government hospital	Others	Not available with ANM	Not aware	Others
Delhi	81.0	81.0	39.3	19.9	40.8	0.0	0.0	100
Chandigarh	82.1	82.1	0.0	100	0.0	0.0	0.0	100
Arunachal Pradesh	23.1	23.1	0.0	23.3	76.7	3.2	67.9	28.9
Manipur	74.3	74.3	36.2	34.0	29.8	6.1	7.7	86.2
Meghalaya	84.0	84.0	66.3	33.7	0.0	0.0	0.0	100
Mizoram	70.2	70.2	0.0	47.5	52.5	0.0	35.3	64.7
Nagaland	88.5	88.5	0.0	19.6	80.4	0.0	29.0	71.0
Tripura	94.2	94.2	25.7	43.4	30.9	11.8	36.1	52.1
Sikkim	66.5	66.5	63.9	36.1	0.0	100	0.0	0.0
Dadar & Nagar Haveli	100.0	100	43.5	56.5	0.0	0.0	0.0	0.0
Daman & Diu	74.6	74.6	35.9	44.1	20.0	0.0	0.0	100
Goa	89.8	89.8	0.0	48.1	51.9	0.0	0.0	100
Puducherry	100.0	100	0.0	84.7	15.3	0.0	0.0	0.0
Andaman & Nicobar Island	97.3	97.3	84.9	15.1	0.0	0.0	100	0.0
All India	**76.7**	**76.7**	**61.2**	**26.0**	**12.8**	**40.2**	**29.2**	**30.7**

Appendix Table 7.12: About IFA Tablets

(Figures in %)

States/UTs	PW consumed IFA tablets	Source		If no, why?		
		AWC/ANM	Others	Not available	Not aware	Others
Andhra Pradesh	74.9	80.2	19.8	24.9	29.0	46.1
Assam	62.6	87.4	12.6	17.7	25.7	56.7
Bihar	9.4	90.9	9.1	52.4	26.1	21.6
Chhattisgarh	82.3	96.6	3.4	24.2	6.4	69.4
Gujarat	86.8	92.2	7.8	29.3	25.2	45.5
Haryana	80.6	100.0	0.0	9.1	69.5	21.4
Himachal Pradesh	86.6	80.9	19.1	8.2	0.0	91.8
Jammu and Kashmir	44.8	62.6	37.5	27.4	21.6	51.0
Jharkhand	85.2	94.3	5.7	53.6	28.4	18.0
Karnataka	84.1	91.9	8.1	13.5	41.7	44.8
Kerala	100.0	6.2	93.8	0.0	0.0	0.0
Madhya Pradesh	72.7	98.7	1.4	31.1	31.8	37.1
Maharashtra	91.0	87.0	13.0	18.0	33.9	48.1
Orissa	86.5	100.0	0.0	19.6	17.9	62.6
Punjab	70.5	94.8	5.2	6.1	9.0	85.0
Rajasthan	70.3	96.7	3.3	30.8	16.4	52.8
Tamil Nadu	80.5	78.6	21.4	43.0	18.9	38.1
Uttar Pradesh	32.1	93.7	6.3	25.8	27.1	47.1
Uttrakhand	45.8	100.0	0.0	21.5	23.2	55.3
West Bengal	84.1	80.4	19.6	3.5	1.4	95.2

Appendix Table 7.12: About IFA Tablets (Continued...)

(Figures in %)

States/UTs	PW consumed IFA tablets	Source		If no, why?		
		AWC/ANM	Others	Not available	Not aware	Others
Delhi	73.5	100.0	0.0	0.0	0.0	100.0
Chandigarh	100.0	100.0	0.0	0.0	0.0	0.0
Arunachal Pradesh	16.5	0.0	100.0	7.9	3.2	88.9
Manipur	91.7	27.6	72.4	76.3	0.0	23.7
Meghalaya	84.4	89.0	11.0	51.2	16.3	32.5
Mizoram	89.5	62.8	37.3	0.0	0.0	100.0
Nagaland	34.5	43.1	56.9	15.5	13.1	71.4
Tripura	93.5	31.5	68.5	21.0	0.0	79.0
Sikkim	88.0	100.0	0.0	100.0	0.0	0.0
Dadar & Nagar Haveli	64.1	100.0	0.0	0.0	0.0	100.0
Daman & Diu	56.7	71.0	29.0	0.0	0.0	100.0
Goa	58.0	0.0	100.0	100.0	0.0	0.0
Puducherry	73.0	29.0	71.0	0.0	0.0	100.0
Andaman & Nicobar Island	95.4	95.2	4.8	0.0	0.0	100.0
All India	**63.6**	**88.7**	**11.3**	**28.2**	**25.6**	**46.2**

Appendix Table 7.13: About Regular Check-Ups - Blood Pressure

(Figures in %)

States/UTs	PW checked	Awareness about advantages			How many times (number)	Check-up from where			If not checked, why	
		Knowledge about foetus growth	Knowledge about pregnancy risk	Don't know		AWC/ANM	Government hospital	Private clinic	Not aware	Others
Andhra Pradesh	88.7	41.4	36.0	22.6	2	24.5	38.1	37.5	25.1	74.9
Assam	50.8	14.7	22.3	63.1	1	31.9	58.4	9.8	39.2	60.8
Bihar	19.0	4.9	8.7	86.4	0	18.1	17.4	64.5	29.3	70.7
Chhattisgarh	72.7	42.6	29.8	27.6	1	65.4	22.9	11.6	1.7	98.4
Gujarat	96.0	27.5	40.2	32.3	3	50.4	37.0	12.5	86.1	13.9
Haryana	63.8	9.8	24.1	66.2	1	0.9	57.2	41.8	9.9	90.1
Himachal Pradesh	86.6	25.8	6.3	67.9	2	16.0	75.4	8.6	8.1	91.9
Jammu and Kashmir	65.3	38.6	3.8	57.6	1	0.7	85.8	13.6	26.0	74.0
Jharkhand	53.1	4.9	25.8	69.4	1	55.7	25.8	18.4	36.9	63.1
Karnataka	84.8	53.3	16.4	30.3	2	3.6	65.2	31.2	27.2	72.8
Kerala	98.8	72.3	23.9	3.8	3	11.5	58.9	29.6	28.3	71.7
Madhya Pradesh	64.6	36.3	20.8	42.9	1	43.1	31.4	25.5	63.2	36.8
Maharashtra	88.2	49.4	27.2	23.4	2	52.2	20.5	27.3	58.0	42.0
Orissa	77.0	12.0	52.8	35.2	2	30.9	56.2	12.9	16.2	83.9
Punjab	70.1	52.6	19.3	28.1	1	4.8	43.7	51.5	49.5	50.5
Rajasthan	56.4	9.9	29.8	60.4	1	42.7	41.2	16.1	28.1	72.0
Tamil Nadu	94.0	69.8	19.0	11.3	3	6.9	78.9	14.2	41.6	58.5
Uttar Pradesh	8.1	3.6	3.3	93.1	0	11.8	44.3	44.0	46.7	53.3
Uttrakhand	15.1	2.2	5.6	92.2	0	0.0	22.8	77.2	30.2	69.9
West Bengal	82.2	15.6	25.5	58.9	2	28.9	64.8	6.2	15.8	84.2

Appendix Table 7.13: About Regular Check-Ups - Blood Pressure (Continued...)

(Figures in %)

States/UTs	PW checked	Awareness about advantages			How many times (number)	Check-up from where			If not checked, why	
		Knowledge about foetus growth	Knowledge about pregnancy risk	Don't know		AWC/ANM	Government hospital	Private clinic	Not aware	Others
Delhi	81.5	57.7	23.8	18.5	2	10.5	73.4	16.1	43.5	56.5
Chandigarh	100.0	84.6	15.4	0.0	2	0.0	100.0	0.0	-	-
Arunachal Pradesh	10.2	0.0	1.3	98.7	0	0.0	13.2	86.8	0.0	100.0
Manipur	100.0	0.0	91.0	9.0	5	3.2	47.5	49.4	0.0	100.0
Meghalaya	46.2	17.3	13.1	69.6	1	56.1	43.9	0.0	14.9	85.2
Mizoram	73.7	33.3	29.8	36.8	2	14.3	85.7	0.0	0.0	100.0
Nagaland	51.9	19.6	12.0	68.4	1	13.9	29.6	56.5	79.3	20.7
Tripura	87.7	20.1	0.0	79.9	2	0.0	26.6	73.4	71.6	28.4
Sikkim	100.0	0.0	0.0	100.0	3	49.5	50.6	0.0	-	-
Dadar & Nagar Haveli	100.0	54.3	17.4	28.3	3	0.0	82.6	17.4	-	-
Daman & Diu	100.0	59.7	40.3	0.0	2	0.0	85.1	14.9	-	-
Goa	100.0	100.0	0.0	0.0	2	0.0	18.2	81.8	-	-
Puducherry	100.0	100.0	0.0	0.0	3	0.0	100.0	0.0	-	-
Andaman & Nicobar Island	100.0	65.7	27.6	6.7	3	82.5	17.5	0.0	-	-
All India	**55.0**	**23.4**	**20.4**	**56.2**	**1**	**29.5**	**46.2**	**24.3**	**40.0**	**60.0**

Appendix Table 7.14: About Regular Check-Ups – Weight

(Figures in %)

States/UTs	PW checked	Awareness about advantages			How many times (number)	Check-up from where			If not checked, why	
		Knowledge about foetus growth	Knowledge about pregnancy risk	Don't know		AWC/ANM	Government hospital	Private clinic	Not aware	Others
Andhra Pradesh	87.7	55.3	19.6	25.2	2	26.6	36.6	36.9	26.0	74.0
Assam	67.6	35.4	25.4	39.2	1	32.8	59.6	7.6	21.9	78.1
Bihar	8.5	7.0	2.2	90.8	0	46.2	11.8	42.0	42.1	57.9
Chhattisgarh	86.0	55.1	33.7	11.3	1	77.5	13.3	9.3	0.0	100.0
Gujarat	97.0	48.8	21.1	30.1	2	57.2	30.1	12.7	12.1	87.9
Haryana	62.5	29.6	31.0	39.5	1	48.3	29.0	22.7	7.9	92.1
Himachal Pradesh	73.5	39.9	1.3	58.9	2	25.0	71.5	3.5	9.1	90.9
Jammu and Kashmir	51.7	30.6	7.8	61.5	1	0.0	87.0	13.1	28.4	71.6
Jharkhand	47.5	8.3	24.6	67.1	1	51.5	29.6	19.0	30.1	69.9
Karnataka	80.7	53.5	16.0	30.5	1	10.5	66.8	22.8	9.6	90.4
Kerala	97.0	70.7	27.5	1.8	2	12.3	51.9	35.8	-	-
Madhya Pradesh	85.9	53.4	17.7	28.9	2	58.0	24.2	17.7	71.5	28.5
Maharashtra	91.4	59.3	24.9	15.8	2	62.6	12.8	24.7	70.6	29.4
Orissa	80.1	41.6	30.0	28.4	2	53.8	36.5	9.7	21.7	78.3
Punjab	58.3	33.6	16.3	50.1	1	13.0	44.5	42.5	55.7	44.3
Rajasthan	70.0	43.4	14.0	42.6	1	75.0	21.5	3.5	25.7	74.3
Tamil Nadu	96.7	78.2	15.5	6.3	3	21.1	65.3	13.6	32.1	67.9
Uttar Pradesh	6.2	5.0	0.9	94.2	0	25.7	41.1	33.3	49.3	50.7
Uttrakhand	15.4	0.0	9.0	91.0	0	36.2	23.8	39.9	23.3	76.7
West Bengal	74.2	21.6	20.7	57.8	2	32.3	65.6	2.1	7.5	92.5

Appendix Table 7.14: About Regular Check-Ups – Weight (Continued...)

(Figures in %)

States/UTs	PW checked	Awareness about advantages			How many times (number)	Check-up from where			If not checked, why	
		Knowledge about foetus growth	Knowledge about pregnancy risk	Don't know		AWC/ANM	Government hospital	Private clinic	Not aware	Others
Delhi	62.5	52.0	10.5	37.5	2	10.5	73.4	16.1	0.0	100.0
Chandigarh	100.0	57.7	42.3	0.0	3	17.9	82.1	0.0	-	-
Arunachal Pradesh	12.9	0.0	4.0	96.0	0	0.0	31.4	68.6	0.0	100.0
Manipur	98.4	57.8	23.7	18.5	5	1.6	48.2	50.2	-	-
Meghalaya	64.9	21.5	19.4	59.1	2	74.7	25.3	0.0	0.0	100.0
Mizoram	100.0	100.0	0.0	0.0	3	36.8	63.2	0.0	-	-
Nagaland	58.2	30.2	13.5	56.3	1	5.8	49.2	45.0	82.8	17.3
Tripura	72.8	32.1	0.0	67.9	2	22.7	26.3	51.1	38.0	62.0
Sikkim	100.0	10.7	0.0	89.3	3	49.5	50.6	0.0	-	-
Dadar & Nagar Haveli	100.0	54.3	17.4	28.3	3	0.0	82.6	17.4	-	-
Daman & Diu	100.0	85.1	14.9	0.0	2	0.0	85.1	14.9	-	-
Goa	100.0	100.0	0.0	0.0	2	0.0	18.2	81.8	-	-
Puducherry	100.0	100.0	0.0	0.0	1	0.0	100.0	0.0	-	-
Andaman & Nicobar Island	100.0	79.1	14.3	6.7	3	82.5	17.5	0.0	-	-
All India	**56.4**	**33.1**	**14.9**	**52.0**	**1**	**42.5**	**38.8**	**18.7**	**40.7**	**59.3**

Appendix Table 7.15: About Regular Check-Ups - Abdominal Examination

(Figures in %)

States/UTs	PW checked	Awareness about advantages			How many times (number)	Check-up from where			If not checked, why	
		Knowledge about foetus growth	Knowledge about pregnancy risk	Don't know		AWC/ANM	Government hospital	Private clinic	Not aware	Others
Andhra Pradesh	90.4	54.9	23.9	21.2	2.0	24.8	37.2	38.0	23.4	76.6
Assam	33.8	17.2	12.9	69.9	1.0	13.5	67.8	18.7	47.0	53.1
Bihar	6.2	1.9	1.4	96.7	0.0	8.3	7.0	84.7	25.8	74.2
Chhattisgarh	52.2	22.4	28.7	48.9	1.0	35.9	44.4	19.7	8.0	92.1
Gujarat	78.1	32.5	29.9	37.6	1.0	43.0	31.7	25.2	1.4	98.6
Haryana	65.8	10.2	45.8	44.1	1.0	14.1	42.4	43.5	27.3	72.7
Himachal Pradesh	87.1	43.9	1.3	54.8	2.0	34.4	62.6	3.0	45.9	54.2
Jammu and Kashmir	64.4	30.9	11.5	57.6	1.0	0.7	87.0	12.4	21.5	78.5
Jharkhand	40.6	9.6	24.0	66.4	1.0	51.7	36.5	11.8	41.6	58.4
Karnataka	84.8	62.3	9.7	28.0	2.0	3.2	64.0	32.9	26.4	73.6
Kerala	95.4	76.7	18.7	4.7	1.0	9.8	53.8	36.4	25.8	74.2
Madhya Pradesh	63.2	43.1	8.4	48.5	1.0	38.2	34.6	27.2	68.7	31.4
Maharashtra	72.3	42.9	20.8	36.3	1.0	19.3	36.6	44.1	56.3	43.7
Orissa	78.6	39.5	35.6	25.0	2.0	28.6	53.8	17.7	28.4	71.6
Punjab	64.5	41.1	21.6	37.3	1.0	8.1	47.3	44.5	69.3	30.7
Rajasthan	59.2	22.1	27.8	50.1	1.0	46.8	31.6	21.6	31.2	68.8
Tamil Nadu	84.3	64.4	18.5	17.1	2.0	7.5	69.1	23.4	23.1	76.9
Uttar Pradesh	20.0	11.0	4.3	84.8	0.0	43.2	34.3	22.5	48.1	51.9
Uttrakhand	20.0	3.4	16.7	80.0	0.0	3.2	16.8	80.0	32.4	67.7
West Bengal	36.6	16.6	9.4	74.0	1.0	6.4	76.3	17.3	16.3	83.7

Appendix Table 7.15: About Regular Check-Ups - Abdominal Examination (Continued...)

(Figures in %)

States/UTs	PW checked	Awareness about advantages			How many times (number)	Check-up from where			If not checked, why	
		Knowledge about foetus growth	Knowledge about pregnancy risk	Don't know		AWC/ANM	Government hospital	Private clinic	Not aware	Others
Delhi	89.5	29.5	60.1	10.5	1.0	0.0	50.9	49.1	0.0	100.0
Chandigarh	66.7	39.8	26.9	33.3	1.0	0.0	100.0	0.0	53.9	46.2
Arunachal Pradesh	4.0	0.0	4.0	96.0	0.0	0.0	100.0	0.0	0.0	100.0
Manipur	96.9	21.4	42.7	36.0	4.0	0.0	49.0	51.0	0.0	100.0
Meghalaya	24.9	19.8	5.1	75.1	0.0	18.7	81.3	0.0	10.7	89.3
Mizoram	100.0	59.7	0.0	40.4	2.0	26.3	73.7	0.0	-	-
Nagaland	42.1	12.1	30.0	57.9	1.0	8.6	16.9	74.5	69.8	30.2
Tripura	58.4	48.8	2.5	48.7	1.0	34.4	39.9	25.7	8.8	91.2
Sikkim	48.1	0.0	0.0	100.0	1.0	80.6	19.4	0.0	66.8	33.2
Dadar & Nagar Haveli	100.0	54.3	17.4	28.3	2.0	0.0	82.6	17.4	-	-
Daman & Diu	100.0	59.7	40.3	0.0	2.0	0.0	85.1	14.9	-	-
Goa	100.0	100.0	0.0	0.0	1.0	0.0	18.2	81.8	-	-
Puducherry	100.0	100.0	0.0	0.0	2.0	0.0	100.0	0.0	-	-
Andaman & Nicobar Island	14.1	7.4	0.0	92.6	0.0	0.0	100.0	0.0	84.6	15.4
All India	**51.2**	**28.1**	**15.8**	**56.1**	**1.0**	**25.2**	**45.8**	**29.0**	**39.7**	**60.3**

Appendix Table 7.16: Pregnant Women Ever Referred to SC/PHC

(Figures in %)

States/UTs	During current pregnancy	During last pregnancy	This is first pregnancy
Andhra Pradesh	72.2	63.3	34.6
Assam	21.4	39.4	40.4
Bihar	2.0	39.2	30.1
Chhattisgarh	15.8	47.0	49.3
Gujarat	18.7	70.5	28.0
Haryana	6.5	47.1	45.0
Himachal Pradesh	33.1	58.4	37.7
Jammu and Kashmir	3.5	69.4	18.5
Jharkhand	16.2	46.0	43.4
Karnataka	38.9	52.3	44.6
Kerala	3.8	46.1	38.5
Madhya Pradesh	7.2	61.6	35.7
Maharashtra	40.3	68.0	25.2
Orissa	11.3	61.2	37.6
Punjab	4.0	49.2	45.6
Rajasthan	10.8	65.0	27.6
Tamil Nadu	49.3	51.9	41.9
Uttar Pradesh	4.5	60.3	17.4
Uttrakhand	7.8	62.8	28.3
West Bengal	17.1	52.9	44.1
Delhi	0.0	28.9	51.1
Chandigarh	0.0	82.1	17.9
Arunachal Pradesh	2.0	32.4	19.8
Manipur	12.6	63.3	36.7
Meghalaya	13.3	63.8	28.3
Mizoram	0.0	0.0	100.0
Nagaland	9.0	31.8	35.7

Appendix Table 7.16: Pregnant Women Ever Referred To SC/PHC (Continued...)

(Figures in %)

States/UTs	During current pregnancy	During last pregnancy	This is first pregnancy
Tripura	20.1	15.8	75.0
Sikkim	27.9	12.0	88.0
Dadar & Nagar Haveli	71.8	60.9	39.1
Daman & Diu	100.0	73.2	26.8
Goa	0.0	68.2	31.8
Puducherry	55.3	37.6	47.1
Andaman & Nicobar Island	0.0	42.2	48.0
All India	**18.9**	**56.3**	**32.2**

Appendix Table 7.17: Pregnant Women Attended NHE Meetings

(Figures in %)

States/UTs	PW
Andhra Pradesh	45.7
Assam	7.5
Bihar	13.7
Chhattisgarh	32.5
Gujarat	38.5
Haryana	32.5
Himachal Pradesh	51.1
Jammu and Kashmir	11.8
Jharkhand	30.8
Karnataka	21.5
Kerala	50.1
Madhya Pradesh	17.5
Maharashtra	31.2
Orissa	42.2
Punjab	9.6
Rajasthan	19.1
Tamil Nadu	32.9
Uttar Pradesh	11.2
Uttrakhand	13.0
West Bengal	17.3
Delhi	14.2
Chandigarh	82.1
Arunachal Pradesh	0.0
Manipur	12.7
Meghalaya	35.6
Mizoram	10.5
Nagaland	7.9

Appendix Table 7.17: Pregnant Women Attended NHE Meetings (Continued...)

(Figures in %)

States/UTs	PW
Tripura	19.4
Sikkim	21.8
Dadar & Nagar Haveli	17.4
Daman & Diu	40.3
Goa	30.7
Puducherry	5.9
Andaman & Nicobar Island	4.6
All India	**22.4**

Appendix Table 7.18: Pregnant Women Following Advices Regarding Services/Activities about Child Care Discussed During NHE

States/UTs	Taking care and monitoring of child's growth	Timely immunization	About breast feeding	About colostrum feeding	About treatment of diarrhoea/ minor illness	About preparation of nutritious food/feeding practices	Provide medicine/ consult AWW during illness	Importance of education of the child	Cleanliness and hygiene
Andhra Pradesh	53.5	53.5	54.0	54.0	53.5	52.2	55.1	52.3	53.4
Assam	9.0	9.0	8.1	7.2	12.3	9.0	12.3	9.0	10.5
Bihar	11.7	12.8	12.8	10.5	12.3	7.4	9.9	11.8	10.4
Chhattisgarh	28.7	39.0	34.3	33.9	54.2	14.0	13.1	31.6	41.8
Gujarat	37.1	42.7	33.5	28.8	36.5	21.1	32.3	30.9	38.0
Haryana	32.5	32.5	32.5	30.9	31.7	32.5	31.7	32.5	32.5
Himachal Pradesh	51.1	51.1	51.1	44.6	51.1	51.1	44.6	51.1	43.7
Jammu and Kashmir	11.8	11.8	11.8	11.4	10.7	11.8	11.4	11.8	11.4
Jharkhand	28.8	35.2	26.0	31.6	22.9	17.3	30.3	37.5	26.7
Karnataka	21.6	21.2	20.6	18.0	20.6	19.8	20.2	20.4	21.2
Kerala	53.4	53.4	51.2	51.2	51.2	51.2	48.1	50.4	53.4
Madhya Pradesh	20.8	20.8	20.8	20.5	18.5	18.8	20.8	18.5	20.5
Maharashtra	46.8	48.1	43.8	43.9	39.4	41.4	39.0	44.8	38.9
Orissa	39.7	41.5	38.5	30.9	26.5	21.1	26.0	30.1	34.9
Punjab	11.9	11.9	11.9	10.1	7.4	7.4	10.1	10.1	10.1
Rajasthan	19.6	21.0	21.3	20.4	14.7	13.0	15.4	20.6	18.2
Tamil Nadu	34.7	36.5	34.1	34.1	35.3	35.6	35.3	33.3	36.3
Uttar Pradesh	7.7	10.9	10.4	9.3	7.3	7.9	7.2	7.9	7.8
Uttrakhand	13.4	13.4	9.9	9.9	13.4	13.0	9.9	13.4	13.4
West Bengal	24.8	33.2	21.8	22.9	19.1	16.7	19.4	28.4	24.1

Appendix Table 7.18: Pregnant Women Following Advices Regarding Services/Activities about Child Care Discussed During NHE (Continued...)

States/UTs	Taking care and monitoring of child's growth	Timely immunization	About breastfeeding	About colostrum feeding	About treatment of diarrhoea/ minor illness	About preparation of nutritious food/feeding practices	Provide medicine/ consult AWW during illness	Importance of education of the child	Cleanliness and hygiene
Delhi	14.2	14.2	14.2	14.2	14.2	14.2	14.2	14.2	14.2
Chandigarh	82.1	82.1	82.1	82.1	82.1	82.1	82.1	82.1	82.1
Arunachal Pradesh	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Manipur	12.7	19.0	19.0	19.0	19.0	19.0	19.0	19.0	19.0
Meghalaya	10.1	10.1	10.1	10.1	10.1	2.5	10.1	10.1	2.5
Mizoram	10.5	10.5	10.5	10.5	10.5	10.5	10.5	10.5	10.5
Nagaland	0.0	7.9	7.9	0.0	0.0	0.0	0.0	7.9	0.0
Tripura	3.8	22.9	5.6	4.7	3.8	3.0	21.2	5.6	3.0
Sikkim	35.9	46.1	46.1	34.6	20.5	0.0	0.0	0.0	0.0
Dadar & Nagar Haveli	45.7	45.7	45.7	45.7	31.5	45.7	45.7	31.5	31.5
Daman & Diu	40.3	40.3	40.3	40.3	40.3	40.3	40.3	40.3	40.3
Goa	30.7	30.7	18.2	18.2	30.7	30.7	30.7	30.7	30.7
Puducherry	5.9	5.9	5.9	5.9	5.9	5.9	5.9	5.9	5.9
Andaman & Nicobar Island	0.0	4.6	4.6	2.8	2.8	0.0	0.0	4.6	2.8
All India	**23.3**	**25.8**	**23.6**	**22.6**	**21.9**	**19.3**	**20.9**	**22.9**	**22.7**

Appendix Table 7.19: Pregnant Women Following Advices Regarding Services/Activities about Mother Care Discussed During NHE (%)

States/UTs	About immunization during pregnancy	About institutional delivery	Precautions in case of home delivery	About feeding practices during pregnancy and lactating period	About correct posture during pregnancy	About correct posture during breast feeding	About self care & health (cleanliness & hygiene)	About diseases/ illness	About nipple hygiene	About family planning
Andhra Pradesh	57.6	57.1	48.4	57.6	57.3	56.7	58.4	57.9	54.8	39.9
Assam	10.2	10.2	9.3	9.3	11.7	10.5	8.1	9.0	8.4	12.3
Bihar	8.5	9.8	9.8	9.8	11.0	11.0	9.6	12.0	9.6	12.0
Chhattisgarh	61.0	48.7	49.2	21.0	24.9	24.5	37.4	55.3	11.5	4.1
Gujarat	42.7	32.6	33.4	30.0	21.3	20.6	36.8	32.3	31.5	28.7
Haryana	32.5	32.5	32.5	32.5	31.7	32.5	31.7	31.7	31.7	30.9
Himachal Pradesh	51.1	50.2	43.7	43.7	50.2	50.2	51.1	50.2	39.8	50.2
Jammu and Kashmir	11.8	11.8	11.8	11.8	11.8	11.4	11.8	11.8	11.4	11.4
Jharkhand	33.8	26.7	31.8	21.1	26.8	26.5	21.6	25.3	21.5	24.1
Karnataka	20.6	20.2	18.4	19.7	20.2	20.6	19.4	21.0	15.3	20.2
Kerala	51.2	50.2	9.6	51.2	51.2	51.2	51.2	48.1	50.6	46.2
Madhya Pradesh	20.8	20.8	20.8	20.5	20.5	20.8	20.8	20.8	20.5	20.5
Maharashtra	47.7	44.6	40.2	35.0	41.3	43.2	40.1	34.9	39.0	38.5
Orissa	45.0	39.9	27.5	34.3	40.1	34.4	37.8	38.9	29.0	21.6
Punjab	11.9	11.9	11.9	10.1	7.8	11.9	7.4	9.2	10.1	10.1
Rajasthan	22.6	16.8	17.6	21.9	20.0	16.1	21.7	17.4	11.4	15.7
Tamil Nadu	37.2	35.8	34.1	34.5	36.9	34.2	36.9	37.3	34.8	33.6
Uttar Pradesh	10.2	7.6	5.9	7.9	7.0	6.4	7.7	6.8	7.2	8.6
Uttaranchal	13.4	9.5	13.4	13.4	13.4	13.4	13.4	13.4	13.4	13.4
West Bengal	35.6	34.6	29.8	19.6	23.3	18.9	17.5	26.5	17.0	25.4

Appendix Table 7.19: Pregnant Women Following Advices Regarding Services/Activities about Mother Care Discussed During NHE (%) (Continued...)

States/UTs	About immunization during pregnancy	About institutional delivery	Precautions in case of home delivery	About feeding practices during pregnancy and lactating period	About correct posture during pregnancy	About correct posture during breast feeding	About self care & health (cleanliness & hygiene)	About diseases/ illness	About nipple hygiene	About family planning
Delhi	14.2	14.2	14.2	14.2	14.2	14.2	14.2	14.2	14.2	14.2
Chandigarh	82.1	82.1	82.1	82.1	82.1	82.1	82.1	82.1	82.1	82.1
Arunachal Pradesh	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Manipur	19.0	19.0	19.0	19.0	19.0	19.0	19.0	19.0	19.0	12.7
Meghalaya	10.1	10.1	10.1	6.3	2.5	2.5	2.5	6.3	2.5	10.1
Mizoram	10.5	10.5	10.5	10.5	10.5	10.5	10.5	10.5	10.5	10.5
Nagaland	0.0	0.0	7.9	7.9	0.0	0.0	0.0	0.0	0.0	0.0
Tripura	5.6	3.8	3.8	3.8	3.0	3.8	3.8	2.1	3.0	22.9
Sikkim	69.4	46.1	46.1	10.3	0.0	0.0	21.8	33.3	21.8	42.3
Dadar & Nagar Haveli	45.7	45.7	31.5	45.7	31.5	31.5	45.7	45.7	45.7	45.7
Daman & Diu	40.3	40.3	40.3	40.3	40.3	40.3	40.3	40.3	40.3	40.3
Goa	30.7	30.7	30.7	18.2	18.2	18.2	30.7	30.7	18.2	30.7
Puducherry	5.9	5.9	5.9	5.9	5.9	5.9	5.9	5.9	5.9	5.9
Anadaman & Nicobar Island	4.6	4.6	4.6	4.6	4.6	4.6	1.9	0.0	0.0	4.6
Total	**26.6**	**24.0**	**21.6**	**21.4**	**22.3**	**21.4**	**22.5**	**23.0**	**19.7**	**19.7**

Appendix Table 7.20: Awareness and Use of Boil Water (%)

States/UTs	% of PW using iodized salt	% of PW know method of delay/ avoid of pregnancy	Legal of age for marriage (year): reported by PW	% of PW using boiled water
Andhra Pradesh	69.2	41.1	19	59.6
Assam	90.0	96.0	19	75.5
Bihar	83.7	57.9	18	26.5
Chhattisgarh	78.2	81.3	18	70.0
Gujarat	79.6	81.3	18	47.9
Haryana	100.0	28.3	18	44.1
Himachal Pradesh	98.9	72.7	18	91.9
Jammu and Kashmir	92.6	50.2	20	80.9
Jharkhand	95.1	76.5	18	38.9
Karnataka	58.4	20.2	18	75.3
Kerala	100.0	92.8	19	95.4
Madhya Pradesh	92.4	59.0	18	68.5
Maharashtra	94.8	83.6	18	49.2
Orissa	83.1	93.4	20	55.1
Punjab	39.1	87.2	18	37.1
Rajasthan	93.6	96.6	18	36.7
Tamil Nadu	89.3	56.1	21	88.0
Uttar Pradesh	51.8	76.6	18	46.3
Uttrakhand	74.9	84.9	19	54.7
West Bengal	87.0	83.6	18	24.1

Appendix Table 7.20: Awareness and Use of Boil Water (%) (Continued...)

States/UTs	% of PW using iodized salt	% of PW know method of delay/ avoid of pregnancy	Legal of age for marriage (year): reported by PW	% of PW using boiled water
Delhi	100.0	54.9	18	51.3
Chandigarh	100.0	100.0	18	100.0
Arunachal Pradesh	81.8	63.9	18	81.8
Manipur	100.0	96.9	19	97.6
Meghalaya	100.0	65.7	18	43.9
Mizoram	100.0	100.0	18	29.8
Nagaland	85.5	70.5	18	90.0
Tripura	98.3	18.3	18	53.5
Sikkim	100.0	100.0	21	61.2
Dadar & Nagar Haveli	100.0	85.9	19	85.9
Daman & Diu	100.0	100.0	18	100.0
Goa	100.0	100.0	18	90.9
Puducherry	100.0	84.7	21	74.1
Andaman & Nicobar Island	100.0	97.3	18	1.9
All India	**76.0**	**71.0**	**19**	**52.8**

Appendix Table 7.21: Pregnant Women's Perception about Ideal Birth Interval

States/UTs	1 to 2 Years	3 to 4 Years	5 to 6 Years	More than 6 years	Don't know
Andhra Pradesh	13.9	62.5	8.6	2.3	12.7
Assam	1.9	61.5	28.5	0.0	8.2
Bihar	13.3	43.0	10.6	0.0	33.1
Chhattisgarh	19.0	54.4	3.1	0.0	23.5
Gujarat	32.1	52.5	2.3	0.0	13.2
Haryana	19.6	47.7	8.1	1.4	23.2
Himachal Pradesh	11.2	83.0	4.7	0.0	1.1
Jammu and Kashmir	12.9	61.9	16.7	0.0	8.5
Jharkhand	2.0	54.7	19.5	1.9	21.9
Karnataka	34.1	28.3	0.0	0.0	37.6
Kerala	7.3	71.6	15.5	0.0	5.6
Madhya Pradesh	9.1	64.3	11.2	0.7	14.7
Maharashtra	17.9	64.0	13.6	0.0	4.6
Orissa	3.4	42.7	46.0	0.3	7.7
Punjab	2.5	64.0	7.0	0.0	26.5
Rajasthan	14.1	63.4	15.5	0.0	7.0
Tamil Nadu	20.0	61.0	13.5	0.6	4.9
Uttar Pradesh	5.2	54.9	21.3	0.1	18.6
Uttrakhand	6.5	27.8	50.5	3.3	12.0
West Bengal	1.2	41.9	31.0	9.4	16.5

Appendix Table 7.21: Pregnant Women's Perception about Ideal Birth Interval (Continued...)

States/UTs	1 to 2 Years	3 to 4 Years	5 to 6 Years	More than 6 years	Don't know
Delhi	8.6	67.9	16.9	0.0	6.7
Chandigarh	0.0	76.9	0.0	0.0	23.1
Arunachal Pradesh	3.1	5.2	2.0	0.0	89.7
Manipur	7.9	75.1	17.0	0.0	0.0
Meghalaya	51.1	34.2	4.2	0.0	10.5
Mizoram	73.7	26.3	0.0	0.0	0.0
Nagaland	8.6	43.6	3.4	0.0	44.5
Tripura	0.0	16.5	58.7	21.0	3.8
Sikkim	0.0	21.3	28.1	0.0	50.6
Dadar & Nagar Haveli	0.0	81.5	18.5	0.0	0.0
Daman & Diu	0.0	100.0	0.0	0.0	0.0
Goa	18.2	81.8	0.0	0.0	0.0
Puducherry	21.2	78.8	0.0	0.0	0.0
Andaman & Nicobar Island	0.0	35.0	44.5	0.0	20.5
All India	**11.3**	**54.2**	**17.1**	**1.0**	**16.5**

Appendix Table 7.22: Status of TT Vaccine During Pregnancy

(Figures in %)

States/UTs	LM aware about post natal care services at AWC	LM took TT	Source			If no, why?		
			AWC/ANM	Government hospital	Others	Not available at AWC	Not aware	Others
Andhra Pradesh	85.5	97.2	71.3	20.5	8.3	0.0	0.0	100.0
Assam	95.1	95.2	39.9	17.2	42.9	21.9	0.0	78.1
Bihar	30.5	94.1	71.7	14.9	13.4	9.3	58.5	32.2
Chhattisgarh	67.2	100.0	80.8	17.7	1.5	-	-	-
Gujarat	89.4	95.8	54.9	23.4	21.7	0.0	33.5	66.6
Haryana	66.5	100.0	62.8	1.8	35.4	-	-	-
Himachal Pradesh	35.9	100.0	11.7	70.8	17.6	-	-	-
Jammu and Kashmir	47.5	100.0	2.8	78.0	19.3	-	-	-
Jharkhand	73.8	99.4	74.7	21.6	3.6	0.0	0.0	100.0
Karnataka	57.9	97.1	55.3	40.4	4.3	57.0	0.0	43.0
Kerala	85.3	100.0	0.6	84.1	15.4	-	-	-
Madhya Pradesh	61.2	95.0	67.7	28.4	4.0	26.2	50.7	23.1
Maharashtra	99.7	98.7	65.1	21.1	13.8	63.6	0.0	36.4
Orissa	99.9	98.8	76.9	16.1	7.0	0.0	0.0	100.0
Punjab	63.6	96.0	32.5	28.8	38.7	0.0	0.0	100.0
Rajasthan	94.7	99.1	88.0	9.3	2.7	0.0	0.0	100.0
Tamil Nadu	89.3	94.0	13.2	72.8	14.0	0.6	40.1	59.3
Uttar Pradesh	47.9	85.5	58.6	26.9	14.6	17.3	35.3	47.4
Uttarkhand	90.6	81.6	54.5	23.3	22.3	46.8	0.0	53.2
West Bengal	68.5	82.6	28.8	67.9	3.2	0.0	0.0	100.0

Appendix Table 7.22: Status of TT Vaccine During Pregnancy (Continued...)

(Figures in %)

States/UTs	LM aware about post natal care services at AWC	LM took TT	Source			If no, why?		
			AWC/ANM	Government hospital	Others	Not available at AWC	Not aware	Others
Delhi	86.5	100.0	37.2	32.1	30.8	-	-	-
Chandigarh	68.6	100.0	0.0	100.0	0.0	-	-	-
Arunachal Pradesh	44.9	16.6	0.0	91.2	8.9	5.8	20.8	73.4
Manipur	50.7	98.5	44.2	27.7	28.2	100.0	0.0	0.0
Meghalaya	22.2	100.0	57.2	24.0	18.8	-	-	-
Mizoram	83.3	94.7	0.0	40.7	59.3	0.0	0.0	100.0
Nagaland	55.5	95.5	9.5	50.1	40.4	0.0	0.0	100.0
Tripura	39.9	80.3	3.9	42.1	54.0	78.2	16.7	5.1
Sikkim	76.0	100.0	68.0	32.0	0.0	-	-	-
Dadar & Nagar Haveli	100.0	100.0	15.8	73.1	11.1	-	-	-
Daman & Diu	100.0	100.0	70.1	29.9	0.0	-	-	-
Goa	36.9	100.0	0.0	45.3	54.7	-	-	-
Puducherry	100.0	85.6	0.0	100.0	0.0	100.0	0.0	0.0
Andaman & Nicobar Islands	80.4	97.8	84.8	15.2	0.0	0.0	0.0	100.0
All India	**68.8**	**93.1**	**58.2**	**28.7**	**13.1**	**15.5**	**26.3**	**58.2**

Appendix Table 7.23: About IFA Tablets

(Figures in %)

States/UTs	LM consumed IFA tablets	Source		If no, why?		
		AWC/ANM	Others	Not available	Not aware	Others
Andhra Pradesh	57.9	85.5	14.5	15.0	22.5	62.5
Assam	41.2	90.6	9.4	7.9	32.6	59.5
Bihar	11.5	68.5	31.5	32.6	35.1	32.3
Chhattisgarh	14.7	100.0	0.0	14.2	15.3	70.5
Gujarat	52.1	100.0	0.0	3.9	0.7	95.4
Haryana	42.0	100.0	0.0	4.0	29.2	66.9
Himachal Pradesh	45.2	93.5	6.5	10.3	26.1	63.6
Jammu and Kashmir	45.7	49.9	50.2	11.3	35.6	53.1
Jharkhand	32.9	95.6	4.4	9.6	41.8	48.7
Karnataka	78.4	71.9	28.1	4.6	38.9	56.5
Kerala	28.7	45.0	55.0	31.4	14.4	54.2
Madhya Pradesh	26.0	92.3	7.7	22.7	25.5	51.8
Maharashtra	73.4	92.4	7.6	5.4	14.1	80.6
Orissa	33.8	100.0	0.0	4.1	17.1	78.8
Punjab	57.3	93.9	6.1	16.6	18.3	65.1
Rajasthan	21.5	96.6	3.4	16.2	9.3	74.5
Tamil Nadu	60.0	66.0	34.0	14.9	25.8	59.3
Uttar Pradesh	11.3	92.2	7.9	22.7	30.4	46.9
Uttarkhand	22.5	79.7	20.3	24.7	7.2	68.1
West Bengal	39.1	74.2	25.8	2.5	8.0	89.5

Appendix Table 7.23: About IFA Tablets (Continued...)

(Figures in %)

States/UTs	LM consumed IFA tablets	Source		If no, why?		
		AWC/ANM	Others	Not available	Not aware	Others
Delhi	43.1	100.0	0.0	8.9	10.9	80.2
Chandigarh	9.0	0.0	100.0	0.0	9.9	90.2
Arunachal Pradesh	13.6	0.0	100.0	35.3	3.1	61.6
Manipur	0.0	-	-	0.0	21.6	78.4
Meghalaya	66.0	77.9	22.1	0.0	0.0	100.0
Mizoram	43.0	61.2	38.8	0.0	0.0	100.0
Nagaland	9.5	0.0	100.0	2.1	3.0	94.9
Tripura	27.7	10.9	89.1	5.7	55.4	38.8
Sikkim	15.0	100.0	0.0	0.0	20.0	80.0
Dadar & Nagar Haveli	26.2	100.0	0.0	0.0	0.0	100.0
Daman & Diu	46.2	100.0	0.0	0.0	0.0	100.0
Goa	100.0	0.0	100.0	-	-	-
Puducherry	56.6	36.2	63.9	0.0	0.0	100.0
Andaman & Nicobar Islands	49.0	100.0	0.0	0.0	3.0	97.0
All India	**33.9**	**85.7**	**14.3**	**16.8**	**24.6**	**58.7**

Appendix Table 7.24: Lactating Mother Attended NHE Meetings

(Figures in %)

States/UTs	LM who have attended NHE meetings in the last one month
Andhra Pradesh	44.3
Assam	13.2
Bihar	3.5
Chhattisgarh	47.2
Gujarat	41.5
Haryana	28.8
Himachal Pradesh	11.4
Jammu and Kashmir	18.9
Jharkhand	31.9
Karnataka	6.8
Kerala	36.4
Madhya Pradesh	17.8
Maharashtra	39.4
Orissa	34.2
Punjab	9.7
Rajasthan	13.1
Tamil Nadu	31.5
Uttar Pradesh	7.9
Uttarkhand	25.5
West Bengal	11.1
Delhi	25.8
Chandigarh	62.8
Arunachal Pradesh	0.0
Manipur	0.0
Meghalaya	23.3
Mizoram	57.0
Nagaland	4.7

Appendix Table 7.24: Lactating Mother Attended NHE Meetings (Continued...)

(Figures in %)

States/UTs	LM who have attended NHE meetings in the last one month
Tripura	1.7
Sikkim	0.0
Dadar & Nagar Haveli	4.1
Daman & Diu	28.3
Goa	0.0
Puducherry	0.0
Andaman & Nicobar Islands	0.0
All India	**20.3**

Appendix Table 7.25: Lactating Mothers Following Advices Regarding Services/Activities about Child Care Discussed During NHE

States/UTs	Taking care and monitoring of child's growth	Timely immunization	About breastfeeding	About colostrum feeding	About treatment of diarrhoea/minor illness	About preparation of nutritious food/feeding practices	Provide medicine/consult AWW during illness	Importance of education of the child	Cleanliness and hygiene
Andhra Pradesh	57.7	56.8	57.7	56.8	53.1	53.0	57.3	53.6	58.4
Assam	14.2	14.2	16.3	15.5	10.2	9.3	9.7	11.9	10.5
Bihar	3.0	3.5	2.5	2.5	3.5	1.8	0.3	2.5	1.8
Chhattisgarh	59.9	61.4	53.4	50.0	57.5	22.2	21.9	27.5	40.2
Gujarat	50.8	61.4	52.5	42.4	45.9	43.0	38.6	43.9	52.6
Haryana	28.8	28.8	28.8	28.8	27.7	27.7	28.8	28.8	28.8
Himachal Pradesh	20.9	20.9	20.9	11.4	14.3	20.9	14.3	20.9	14.3
Jammu and Kashmir	18.8	19.4	19.4	19.4	18.8	19.4	18.0	19.4	19.4
Jharkhand	36.8	39.6	25.6	22.7	30.3	24.4	27.5	36.2	32.5
Karnataka	8.3	5.7	8.3	4.3	8.3	5.7	8.3	4.7	8.3
Kerala	39.6	39.6	39.6	39.6	39.6	39.6	39.6	37.9	39.6
Madhya Pradesh	17.3	17.3	17.3	17.3	17.3	17.3	16.8	16.8	16.8
Maharashtra	46.5	47.5	45.8	43.0	46.7	35.3	42.8	40.8	34.4
Orissa	39.4	41.9	34.9	32.1	29.8	21.7	19.8	22.5	33.8
Punjab	7.1	5.2	7.1	9.7	5.0	5.2	5.2	7.1	9.7
Rajasthan	12.4	13.1	13.1	12.4	10.9	9.4	7.6	10.1	10.9
Tamil Nadu	38.6	38.2	37.9	33.3	38.1	38.0	37.8	31.5	37.3
Uttar Pradesh	7.5	7.9	7.1	6.7	6.6	6.0	5.4	7.1	5.9
Uttarkhand	25.5	25.5	25.5	25.5	23.8	23.8	25.5	25.5	25.5

Appendix Table 7.25: Lactating Mothers Following Advices Regarding Services/Activities about Child Care Discussed During NHE (Continued...)

States/UTs	Taking care and monitoring of child's growth	Timely immunization	About breastfeeding	About colostrum feeding	About treatment of diarrhoea/minor illness	About preparation of nutritious food/feeding practices	Provide medicine/consult AWW during illness	Importance of education of the child	Cleanliness and hygiene
West Bengal	26.4	26.4	19.0	21.6	13.0	17.4	26.1	26.4	19.9
Delhi	41.6	41.6	41.6	41.6	41.6	41.6	41.6	41.6	41.6
Chandigarh	62.8	62.8	62.8	62.8	62.8	62.8	62.8	62.8	62.8
Arunachal Pradesh	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Manipur	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Meghalaya	8.8	8.8	8.8	8.8	8.8	8.8	8.8	8.8	8.8
Mizoram	51.8	57.0	57.0	57.0	57.0	57.0	57.0	57.0	57.0
Nagaland	4.7	4.7	4.7	4.7	0.0	0.0	0.0	4.7	4.7
Tripura	7.7	7.7	7.7	7.0	7.7	7.7	7.0	7.7	7.0
Sikkim	20.2	28.2	28.2	28.2	20.2	17.1	21.6	21.6	25.1
Dadar & Nagar Haveli	4.1	4.1	4.1	4.1	4.1	4.1	4.1	4.1	4.1
Daman & Diu	28.3	28.3	28.3	28.3	14.9	14.9	28.3	28.3	28.3
Goa	29.5	29.5	29.5	29.5	29.5	29.5	29.5	29.5	29.5
Puducherry	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Andaman & Nicobar Islands	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
All India	**24.1**	**24.8**	**22.7**	**21.4**	**21.4**	**18.5**	**19.4**	**20.5**	**21.1**

Appendix Table 7.26: Lactating Mothers Following Advices Regarding Services/Activities about Mother Care Discussed During NHE

States/UTs	About Immunization during Pregnancy	About institutional delivery	Precaution in case of home delivery	About feeding practices during pregnancy and lactating period	About correct posture during pregnancy	About correct posture breast feeding	About self care & health (cleanliness & hygiene)	About disease/illness	About nipple hygiene	About family planning
Andhra Pradesh	58.1	55.7	51.8	57.5	56.0	58.1	57.6	58.2	57.0	41.8
Assam	12.2	12.2	11.7	10.4	9.7	8.9	11.1	7.1	7.1	6.8
Bihar	2.5	3.5	3.2	1.8	1.8	1.8	3.0	3.2	2.8	2.5
Chhattisgarh	59.9	51.2	53.2	29.5	20.2	21.2	42.4	54.6	18.5	6.0
Gujarat	59.3	53.6	42.5	35.1	30.9	31.5	52.5	48.8	41.9	57.5
Haryana	28.8	28.8	28.8	28.8	28.8	28.8	28.8	28.8	28.8	28.8
Himachal Pradesh	20.9	20.9	20.9	20.9	14.3	14.3	20.9	14.3	14.3	20.9
jammu and Kashmir	19.4	19.0	19.4	19.4	19.4	19.4	19.0	19.0	18.2	19.0
Jharkhand	42.2	34.5	22.1	30.1	26.6	22.7	32.7	34.0	28.1	23.0
Karnataka	5.7	4.2	7.3	4.2	4.7	8.3	5.7	4.7	4.2	7.3
Kerala	39.6	39.6	13.5	39.6	39.6	39.6	39.6	39.1	39.1	39.6
Madhya Pradesh	17.3	17.3	16.8	17.3	17.3	17.3	17.3	17.3	17.3	17.3
Maharashtra	45.2	39.2	37.5	37.8	34.7	34.4	41.8	32.7	31.9	33.7
Orissa	40.4	34.3	30.6	27.8	34.7	35.7	32.8	26.4	24.7	15.4
Punjab	9.7	6.9	6.9	9.7	9.7	9.7	9.7	4.3	9.7	9.7
Rajasthan	13.1	13.1	13.1	11.7	9.9	8.6	13.1	12.4	8.7	6.4
Tamil Nadu	38.3	38.3	32.7	38.6	38.0	37.6	38.3	38.3	37.8	28.5
Uttar Pradesh	7.6	7.1	6.6	6.8	6.1	5.8	6.8	6.8	7.1	7.5

Appendix Table 7.26: Lactating Mothers Following Advices Regarding Services/Activities about Mother Care Discussed During NHE (Continued...)

States/UTs	About Immunization during Pregnancy	About institutional delivery	Precaution in case of home delivery	About feeding practices during pregnancy and lactating period	About correct posture during pregnancy	About correct posture breast feeding	About self care & health (cleanliness & hygiene)	About disease/illness	About nipple hygiene	About family planning
Uttarkhand	25.5	19.8	21.4	19.8	25.5	21.4	25.5	25.5	25.5	25.5
West Bengal	29.7	27.2	13.4	21.8	24.9	20.6	18.7	21.9	14.6	17.4
Delhi	41.6	41.6	41.6	41.6	41.6	41.6	41.6	41.6	41.6	41.6
Chandigarh	62.8	62.8	62.8	62.8	62.8	62.8	62.8	62.8	62.8	62.8
Arunachal Pradesh	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Manipur	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Meghalaya	8.8	8.8	8.8	8.8	8.8	8.8	8.8	8.8	8.8	8.8
Mizoram	57.0	57.0	57.0	57.0	57.0	57.0	57.0	57.0	57.0	57.0
Nagaland	4.7	4.7	4.7	4.7	4.7	4.7	4.7	4.7	4.7	4.7
Tripura	7.7	5.3	2.4	7.7	6.7	6.7	7.7	7.7	5.3	7.7
Sikkim	28.2	28.2	28.2	21.6	3.5	3.5	28.2	20.2	20.2	28.2
Dadar & Nagar Haveli	4.1	4.1	4.1	4.1	4.1	4.1	4.1	4.1	4.1	4.1
Daman & Diu	28.3	28.3	14.9	28.3	28.3	28.3	28.3	28.3	28.3	28.3
Goa	29.5	29.5	29.5	29.5	29.5	29.5	29.5	29.5	29.5	29.5
Puducherry	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Andaman & Nicobar Islands	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
All India	**24.7**	**22.6**	**19.9**	**20.3**	**19.6**	**19.4**	**21.9**	**21.2**	**18.8**	**17.1**

Appendix Table 7.27: Awareness and Use of Boil Water (%)

States/UTs	% of LM using iodised salt	% of LM know method of delay/ avoid of pregnancy	Legal of age for marriage (mean): reported by LM	% of LM using boiled water
Andhra Pradesh	69.1	45.8	17	66.8
Assam	97.5	87.3	17	84.7
Bihar	87.9	65.5	13	21.8
Chattisgarh	91.9	83.2	16	91.9
Gujarat	89.2	78.7	17	54.3
Haryana	100.0	64.9	15	56.6
Himachal Pradesh	100.0	82.5	18	97.6
Jammu and Kashmir	94.3	29.2	16	90.2
Jharkhand	93.2	78.4	14	45.3
Karnataka	58.9	12.5	13	89.3
Kerala	100.0	100.0	18	88.9
Madhya Pradesh	92.8	59.5	17	72.4
Maharashtra	94.7	79.2	17	65.5
Orissa	88.3	94.9	18	60.2
Punjab	47.8	85.6	14	46.4
Rajasthan	86.8	94.6	17	32.3
Tamil Nadu	85.2	55.9	20	89.0
Uttar Pradesh	46.4	78.4	16	42.3
Uttarkhand	83.0	73.5	17	68.6
West Bengal	92.0	67.2	14	36.9

Appendix Table 7.27: Awareness and Use of Boil Water (%)(Continued...)

States/UTs	% of LM using iodised salt	% of LM know method of delay/ avoid of pregnancy	Legal of age for marriage (mean): reported by LM	% of LM using boiled water
Delhi	95.2	73.5	18	63.6
Chandigarh	75.0	100.0	16	86.5
Arunachal Pradesh	90.5	36.9	5	90.5
Manipur	100.0	100.0	18	94.7
Meghalaya	100.0	59.2	18	25.4
Mizoram	100.0	100.0	18	26.3
Nagaland	95.5	80.5	9	92.7
Tripura	68.9	18.1	19	96.2
Sikkim	93.0	94.3	20	65.3
Dadar & Nagar Haveli	100.0	91.0	19	100.0
Daman & Diu	100.0	100.0	18	100.0
Goa	100.0	100.0	18	100.0
Puducherry	100.0	100.0	22	84.3
Andaman & Nicobar Islands	100.0	78.1	18	16.9
All India	**76.2**	**71.8**	**16**	**57.0**

Appendix Table 7.28 Lactating Mother's Perception about Ideal Birth Interval

(Figures in %)

States/UTs	1 to 2 Years	3 to 4 Years	5 to 6 Years	More than 6 years	Don't know
Andhra Pradesh	9.2	64.8	12.7	1.4	11.9
Assam	4.3	61.6	32.9	1.2	0.0
Bihar	41.4	54.3	2.4	0.0	1.9
Chhattisgarh	10.6	47.9	17.9	0.0	23.6
Gujarat	25.7	59.9	12.4	0.0	2.0
Haryana	18.9	74.0	0.9	1.0	5.3
Himachal Pradesh	7.8	76.6	15.6	0.0	0.0
Jammu and Kashmir	28.1	55.2	16.8	0.0	0.0
Jharkhand	6.9	62.4	23.7	1.5	5.6
Karnataka	35.7	47.3	0.4	0.0	16.7
Kerala	8.3	72.5	19.2	0.0	0.0
Madhya Pradesh	24.7	52.8	13.4	0.0	9.1
Maharashtra	23.4	66.9	7.6	0.0	2.1
Orissa	4.6	50.0	41.9	0.0	3.5
Punjab	8.4	81.2	7.7	0.0	2.8
Rajasthan	20.5	63.7	11.9	0.0	3.9
Tamil Nadu	24.3	58.1	14.0	0.8	2.7
Uttar Pradesh	11.8	60.6	20.9	0.0	6.8
Uttarkhand	1.0	35.1	47.5	4.5	12.0
West Bengal	19.0	39.3	37.6	1.5	2.6

Appendix Table 7.28 Lactating Mother's Perception about Ideal Birth Interval (Continued...)

(Figures in %)

States/UTs	1 to 2 Years	3 to 4 Years	5 to 6 Years	More than 6 years	Don't know
Delhi	4.8	43.8	42.7	0.0	8.7
Chandigarh	9.0	91.0	0.0	0.0	0.0
Arunachal Pradesh	21.2	6.3	0.0	0.0	72.5
Manipur	0.0	64.2	32.7	3.1	0.0
Meghalaya	53.5	46.5	0.0	0.0	0.0
Mizoram	55.3	44.7	0.0	0.0	0.0
Nagaland	24.1	71.4	0.0	0.0	4.5
Tripura	3.5	18.6	69.1	0.0	8.8
Sikkim	0.0	64.1	25.4	0.0	10.5
Dadar & Nagar Haveli	0.0	100.0	0.0	0.0	0.0
Daman & Diu	13.4	73.2	13.4	0.0	0.0
Goa	0.0	73.7	26.3	0.0	0.0
Puducherry	33.8	38.6	14.5	13.3	0.0
Andaman & Nicobar Islands	0.0	37.4	58.3	0.0	4.3
All India	**16.6**	**57.9**	**18.7**	**0.4**	**6.4**

Appendix Table 7.29: Status of Supplementary Nutrition (Food)

States/UTs	Receiving food		Awareness of food entitlement (%)
	% AG	Average number of days	
Andhra Pradesh	44.5	3	40.7
Assam	42.8	3	37.3
Bihar	67.6	9	20.9
Chhattisgarh	26.3	3	16.8
Gujarat	91.9	17	80.3
Haryana	17.0	3	0.0
Himachal Pradesh	87.2	17	17.5
Jammu and Kashmir	89.8	17	8.4
Jharkhand	86.7	18	0.0
Karnataka	81.2	10	66.8
Kerala	95.6	20	98.1
Madhya Pradesh	89.1	7	6.5
Maharashtra	70.9	13	57.6
Orissa	0.4	0	0.2
Punjab	91.9	15	43.3
Rajasthan	93.0	6	30.9
Tamil Nadu	0.8	0	1.4
Uttar Pradesh	82.6	15	14.7
Uttarakhand	79.0	9	23.5
West Bengal	46.4	7	11.2
Delhi	100.0	21	-
Chandigarh	-	-	-
Arunachal Pradesh	73.8	4	2.5
Manipur	30.6	3	11.8
Meghalaya	94.9	13	27.2
Mizoram	66.7	3	66.7
Nagaland	93.7	6	100.0

Appendix Table 7.29: Status of Supplementary Nutrition (Food) (Continued…)

States/UTs	Receiving food		Awareness of food entitlement (%)
	% AG	Average number of days	
Tripura	100.0	10	18.7
Sikkim	0.0	0	0.0
Dadar & Nagar Haveli	100.0	23	100.0
Daman & Diu	100.0	24	90.0
Goa	100.0	22	87.5
Puducherry	100.0	10	100.0
Andaman & Nicobar Islands	100.0	23	3.1
All India	**41.7**	**6**	**26.8**

Appendix Table 7.30: About Deworming

(Figures in %)

States/UTs	AG reported taking weight regularly	AG started deworming	Source		If no, why?			
			AWC/ANM	Others	Financial constraints	Family members didn't allow	Don't feel need	Others
Andhra Pradesh	71.5	13.2	86.2	13.8	0.3	0.7	58.3	40.8
Assam	18.1	5.0	60.4	39.6	0.0	7.0	68.6	24.4
Bihar	15.0	32.4	49.8	50.2	12.9	5.2	31.5	50.4
Chhattisgarh	2.7	19.3	100.0	0.0	1.2	0.0	49.0	49.8
Gujarat	67.8	16.7	91.2	8.8	0.8	2.8	71.4	25.0
Haryana	45.0	0.0	-	-	80.5	0.0	17.0	2.5
Himachal Pradesh	49.4	34.7	100.0	0.0	0.0	3.7	49.0	47.3
Jammu and Kashmir	1.2	22.0	94.6	5.4	0.0	0.0	54.6	45.4
Jharkhand	18.3	18.9	95.7	4.3	1.2	0.0	79.5	19.4
Karnataka	37.2	25.6	91.7	8.3	2.1	0.0	59.8	38.1
Kerala	57.1	61.1	31.0	69.0	0.0	33.9	22.9	43.2
Madhya Pradesh	83.8	21.5	76.7	23.3	0.0	0.9	47.7	51.4
Maharashtra	93.5	26.9	94.1	5.9	1.6	1.0	78.1	19.3
Orissa	27.7	26.6	80.3	19.7	0.0	7.3	69.0	23.7
Punjab	34.8	0.0	-	-	0.0	4.2	47.9	47.9
Rajasthan	44.4	28.7	98.1	2.0	0.7	0.8	53.5	45.1
Tamil Nadu	42.2	16.8	74.9	25.1	8.1	3.8	39.3	48.9
Uttar Pradesh	18.5	17.3	86.6	13.4	1.8	5.1	44.7	48.4
Uttarakhand	34.0	18.5	100.0	0.0	2.4	0.0	54.6	43.1
West Bengal	10.9	24.3	87.2	12.8	1.9	2.7	95.4	0.0

Appendix Table 7.30: About Deworming (Continued…)

(Figures in %)

States/UTs	AG reported taking weight regularly	AG started deworming	Source		If no, why?			
			AWC/ANM	Others	Financial constraints	Family members didn't allow	Don't feel need	Others
Delhi	60.8	20.8	100.0	0.0	5.8	0.0	88.4	5.8
Arunachal Pradesh	7.3	27.4	62.6	37.4	7.7	11.4	62.3	18.7
Manipur	9.9	8.4	0.0	100.0	0.0	0.0	100.0	0.0
Meghalaya	40.9	10.3	0.0	100.0	0.0	0.0	41.8	58.2
Mizoram	66.7	0.0	-	-	33.3	0.0	0.0	66.7
Nagaland	14.1	27.1	41.6	58.4	1.0	0.0	88.3	10.7
Tripura	19.6	23.6	79.0	21.0	0.0	0.0	50.0	50.0
Sikkim	0.0	22.3	50.0	50.1	0.0	0.0	83.4	16.6
Dadar & Nagar Haveli	70.0	30.0	100.0	0.0	0.0	0.0	85.7	14.3
Daman & Diu	100.0	0.0	-	-	0.0	0.0	100.0	0.0
Goa	0.0	0.0	-	-	0.0	0.0	100.0	0.0
Puducherry	79.3	23.2	0.0	100.0	0.0	0.0	64.3	35.7
Andaman & Nicobar Islands	6.3	0.0	-	-	0.0	3.1	77.3	19.7
All India	**48.9**	**19.0**	**80.4**	**19.6**	**3.1**	**3.1**	**57.0**	**36.9**

Appendix Table 7.31: Adolescent Girls Following Advices Regarding Health and Hygiene Care Discussed During NHE

States/UTs	AG attended NHE meetings	Taking Care and monitoring	About health and nutrition	About growing self confidence	About treatment of minor illness	About cleanliness and hygiene	Importance of education	About the age of marriage
Andhra Pradesh	16.3	17.8	19.8	17.8	20.0	16.5	18.1	18.0
Assam	7.4	16.6	6.1	6.6	16.6	14.9	18.6	16.6
Bihar	16.7	11.7	10.2	11.6	12.0	14.5	10.8	11.0
Chhattisgarh	18.0	22.1	11.5	7.6	22.7	12.7	9.8	20.2
Gujarat	58.2	57.3	63.6	45.8	46.7	62.9	54.1	59.9
Haryana	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Himachal Pradesh	8.4	14.0	14.0	8.4	14.0	8.4	14.0	10.8
Jammu and Kashmir	31.0	38.1	39.6	39.6	38.7	39.2	39.6	39.6
Jharkhand	24.6	28.6	24.1	27.6	24.3	31.0	29.9	27.8
Karnataka	32.5	33.1	24.6	32.9	22.1	32.2	24.5	32.3
Kerala	63.2	56.8	56.7	52.3	59.2	60.1	56.7	42.9
Madhya Pradesh	51.4	62.4	62.9	61.0	61.8	62.9	62.2	62.4
Maharashtra	29.2	38.6	35.2	28.6	28.0	34.0	34.6	33.9
Orissa	37.3	33.6	28.8	28.0	23.7	35.7	31.8	36.7
Punjab	3.8	0.0	1.4	2.4	1.0	2.4	1.0	2.4
Rajasthan	49.8	35.6	48.1	38.3	39.6	42.8	40.4	39.5
Tamil Nadu	24.7	31.2	31.2	30.6	30.9	31.2	29.3	29.1
Uttar Pradesh	13.0	10.0	13.0	9.7	10.8	12.5	11.5	11.2
Uttarakhand	33.9	42.9	42.9	42.9	42.9	42.9	41.2	41.2
West Bengal	8.9	11.1	11.6	9.4	9.4	11.6	13.3	11.6

Appendix Table 7.31: Adolescent Girls Following Advices Regarding Health and Hygiene Care Discussed During NHE (Continued…)

States/UTs	AG attended NHE meetings	Taking Care and monitoring	About health and nutrition	About growing self confidence	About treatment of minor illness	About cleanliness and hygiene	Importance of education	About the age of marriage
Delhi	46.2	70.8	70.8	70.8	70.8	70.8	70.8	70.8
Arunachal Pradesh	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5
Manipur	0.0	13.9	13.9	13.9	13.9	13.9	13.9	13.9
Meghalaya	48.7	43.5	39.5	38.4	47.6	38.4	42.5	42.5
Mizoram	33.3	33.3	33.3	33.3	33.3	33.3	33.3	33.3
Nagaland	5.2	11.5	8.9	11.5	11.5	11.5	11.5	11.5
Tripura	4.1	4.1	4.1	4.1	4.1	4.1	4.1	4.1
Sikkim	2.2	0.0	0.0	0.0	0.0	2.2	0.0	2.2
Dadar & Nagar Haveli	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0
Daman & Diu	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0
Goa	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Puducherry	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Andaman & Nicobar Islands	2.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
All India	**24.4**	**27.7**	**26.5**	**24.2**	**25.6**	**27.1**	**26.3**	**26.9**

Appendix Table 7.32: Adolescent Girls Heard of AIDS

(Figures in %)

States/UTs	AG heard of AIDS	Source of information	
		AWW/ANM	Others
Andhra Pradesh	80.1	22.3	77.7
Assam	74.4	24.6	75.4
Bihar	28.9	44.1	55.9
Chhattisgarh	65.1	18.8	81.2
Gujarat	45.2	39.8	60.2
Haryana	97.5	40.0	60.0
Himachal Pradesh	82.0	47.3	52.7
Jammu and Kashmir	35.7	19.0	81.1
Jharkhand	20.2	58.9	41.2
Karnataka	36.3	54.4	45.6
Kerala	87.8	26.4	73.7
Madhya Pradesh	76.1	57.4	42.6
Maharashtra	71.0	19.2	80.9
Orissa	93.4	21.1	78.9
Punjab	87.6	5.5	94.5
Rajasthan	59.8	43.6	56.4
Tamil Nadu	81.2	35.9	64.1
Uttar Pradesh	36.3	29.6	70.4
Uttarakhand	29.6	27.2	72.9
West Bengal	48.3	12.7	87.3
Delhi	75.4	67.4	32.6
Arunachal Pradesh	35.0	14.0	86.0
Manipur	100.0	4.4	95.6
Meghalaya	74.5	66.8	33.2
Mizoram	66.7	0.0	100.0
Nagaland	94.9	13.3	86.7

Appendix Table 7.32: Adolescent Girls Heard of AIDS (Continued…)

(Figures in %)

States/UTs	AG heard of AIDS	Source of information	
		AWW/ANM	Others
Tripura	0.0	-	-
Sikkim	81.7	0.0	100.0
Dadar & Nagar Haveli	100.0	40.0	60.0
Daman & Diu	100.0	10.0	90.0
Goa	75.0	0.0	100.0
Puducherry	78.1	0.0	100.0
Andaman & Nicobar Islands	59.9	10.4	89.6
All India	**72.9**	**27.5**	**72.5**

Appendix Table 7.33: Awareness about Anemia

(Figures in %)

States/UTs	AG know about anemia	Awareness about preventing anemia				
		Consumption of green leafy vegetables	Consumption of IFA tablets	Consumption of sugarcane juice	Consumption of carrot/tomato/drum stick etc.	Can't explain
Andhra Pradesh	72.2	95.1	1.2	0.6	2.6	0.5
Assam	41.3	52.5	13.0	0.0	3.1	31.4
Bihar	14.4	69.5	13.9	2.4	9.6	4.6
Chhattisgarh	30.9	58.6	4.1	0.0	9.7	27.7
Gujarat	44.7	52.0	40.8	0.0	0.0	7.2
Haryana	85.5	97.1	0.0	0.0	2.9	0.0
Himachal Pradesh	20.4	25.5	35.1	0.0	0.0	39.4
Jammu and Kashmir	1.2	70.3	0.0	0.0	29.7	0.0
Jharkhand	37.9	68.6	16.4	0.0	0.0	15.1
Karnataka	17.5	78.0	17.4	4.6	0.0	0.0
Kerala	73.7	77.8	7.5	2.3	0.9	11.5
Madhya Pradesh	51.3	58.3	29.8	0.2	11.3	0.5
Maharashtra	20.7	91.1	5.0	1.0	2.6	0.3
Orissa	68.2	73.5	19.5	0.3	2.0	4.7
Punjab	56.3	69.3	29.4	0.0	0.0	1.4
Rajasthan	67.0	45.9	21.7	0.0	28.9	3.6
Tamil Nadu	39.3	80.1	9.1	0.0	7.1	3.7
Uttar Pradesh	31.0	64.3	6.8	5.4	10.7	12.9
Uttarakhand	32.2	39.7	5.9	3.0	0.0	51.4
West Bengal	29.9	41.7	58.3	0.0	0.0	0.0

Appendix Table 7.33: Awareness about Anemia (Continued…)

(Figures in %)

States/UTs	AG know about anemia	Awareness about preventing anemia				
		Consumption of green leafy vegetables	Consumption of IFA tablets	Consumption of sugarcane juice	Consumption of carrot/tomato/drum stick etc.	Can't explain
Delhi	64.6	76.1	0.0	0.0	23.9	0.0
Arunachal Pradesh	0.0	-	-	-	-	-
Manipur	57.4	75.0	17.3	0.0	0.0	7.7
Meghalaya	0.0	-	-	-	-	-
Mizoram	66.7	100.0	0.0	0.0	0.0	0.0
Nagaland	6.6	31.2	0.0	0.0	68.8	0.0
Tripura	0.0	-	-	-	-	-
Sikkim	39.6	58.1	41.9	0.0	0.0	0.0
Dadar & Nagar Haveli	40.0	0.0	75.0	0.0	25.0	0.0
Daman & Diu	40.0	50.0	0.0	0.0	50.0	0.0
Goa	37.5	100.0	0.0	0.0	0.0	0.0
Puducherry	33.5	30.9	40.0	0.0	0.0	29.1
Andaman & Nicobar Islands	17.3	71.6	0.0	0.0	0.0	28.4
All India	**47.2**	**79.5**	**10.2**	**0.5**	**4.3**	**5.5**

Appendix Table 7.34: Adolescent Girls Participated in Income Generation Activity

States/UTs	% of AG participated	How many days (mean)	% of AG participated in social activity
Andhra Pradesh	10.2	41	30.1
Assam	4.8	3	14.7
Bihar	1.0	41	14.3
Chattisgarh	10.5	12	38.3
Gujarat	4.9	30	27.0
Haryana	83.0	18	45.0
Himachal Pradesh	8.8	44	43.8
Jammu and Kashmir	26.3	86	26.2
Jharkhand	13.0	6	39.6
Karnataka	36.1	37	35.9
Kerala	4.6	26	26.1
Madhya Pradesh	10.3	31	43.1
Maharashtra	7.5	30	30.7
Orissa	5.3	12	32.1
Punjab	3.5	4	7.7
Rajasthan	0.8	53	66.5
Tamil Nadu	9.3	56	19.2
Uttar Pradesh	13.3	37	13.3
Uttarakhand	12.8	31	16.6
West Bengal	8.7	30	14.3
Delhi	10.8	50	35.4
Arunachal Pradesh	4.9	18	19.5
Manipur	0.0	-	70.3
Meghalaya	5.2	50	71.8
Mizoram	0.0	-	66.7
Nagaland	0.0	-	87.8
Tripura	0.0	-	0.0

Appendix Table 7.34: Adolescent Girls Participated in Income Generation Activity (Continued…)

States/UTs	% of AG participated	How many days (mean)	% of AG participated in social activity
Sikkim	0.0	-	7.9
Dadar & Nagar Haveli	0.0	-	40.0
Daman & Diu	10.0	20	40.0
Goa	50.0	3	12.5
Puducherry	0.0	-	29.9
Andaman & Nicobar Islands	0.0	-	39.5
All India	**9.1**	**36**	**27.5**

Appendix Table 7.35: Awareness and Perception of Adolescent Girls

(Figures in %)

States/UTs	AG reported awareness of average legal age for marriage	AG know method of delay/ avoid of pregnancy	AG's perception about Ideal birth interval				
			1 to 2 Years	3 to 4 Years	5 to 6 Years	More than 6 years	Don't know
Andhra Pradesh	18.0	36.2	15.7	46.3	4.2	0.1	33.8
Assam	16.0	31.5	6.7	28.8	14.2	1.7	48.7
Bihar	12.0	25.7	17.0	27.1	6.0	2.0	48.0
Chhattisgarh	16.0	29.9	0.4	17.0	6.2	0.0	76.3
Gujarat	17.0	47.8	13.4	57.0	6.8	0.0	22.9
Haryana	20.0	86.5	0.0	95.0	0.0	0.0	5.0
Himachal Pradesh	18.0	36.6	16.0	56.2	13.0	0.8	14.0
Jammu and Kashmir	16.0	4.9	16.5	52.2	10.1	0.0	21.3
Jharkhand	14.0	14.3	3.0	39.1	8.3	0.0	49.6
Karnataka	12.0	7.7	16.8	33.8	0.7	0.0	48.7
Kerala	13.0	26.2	8.2	18.8	2.9	0.0	70.2
Madhya Pradesh	18.0	43.8	24.2	31.8	7.2	0.0	36.8
Maharashtra	18.0	33.9	13.1	59.7	7.2	0.8	19.3
Orissa	17.0	69.1	1.2	39.7	42.3	0.5	16.3
Punjab	14.0	59.6	5.8	78.7	1.1	0.0	14.4
Rajasthan	16.0	53.6	6.3	57.0	2.8	0.0	34.0
Tamil Nadu	20.0	36.6	23.0	54.0	9.7	0.3	13.0
Uttar Pradesh	14.0	26.3	6.1	29.6	7.0	0.4	56.9
Uttarakhand	14.0	19.5	0.0	16.2	6.5	2.9	74.4
West Bengal	17.0	27.4	3.6	32.4	26.6	21.6	15.8
Delhi	19.0	56.2	14.6	44.6	20.8	0.0	20.0
Arunachal Pradesh	7.0	30.2	24.4	4.7	0.7	0.0	70.2
Manipur	18.0	96.0	12.8	82.7	4.4	0.0	0.0
Meghalaya	3.0	0.0	0.0	39.2	0.0	0.0	60.8
Mizoram	6.0	0.0	66.7	0.0	0.0	0.0	33.3
Nagaland	6.0	44.7	22.6	42.9	3.3	0.0	31.2
Tripura	15.0	0.0	37.3	19.6	4.1	0.0	39.1

Appendix Table 7.35: Awareness and Perception of Adolescent Girls (Continued)

(Figures in %)

States/UTs	AG reported awareness of average legal age for marriage	AG know method of delay/ avoid of pregnancy	AG's perception about Ideal birth interval				
			1 to 2 Years	3 to 4 Years	5 to 6 Years	More than 6 years	Don't know
Sikkim	20.0	79.3	0.0	26.3	13.3	0.0	60.5
Dadar & Nagar Haveli	18.0	100.0	0.0	90.0	10.0	0.0	0.0
Daman & Diu	18.0	100.0	0.0	100.0	0.0	0.0	0.0
Goa	18.0	12.5	12.5	12.5	0.0	0.0	75.0
Puducherry	21.0	34.1	23.8	76.2	0.0	0.0	0.0
Andaman & Nicobar Islands	12.0	14.2	3.1	14.1	24.2	8.7	50.0
All India	**17.0**	**38.2**	**13.4**	**45.0**	**10.9**	**0.7**	**30.1**

Appendix Table 8.1: Composite Indices of Behavioural Pattern Among ICDS Beneficiaries

States/UTs	Behaviour index	NHE-Child index	NHE-Mother index	PSE-Learning skills index	PSE-Hygiene & social behaviour index	Health check-up index
Andhra Pradesh	0.668	0.639	0.678	0.897	0.408	0.719
Assam	0.445	0.135	0.132	0.912	0.543	0.503
Bihar	0.142	0.015	0.023	0.166	0.466	0.037
Chhattisgarh	0.422	0.507	0.411	0.416	0.158	0.618
Gujarat	0.487	0.527	0.534	0.334	0.488	0.553
Haryana	0.295	0.228	0.242	0.271	0.170	0.563
Himachal Pradesh	0.699	0.588	0.638	0.792	0.670	0.805
Jammu and Kashmir	0.449	0.240	0.266	0.766	0.927	0.045
Jharkhand	0.543	0.336	0.309	0.833	0.914	0.323
Karnataka	0.400	0.235	0.209	0.872	0.271	0.411
Kerala	0.908	1.000	0.909	0.980	0.650	1.000
Madhya Pradesh	0.430	0.177	0.200	0.576	0.758	0.438
Maharashtra	0.650	0.458	0.447	0.746	0.722	0.879
Orissa	0.418	0.393	0.403	0.592	0.041	0.661
Punjab	0.302	0.007	0.012	0.626	0.362	0.503
Rajasthan	0.226	0.102	0.099	0.306	0.332	0.290
Tamil Nadu	0.655	0.447	0.500	0.760	0.612	0.954
Uttar Pradesh	0.166	0.007	0.001	0.146	0.675	0.000
Uttrakhand	0.400	0.135	0.140	0.706	0.834	0.185
West Bengal	0.585	0.362	0.359	0.867	0.797	0.542
All India	**0.394**	**0.243**	**0.243**	**0.510**	**0.570**	**0.404**

Appendix Table 8.2: Estimates of Components of NHE-Child Index: Percentage of Mothers Followed the Advices Given by AWW on the Following Components of Child Care

(Figures in %)

States/UTs	Taking care and monitoring of child's growth	Timely immuni-zation	About breastfeeding	About colostrums feeding	About treatment of diarrhea/minor illness	About preparation of nutritious food/ feeding practices	Provide medicine/ consult AWW during illness	Importance of education of the child	Cleanliness and hygiene
Andhra Pradesh	50.4	50.4	50.3	49.6	49.5	49.7	50.4	49.2	50.5
Assam	22.8	26.1	23.2	12.9	11.3	11.6	12.2	22.6	12.6
Bihar	9.8	11.5	10.6	9.0	9.5	6.6	7.2	10.8	9.7
Chhattisgarh	45.2	53.9	49.9	48.6	50.8	22.8	20.3	32.8	47.4
Gujarat	42.7	54.9	46.1	40.0	38.1	36.4	34.2	45.3	46.8
Haryana	23.1	24.3	23.8	23.1	23.4	23.8	21.9	23.3	23.0
Himachal Pradesh	48.0	51.2	44.9	41.7	43.8	48.0	47.0	49.6	46.6
Jammu and Kashmir	24.4	24.5	24.3	23.9	24.2	24.6	23.8	24.6	22.2
Jharkhand	32.9	38.7	23.9	31.9	27.1	19.2	29.5	38.1	31.8
Karnataka	31.2	22.3	30.3	17.8	21.8	19.4	26.2	21.4	23.3
Kerala	75.4	74.5	72.0	70.4	73.8	73.7	71.6	75.0	75.4
Madhya Pradesh	20.3	20.1	19.5	19.5	20.0	19.6	20.0	19.9	20.3
Maharashtra	41.9	43.2	39.2	34.9	37.8	38.2	34.9	40.7	33.5
Orissa	37.9	44.3	40.7	34.7	32.0	24.0	26.8	32.7	32.5
Punjab	9.3	9.1	9.3	9.1	7.9	8.6	8.3	8.8	9.4
Rajasthan	14.7	17.0	16.1	15.1	14.8	12.2	13.0	16.2	16.1
Tamil Nadu	38.8	38.7	37.6	35.0	37.1	37.6	37.9	37.0	38.4
Uttar Pradesh	9.0	9.9	9.6	8.8	8.5	7.7	8.2	9.3	8.9
Uttrakhand	17.6	17.6	17.3	16.8	16.9	16.2	17.3	17.6	17.6
West Bengal	32.5	38.0	31.9	30.7	26.5	24.2	33.8	38.8	31.0
Delhi	34.7	34.7	34.7	34.7	34.7	34.7	34.7	34.7	34.7
Chandigarh	94.5	94.5	94.5	94.5	94.5	94.5	94.5	94.5	94.5
Arunachal Pradesh	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Manipur	0.6	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0

Appendix Table 8.2: Estimates of Components of NHE-Child Index: Percentage of Mothers Followed the Advices Given by AWW on the Following Components of Child Care (Continued...)

(Figures in %)

States/UTs	Taking care and monitoring of child's growth	Timely immuni-zation	About breastfeeding	About colostrum s feeding	About treatment of diarrhea/ minor illness	About preparation of nutritious food/feeding practices	Provide medicine/ consult AWW during illness	Importance of education of the child	Cleanliness and hygiene
Meghalaya	30.2	30.2	30.2	29.0	26.0	28.3	26.0	30.2	25.9
Mizoram	45.3	72.2	54.2	72.2	30.6	16.8	32.7	23.7	25.8
Nagaland	5.9	6.4	6.4	5.9	4.5	5.4	4.5	8.3	5.0
Tripura	37.3	37.7	19.3	4.0	9.8	17.5	5.5	32.1	21.1
Sikkim	35.6	44.1	41.7	36.9	33.9	8.9	9.0	18.1	28.4
Dadar& Nagar Haveli	41.1	41.1	35.3	37.9	34.5	34.5	41.1	36.4	33.8
Daman & Diu	53.0	53.0	50.2	45.0	46.0	51.3	53.0	53.0	53.0
Goa	51.2	48.3	37.7	43.6	51.2	51.2	44.8	48.3	48.3
Puducherry	10.8	10.8	10.8	10.8	10.8	10.8	10.8	10.8	10.8
Andaman & Nicobar Islands	0.0	10.3	4.7	4.6	1.3	0.0	0.0	10.3	2.7
All India	**25.9**	**27.7**	**25.7**	**23.4**	**23.1**	**20.9**	**22.2**	**25.4**	**24.0**

Appendix Table 8.3: Estimates of Components of NHE-Mother Index: Percentage of Mothers Followed the Advices Given by AWW on the Following Components of Self Care

(Figures in %)

States/UTs	About immunization during pregnancy	About institutional delivery	Precautions in case of home delivery	About feeding practices during pregnancy and lactating period	About correct posture during pregnancy	About correct posture during breastfeeding	About self care & health (cleanliness & hygiene)	About disease/ illness	About nipple hygiene	About family planning
Andhra Pradesh	50.9	49.8	45.3	50.6	50.2	50.6	50.9	50.9	50.3	43.0
Assam	25.3	13.7	12.0	15.7	14.9	17.8	13.3	14.9	12.9	23.0
Bihar	11.3	10.0	9.7	9.7	9.4	8.8	9.4	10.0	7.9	9.6
Chhattisgarh	51.5	41.3	39.4	31.5	21.1	27.9	34.2	48.8	17.1	12.9
Gujarat	55.7	43.6	38.8	33.4	33.5	27.6	44.1	40.6	38.6	47.4
Haryana	24.5	23.6	20.1	23.9	23.4	22.8	23.1	22.4	23.0	22.4
Himachal Pradesh	48.2	46.4	48.9	45.9	45.3	43.8	48.0	50.2	40.1	47.7
Jammu and Kashmir	24.3	23.8	24.6	24.4	24.1	24.0	24.5	24.7	23.9	23.6
Jharkhand	39.5	34.7	23.7	23.0	22.0	24.0	26.0	31.0	23.4	22.2
Karnataka	27.8	19.8	18.6	20.9	23.0	21.8	20.5	23.8	15.1	18.3
Kerala	74.1	71.3	12.2	72.9	71.9	72.2	71.9	71.1	71.7	69.6
Madhya Pradesh	20.4	20.3	20.0	20.5	20.4	20.4	20.1	20.2	20.0	20.2
Maharashtra	42.8	39.7	36.4	34.8	33.1	32.8	35.6	32.5	30.8	32.0
Orissa	43.8	39.8	31.7	31.5	29.8	33.6	32.5	35.6	22.2	25.1
Punjab	9.6	9.0	8.7	9.4	8.5	9.3	9.1	8.1	8.7	8.7
Rajasthan	17.0	14.4	15.2	15.2	14.6	12.1	15.8	13.6	9.5	13.4
Tamil Nadu	39.1	38.8	37.9	38.4	39.0	38.7	38.4	38.7	38.7	35.6
Uttar Pradesh	9.6	8.5	8.7	7.3	6.5	7.5	8.6	8.3	8.2	9.2
Uttrakhand	17.6	15.8	16.9	15.2	15.7	16.2	17.6	17.3	16.4	17.6
West Bengal	37.5	34.6	33.2	25.3	26.6	30.1	26.9	30.9	20.8	30.2
Delhi	34.7	34.7	34.7	34.7	34.7	34.7	34.7	34.7	34.7	34.7
Chandigarh	94.5	94.5	94.5	94.5	94.5	94.5	94.5	94.5	94.5	94.5

Appendix Table 8.3: Estimates of Components of NHE-Mother Index: Percentage of Mothers Followed the Advices Given by AWW on the Following Components of Self Care (Continued...)

(Figures in %)

States/UTs	About immunization during pregnancy	About institutional delivery	Precautions in case of home delivery	About feeding practices during pregnancy and lactating period	About correct posture during pregnancy	About correct posture during breastfeeding	About self care & health (cleanliness & hygiene)	About disease/ illness	About nipple hygiene	About family planning
Arunachal Pradesh	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Manipur	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	0.6
Meghalaya	30.2	30.2	29.0	23.3	21.8	25.9	25.9	29.8	27.1	26.2
Mizoram	72.2	67.2	67.2	56.3	27.5	35.8	31.8	33.9	43.1	68.5
Nagaland	5.9	5.9	6.4	6.4	5.0	5.9	5.9	5.9	5.9	4.1
Tripura	29.4	30.2	12.6	13.1	5.4	4.8	22.8	11.1	6.1	7.0
Sikkim	45.0	31.6	35.2	16.8	0.7	1.7	30.5	22.9	18.5	39.1
Dadar & Nagar Haveli	41.1	41.1	34.4	37.7	37.8	40.3	38.6	41.1	41.1	36.0
Daman & Diu	53.0	53.0	48.5	53.0	53.0	53.0	53.0	53.0	47.8	53.0
Goa	51.2	45.0	45.3	40.7	40.7	43.6	51.2	48.2	43.6	51.2
Puducherry	10.8	10.8	10.8	10.8	10.8	10.8	10.8	10.8	10.8	5.0
Andaman & Nicobar Islands	10.3	10.3	8.5	10.3	10.3	10.3	3.6	0.0	0.0	10.3
All India	**27.8**	**24.8**	**22.0**	**22.1**	**21.3**	**22.0**	**23.0**	**23.7**	**20.0**	**21.7**

Appendix Table 8.4: Estimates of Components of PSE-Learning Skills and Hygiene & Social Behaviour Index

(Figures in %)

States/UTs	Read simple words	Count numbers	Write alphabets/words	Wash hands after using toilet	Respect elders
Andhra Pradesh	89.0	93.5	78.7	85.7	58.4
Assam	92.1	91.4	82.3	61.9	88.5
Bihar	54.2	71.1	39.7	76.0	70.9
Chhattisgarh	73.2	84.6	32.9	55.1	65.8
Gujarat	55.7	87.1	32.9	87.8	62.5
Haryana	70.7	70.2	41.4	67.3	56.3
Himachal Pradesh	94.9	94.9	51.4	87.9	75.9
Jammu and Kashmir	87.5	87.2	71.2	92.4	91.0
Jharkhand	88.5	90.6	74.5	98.6	84.8
Karnataka	88.2	93.7	74.9	58.0	71.7
Kerala	93.0	97.0	81.1	75.7	84.7
Madhya Pradesh	87.6	84.2	45.4	82.5	86.9
Maharashtra	93.2	94.1	47.0	89.2	78.6
Orissa	74.4	88.2	54.0	58.7	54.1
Punjab	85.1	83.6	57.8	72.3	66.3
Rajasthan	63.7	84.1	25.6	83.2	54.8
Tamil Nadu	91.4	94.3	51.1	74.9	82.6
Uttar Pradesh	42.9	79.0	31.8	92.4	72.4
Uttrakhand	80.9	93.6	54.7	98.7	78.7
West Bengal	93.4	94.7	66.1	93.6	80.4
Delhi	54.2	82.6	50.5	82.7	77.2
Chandigarh	100.0	100.0	32.8	89.9	76.7
Arunachal Pradesh	64.7	54.1	43.4	68.1	48.6
Manipur	91.6	94.0	86.2	95.8	88.8
Meghalaya	73.1	87.2	75.3	93.2	100.0
Mizoram	73.0	77.8	53.0	79.5	86.9
Nagaland	84.6	74.8	66.1	85.0	73.3
Tripura	76.7	74.9	38.4	97.4	73.4
Sikkim	60.4	95.1	96.9	93.5	89.9

Appendix Table 8.4: Estimates of Components of PSE-Learning Skills and Hygiene & Social Behaviour Index (Continued...)

(Figures in %)

States/UTs	Read simple words	Count numbers	Write alphabets/words	Wash hands after using toilet	Respect elders
Dadar& Nagar Haveli	75.8	95.3	48.3	95.3	95.3
Daman & Diu	87.9	100.0	45.7	100.0	100.0
Goa	45.4	100.0	25.7	100.0	100.0
Puducherry	51.5	100.0	35.3	67.7	67.7
Andaman & Nicobar Islands	100.0	100.0	87.6	100.0	100.0
All India	**71.1**	**85.7**	**49.0**	**82.4**	**73.1**

Appendix Table 8.5: Estimates of Components of Health Check-up and Some Other Selected Indexes

(Figures in %)

States/UTs	Child weighed at birth	Initiated breastfeeding within one hour after birth	Child had no diarrhea	Mother reporting received deworming tablets from AWC	Households using iodised salt	Households using boiling water during illness	Households aware of any method to delay or avoid pregnancy	Households aware of measures to prevent anemia
Andhra Pradesh	74.6	75.0	76.4	78.2	69.3	69.3	36.8	57.4
Assam	55.3	73.2	80.0	9.4	96.3	87.3	89.8	27.2
Bihar	13.8	7.7	83.9	13.6	81.8	32.3	50.6	16.8
Chhattisgarh	65.6	41.6	65.9	70.9	85.3	84.2	73.8	27.9
Gujarat	59.8	38.5	48.3	82.0	87.9	37.2	86.0	41.3
Haryana	60.6	31.8	75.1	85.9	98.7	70.8	44.1	43.6
Himachal Pradesh	82.2	60.6	90.4	76.2	97.9	86.0	78.5	35.7
Jammu and Kashmir	14.6	42.6	73.7	72.8	94.7	87.7	33.5	21.9
Jharkhand	39.3	27.8	94.8	66.0	92.8	53.2	81.4	24.3
Karnataka	47.1	61.5	74.8	67.7	55.7	79.9	13.3	15.2
Kerala	99.6	73.0	82.0	11.1	99.0	97.8	98.1	94.9
Madhya Pradesh	49.6	45.4	67.3	92.8	88.9	78.3	62.7	26.3
Maharashtra	88.8	74.3	71.8	79.3	94.7	56.6	84.3	26.6
Orissa	69.4	77.5	77.7	63.7	87.3	78.1	93.4	58.6
Punjab	55.4	9.3	79.2	45.6	46.0	55.7	77.2	53.2
Rajasthan	36.4	23.1	33.5	81.6	90.2	34.4	92.3	37.0
Tamil Nadu	95.5	65.1	51.6	51.8	80.4	90.0	63.2	22.2
Uttar Pradesh	10.5	20.6	58.6	73.1	51.2	48.7	76.8	29.7
Uttrakhand	27.0	28.3	54.5	57.1	75.7	62.1	72.0	34.5
West Bengal	58.8	30.8	93.9	41.0	89.2	48.5	74.0	21.2

Appendix Table 8.5: Estimates of Components of Health Check-up and Some Other Selected Indexes (Continued...)

(Figures in %)

States/UTs	Child weighed at birth	Initiated breastfeeding within one hour after birth	Child had no diarrhea	Mother reporting received deworming tablets from AWC	Households using iodised salt	Households using boiling water during illness	Households aware of any method to delay or avoid pregnancy	Households aware of measures to prevent anemia
Delhi	48.4	39.3	89.1	87.8	99.3	84.1	83.2	76.3
Chandigarh	65.5	25.3	95.6	100.0	69.1	90.6	95.0	61.6
Arunachal Pradesh	0.5	75.2	45.0	44.4	84.0	73.1	84.5	18.6
Manipur	74.4	75.7	63.6	0.0	100.0	98.6	99.8	52.5
Meghalaya	52.2	75.8	67.7	65.0	100.0	59.0	77.1	44.7
Mizoram	83.0	100.0	66.1	48.6	100.0	21.0	96.0	61.1
Nagaland	41.2	37.7	60.0	59.6	98.7	96.9	72.8	12.7
Tripura	73.8	32.3	85.8	8.8	91.3	49.9	60.1	6.0
Sikkim	68.4	85.6	38.8	56.3	77.0	91.2	96.9	16.7
Dadar& Nagar Haveli	80.5	70.7	84.8	46.5	100.0	82.2	82.5	11.9
Daman & Diu	89.2	50.0	74.3	73.8	100.0	92.3	100.0	25.6
Goa	96.4	96.4	64.8	0.0	100.0	99.1	100.0	67.5
Puducherry	96.9	60.0	78.9	36.1	97.4	89.0	95.5	54.4
Andaman & Nicobar Islands	94.5	5.0	99.0	50.7	97.9	22.2	91.5	12.6
All India	**46.5**	**42.8**	**69.3**	**56.0**	**76.4**	**60.6**	**71.6**	**32.8**

Appendix Table 8.6: Difference in Mean: Some Characteristic Variables of ICDS and Non-ICDS Samples

(Figures in %)

States/UTs	Sex	Weight at birth (in Kg.)	House Ownership	Toilet facility
Andhra Pradesh	-0.1	0.0	0.0	0.1
Assam	0.1	0.2	0.0	-0.1
Bihar	-0.2	0.0	0.0	0.0
Chhattisgarh	0.1	0.0	0.0	0.5
Gujarat	0.1	-0.2	0.0	-0.1
Haryana	0.2	0.0	0.0	0.1
Himachal Pradesh	-0.1	0.1	0.0	0.0
Jammu and Kashmir	0.3	0.5	0.1	0.9
Jharkhand	0.1	0.0	0.0	0.0
Karnataka	0.3	0.3	0.0	0.0
Kerala	-0.1	0.2	0.2	0.5
Madhya Pradesh	0.0	0.0	0.0	0.3
Maharashtra	0.1	-0.1	0.1	0.1
Orissa	0.0	-0.3	0.0	0.2
Punjab	0.0	0.1	0.0	0.3
Rajasthan	0.1	-0.4	0.0	0.0
Tamil Nadu	0.1	-0.2	0.0	0.2
Uttar Pradesh	0.1	0.0	0.0	0.0
Uttrakhand	0.5	2.8	0.0	0.5
West Bengal	0.1	0.0	-0.1	0.2
Delhi	-0.1	0.3	0.1	0.2
Chandigarh	0.6	0.0	0.2	0.0
Arunachal Pradesh	-0.2	-0.7	-0.4	-0.1
Manipur	-0.1	-0.4	0.1	-0.1
Meghalaya	0.1	-0.8	0.0	-0.2
Mizoram	-0.1	0.0	-0.2	-0.2
Nagaland	0.0	-0.4	0.0	0.1
Tripura	-0.1	-0.1	0.2	0.3
Sikkim	-0.1	-0.3	-0.2	0.1

Appendix Table 8.6: Difference in Mean: Some Characteristic Variables of ICDS and Non-ICDS Samples (Continued...)

(Figures in %)

States/UTs	Sex	Weight at birth (in Kg.)	House ownership	Toilet facility
Dadar& Nagar Haveli	0.1	-0.2	0.4	0.4
Daman & Diu	0.4	0.0	0.4	0.5
Goa	-0.1	0.0	0.2	0.1
Puducherry	0.1	-0.1	0.1	0.1
West Bengal	0.1	0.0	-0.1	0.2
All India	**0.0**	**0.0**	**0.0**	**0.1**

Appendix Table 8.7: Estimates of Components Nutritional Status of Children Aged 7 Months-60 Months (ICDS v/s Non ICDS)

(Figures in %)

States/UTs	ICDS					Non-ICDS				
	Normal	Grade 1	Grade 2	Grade 3	Grade 4	Normal	Grade 1	Grade 2	Grade 3	Grade 4
Andhra Pradesh	52.2	27.6	15.6	4.6	0.0	46.1	33.4	15.8	3.4	1.4
Assam	47.3	31.5	14.6	6.7	0.0	46.7	27.5	22.6	2.3	1.0
Bihar	46.9	31.9	11.1	8.1	2.1	40.0	26.5	22.1	7.0	4.4
Chhattisgarh	41.1	35.0	14.5	8.1	1.3	52.0	23.4	17.5	6.6	0.6
Gujarat	40.9	34.8	18.3	4.7	1.4	49.9	24.3	12.0	13.8	0.0
Haryana	55.3	33.8	8.8	2.1	0.0	53.0	31.1	15.2	0.8	0.0
Himachal Pradesh	56.2	30.1	13.1	0.3	0.3	57.0	22.5	20.5	0.0	0.0
Jammu and Kashmir	63.0	18.0	17.0	1.5	0.5	67.1	12.2	17.3	2.8	0.6
Jharkhand	48.3	33.0	10.9	5.6	2.2	54.3	26.8	13.4	4.4	1.0
Karnataka	45.0	35.1	14.6	4.7	0.6	52.1	27.7	11.9	8.3	0.0
Kerala	63.6	23.9	11.3	1.2	0.0	57.1	35.9	7.1	0.0	0.0
Madhya Pradesh	39.0	30.6	21.0	6.9	2.6	31.5	32.3	27.2	6.8	2.2
Maharashtra	55.2	31.3	11.1	1.4	1.1	51.7	31.1	11.4	4.7	1.1
Orissa	46.0	31.0	14.2	6.5	2.4	47.7	19.9	19.5	12.5	0.4
Punjab	63.6	22.1	10.6	3.1	0.7	73.2	16.0	6.5	4.3	0.0
Rajasthan	47.9	27.1	16.6	5.2	3.3	45.0	25.7	18.8	8.9	1.6
Tamil Nadu	55.3	33.0	8.4	2.6	0.7	54.0	29.8	12.5	1.8	2.0
Uttar Pradesh	38.6	33.1	19.5	6.4	2.4	38.9	31.2	20.9	6.9	2.2
Uttrakhand	49.6	23.1	20.9	6.0	0.4	64.4	23.3	3.4	9.0	0.0
West Bengal	57.8	28.1	10.3	3.0	0.8	46.1	32.2	15.0	6.2	0.5
Delhi	44.1	31.6	22.8	1.5	0.0	50.1	24.6	25.3	0.0	0.0
Chandigarh	74.3	9.5	9.8	6.4	0.0	22.2	77.8	0.0	0.0	0.0
Arunachal Pradesh	49.4	14.4	24.8	7.7	3.7	49.1	0.0	50.9	0.0	0.0
Manipur	71.6	26.0	2.4	0.0	0.0	85.3	13.0	1.7	0.0	0.0
Meghalaya	59.0	19.6	16.7	4.7	0.0	48.7	9.1	29.1	13.1	0.0
Mizoram	61.9	18.2	11.9	2.9	5.1	100.0	0.0	0.0	0.0	0.0
Nagaland	87.8	5.6	4.7	0.0	1.9	71.4	18.8	4.1	0.0	5.7

Appendix Table 8.7: Estimates of Components Nutritional Status of Children Aged 7 Months-60 Months (ICDS v/s Non ICDS) (Continued...)

(Figures in %)

States/UTs	ICDS					Non-ICDS				
	Normal	Grade 1	Grade 2	Grade 3	Grade 4	Normal	Grade 1	Grade 2	Grade 3	Grade 4
Tripura	53.0	24.7	16.7	5.4	0.2	56.3	33.9	9.8	0.0	0.0
Sikkim	71.1	23.6	5.3	0.0	0.0	70.3	21.7	8.1	0.0	0.0
Dadar& Nagar Haveli	32.0	42.2	25.8	0.0	0.0	70.4	21.2	0.0	0.0	8.5
Daman & Diu	55.3	32.0	6.1	6.6	0.0	87.2	12.8	0.0	0.0	0.0
Goa	84.5	8.3	7.3	0.0	0.0	48.1	43.8	8.1	0.0	0.0
Puducherry	68.0	22.9	9.1	0.0	0.0	93.6	6.4	0.0	0.0	0.0
Andaman & Nicobar Islands	73.8	25.2	1.0	0.0	0.0	46.8	47.7	5.6	0.0	0.0
All India	**47.3**	**31.0**	**15.1**	**5.1**	**1.5**	**46.0**	**28.9**	**17.8**	**5.5**	**1.9**

Appendix Table 8.8: Estimates of Components of Immunization Status of Children Aged12-23 Months (ICDS v/s Non ICDS)

(Figures in %)

States/UTs	BCG		Measels		All Vaccination*	
	ICDS	Non-ICDS	ICDS	Non-ICDS	ICDS	Non-ICDS
Andhra Pradesh	95.3	93.8	74.9	69.4	49.6	45.5
Assam	73.0	82.5	66.6	64.5	37.0	39.1
Bihar	73.9	73.2	53.1	48.1	39.8	35.4
Chhattisgarh	88.3	89.3	70.7	69.0	54.0	52.3
Gujarat	91.6	97.5	74.0	95.2	55.2	47.6
Haryana	82.3	96.1	80.7	79.6	74.8	75.6
Himachal Pradesh	100.0	100.0	88.6	87.5	73.0	87.5
Jammu and Kashmir	97.0	100.0	86.7	96.4	78.0	96.4
Jharkhand	83.7	79.8	65.9	53.1	51.1	53.1
Karnataka	88.6	82.6	75.4	76.2	63.4	58.8
Kerala	100.0	100.0	88.4	89.7	79.7	89.7
Madhya Pradesh	86.1	87.9	65.5	66.1	48.9	44.3
Maharashtra	100.0	98.1	88.3	77.6	65.1	66.1
Orissa	83.2	75.1	73.7	70.6	59.1	49.1
Punjab	88.4	84.9	79.7	68.4	67.9	58.6
Rajasthan	70.5	67.1	58.4	55.7	31.9	32.0
Tamil Nadu	99.1	98.8	90.9	87.8	86.7	82.8
Uttar Pradesh	71.0	67.5	41.5	38.9	29.9	25.3
Uttrakhand	91.4	100.0	75.6	0.0	63.6	0.0
West Bengal	94.0	97.0	82.2	73.9	67.4	61.8
Delhi	89.6	100.0	89.6	70.0	63.6	70.0
Chandigarh	100.0	100.0	100.0	100.0	100.0	100.0
Arunachal Pradesh	65.1	-	34.6	-	19.1	-
Manipur	100.0	100.0	100.0	100.0	100.0	100.0
Meghalaya	82.8	100.0	100.0	64.6	82.8	64.6
Mizoram	75.4	-	100.0	-	75.4	77.6
Nagaland	96.8	100.0	81.2	100.0	78.0	0.0
Tripura	80.1	100.0	72.8	94.3	69.4	-

Appendix Table 8.8: Estimates of Components of Immunization Status of Children Aged12-23 Months (ICDS v/s Non ICDS) (continued ...)

(Figures in %)

States/UTs	BCG		Measels		All Vaccination*	
	ICDS	Non-ICDS	ICDS	Non-ICDS	ICDS	Non-ICDS
Sikkim	100.0	-	100.0	-	100.0	-
Dadar& Nagar Haveli	100.0	-	100.0	-	100.0	-
Daman & Diu	100.0	-	100.0	-	100.0	-
Goa	100.0	100.0	59.3	71.4	59.3	71.4
Puducherry	**100.0**	-	100.0	-	100.0	-
Andaman & Nicobar Islands	100.0	100.0	95.0	88.5	95.0	88.5
All India	**84.4**	**86.5**	**67.2**	**59.9**	**51.2**	**50.8**

Note: * Children who are fully vaccinated i.e. those who have received BCG, measels and three doses of DPT and Polio vaccine

Appendix Table 8.9: Estimates of Components of Practice of Child Getting Weighed at Birth (ICDS v/s Non ICDS)

(Figures in %)

States/UTs	Child weighed at birth	
	ICDS	Non-ICDS
Andhra Pradesh	74.6	72.5
Assam	55.3	53.7
Bihar	13.8	15.3
Chhattisgarh	65.6	63.6
Gujarat	59.8	60.0
Haryana	60.6	68.4
Himachal Pradesh	82.2	96.4
Jammu and Kashmir	14.6	23.4
Jharkhand	39.3	29.0
Karnataka	47.1	59.6
Kerala	99.6	100.0
Madhya Pradesh	49.6	55.4
Maharashtra	88.8	86.8
Orissa	69.4	70.7
Punjab	55.4	77.3
Rajasthan	36.4	36.0
Tamil Nadu	95.5	97.8
Uttar Pradesh	10.5	11.7
Uttrakhand	27.0	26.2
West Bengal	58.8	71.3
Delhi	48.4	40.6
Chandigarh	65.5	68.5
Arunachal Pradesh	0.5	23.2
Manipur	74.4	74.9
Meghalaya	52.2	46.0
Mizoram	83.0	100.0
Nagaland	41.2	27.1
Tripura	73.8	91.7
Sikkim	68.4	47.2

Appendix Table 8.9: Estimates of Components of Practice of Child Getting Weighed at Birth (ICDS v/s Non ICDS) (Continued...)

(Figures in %)

States/UTs	Child weighed at birth	
	ICDS	Non-ICDS
Dadar& Nagar Haveli	80.5	90.5
Daman & Diu	89.2	100.0
Goa	96.4	58.1
Puducherry	96.9	100.0
Andaman & Nicobar Islands	94.5	95.6
All India	**46.5**	**47.2**

Appendix Table 8.10: Estimates of Components of Colostrum Feeding (ICDS v/s Non ICDS)

(Figures in %)

States/UTs	ICDS		Non-ICDS	
	Within one hour	Within one day	Within one hour	Within one day
Andhra Pradesh	75.0	14.1	55.1	29.9
Assam	73.2	20.8	63.7	28.9
Bihar	7.7	54.5	4.0	57.9
Chhattisgarh	41.6	45.2	27.5	53.1
Gujarat	38.5	50.1	49.0	38.2
Haryana	31.8	49.6	26.1	50.6
Himachal Pradesh	60.6	27.8	63.2	35.9
Jammu and Kashmir	42.6	36.6	40.7	55.8
Jharkhand	27.8	56.9	25.6	55.4
Karnataka	61.5	17.2	59.6	19.1
Kerala	73.0	25.4	75.2	16.0
Madhya Pradesh	45.4	39.9	46.4	42.1
Maharashtra	74.3	18.4	58.0	35.5
Orissa	77.5	20.7	80.1	18.5
Punjab	9.3	19.9	12.7	23.8
Rajasthan	23.1	50.3	21.0	32.7
Tamil Nadu	65.1	29.6	63.7	26.0
Uttar Pradesh	20.6	28.0	17.1	30.6
Uttrakhand	28.3	29.9	1.1	71.7
West Bengal	30.8	62.3	14.9	78.2
Delhi	39.3	24.1	24.6	50.0
Chandigarh	25.3	69.9	30.9	69.1
Arunachal Pradesh	75.2	20.8	86.0	14.0
Manipur	75.7	19.3	89.8	9.3
Meghalaya	75.8	24.2	52.3	47.8
Mizoram	100.0	0.0	100.0	0.0
Nagaland	37.7	32.0	37.1	42.8
Tripura	32.3	44.1	22.7	77.4
Sikkim	85.6	13.1	86.6	8.2

Appendix Table 8.10: Estimates of Components of Colostrum Feeding (ICDS v/s Non ICDS) (Continued ....)

(Figures in %)

States/UTs	ICDS		Non-ICDS	
	Within one hour	Within one day	Within one hour	Within one day
Dadar& Nagar Haveli	70.7	29.3	68.4	31.6
Daman & Diu	50.0	45.8	28.2	71.8
Goa	96.4	3.6	100.0	0.0
Puducherry	60.0	33.7	66.5	33.5
Andaman & Nicobar Islands	5.0	84.0	0.0	97.7
All India	**42.8**	**33.0**	**32.6**	**41.7**

Appendix Table 8.11: Estimates of Components of Enrollment of and Discontinuation by Children Aged 7-14 Years in Primary and Post-Primary Education (ICDS v/s Non ICDS)

(Figures in %)

States/UTs	Enrollment		Discontinuation	
	ICDS	Non-ICDS	ICDS	Non-ICDS
Andhra Pradesh	95.6	89.5	4.5	2.0
Assam	98.7	99.2	1.8	7.1
Bihar	96.3	91.8	4.9	4.0
Chhattisgarh	99.6	98.0	6.4	7.0
Gujarat	99.1	97.1	3.7	1.7
Haryana	100.0	100.0	0.1	0.0
Himachal Pradesh	100.0	100.0	0.1	0.0
Jammu and Kashmir	95.8	97.7	1.4	0.0
Jharkhand	87.1	80.0	6.2	7.9
Karnataka	95.8	99.5	3.1	3.2
Kerala	100.0	100.0	0.0	1.3
Madhya Pradesh	98.7	82.1	3.6	2.2
Maharashtra	97.6	95.8	3.6	3.0
Orissa	97.7	92.3	3.5	3.6
Punjab	97.3	85.6	3.8	1.9
Rajasthan	95.7	93.5	5.8	5.7
Tamil Nadu	99.4	95.8	1.0	0.9
Uttar Pradesh	95.4	91.0	4.8	9.7
Uttrakhand	99.2	100.0	1.2	0.0
West Bengal	98.3	97.4	4.3	6.7
Delhi	100.0	100.0	1.8	0.0
Chandigarh	100.0	100.0	0.0	0.0
Arunachal Pradesh	93.9	56.9	0.0	0.0
Manipur	99.4	93.5	1.2	0.0
Meghalaya	100.0	100.0	0.5	0.0
Mizoram	100.0	100.0	0.0	0.0
Nagaland	98.8	89.6	6.6	23.6
Tripura	87.2	89.2	2.9	0.0

Appendix Table 8.11: Estimates of Components of Enrollment of and Discontinuation by Children Aged 7-14 Years in Primary and Post-Primary Education (ICDS v/s Non ICDS) (Continued...)

(Figures in %)

States/UTs	Enrollment		Discontinuation	
	ICDS	Non-ICDS	ICDS	Non-ICDS
Sikkim	100.0	100.0	11.6	0.0
Dadar& Nagar Haveli	100.0	58.8	14.8	0.0
Daman & Diu	100.0	76.7	0.0	0.0
Goa	100.0	-	0.0	-
Puducherry	100.0	100.0	5.8	0.0
Andaman & Nicobar Islands	100.0	100.0	4.8	0.0
All India	**96.8**	**91.8**	**4.0**	**6.4**

Appendix Table 9.2: Nutritional Status of Children Aged 7 Months-60 Months

(Figures in %)

States/UTs	ICDS		Non-ICDS		(MWCD,2009)	
	Moderately malnourished	Severely malnourished	Moderately malnourished	Severely malnourished	Moderately malnourished	Severely malnourished
Andhra Pradesh	43.1	4.6	49.2	4.8	49.9	0.1
Assam	46.1	6.7	50.1	3.2	35.0	0.6
Bihar	43.0	10.2	48.6	11.4	**66.7**	**33.3**
Chhattisgarh	49.5	9.4	40.9	7.1	52.3	0.7
Gujarat	53.1	6.1	36.3	13.8	56.1	0.8
Haryana	42.6	2.1	46.3	0.8	43.8	0.1
Himachal Pradesh	43.2	0.6	43.0	0.0	37.2	0.1
Jammu and Kashmir	35.0	2.0	29.5	3.4	31.1	0.1
Jharkhand	43.9	7.8	40.2	5.5	42.8	0.8
Karnataka	49.7	5.3	39.7	8.3	51.6	0.4
Kerala	35.2	1.2	42.9	0.0	37.1	0.1
Madhya Pradesh	51.6	9.5	59.5	9.1	43.5	0.4
Maharashtra	42.3	2.5	42.4	5.8	37.8	0.1
Orissa	45.2	8.9	39.3	12.9	51.9	0.8
Punjab	32.7	3.7	22.5	4.3	34.8	0.1
Rajasthan	43.6	8.5	44.5	10.5	46.6	0.7
Tamil Nadu	41.4	3.3	42.3	3.8	36.5	0.0
Uttar Pradesh	52.6	8.8	52.1	9.1	52.2	0.5
Uttrakhand	43.9	6.5	26.7	9.0	93.5	2.1
West Bengal	38.4	3.8	47.2	6.7	49.0	0.6
Delhi	54.4	1.5	49.9	0.0	49.9	0.0
Chandigarh	19.3	6.4	77.8	0.0	31.3	0.4
Arunachal Pradesh	39.2	11.4	50.9	0.0	0.0	0.0
Manipur	28.4	0.0	14.7	0.0	13.6	0.2
Meghalaya	36.3	4.7	38.2	13.1	38.2	0.2
Mizoram	30.1	8.0	0.0	0.0	26.8	0.1
Nagaland	10.3	1.9	22.9	5.7	6.3	0.1
Tripura	41.3	5.6	43.8	0.0	38.1	0.3

Appendix Table 9.2: Nutritional Status of Children Aged 7 Months-60 Months (Continued ...)

(Figures in %)

States/UTs	ICDS		Non-ICDS		(MWCD,2009)	
	Moderately malnourished	Severely malnourished	Moderately malnourished	Severely malnourished	Moderately malnourished	Severely malnourished
Sikkim	28.9	0.0	29.8	0.0	17.4	0.0
Dadar& Nagar Haveli	68.0	0.0	21.2	8.5	71.9	0.4
Daman & Diu	38.1	6.6	12.8	0.0	52.7	0.1
Goa	15.5	0.0	51.9	0.0	37.5	0.1
Puducherry	32.0	0.0	6.4	0.0	39.7	0.0
Andaman & Nicobar Islands	26.2	0.0	53.2	0.0	13.3	2.4
All India	**46.1**	**6.6**	**46.7**	**7.3**	**45.5**	**0.4**

Source: (i) MWCD Website (Under Child Development Section-Data Tables of ICDS: States/UTs -wise details of Classification of Nutritional Status of Children (as on 31.12.2009)

(ii) Figures for Bihar under ICDS Ben. (MWCD, 2009) for the year Feb, 2007.

Appendix Table 9.3: Nutritional Status of Children Aged 7 Months-60 Months by Expenditure Classes

(Figures in %)

States/UTs	ICDS						Non-ICDS					
	Upto Rs. 2000		2001-3000		Above 3000		Upto Rs. 2000		2001-3000		Above 3000	
	Moderately	Severely	Moderately	Severely	Moderately	Severely	Moderately	Severely	Moderately	Severely	Moderately	Severely
Andhra Pradesh	47.7	6.7	44.7	5.0	31.0	1.5	46.3	7.4	45.0	5.7	33.8	0.7
Assam	58.4	11.7	48.1	9.4	35.2	0.0	60.2	7.0	50.4	8.0	31.0	0.0
Bihar	44.9	14.2	41.5	7.0	38.0	0.6	55.3	17.7	43.2	11.2	45.9	0.0
Chhattisgarh	45.3	15.0	49.1	3.9	62.2	2.8	61.5	24.7	61.5	8.6	24.4	0.0
Gujarat	54.3	8.4	48.6	6.6	56.5	0.0	38.3	10.0	46.0	8.2	45.5	0.0
Haryana	55.9	11.0	52.7	0.0	24.3	0.0	43.0	4.3	73.4	0.0	17.3	0.0
Himachal Pradesh	50.2	2.6	46.9	0.7	37.3	0.0	63.9	0.0	47.8	0.0	29.1	0.0
Jammu and Kashmir	43.8	12.7	33.6	2.6	34.5	0.0	55.6	18.9	48.4	4.4	26.7	0.0
Jharkhand	47.1	12.5	36.7	7.5	54.0	3.8	40.7	9.3	42.0	2.4	34.8	0.0
Karnataka	53.2	6.7	42.1	2.5	36.8	0.0	44.3	19.8	57.7	0.0	2.0	0.0
Kerala	44.2	9.6	35.6	0.0	33.3	0.0	85.6	0.0	0.0	0.0	2.0	0.0
Madhya Pradesh	57.1	13.4	48.9	7.6	42.9	3.2	63.5	15.6	60.5	11.8	55.3	1.5
Maharashtra	51.7	5.6	46.3	1.2	26.5	0.0	46.0	13.2	31.8	2.5	28.8	1.7
Orissa	50.2	13.5	45.9	5.9	32.8	2.3	46.9	20.1	34.1	15.7	37.1	0.0
Punjab	38.3	12.1	30.1	0.6	30.8	0.0	36.5	8.9	22.9	6.5	17.6	0.0
Rajasthan	51.3	11.8	41.6	8.9	39.1	3.7	53.0	16.9	46.1	14.1	36.6	1.4
Tamil Nadu	44.3	5.6	41.7	2.1	34.8	0.0	41.7	6.5	42.9	5.4	42.2	0.0
Uttar Pradesh	58.2	12.2	52.7	8.4	47.4	5.9	58.7	15.4	47.6	7.5	51.7	2.4
Uttrakhand	47.4	16.4	45.7	0.0	34.8	0.0	36.4	14.0	33.6	0.0	0.0	0.0
West Bengal	41.9	6.2	37.7	2.1	29.8	1.9	48.1	12.9	44.9	2.5	37.2	1.7
Delhi	100.0	0.0	69.3	0.0	48.9	2.0	56.7	0.0	58.7	0.0	47.1	0.0
Chandigarh	15.0	19.6	29.1	0.0	0.0	0.0	-	-	5.8	0.0	93.1	0.0

Appendix Table 9.3: Nutritional Status of Children Aged 7 Months-60 Months by Expenditure Classes (Continued...)

(Figures in %)

States/UTs	ICDS						Non-ICDS					
	Upto Rs. 2000		2001-3000		Above 3000		Upto Rs. 2000		2001-3000		Above 3000	
	Moderately	Severely	Moderately	Severely	Moderately	Severely	Moderately	Severely	Moderately	Severely	Moderately	Severely
Arunachal Pradesh	35.3	16.2	57.7	15.3	30.1	0.0	16.9	0.0	100.0	0.0	0.0	0.0
Manipur	56.2	0.0	28.1	0.0	24.9	0.0	22.4	0.0	10.7	0.0	5.9	0.0
Meghalaya	24.1	7.7	47.5	4.5	34.4	3.5	29.0	23.8	16.3	0.0	47.5	11.1
Mizoram	46.2	10.1	0.0	12.7	25.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Nagaland	0.0	0.0	17.7	0.0	8.7	2.8	100.0	0.0	51.8	11.6	13.8	4.4
Tripura	65.4	9.0	15.9	11.7	55.1	0.4	100.0	0.0	4.2	0.0	50.0	0.0
Sikkim	24.8	0.0	31.0	0.0	34.3	0.0	0.0	0.0	0.0	0.0	84.5	0.0
Dadar& Nagar Haveli	0.0	0.0	62.4	0.0	88.1	0.0	0.0	100.0	37.7	0.0	9.1	0.0
Daman & Diu	60.6	0.0	38.0	5.4	30.5	11.1	-	-	0.0	0.0	13.4	0.0
Goa	0.0	0.0	0.0	0.0	19.4	0.0	-	-	0.0	0.0	56.5	0.0
Puducherry	48.3	0.0	0.0	0.0	0.0	0.0	9.7	0.0	-	-	0.0	0.0
Andaman & Nicobar Islands	0.0	0.0	25.0	0.0	28.4	0.0	46.1	0.0	54.7	0.0	56.6	0.0
All India	**51.2**	**10.2**	**45.7**	**5.8**	**39.4**	**2.7**	**52.7**	**12.7**	**45.1**	**6.9**	**38.5**	**0.8**

Appendix Table 9.4: Nutritional Status of Children Aged 7 Months-60 Months by Occupation Group

(Figures in %)

States/UTs	ICDS						Non-ICDS					
	Agriculture		Wage earners		Others		Agriculture		Wage earners		Others	
	Moderately	Severely	Moderately	Severely	Moderately	Severely	Moderately	Severely	Moderately	Severely	Moderately	Severely
Andhra Pradesh	37.4	4.1	53.1	6.4	11.3	0.7	34.9	0.0	58.7	9.0	25.2	1.4
Assam	26.9	6.3	57.8	14.1	47.0	0.0	31.0	0.0	67.3	13.3	37.3	0.4
Bihar	47.7	5.7	45.9	17.1	37.2	2.2	45.5	3.3	49.6	14.5	48.8	9.9
Chhattisgarh	53.2	11.9	36.8	13.8	58.2	1.1	39.6	9.3	53.1	26.7	37.5	0.0
Gujarat	53.6	9.1	49.5	5.8	58.0	2.1	57.7	1.0	35.9	23.1	18.2	0.0
Haryana	43.0	0.0	42.3	4.7	42.7	0.0	30.6	0.0	68.8	2.0	32.8	0.0
Himachal Pradesh	24.6	0.0	60.7	2.0	39.3	0.0	30.0	0.0	84.6	0.0	38.1	0.0
Jammu and Kashmir	14.8	1.0	54.8	7.2	35.9	0.8	32.5	26.9	76.4	0.0	24.5	0.0
Jharkhand	39.3	2.8	42.8	11.2	50.0	0.0	37.0	0.0	40.8	8.6	40.5	0.0
Karnataka	43.8	3.5	63.76	9.7	32.7	0.0	58.0	0.6	36.6	21.5	12.2	0.0
Kerala	41.7	17.2	44.0	1.2	12.0	0.0	-	-	61.9	0.0	2.0	0.0
Madhya Pradesh	46.1	7.3	53.7	11.9	55.1	7.0	65.7	3.7	59.2	19.0	52.6	5.3
Maharashtra	46.8	3.1	52.6	2.0	22.3	2.0	36.4	1.3	31.0	17.8	35.3	1.6
Orissa	53.7	14.8	48.0	10.4	35.7	3.0	68.0	10.0	40.7	29.9	24.3	1.8
Punjab	34.9	0.0	28.7	6.6	41.5	0.0	26.1	0.0	33.3	3.4	10.0	8.8
Rajasthan	44.5	4.6	47.2	14.2	39.7	5.0	55.1	14.3	58.2	24.6	31.8	0.6
Tamil Nadu	46.6	2.1	44.8	4.3	28.8	1.4	37.5	9.5	35.2	4.2	56.0	0.2
Uttar Pradesh	48.7	8.9	59.7	9.0	39.3	7.7	48.8	5.6	54.5	15.7	56.1	2.5
Uttrakhand	40.2	0.0	44.9	9.0	42.8	2.1	0.0	0.0	45.9	12.0	35.7	0.0
West Bengal	38.4	3.7	40.9	4.3	28.2	2.1	27.4	1.7	45.7	8.8	46.4	2.8
Chandigarh	-	-	14.4	18.7	21.9	0.0	-	-	0.0	0.0	82.2	0.0
Arunachal Pradesh	39.7	10.7	9.4	62.4	45.6	0.0	100.0	0.0	16.9	0.0	16.9	0.0

Appendix Table 9.4: Nutritional Status of Children Aged 7 Months-60 Months by Occupation Group (Continued...)

(Figures in %)

States/UTs	ICDS						Non-ICDS					
	Agriculture		Wage earners		Others		Agriculture		Wage earners		Others	
	Moderately	Severely	Moderately	Severely	Moderately	Severely	Moderately	Severely	Moderately	Severely	Moderately	Severely
Manipur	0.0	0.0	9.1	0.0	40.9	0.0	0.0	0.0	27.8	0.0	6.4	0.0
Meghalaya	18.8	0.0	34.3	5.3	44.6	6.3	0.0	0.0	49.2	20.2	22.5	0.0
Mizoram	22.4	0.0	54.1	0.0	28.5	16.1	0.0	0.0	-	-	0.0	0.0
Nagaland	0.0	0.0	34.3	31.5	11.5	0.0	59.7	7.3	0.0	0.0	7.4	5.2
Tripura	69.8	0.0	61.3	2.4	8.0	11.2	100.0	0.0	50.0	0.0	43.3	0.0
Sikkim	20.6	0.0	32.5	0.0	29.9	0.0	0.0	0.0	0.0	0.0	45.7	0.0
Dadar& Nagar Haveli	50.0	0.0	84.6	0.0	55.4	0.0	31.7	15.9	-	-	9.1	0.0
Daman & Diu	-	-	0.0	33.7	42.0	3.9	-	-	-	-	12.8	0.0
Goa	0.0	0.0	16.4	0.0	15.9	0.0	-	-	0.0	0.0	56.5	0.0
Puducherry	-	-	29.8	0.0	57.2	0.0	-	-	9.7	0.0	0.0	0.0
Andaman & Nicobar Islands	0.0	0.0	25.7	0.0	34.8	0.0	0.0	0.0	51.0	0.0	61.1	0.0
All India	**45.7**	**6.7**	**50.7**	**8.4**	**37.4**	**3.0**	**45.5**	**4.2**	**48.8**	**11.5**	**42.4**	**3.6**

Appendix Table 9.5: Nutritional Status of Children Aged 7 Months-60 Months by Asset Class

(Figures in %)

States/UTs	ICDS				Non-ICDS			
	Asset 1		Asset 2		Asset 1		Asset 2	
	Moderately	Severely	Moderately	Severely	Moderately	Severely	Moderately	Severely
Andhra Pradesh	29.4	3.5	47.5	5.4	29.7	0.8	49.9	6.9
Assam	44.5	0.0	46.3	7.9	25.9	2.0	52.1	6.1
Bihar	27.9	3.9	44.3	10.7	43.3	6.0	49.9	12.4
Chhattisgarh	68.9	6.3	36.7	11.4	23.6	0.0	65.6	17.3
Gujarat	48.6	2.0	54.9	7.8	50.8	0.0	35.8	13.7
Haryana	34.9	0.0	49.5	4.1	40.6	0.0	55.1	1.9
Himachal Pradesh	34.5	0.7	49.5	0.5	37.0	0.0	50.6	0.0
Jammu and Kashmir	41.2	1.3	32.4	2.3	3.7	0.0	74.4	7.9
Jharkhand	43.6	3.3	43.9	8.3	38.0	0.0	40.6	6.4
Karnataka	32.9	2.8	56.0	6.3	40.3	0.0	39.0	17.1
Kerala	36.1	0.0	34.7	1.9	1.4	0.0	77.0	0.0
Madhya Pradesh	46.7	5.5	54.5	11.8	58.8	1.7	60.3	18.2
Maharashtra	35.3	1.3	52.3	4.1	31.5	2.0	49.6	21.0
Orissa	34.1	5.5	49.3	10.1	36.1	0.0	42.5	25.4
Punjab	33.4	1.1	31.3	8.8	21.4	3.9	27.9	6.2
Rajasthan	41.3	2.5	44.9	11.8	33.7	3.4	58.5	19.6
Tamil Nadu	28.9	2.3	46.6	3.7	36.7	0.5	45.7	5.8
Uttar Pradesh	44.2	8.1	55.5	9.0	48.2	5.5	53.8	10.7
Uttrakhand	65.7	0.0	39.5	7.8	-	-	35.0	9.0
West Bengal	18.0	1.2	40.3	4.1	25.7	1.1	49.3	8.0
Delhi	50.7	2.1	63.7	0.0	34.9	0.0	67.7	0.0
Chandigarh	7.4	0.0	39.2	17.0	82.2	0.0	0.0	0.0
Arunachal Pradesh	0.0	0.0	41.1	12.0	-	-	-	-
Manipur	26.5	0.0	30.8	0.0	14.4	0.0	50.9	0.0
Meghalaya	24.9	0.0	57.8	13.6	48.1	11.0	14.8	0.0
Mizoram	30.5	12.7	29.3	0.0	0.0	0.0	23.5	16.3
Nagaland	8.7	2.4	16.4	0.0	15.5	5.0	0.0	0.0

Appendix Table 9.5: Nutritional Status of Children Aged 7 Months-60 Months by Asset Class (Continued...)

(Figures in %)

States/UTs	ICDS				Non-ICDS			
	Asset 1		Asset 2		Asset 1		Asset 2	
	Moderately	Severely	Moderately	Severely	Moderately	Severely	Moderately	Severely
Tripura	2.2	0.0	49.0	6.8	38.9	0.0	40.2	7.4
Sikkim	33.2	0.0	28.7	0.0	47.0	0.0	50.7	0.0
Dadar& Nagar Haveli	100.0	0.0	66.7	0.0	9.1	0.0	15.0	0.0
Daman & Diu	22.7	8.2	49.4	5.4	16.3	0.0	31.7	15.9
Goa	30.0	0.0	0.0	0.0	51.9	0.0	0.0	0.0
Puducherry	19.7	0.0	45.5	0.0	0.0	0.0	19.8	0.0
Andaman & Nicobar Islands	37.0	0.0	25.1	0.0	67.8	0.0	50.9	0.0
All India	**39.0**	**3.8**	**49.0**	**7.8**	**37.8**	**2.3**	**50.3**	**9.9**

Asset 1: Households holding assets like Refrigerator or Motorcycle/Scooter or Tractor or Car/Jeep or Land more than 2 acres.
Asset 2: Others The information for smaller States/UTs/UTs is available in Appendix Table.

Note: Moderately malnourished children (Grade I & II). Severely malnourished children (Grade III & IV).

Appendix Table 9.6: Distribution of Households by Level of Education – Beneficiary vs. Non-Beneficiary

(Figures in %)

States/UTs	Beneficiary children household						Non-Beneficiary children household				
	Illiterate	Primary pass	Middle level pass	Matric pass	HS pass	Graduate & above	Primary pass	Middle level pass	Matric pass	HS pass	Graduate & above
Andhra Pradesh	39.1	13.1	17.0	16.2	10.6	4.0	12.8	6.6	21.3	18.5	9.4
Assam	8.5	9.0	41.3	13.5	16.7	11.0	9.9	27.8	12.4	17.5	16.2
Bihar	41.8	18.1	16.2	15.2	5.9	2.8	12.9	17.8	8.5	11.7	8.6
Chhattisgarh	10.4	23.3	31.4	23.0	7.1	4.9	7.6	26.1	24.2	27.0	10.7
Gujarat	9.4	18.6	23.9	15.4	17.8	15.0	22.3	14.8	13.9	31.1	12.9
Haryana	14.8	7.0	22.6	25.9	18.6	11.1	2.2	22.5	21.6	32.0	10.4
Himachal Pradesh	0.0	9.5	24.7	24.7	27.2	13.9	1.0	14.3	10.2	58.5	16.0
Jammu and Kashmir	4.8	1.6	13.3	27.0	36.2	17.1	1.8	29.1	9.1	29.8	23.6
Jharkhand	27.7	23.4	29.8	9.2	4.3	5.5	27.2	27.8	11.2	0.8	3.4
Karnataka	27.7	19.6	10.4	21.8	16.3	4.2	9.9	16.1	41.7	15.0	3.8
Kerala	1.8	5.4	23.8	25.1	29.0	14.8	0.0	38.2	20.3	5.6	35.9
Madhya Pradesh	11.4	12.9	18.8	31.1	18.4	7.4	4.1	13.5	27.9	31.2	17.5
Maharashtra	7.6	10.4	18.9	31.7	17.5	13.9	4.9	17.7	32.4	25.3	18.6
Orissa	20.4	17.4	30.7	14.5	9.0	8.1	12.0	32.3	20.4	11.9	17.9
Punjab	14.7	16.5	17.6	31.4	16.1	3.7	9.6	17.0	38.1	17.7	7.6
Rajasthan	16.9	22.1	18.7	22.0	8.9	11.4	15.9	14.7	25.9	23.7	8.2
Tamil Nadu	7.1	16.8	31.7	25.3	11.5	7.6	10.5	25.8	26.4	25.3	8.1
Uttar Pradesh	18.9	22.7	27.4	12.8	9.9	8.3	25.0	24.5	11.2	11.7	5.9
Uttrakhand	7.2	25.0	29.4	15.0	17.3	6.3	9.0	26.1	23.9	1.1	0.0
West Bengal	18.8	29.5	34.9	9.0	3.3	4.6	16.5	35.0	16.5	5.6	11.9
Delhi	13.1	9.9	24.4	22.8	14.3	15.5	16.8	7.3	14.3	19.7	35.0
Chandigarh	4.7	20.3	9.3	29.0	31.9	4.9	0.0	29.1	34.4	3.6	33.0
Arunachal Pradesh	26.4	29.7	27.4	13.4	3.2	0.0	55.1	33.3	0.0	11.6	0.0
Manipur	0.0	0.0	36.8	8.4	37.0	17.8	5.7	21.3	28.8	24.3	20.0
Meghalaya	12.4	18.7	39.9	16.0	11.7	1.2	19.6	4.2	16.3	14.3	0.9
Mizoram	0.0	2.7	50.4	24.1	16.3	6.4	0.0	66.7	0.0	33.3	0.0
Nagaland	4.8	11.5	38.3	21.1	8.7	15.6	4.9	19.6	31.6	25.8	12.3
Tripura	12.4	35.1	35.7	11.2	0.0	5.6	0.0	18.2	57.2	17.3	7.4

Appendix Table 9.6: Distribution of Households by Level of Education – Beneficiary vs. Non-Beneficiary

(Figures in %)

States/UTs	Beneficiary children household						Non-Beneficiary children household				
	Illiterate	Primary pass	Middle level pass	Matric pass	HS pass	Graduate & above	Primary pass	Middle level pass	Matric pass	HS pass	Graduate & above
Sikkim	18.4	56.3	13.6	9.3	0.0	2.5	49.0	10.5	11.9	1.7	6.9
Dadar& Nagar Haveli	15.2	31.4	24.8	11.6	17.0	0.0	31.6	6.0	17.9	17.9	14.9
Daman & Diu	0.0	10.7	14.0	37.6	28.1	9.6	3.3	0.0	37.9	49.0	9.7
Goa	3.6	0.0	21.5	47.2	23.6	4.2	0.0	4.8	27.2	27.6	40.5
Puducherry	0.0	0.0	15.1	48.9	23.7	12.3	2.7	40.1	23.1	13.2	15.5
Andaman & Nicobar Islands	0.0	9.9	64.4	21.2	2.4	2.1	4.9	45.4	47.4	0.0	0.0
All India	**18.1**	**18.3**	**25.3**	**18.0**	**12.0**	**8.2**	**15.1**	**23.3**	**17.1**	**15.3**	**10.6**

Appendix Table 9.7: Distribution of Households by Occupation Group – Beneficiary vs. Non-Beneficiary

(Figures in %)

States/UTs	Beneficiary children household				Non-beneficiary children household		
	Agriculture	Wage earner	Salaried	Others	Agriculture	Wage earner	Others
Andhra Pradesh	18.5	64.2	7.2	10.2	21.1	43.7	19.4
Assam	26.2	35.4	14.9	23.5	23.9	36.9	28.3
Bihar	13.8	49.9	21.0	15.4	10.7	46.1	16.6
Chhattisgarh	42.6	30.2	9.5	17.8	21.1	23.3	36.6
Gujarat	39.7	36.9	11.0	12.5	49.6	27.9	8.0
Haryana	18.9	44.8	24.0	12.3	20.0	37.1	27.8
Himachal Pradesh	18.4	30.9	22.3	28.4	32.7	25.0	10.8
Jammu and Kashmir	18.9	20.1	55.7	5.3	10.2	8.6	27.3
Jharkhand	11.7	66.6	4.2	17.6	13.3	62.3	19.8
Karnataka	47.7	37.4	7.9	7.0	49.7	31.2	4.0
Kerala	2.2	70.8	17.6	9.4	0.0	68.9	9.4
Madhya Pradesh	32.2	46.9	8.7	12.2	38.7	30.9	18.1
Maharashtra	43.1	31.5	11.7	13.8	45.7	27.5	14.3
Orissa	19.1	49.1	10.0	21.8	21.3	35.9	26.6
Punjab	22.0	57.6	9.4	11.0	32.2	34.9	19.3
Rajasthan	21.4	37.7	18.3	22.6	22.2	32.6	17.8
Tamil Nadu	14.9	62.1	14.0	9.1	15.7	57.1	6.9
Uttar Pradesh	35.6	49.3	5.5	9.6	47.1	37.5	8.2
Uttrakhand	13.4	66.4	12.7	7.5	23.3	75.1	1.1
West Bengal	5.0	76.1	4.3	14.6	6.1	59.0	23.0
Delhi	0.0	19.9	46.5	33.6	0.0	23.0	39.8
Chandigarh	0.0	37.3	38.2	24.4	0.0	2.1	0.0
Arunachal Pradesh	71.8	4.5	16.9	6.9	58.1	14.0	2.4
Manipur	1.2	38.7	13.9	46.2	17.8	44.9	16.9
Meghalaya	16.9	36.0	23.1	24.0	11.6	57.5	24.6
Mizoram	41.8	11.3	47.0	0.0	66.7	0.0	0.0
Nagaland	22.0	4.5	40.3	33.2	33.2	2.6	12.7
Tripura	4.1	59.2	11.1	25.6	0.5	18.2	51.8

Appendix Table 9.7: Distribution of Households by Occupation Group – Beneficiary vs. Non-Beneficiary (Continued ...)

(Figures in %)

States/UTs	Beneficiary children household				Non-beneficiary children household		
	Agriculture	Wage earner	Salaried	Others	Agriculture	Wage earner	Others
Sikkim	28.3	50.7	10.4	10.6	25.2	37.0	17.7
Dadar& Nagar Haveli	9.3	44.9	34.1	11.7	37.5	6.0	29.8
Daman & Diu	0.0	9.3	62.6	28.2	0.0	0.0	60.0
Goa	3.6	47.5	31.1	17.8	4.8	7.1	8.6
Puducherry	0.0	92.0	4.6	3.4	0.0	80.8	0.0
Andaman & Nicobar Islands	7.3	66.2	19.8	6.7	4.6	49.4	24.0
All India	**27.0**	**48.4**	**10.7**	**14.0**	**24.7**	**44.1**	**15.7**

Appendix Table 9.8: Distribution of Households by Expenditure Class (Rs./Month) – Beneficiary vs. Non-Beneficiary

(Figures in %)

States/UTs	Beneficiary children						Non-beneficiary children					
	Below 1000	1000-1500	1501-2000	2001-2500	2501-3000	Above 3000	Below 1000	1000-1500	1501-2000	2001-2500	2501-3000	Above 3000
Andhra Pradesh	6.7	17.4	19.0	15.7	18.3	22.9	3.0	9.8	23.2	10.0	15.1	39.0
Assam	0.3	3.4	18.0	14.6	27.2	36.5	3.0	0.8	24.1	29.9	15.7	26.6
Bihar	7.5	22.2	23.9	16.3	18.5	11.7	1.8	13.5	25.6	25.8	9.8	23.4
Chhattisgarh	3.2	19.3	27.7	16.9	15.1	17.9	1.0	9.1	16.4	11.5	10.0	52.0
Gujarat	4.2	13.2	32.7	15.1	14.4	20.4	0.0	10.4	27.3	19.3	20.2	22.8
Haryana	1.1	8.0	7.3	19.1	25.9	38.6	0.0	0.0	17.5	14.6	26.5	41.5
Himachal Pradesh	0.0	1.4	10.2	7.5	38.6	42.4	0.0	0.0	11.1	25.6	22.0	41.3
Jammu and Kashmir	1.3	3.9	4.5	5.8	31.2	53.4	0.0	0.0	6.7	5.1	2.8	85.5
Jharkhand	1.0	10.0	15.3	22.8	25.9	25.0	0.0	3.3	46.5	21.2	9.9	19.1
Karnataka	5.1	40.3	26.2	12.1	7.7	8.7	2.1	11.2	39.1	5.4	23.6	18.5
Kerala	0.7	4.5	7.6	5.4	16.2	65.5	15.6	0.0	31.7	14.6	6.3	31.9
Madhya Pradesh	5.4	17.9	22.8	16.8	18.6	18.5	1.9	11.8	20.3	13.8	11.7	40.5
Maharashtra	9.3	10.8	16.6	16.5	17.5	29.3	7.9	6.9	13.6	8.6	17.4	45.6
Orissa	6.8	23.0	21.0	14.0	14.8	20.5	1.7	14.8	20.8	14.3	22.5	26.0
Punjab	0.9	8.6	20.0	11.5	28.0	30.9	2.9	0.9	12.9	21.4	22.9	39.1
Rajasthan	1.9	10.2	14.1	19.6	30.4	23.9	2.0	3.6	20.2	20.9	22.3	31.1
Tamil Nadu	7.6	16.8	22.3	12.0	18.5	22.9	3.8	6.8	27.4	16.6	11.2	34.1
Uttar Pradesh	4.2	11.1	15.0	12.2	23.5	34.0	1.5	9.2	23.0	23.0	22.9	20.4
Uttrakhand	3.0	17.1	22.4	14.8	20.8	21.9	0.0	0.0	63.9	34.4	0.6	1.1
West Bengal	4.6	8.3	30.3	18.3	23.7	14.9	2.6	5.6	31.4	18.6	16.2	25.6
Delhi	0.0	1.3	3.5	7.9	16.5	70.9	0.0	0.0	14.5	8.6	0.0	77.0
Chandigarh	4.7	15.4	11.0	29.0	22.9	17.0	0.0	0.0	0.0	37.4	2.2	60.4
Arunachal Pradesh	3.6	13.2	28.4	3.1	22.1	29.6	0.0	0.0	33.3	33.3	21.7	11.6
Manipur	0.0	1.8	5.9	8.0	25.5	58.8	0.0	0.0	40.8	7.3	7.5	44.5
Meghalaya	2.8	5.4	13.0	6.5	28.4	43.9	0.0	0.0	27.5	5.5	5.3	61.8
Mizoram	28.4	16.1	8.5	5.2	16.3	25.5	0.0	0.0	33.3	33.3	0.0	33.3
Nagaland	0.0	0.0	6.6	9.3	14.8	69.4	0.0	0.0	2.0	4.7	18.3	75.0

Appendix Table 9.8: Distribution of Households by Expenditure Class (Rs./Month) – Beneficiary vs. Non-Beneficiary (Continued...)

(Figures in %)

States/UTs	Beneficiary children						Non-beneficiary children					
	Below 1000	1000-1500	1501-2000	2001-2500	2501-3000	Above 3000	Below 1000	1000-1500	1501-2000	2001-2500	2501-3000	Above 3000
Tripura	0.6	3.4	6.8	17.4	20.7	51.1	0.0	0.0	17.7	0.9	9.9	71.5
Sikkim	0.0	10.2	32.9	26.5	17.1	13.4	0.0	0.0	20.0	43.7	14.0	22.3
Dadar & Nagar Haveli	4.7	0.0	0.0	32.2	30.1	33.1	0.0	0.0	6.0	31.0	9.5	53.6
Daman & Diu	0.0	0.0	10.7	7.0	50.7	31.5	0.0	0.0	0.0	0.0	3.3	96.7
Goa	3.6	0.0	0.0	4.2	12.1	80.1	0.0	0.0	0.0	7.1	0.0	92.9
Puducherry	0.0	19.1	47.1	8.0	7.7	18.0	0.0	15.1	56.0	0.0	9.7	19.2
Andaman & Nicobar Islands	0.0	2.0	2.0	6.8	21.9	67.2	0.0	0.0	25.0	29.0	4.6	41.4
All India	**4.7**	**13.8**	**19.1**	**14.6**	**20.9**	**27.1**	**2.5**	**7.8**	**25.9**	**19.4**	**15.5**	**28.8**

Appendix Table 10.1: Requirement of Financial Provisions and Actual Expenditure-States/UTs -wise

States/UTs	Number of children (6 months - 6 years) in '000 who received SN in 2008-09*	Number of PW & LM in '000 who received SN in 2008-09*	Total budgetary requirement/provision for SN for both children and PW&LM (in lakhs) as per norm**	Actual Expenditure on SN including States/UTs share (in lakhs) in 2008-09*	% Shortfall/ Excess
Andhra Pradesh	4318	1078	33349	35091	-5.2
Assam	2218	493	16736	9540	43.0
Bihar	3508	710	25978	53027	-104.1
Chhattisgarh	1977	519	15471	18362	-18.7
Gujarat	2401	481	17764	13084	26.3
Haryana	1015	285	8059	11513	-42.9
Himachal Pradesh	425	97	3221	4543	-41.0
Jammu & Kashmir	411	99	3149	4327	-37.4
Jharkhand	2359	662	18759	18897	-0.7
Karnataka	3255	804	25100	24645	1.8
Kerala	1166	219	8505	11848	-39.3
Madhya Pradesh	5363	1140	40090	27156	32.3
Maharashtra	5814	1007	41847	38837	7.2
Orissa	4112	782	30139	20449	32.2
Punjab	1057	306	8460	4560	46.1
Rajasthan	3017	810	23732	23694	0.2
Tamil Nadu	2299	523	17402	13752	21.0
Uttar Pradesh	19442	3794	143008	108780	23.9
Uttaranchal	475	107	3612	1063	70.6
West Bengal	5277	785	37137	30208	18.7
Delhi	570	112	4188	4865	-16.2
Chandigarh	34	7	255	207	19.0
Arunachal Pradesh	192	24	1323	880	33.5
Manipur	316	55	2273	2372	-4.4
Meghalaya	330	59	2384	3152	-32.2

Appendix Table 10.1: Requirement of Financial Provisions and Actual Expenditure-States/UTs -wise (Continued…)

States/UTs	Number of children (6 months - 6 years) in '000 who received SN in 2008-09*	Number of PW & LM in '000 who received SN in 2008-09*	Total budgetary requirement/provision for SN for both children and PW&LM (in lakhs) as per norm**	Actual Expenditure on SN including States/UTs share (in lakhs) in 2008-09*	% Shortfall/ Excess
Mizoram	119	33	943	1495	-58.5
Nagaland	295	53	2141	2503	-16.9
Tripura	276	66	2115	1906	9.9
Sikkim	32	6	232	635	-173.3
Dadar & Nagar Haveli	17	4	124	122	1.4
Daman & Diu	7	1	52	12	77.1
Goa	48	12	373	315	15.7
Puducherry	27	9	221	446	-102.1
Lakshadweep	7	2	55	114	-105.6
Andaman & Nicobar Islands	20	5	152	444	-191.9
All India	**72197**	**15147**	538302	**492844**	8.4

* Ministry of Women and Child Development, 2008-09

**Rs. 2 for normal & moderately children, Rs. 2.7 for malnourished children and Rs. 2.3 for PW & LM; Number of days in a year is 300.

Appendix Table 10.2: Estimated Values of A and B (In %) for Major States/UTs

States/UTs	Number of children (6 months - 6 years) in '000 who received SN as on 31.3.2009*	Percent children receiving SN	Days for SN delivered (%)
Andhra Pradesh	4318	73.7	64.0
Assam	2218	73.5	8.0
Bihar	3508	52.6	56.0
Chhattisgarh	1977	85.6	76.0
Gujarat	2401	86.5	76.0
Haryana	1015	51.9	84.0
Himachal Pradesh	425	77.1	68.0
Jammu & Kashmir	411	91.5	72.0
Jharkhand	2359	88.3	72.0
Karnataka	3255	80.4	84.0
Kerala	1166	75.8	80.0
Madhya Pradesh	5363	68.2	56.0
Maharashtra	5814	69.6	84.0
Orissa	4112	69.9	84.0
Punjab	1057	59.1	68.0
Rajasthan	3017	55.6	60.0
Tamil Nadu	2299	75.8	84.0
Uttar Pradesh	19442	40.6	56.0
Uttaranchal	475	81.9	32.0
West Bengal	5277	78.3	84.0
Delhi	570	56.4	88.0
Chandigarh	34	68.0	88.0
Arunachal Pradesh	192	94.4	32.0
Manipur	316	44.9	48.0
Meghalaya	330	79.8	72.0
Mizoram	119	91.8	76.0
Nagaland	295	82.4	24.0
Tripura	276	77.6	68.0

Appendix Table 10.2: Estimated Values of A and B (In %) for Major States/UTs/UTs (Continued…)

States/UTs	Number of children (6 months - 6 years) in '000 who received SN as on 31.3.2009*	Percent children receiving SN	Days for SN delivered (%)
Sikkim	32	93.8	56.0
Dadra & Nagar Haveli	17	60.0	96.0
Daman & Diu	7	54.7	92.0
Goa	48	73.4	80.0
Puducherry	27	56.7	88.0
Lakshadweep	7	64.0	64.0
Andaman & Nicobar Islands	20	100.0	96.0
All India	**72197**	**64.0**	**64.0**

*Ministry of Women and Child Development, 2008-09

Appendix Table 10.3: Estimated Proportion of SN Funds Spent on Children (In %)

States/UTs	Actual Expenditure on children's SN (in lakhs) in 2008-09	Expenditure on children's SN as % to total expenditure on SN	Estimated value of SN reached/ delivered to children as % to actual expenditure on children's SN in 2008-09
Andhra Pradesh	27267	77.7	47.2
Assam	7602	79.7	5.9
Bihar	43022	81.1	29.4
Chhattisgarh	14115	76.9	65.1
Gujarat	10638	81.3	65.7
Haryana	8704	75.6	43.6
Himachal Pradesh	3595	79.1	52.4
Jammu & Kashmir	3389	78.3	65.9
Jharkhand	14298	75.7	63.6
Karnataka	19198	77.9	67.5
Kerala	9745	82.3	60.7
Madhya Pradesh	21827	80.4	38.2
Maharashtra	32390	83.4	58.4
Orissa	16790	82.1	58.7
Punjab	3421	75.0	40.2
Rajasthan	18116	76.5	33.3
Tamil Nadu	10900	79.3	63.7
Uttar Pradesh	88870	81.7	22.7
Uttaranchal	845	79.5	26.2
West Bengal	25804	85.4	65.8
Delhi	3971	81.6	49.7
Chandigarh	166	80.4	59.8
Arunachal Pradesh	768	87.3	30.2
Manipur	1977	83.4	21.6
Meghalaya	2617	83.0	57.5
Mizoram	1136	76.0	69.8
Nagaland	2073	82.8	19.8
Tripura	1493	78.3	52.8

Appendix Table 10.3: Estimated Proportion of SN Funds Spent on Children (In %) (Continued…)

States/UTs	Actual Expenditure on children's SN (in lakhs) in 2008-09	Expenditure on children's SN as % to total expenditure on SN	Estimated value of SN reached/ delivered to children as % to actual expenditure on children's SN in 2008-09
Sikkim	519	81.8	52.5
Dadar & Nagar Haveli	98	80.3	57.6
Daman & Diu	10	80.4	50.3
Goa	243	77.1	58.7
Puducherry	324	72.6	49.9
Lakshadweep	87	76.0	40.9
Andaman & Nicobar Islands	350	78.9	96.0
All India	**397154**	**80.6**	**40.9**

Source: Estimated using data provided by Ministry of Women and Child Development, 2008-09

Appendix Table 10.4: Estimated Values of A and B (In %) for Major States/UTs

States/UTs	Number of PW & LM in '000 who received SN as on 31.3.2009*	Percent PW&LM receiving SN	Days for SN delivered (%)
Andhra Pradesh	1078	87.8	40.0
Assam	493	7.7	0.0
Bihar	710	68.0	40.0
Chhattisgarh	519	76.8	64.0
Gujarat	481	76.5	56.0
Haryana	285	93.1	72.0
Himachal Pradesh	97	75.3	64.0
Jammu & Kashmir	99	90.4	64.0
Jharkhand	662	91.4	80.0
Karnataka	804	90.7	44.0
Kerala	219	93.8	76.0
Madhya Pradesh	1140	78.4	32.0
Maharashtra	1007	93.3	80.0
Orissa	782	90.1	80.0
Punjab	306	87.8	64.0
Rajasthan	810	83.8	16.0
Tamil Nadu	523	89.5	52.0
Uttar Pradesh	3794	69.5	36.0
Uttaranchal	107	92.3	40.0
West Bengal	785	96.9	80.0
Delhi	112	89.4	56.0
Chandigarh	7	100.0	80.0
Arunachal Pradesh	24	63.3	28.0
Manipur	55	23.6	8.0
Meghalaya	59	66.5	56.0
Mizoram	33	100.0	68.0
Nagaland	53	92.3	28.0
Tripura	66	66.8	28.0

Appendix Table 10.4: Estimated Values of A and B (In %) for Major States/UTs/UTs (Continued…)

States/UTs	Number of PW & LM in '000 who received SN as on 31.3.2009*	Percent PW&LM receiving SN	Days for SN delivered (%)
Sikkim	6	86.8	52.0
Dadra & Nagar Haveli	4	100.0	96.0
Daman & Diu	1	100.0	88.0
Goa	12	100.0	96.0
Puducherry	9	100.0	96.0
Lakshadweep	2	78.3	48.0
Andaman & Nicobar Islands	5	74.2	60.0
All India	**15147**	**78.3**	**48.0**

*Ministry of Women and Child Development, 2008-09

Appendix Table 10.5: Proportion of SN funds spent for PW & LM

States/UTs	Actual Expenditure on cPW & LM's SN (in lakh) in 2008-09	Expenditure on PW & LM's SN as % to total expenditure on SN	Estimated value of SN reached/delivered to PW & LM as % to actual expenditure on PW & LM's SN in 2008-09
Andhra Pradesh	7824	22.3	35.1
Assam	1938	20.3	0.0
Bihar	10005	18.9	27.2
Chhattisgarh	4247	23.1	49.2
Gujarat	2445	18.7	42.8
Haryana	2809	24.4	67.0
Himachal Pradesh	948	20.9	48.2
Jammu & Kashmir	938	21.7	57.9
Jharkhand	4599	24.3	73.1
Karnataka	5446	22.1	39.9
Kerala	2102	17.7	71.3
Madhya Pradesh	5329	19.6	25.1
Maharashtra	6447	16.6	74.6
Orissa	3660	17.9	72.0
Punjab	1139	25.0	56.2
Rajasthan	5579	23.5	13.4
Tamil Nadu	2852	20.7	46.5
Uttar Pradesh	19910	18.3	25.0
Uttaranchal	218	20.5	36.9
West Bengal	4404	14.6	77.5
Delhi	894	18.4	50.1
Chandigarh	41	19.6	80.0
Arunachal Pradesh	112	12.7	17.7
Manipur	395	16.6	1.9
Meghalaya	535	17.0	37.2
Mizoram	359	24.0	68.0
Nagaland	430	17.2	25.8
Tripura	413	21.7	18.7

Appendix Table 10.5: Proportion of SN funds spent for PW & LM (Continued…)

States/UTs	Actual Expenditure on cPW & LM's SN (in lakh) in 2008-09	Expenditure on PW & LM's SN as % to total expenditure on SN	Estimated value of SN reached/delivered to PW & LM as % to actual expenditure on PW & LM's SN in 2008-09
Sikkim	116	18.2	45.1
Dadar & Nagar Haveli	24	19.7	96.0
Daman & Diu	2	19.6	88.0
Goa	72	22.9	96.0
Puducherry	122	27.4	96.0
Lakshadweep	27	24.0	37.6
Andaman & Nicobar Islands	94	21.1	44.5
All India	**95690**	**19.4**	**37.6**

Source: Ministry of Women and Child Development, 2008-09

Appendix Table 10.6: Proportion of Expenditure on Spent SN and Estimated Shares of Different Groups (%)

States/UTs	Estimated value of SN reached/delivered to children as % of total available funds for SN, 2008-09	Estimated value of SN reached/delivered to PW & LM as % of total available funds for SN, 2008-09	Estimated total value of SN reached/delivered as % of total available funds for SN, 2008-09
Andhra Pradesh	36.7	7.8	44.5
Assam	4.7	0.0	4.7
Bihar	23.9	5.1	29.0
Chhattisgarh	50.0	11.4	61.4
Gujarat	53.4	8.0	61.4
Haryana	33.0	16.3	49.3
Himachal Pradesh	41.5	10.1	51.6
Jammu & Kashmir	51.6	12.5	64.2
Jharkhand	48.1	17.8	65.9
Karnataka	52.6	8.8	61.4
Kerala	49.9	12.6	62.6
Madhya Pradesh	30.7	4.9	35.6
Maharashtra	48.7	12.4	61.1
Orissa	48.2	12.9	61.1
Punjab	30.2	14.0	44.2
Rajasthan	25.5	3.2	28.7
Tamil Nadu	50.5	9.6	60.1
Uttar Pradesh	18.6	4.6	23.1
Uttaranchal	20.8	7.6	28.4
West Bengal	56.2	11.3	67.5
Delhi	40.5	9.2	49.7
Chandigarh	48.1	15.7	63.8
Arunachal Pradesh	26.4	2.3	28.6
Manipur	18.0	0.3	18.3
Meghalaya	47.7	6.3	54.0
Mizoram	53.0	16.3	69.3
Nagaland	16.4	4.4	20.8

Appendix Table 10.6: Proportion of Expenditure on Spent SN and Estimated Shares of Different Groups (%) (Continued…)

States/UTs	Estimated value of SN reached/delivered to children as % of total available funds for SN, 2008-09	Estimated value of SN reached/delivered to PW & LM as % of total available funds for SN, 2008-09	Estimated total value of SN reached/delivered as % of total available funds for SN, 2008-09
Tripura	41.3	4.1	45.4
Sikkim	42.9	8.2	51.2
Dadar & Nagar Haveli	46.3	18.9	65.2
Daman & Diu	40.5	17.2	57.7
Goa	45.3	21.9	67.2
Puducherry	36.2	26.3	62.5
Lakshadweep	31.1	9.0	40.1
Andaman & Nicobar Islands	75.7	9.4	85.1
All India	**33.0**	**7.3**	**40.3**

Source: Estimated using data provided by Ministry of Women and Child Development, 2008-09

Appendix Table 10.7: Estimated Average Available Fund for SN on Different Types of Beneficiaries (Per Beneficiary Per Day In Rs.), 2008-09

States/UTs	Severely malnourished child		Other child		PW & LM	
	Average available fund for SN	Reached/ delivered	Average available fund for SN	Reached/ delivered	Average available fund for SN	Reached/ delivered
Andhra Pradesh	2.8	1.3	2.1	1.0	2.4	0.9
Assam	1.5	0.1	1.1	0.1	1.3	0.0
Bihar	5.5	1.6	4.1	1.2	4.7	1.3
Chhattisgarh	3.2	2.1	2.4	1.5	2.7	1.3
Gujarat	2.0	1.3	1.5	1.0	1.7	0.7
Haryana	3.9	1.7	2.9	1.2	3.3	2.2
Himachal Pradesh	3.8	2.0	2.8	1.5	3.2	1.6
Jammu & Kashmir	3.7	2.4	2.7	1.8	3.2	1.8
Jharkhand	2.7	1.7	2.0	1.3	2.3	1.7
Karnataka	2.7	1.8	2.0	1.3	2.3	0.9
Kerala	3.8	2.3	2.8	1.7	3.2	2.3
Madhya Pradesh	1.8	0.7	1.4	0.5	1.6	0.4
Maharashtra	2.5	1.5	1.9	1.1	2.1	1.6
Orissa	1.8	1.1	1.4	0.8	1.6	1.1
Punjab	1.5	0.6	1.1	0.4	1.2	0.7
Rajasthan	2.7	0.9	2.0	0.7	2.3	0.3
Tamil Nadu	2.1	1.4	1.6	1.0	1.8	0.8
Uttar Pradesh	2.1	0.5	1.5	0.3	1.7	0.4
Uttaranchal	0.8	0.2	0.6	0.2	0.7	0.2
West Bengal	2.2	1.4	1.6	1.1	1.9	1.4
Delhi	3.1	1.6	2.3	1.2	2.7	1.3
Chandigarh	2.2	1.3	1.6	1.0	1.9	1.5
Arunachal Pradesh	2.2	0.7	1.3	0.4	1.5	0.3
Manipur	2.8	0.6	2.1	0.5	2.4	0.0

Appendix Table 10.7: Estimated Average Available Fund for SN on Different Types of Beneficiaries (Per Beneficiary Per Day In Rs.) 2008-09 (Continued…)

States/UTs	Severely malnourished child		Other child		PW & LM	
	Average available fund for SN	Reached/ delivered	Average available fund for SN	Reached/ delivered	Average available fund for SN	Reached/ delivered
Meghalaya	3.6	2.1	2.6	1.5	3.0	1.1
Mizoram	4.3	3.0	3.2	2.2	3.6	2.5
Nagaland	3.2	0.6	2.3	0.5	2.7	0.7
Tripura	2.4	1.3	1.8	1.0	2.1	0.4
Sikkim	7.4	3.9	5.5	2.9	6.3	2.8
Dadra & Nagar Haveli	2.7	1.5	2.0	1.1	2.3	2.2
Daman & Diu	0.6	0.3	0.5	0.2	0.5	0.5
Goa	2.3	1.3	1.7	1.0	1.9	1.9
Puducherry	4.0	2.0	4.0	2.0	4.6	4.5
Lakshadweep	2.5	1.0	1.8	0.7	2.1	0.8
Andaman & Nicobar Islands	7.9	7.6	5.8	5.6	6.7	3.0
All India	**2.5**	**1.0**	**1.8**	**0.7**	**2.1**	**0.8**

Source: Estimated using data provided by Ministry of Women and Child Development, 2008-09

Towards a new dawn

ICDS MISSION

The Broad Framework for Implementation



MINISTRY OF WOMEN AND CHILD DEVELOPMENT

GOVERNMENT OF INDIA

ICDS MISSION

The Broad Framework for Implementation

MINISTRY OF WOMEN AND CHILD DEVELOPMENT

GOVERNMENT OF INDIA

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1. THE CONTEXT

1.1 The Challenge

India is home to 158.7 million children in the age group of 0-6 years. With nearly 20 per cent of the 0-4 years' child population of the world, India is home to the largest number of children in the world[1]. Despite growth in literacy and economy, the understanding of holistic development of children remains less understood, absorbed and assimilated and more importantly underinvested.

INDIA : SITUATION OF CHILDREN – 0-6 YEARS

- Nearly every fifth child in the world lives in India
- 0-6 years (Census-2011)
  - Total children: 15.87 crore;
    - ✓ Male: 8.29 crore;
    - ✓ Female: 7.58 crore;
  - About 5 million less than Census 2001;
  - Decline more in Girl Child: 30 lakh;
- Child Birth: 2.5 Crore annually; Child Survival: 1.75 Crore
- Mortality: 0.8 Crore annually; Missing girl: 0.4-0.5 Crore
- Declining child sex ratio from 927 to 914 /1000
- IMR: 47; male – 46., female 49; (SRS 2010)
- U5MR: India: 59; male: 55; female 64 (SRS 2010)
- LBW Babies: 22% (NFHS-3)
- Only 44% infants are fully immunised (NFHS-3)
- 42.5% of children 0-5 years are underweight (NFHS-3)
- 79% children (6-35 months) are anaemic (NFHS-3)

Around 40 per cent of children remain undernourished with their growth and development impeded irrevocably, over the lifetime. Strong Constitutional, legislative policy, plan and programme commitments including a range of national programmes notwithstanding, improved early child development outcomes remain a real challenge. Certainly, there is a need for higher investment, greater commitment at all levels besides application in terms of design, delivery and deployment of resources, both human and financial to restore the overall growth and development of children.

1.2 ICDS: The Evolution & Progress

Launched in 1975, ICDS is a unique early childhood development programme aimed at addressing health, nutrition and the development needs of young children, pregnant and nursing mothers. Over 35 years of its operation, ICDS has expanded from 33 community development blocks selected in 1975 to cover almost all habitations (14 lakh) across the country. However, the larger part of expansion (more than 50%) has taken place post 2005. Recognizing that early childhood development constitutes the foundation of human development, ICDS is designed to promote holistic development of children under six years, through the strengthened capacity of caregivers and communities and improved access to basic services, at the community level. Within this group, priority is accorded to addressing the critical prenatal- under three years age group, the period of most rapid growth and development and also of greatest vulnerability. The programme is specifically designed to reach disadvantaged and low income groups, for effective disparity reduction. ICDS provides the convergent interface / platform between communities and other systems such as primary healthcare, education, water and sanitation among others. The programme has the potential to break an intergenerational cycle of undernutrition as well as address the multiple disadvantages faced by girls and women but with adequate investment and enabling environment.

[1] According to the World Population Prospects 2008, Revision population database, the child population in the age group 0-4 for India in 2010 is estimated to be (median variant) 126 million against 88 million in China. The population of children in the age group 0-14 for the same year for India is estimated as 374 million as compared to 269 million in China.

1.3 Emerging Issues and Gaps

Over the years, ICDS has evolved with difference across the States in regard to modalities of delivery, convergence, community and NGO participation, duration in service hours, available infrastructure and facilities, incentives to honorary workers, selection processes etc. The diversity is also linked to levels of governance in States / UTs. There are examples of innovative and successful models under ICDS implemented by the State Governments of Tamil Nadu, Gujarat, Karnataka, Andhra Pradesh, Kerala, Rajasthan, Orissa etc., in respect of one or more components or interventions that have shown good results and have the potential of being replicated. The programme as a whole has potential for delivering on the nutritional and early childhood outcomes, if invested, supported and managed well.

(i) **Challenges of Universalisation:** In 2008-09, the programme was universalized, this meant rapid expansion from a 8.44 lakh AWCs in 2007 to 13.19 lakh operational AWCs in August 2012 and target of 14 lakh AWCs by the end of 2012 without the corresponding augmentation of resources, both human and financial resulting in a series of operational challenges at all levels. Some of the challenges that have accompanied the universalisation and third phase of expansion are summarized below:

ICDS UNIVERSALISATION AND THIRD PHASE OF EXPANSION: CURRENT CHALLENGES

The universalisation of ICDS Scheme has not been an unmixed blessing. While adding the number of AWCs and taking them to the door steps of children in smaller clusters has been a welcome step, it (universalization) concomitantly has brought in its wake, huge challenges in terms of resources as well as challenges of management, delivery of services with quality and standards. These are briefly as under:-

- **Delay in universalisation:**
  - Approved for Universalization in 2008-09, 6722 projects Operational (March 2011); 7005 projects (Aug 2012)
  - 7076 projects in 14 lakh habitations; 12.62 lakh AWCs Operational (Mar 2011); 13.19 lakh AWCs (Aug 2012)
  - Cost of Supplementary nutrition: Rs.1 (1991 to 2004); Rs.2 – 2.70 (2004 – 09); Rs. 4 – 6 (2009 – 10)
  - Adherence to revised population norms not conformed.
  - Mapping (GIS) and Ground verification yet to be completed to ensure saturation of coverage.
- **SNP management and administrative challenges:**
  - Adoption of and adherence to revised nutritional and cost norms still underway and not achieved fully.
  - Optimization of coverage and improved quality of delivery an issue.
  - Improved supply chain and commodity management and uninterrupted distribution at AWC for 25 days in a month.
- **Financial management and SOE:**
  - Timely submission of component-wise expenditure in SOE along with Utilization Certificate (UC)
  - Fund utilizations as per norms under SNP and ICDS(G) including expenditure on components like PSE, Medical kits, POL, utilization of flexi funds etc.
- **Inadequate Availability of space for Anganwadi Centres**
- **Availability of Human resource:** Large scale vacancies (August 2012) - CDPO/ ACDPO (32%), Supervisors (34%), AWW (8%)/ AWH (8%), need for a dedicated cadre &team for ICDS functionaries & tenure stability and disengagement of ICDS functionaries from non- ICDS related activities. Mode of engagement needs to be worked out.
- **Increased challenge for Inter Sectoral Convergence:** Provision of safe drinking water and child friendly toilet, joint arrangement of delivery of 3 services: Immunization, Health Check-up and Referral, Joint Home Visits, management and treatment of undernourished children, the linkage with NRC and MTC
- **Low focus on Growth monitoring, ECCE and PSE kits:** Roll out new WHO Growth Standards and Joint MCP cards and ensure availability of PSE kits
- **Low focus on Early childhood Education:** need for policy, curriculum framework and guidelines
- **Challenges of strengthening Training, Monitoring, MIS and ICT:** Focus on cross sectoral, horizontal and vertical integration, in content and participation of training component,timely transfer of funds to AWTCs & MLTCs, implementation of monitoring Guidelines

(ii) **Programmatic and Operational Gaps:** Based on the learning from various studies and inputs received from States through series of consultations as well as from Annual Programme Implementation Plans (APIPs) key gaps in the implementation, management, supervision and monitoring of present ICDS programme have been identified. Major gap areas in effective implementation of ICDS can be categorised in two broad categories i.e., programmatic gaps and operational issues, as discussed below:

- **Programmatic Gaps:** The implementation of ICDS Scheme has been uneven across the States/UTs in the country. The programmatic gaps have been many. While some of them are faced universally across the States/UTs, there are others which are State-specific. The universalisation has, in a way, aggravated the position in respect of some of them. These include: (a) absence of physical space (building) and facilities to operate efficiently and effectively; (b) constraints of quality and number of human resources for meeting diverse needs for service provision with improved quality; (c) inadequate focus on under 3s; (d) inadequate focus on Early Childhood Education (ECE) as large part of time of AWW's spent in AWC related work; (e)perceived as feeding center operated through an overburdened and underpaid AWW; (f) low investment on child development in terms of provision of adequate resources, both human and financial; (g) inadequate convergence of programmes / services – weak linkages with public health system; (h) Implementation of programme largely left to States - low intensity engagement with States in planning, implementation, monitoring and supervision; (i) community engagement and participation virtually non-existent often leading to lower demand for services; (j) poor data management, information system (MIS), analysis and reporting; (k) inadequate and inappropriate training; (l) programme implementation guided by periodic revisions of norms and Office Order / Circulars; (m) lack of comprehensive programme implementation guidelines; and (n) little or no attention paid to the needs of working women – availability and accessibility of crèche and day care services (not part of the current programme).

- **Operational Issues:** Besides, the programmatic gaps ICDS implementation is marked with many operational issues such as: (a) inadequate operational efficiency and accountability at national, state, district and grassroots levels in absence of infrastructure, human resource (large vacancies, educational qualification and inadequate numbers), mobility, etc.; (b) delivery of supplementary nutrition due to non-sharing of cost on SNP prior to 2005 – 06, followed by issues in management of SNP arising out of the requirement to supply morning snack and hot cooked meal; (c) non revision & indexation of cost to rising prices of food, fuel and transportation etc.; (d) program envisaged as community driven but in reality has evolved as State run programme; (e) regularity of AWC functioning in terms of prescribed working hours, number of days and service provision; (f) slow pace of universalisation due to a variety of problems faced by the States/UTs; (g) fund transfer mechanism marked with delays at all levels often resulting in delays in release of funds and payments to AWWs and for SNP; (h) Concurrent monitoring a continuing weak point – inadequacy and non-usage of data, poor management information system (MIS); and (i) Single AWW at each AWC & ICDS functionaries burdened with non- ICDS functions.

1.4 The Environment for Change

In order to create the present environment for change and for strengthening and restructuring of ICDS, the Ministry of Women and Child Development had initiated and taken various pro-active measures following Mid Term Appraisal of the Eleventh Five Year Plan and simultaneously in the context of preparing for the Joint strategy Paper for addressing India's Nutrition challenges. The issue

of strengthening and restructuring of ICDS has been the centrepiece of the strategy which was deliberated upon in a series of consultations held at various levels. These consultations were held with all concerned in different sectors, partners as well as State WCD Secretaries with the aim to generate understanding as well as arrive at comprehensive strategies and actions for addressing India's nutrition challenges. Inter-ministerial meetings were also held between the Ministry of Health & Family Welfare and the Ministry of Women and Child Development. The joint strategy paper on addressing India's Nutrition challenges was validated through a Multi-sectoral Retreat organised by the Planning Commission in the series of these deliberations. ICDS restructuring and strengthening emerged as one of the major recommendations in all these consultations and deliberations and was taken forward to the PM's National Council on India's Nutrition Challenge.

The decisions of the PM's National Council on India's Nutrition Challenge and recommendations of the National Advisory Council (NAC), the Twelfth Plan Approach Paper along with various consultations mentioned above, reflect the debate and the larger consensus that has emerged around ICDS and its desired impact. The ICDS platform is viewed as a base for providing a continuum of care in a life-cycle approach aimed towards impacting mother and child development. In order to achieve this, there is also consensus on the need to restructure and strengthen ICDS both programmatically and structurally, backed by adequate resource investment, thereby establishing and ensuring standards of quality, coverage as well as flexibility in operations.

The Inter-ministerial Group constituted on ICDS Restructuring led by the Member, Planning Commission (in-charge of WCD) which also included some of the State representatives, submitted its report[2] along with the proposal given in the Broad Framework for Implementation. This framework has been evolved keeping in mind the decisions in the PM Council and core principles and recommendations of the NAC by the IMG. The recommendations were incorporated in the proposal for Strengthening and restructuring of ICDS.

Further, the EFC considered the proposal on 22nd March and 20th July 2012 wherein, it was considered that there should be greater ownership of the States and that the State Governments need to invest more in the Scheme. It decided that the cost sharing pattern in most of the new components should be at least 75:25 excluding NER where it would continue to be 90:10. It was further agreed that clear outcomes be laid out and all possible data should be made available to test the actual outcome with the targeted one. It was agreed that Annual Health Survey (AHS) and District Level Household Survey (DLHS) to be used as baseline for measuring the outcomes of ICDS Mission. Based on the EFC, the original proposal and the Broad Framework for Implementation have been revised in terms of program, financial resources and human resources.

The Strengthening and Restructuring of ICDS contained in the framework and in the subsequent Para are moderated to the extent of approved norms and discussion. Framework of implementation of ICDS Mission is formulated - based on the analysis of issues/priorities, design, implementation and resource gaps, action possibilities, core strategies identified and spectrum of programmatic, management and institutional reform envisaged. MoUs would be signed between Central and State governments / UT administrations with agreed state-specific objectives for preventing and reducing child undernutrition and promotion of integrated early child development. There are stipulated outcomes to be achieved through service standards and process indicators in the mission.

[2]http://www.planningcommission.nic.in/reports/genrep/rep_icds2704.pdf

2. ICDS STRENGTHENING AND RESTRUCTURING

The ICDS Scheme has been a well conceived Scheme. But the real problem lies in its implementation which arises out of inadequate funding, lack of convergence, accountability of those managing and implementing the programme, specially, at the level of anganwadi centres and supervisory level, lack of community ownership and the general perception about this being a feeding programme and not an Early Childhood Development programme. If these inadequacies are addressed appropriately, the Scheme has the potential to give satisfactory nutritional and child development outcomes. The strengthening and restructuring of the Scheme will then have to address these concerns. Conceivably then, this would need to be undertaken as a necessity. But the issue of management of anganwadi centres and their supervision, capacity building and focus on under 3 (<3) will require putting in place the system of controls which are decentralized and which are closer to the scene of operation. The experience, so far, has been that any amount of guidelines/instructions issued by the Government of India or by the State Governments, do not percolate evenly and with the same seriousness down to the last level, the States/UTs. As a result, the accountability becomes a casualty and, thus, the delivery under the programme suffers.

ICDS strengthening and restructuring addresses the above issues and provides framework for implementation of ICDS Scheme in the Mission Mode.

2.1 ICDS Strengthening

The Ministry of Women & Child Development has been working on ICDS strengthening and has after the meeting of the PM's Council on India's nutritional challenges, taken steps towards it. These are recounted in the succeeding paragraphs along with the steps which are in the pipeline for further improvement in the delivery of services as well as for better supervision. The recent (2011-12) doubling of honorarium of the Anganwadi Workers (AWWs) and Anganwadi Helpers (AWHs) by the Government of India meets a long standing demand of workers and would need to be factored in for enforcing quality, greater regularity in the management of Anganwadi Centre as well as a longer duration of work against the existing 4 hours prescribed generally in most of the States/UTs.

It may be noted that the gaps in the programme management and its implementation are well understood and have been documented from time to time. This has led to making demands for resources as well as issuance of guidelines for better management and control of the programme from time to time. But the approach has been piecemeal and on the top of it, response of the States has been uneven. While some of the State Governments like, Tamil Nadu, Gujarat, Karnataka, Andhra Pradesh have invested in the programme for State resources, the others like, Uttar Pradesh, Bihar, Jharkhand, West Bengal are implementing the Scheme as largely a feeding programme without much innovation and without augmentation of resources from the State funds. One of the reasons could be that the States have a deficit of funds. But, this has more to do with the understanding of criticality of need of children of the 0-6 years of age and the commitments of States/UTs to invest on them besides the overall issue of governance in these States. Therefore, any proposal for strengthening and restructuring, no matter how well devised and thought of, will also have to contend with these challenges calling for a greater state ownership, commitments and priority attention to maternal and child care for child development outcomes.

2.1.1 Steps Initiated for Strengthening

- **Annual Programme Implementation Plans (APIPs)** in at least 10 States in 2011-12. During 2012-13, APIPs have been received from more than 25 states till date.

IDA assisted ISSNIP programme in eight selected States in 162 plus districts including additional districts from Odisha and Uttarakhand and urban pilots. The programme has now been approved and aims to address greater governance and programmatic deficits by providing catalytic support for system strengthening, conducting various pilots, innovations and experimentation of various good practices, development of protocols / standards / guidelines. Community mobilisation, behaviour change are also part of pilots. These would provide the framework of district annual programme implementation plans and learnings for scaling up.

- **Adoption of WHO Child Growth Standards and Joint Mother & Child Protection Card**
- Introduction of the **five-tier monitoring system** (March 2011) including supervision guidelines (Oct. 2010)
- Draft Guidelines for **grading and accreditation of AWCs and awards** for service providers and other stakeholder issued
- Pilot Testing of **revised Management Information System (MIS) completed,** Revised MIS Guidelines issued, roll out during current year and spill over next year
- **Core Group on ECCE Policy Formulation** – draft ECCE Policy, Curriculum Framework and Standards prepared; shared in public domain for comments and suggestions; national consultation planned in October 2012 for finalization; expected to be approved by the end of current financial year.
- **Enhancement of honoraria** of AWW & AWH (March 2011)
- **Establishment of Nutrition Resource Platform –** Process initiated for establishment of single e-platform for sharing knowledge related to nutrition by different stakeholders and sectors having a Digital/physical Library, web-based knowledge management e-forum for discussion and exchange of ideas and a package of services for end-users through mobile telephony services (ongoing).

2.1.2 Steps Ahead for Strengthening

Universalisation with quality with focus on operationalizing 7076 approved projects and 14 lakhs AWCs across the country; harmonization of jurisdiction- PHC / CHC, district cells, project & AWCs; Cluster approach – on a cluster of 17 - 25 AWCs, a Cluster Office in a selected AWC to be set up by placing one Supervisor; Focus on under 3s – Growth monitoring & IYCF; Training & capacity building at all levels; rolling out revised MIS; use of ICT; Health & Nutrition Education and caring practices; preliminary actions for strengthening ECCE by formulation of policy, curriculum etc.; addressing issues pertaining to human resource and Grading and accreditation of AWCs Revision in cost norms for Supplementary Nutrition and providing scope for flexibility to states and in implementation and provision for untied funds to address Innovations, pilots and local needs are also envisaged for expediting the processes.

There will be additional funds required both for construction of anganwadi buildings and for providing facilities as well as for increased rentals for hiring buildings, wherever, construction is not a viable option. The replacement of weighing scales and other equipments will be a periodic requirement and shall have to be provided for. The current cost norms of IEC, pre-school education and medicine kits are on the lower side and need revision. Additional resources will also be required for mobility of Supervisors and for IYCF activities. The IYCF activities would focus on under 3 (<3) and will require experimentation with different set of options including that of having additional nutritional coordinators at the block level.

2.1.3 Lessons / Suggestions

LESSONS / SUGGESTIONS FROM STATE APIPs: 2011 – 2012

- Need for additional positions at different levels for better management and implementation of ICDS at different levels
  - Directors/Program officers/Monitoring Officers at the Regional Level (Gujarat, Tamil Nadu); Asst. Project Directors in each District (A.P.); Monitoring Cell/Personnel at the State Level (West Bengal)
  - Additional Technical Staff at State Level (Jharkhand; U.P.) and District Level (Jharkhand)
  - Additional worker at the AWC level (Tamil Nadu); ASHA-Sahyogini (Rajasthan); Select 1 AWW as supervisor for 5-6 AWCs (Cluster Approach) (Jharkhand)
- Creation of a society structure for facilitating convergence and greater flexibility (A.P. for strengthening convergence; M.P. and Gujarat as part of their Nutrition Mission)
- Hiring medical personnel/ANMs as appropriate as per need
  - MO/ANM budget under ICDS in A.P – also Tamil Nadu
  - Hiring services of private doctors at the Block level where MO position is vacant or health check up not taking place with desired frequency (Karnataka)
  - Hiring ANM for periodic immunisation sessions in urban slums (funds from NRHM) (West Bengal)
- Special training of functionaries on ECE through specific training institutes specialising in ECE (A.P., Rajasthan)
- Organising special events for disseminating critical IYCF and health and nutrition messages such as *Annaprasana* etc. (A.P., M.P., Gujarat)
- Using modern communication channels for capacity building such as SATCOM and interactive TV programs (A.P., Gujarat)
- GMIS/GIS (A.P., Gujarat, Tamil Nadu)
- Accreditation of AWCs (A.P., Karnataka, U.P., West Bengal)
- Annual/Periodic Surveys and Studies to assess actual prevalence of malnutrition (A.P., M.P., U.P., Tamil Nadu)
- Annual ECE Days (Karnataka, Gujarat); Monthly Bal Sabha (M.P.)
- Community Monitoring through different mechanisms (Karnataka, Rajasthan, Jharkhand)
  - Bal Vikas Samiti (Karnataka)
  - Through PRI involvement (Rajasthan)
  - Community Score Cards and engagement of PRIs (Jharkhand)
- Increased working hours of AWCs by offering additional honorarium (M.P., Gujarat)
- Performance Incentives and Awards to AWWs (Gujarat, Rajasthan)
- Sector Alignment for better convergence between Health and ICDS Departments/Services (Gujarat, Rajasthan)
- Corporate Sector Engagement with necessary guidelines (Tamil Nadu, Gujarat)
- AWC Building – all States

NEED PROJECTED BY THE STATES

- Reconsideration of population norms for opening of AWCs
- ECE funds under SSA should be mandatorily shifted to ICDS.
- Protocol for treatment of severely and malnourished children. Setting up of Nutrition Rehabilitation Centre, Expert committee to lay down protocol
- Uniform Recruitment Rules, qualifications for appointment of AWWs and fixation of retirement age.
- Separate medical facilities at AWC
- Revision of rent – rural, urban and metro cities seperately.
- Need for Community contribution.
- Flexibility in staff and revision of norms.
- Model guidelines for PSE Kits and revision of rates.
- Improved quality of PSE kits.
- Modernisation of AWCs
- Purchase of vehicle with post of Driver.
- Payment of permanent Travelling Allowance to ICDS functionaries
- Construction of AWCs through Central funds.
- Increase working hours of AWCs to six hours.
- Flexi pool funds etc. – revision of rates every five years.
- State wise survey on nutrition.
- Health workers to be sensitized for IYCF.
- SNP cost indexation.
- Increase in uniform cost.

2.2 ICDS Restructuring

With the vision of transforming ICDS Scheme to ensure holistic - physical, psychosocial, cognitive and emotional - development of young children under 6 years of age in a nurturing, protective, child friendly and gender sensitive family, community, programme and policy environments, ICDS would be required to be implemented in Mission Mode, as in case of other major flagship programmes like NRHM, SSA, etc. ICDS in Mission in Mode would facilitate its implementation in flexible mode, with appropriate institutional mechanisms at Central, State, District & Block levels as well as adequate human and financial resources linked to accountability and outcomes.

In order to achieve this and enhance the impact on child related outcomes following programmatic, management and institutional reforms would be undertaken.

2.2.1 Programmatic Reforms

The programmatic reforms inter alia include a range of reformative actions related to programme planning and implementation from the central to the AWC level. The focus would be on:

(i) **Repositioning the AWC as a "vibrant ECD centre" to become the first village outpost for health, nutrition and early learning** with adequate infrastructure and human resources for ensuring a continuum of care in a life-cycle approach to early childhood care and development, emphasizing the child's physical, cognitive, emotional and social development until the age of six years. AWCs would be equipped as a child friendly centre with adequate infrastructure, facilities (kitchen, safe drinking water& child-friendly toilets), wall painting, play space and joyful learning environment. The activities of AWC would be expanded to include extended hours (minimum of 6 hours), provide flexibility to State for running of crèches and day care centres as well as linkages with IGMSY & RGSEAG.

The provision of day care crèches is essential for care and development of children in the above 6 months - 6 years of age, whose mothers go for work and there are no adult care givers at home. There is a need for providing day care crèche facilities at the AWCs having outreach up to the habitation levels. To begin with, 5% of the AWCs would be converted into AWC-cum- crèche on a 75:25 cost sharing basis with flexibility to States. States would be given flexibility to explore the engagement of NGOs in implementing the model. Detailed guidelines for piloting AWC cum Crèche Services in selected areas may be seen at **Annexure – I.**

(ii) **Appropriate AWC Building and Infrastructure:** Adequate and appropriate infrastructure for AWC including construction of new buildings, maintenance and repair of existing buildings as well as provision of enhanced rent would be ensured by ICDS Mission for the effective implementation of the scheme. Following specific activities would be undertaken to achieve this:

a) ***Construction of AWC Buildings:*** Following universalisation, 13.19 lakh operational anganwadis (August 2012) have become operational against 14 lakh approved. According to available statistics, nearly 46-50% of anganwadi centres are currently functioning in pakka buildings / school buildings / school and community buildings. Thus, there are still about 7 lakh anganwadi centres which do not have a building of their own. In order to facilitate better delivery of services, providing pakka building for anganwadi centre either of its own or on rent would be essential. It is expected that the States will be in a position to leverage nearly 20% of the requirement of anganwadi centres through convergence with other programmes namely BRGF, MSDP, etc. Further, nearly 20-25% anganwadi buildings would

continue to be in the rented premises. This would specially be the case for anganwadis in the urban centres/ villages with large population. This leaves nearly 4 lakh anganwadi centres which would require to be built out of funds to be provided under ICDS Scheme.

The ICDS Mission, during the 12th Five Year Plan, would construct 2 lakh Anganwadi buildings @Rs.4.5 lakh per building. For construction of remaining AWC buildings, the State Governments would continue to leverage funds from BRGF, Area Development Programme, MSDP, RIDF, IAP, MGNREGA, 13th Finance Commission, ACA, MPLAD, MLALAD etc. Further, the Planning Commission, would issue directives to State Governments and concerned line Ministries for mandatory allotment of funds from State resources as well as leveraging funds from the aforementioned Schemes. The cost of AWC buildings would be in accordance with the State Schedule of Rates (SOR) and guidelines issued by the MWCD. Through all these efforts and mainly in convergence with MNREGA a multiplier effect of completing all remaining AWCs buildings could be achieved by States. The revision of rates for construction of AWC building, i.e., @ Rs. 4.5 lakh per unit, would also apply to NER. The cost sharing ratio for this component would be 75:25 except NER where it would continue to be 90:10.

While planning the construction, due regard shall be given to the fact that they are located next to schools and/ or construction is done in clusters, in villages having more than one AWC, to rationalize the cost of construction without compromising the comfort of the child in covering the distance. Almost all the States have developed model anganwadi centres which would be given due consideration. The MWCD has issued guidelines stating that AWCs should be child friendly with all relevant infrastructure and the space should be at least 600 sq. ft. MWCD's letter in this regard is given at **Annexure –II.** The construction of AWCs would be carried out as per following schedule (for country as a whole):

DETAILS OF CONSTRUCTION OF AWCS IN A PHASED MANNER

Sl. No.	Particulars	Year-1	Year-2	Year-3	Year-4	Year-5	Total
1	Total AWCs to be constructed	0	20,000	50,000	60,000	70,000	2,00,000
2	% w.r.t. total	0	10	25	30	35	100
3	Construction in other states	0	18,500	46,250	55,500	64,750	1,85,000
4	Construction in NER states	0	1,500	3,750	4,500	5,250	15,000

States will be required to prepare and present a perspective plan for the Plan period in a phased manner giving details of current position of own and dedicated building of AWCs and the number of buildings to be constructed by leveraging from various programmes and proposed requirement.

b) ***Up-gradation and Maintenance:*** The existing AWCs that have own buildings and are lacking in infrastructure, would be provided funds for up-gradation including provision of child friendly buildings and water supply and sanitation. For this purpose a provision of upto Rs. 1,00,000 per buliding (including provision for AWC cum crèche) on 75:25 cost sharing basis would be provided under the ICDS Mission. This is over and above the AWCs which are being constructed under various schemes of other Ministries. Up-gradation of 2 lakh AWC buildings would be carried out as per following schedule:

DETAILS OF UP-GRADATION OF AWCS IN A PHASED MANNER							
Sl. No.	Particulars	Year-1	Year-2	Year-3	Year-4	Year-5	Total
1	AWCs to be upgraded	0	30,000	50,000	60,000	60,000	2,00,000

At present, there is no **provision for maintenance** and upkeep of the AWCs owned and constructed by the government as no funds were provided for the said purpose. In the absence of funds, it nas not been possible to maintain these buildings. For the safety and security of the little siblings, it is necessary to provide them safe, pucca and well maintained accommodation. Even for normal wear and tear and repair, it is necessary to provide funds. In view of this, maintenance cost to all government owned AWCs that owns a building, i.e., about 7 lakh, @Rs.2000 per AWC per annum would be provided under the ICDS Mission. The Centre-State cost sharing ratio would be 75:25. This provision is not applicable for rented AWC buildings.

c) ***Enhancement of Rent:*** At present around 4 lakh AWCs are reported to be running from rented buildings. The present rates for AWC building rent is Rs. 200 for rural centres and Rs. 750 for urban centres. This amount is grossly inadequate keeping in view the area required, ambience and present rent rates. States/UTs have indicated that it is difficult to find rented good accommodation for AWCs at current rate. Thus, it is decided to increase the monthly rent of the AWCs as under:

- Upto Rs.750 for AWCs / Mini-AWCs in rural and tribal areas.
- Upto Rs.3000 for AWCs / Mini-AWCs in urban areas depending upon the tier / class of the town/city
- Upto Rs.5000 for AWCs / Mini-AWCs in metropolitan cities

The revised rent for AWCs will only be applicable for centres offering a space of at least 600 sq. ft. with adequate infrastructure facilities. Guidelines and standards for a child- friendly AWC (including safe drinking water and sanitation) would be laid down in the Implementation Guidelines of the Scheme and it would be made mandatory to follow these guidelines while hiring rented accommodations. Wherever such space and / or toilet and drinking water is not available, such centres should be shifted or 6 months time should be given to the owner to construct toilet and arrange for drinking water facility. Till such time, the increase in rent will not come into effect. The determination of the rent per unit will be subject to the rent reasonableness certificate given by the CPWD/PWD/Rent Assessor. Centre-State cost sharing ratio would continue to be 90:10 for this component.

d) ***Enhancement of Rent for CDPO building:*** There are 7076 sanctioned ICDS Projects many of which operate from rented premises. At present rent for CDPO buildings are paid at Rs. 30000/- per project per annum for rural / tribal areas, while Rs.40000/- per project per annum for urban areas. Under the ICDS Mission, the rent for CDPO buildings would be enhanced @Rs. 79200/- per project per annum (Rs.6600/- per month) for all CDPO buildings, with centre – state cost sharing ratio being 75:25.

(iii) **Strengthening Package of Services:** Under the ICDS Mission, the core of package of six services would be continued, but these would be reorganized and reformatted. The perception of this being a feeding centre will have to change. For this, anganwadi centres would be transformed as Early Childhood Care and Development Centres. With this change, the existing package of services would be reformatted as under:

Sl. No	Components	Services	Core Interventions	Target Group	Service Provider
1.	Early Childhood Care Education & Development (ECCED)	Early Childhood Care and Education (ECCE) / Pre-school Non-formal Education	• Home based guidance for parents • Early stimulation • Early screening and referral • Optimal IYCF Practices • Monthly Monitoring & Promotion of Child Growth & Developmental Milestones. • Fixed Monthly Village ECCE Days	0-3years Parents/caregivers	AWW /Second AWW cum Child Care & Nutrition Counsellor
			• Non formal preschool education: a) activity based b) semi-structured play and learning method • Quarterly Monitoring & Promotion of Child Growth & Developmental Milestones. • Fixed Monthly Village ECCE Days	3-6 years Parents / caregivers	AWW
		Supplementary Nutrition	• Morning snack, Hot Cooked Meal and THR as per norms	6 m – 3 yrs 3-6 years P&L Mothers	AWW / Second AWW/ AWH / SHGs / others
2.	Care & Nutrition Counselling	Infant & Young Child Feeding (IYCF) Promotion &Counseling	• One to one counselling for optimal breastfeeding practices linked to growth monitoring • One to one counselling on Complementary feeding • Counselling to ensure food intake • Home visit and follow up	P&L mothers. Mothers of children under 3 yrs	AWW / Second AWW cum nutrition counsellor/ supervisors ASHA / ANM
		Maternal Care and Counselling	• Early registration of pregnancy, 3 or more ANC, Institutional delivery and PNC • Counselling on diet ,rest and IFA compliance during Home visit • Monitoring weight gain • Examination for pallor and oedema and any danger signs • Home based counselling for essential newborn care • Counselling and lactational support • Counselling on spacing	P&L women	ASHA / ANM / MO/Second AWW cum nutrition counsellor
		Care, Nutrition, Health & Hygiene Education	• Monthly health and nutrition education sessions • Education on Improved caring practices– feeding, health and hygiene and psychosocial. • Knowledge sharing for care during Pregnancy, lactation and adolescence • Promotion of local foods and family feeding. • Appropriate food demonstration • Celebration of nutrition week, Breastfeeding week , ICDS day etc	P&L Mother and other caregivers , community and families	AWW / Second AWW cum nutrition counsellor/supervisors

		Community based care and Management of underweight children	• 100% weighing of all eligible children and identification of underweight children • Referral to NRCs/MTCs for children requiring medical attention • 12 day Nutritional counselling and care sessions for moderately and severely underweight children (SNEHA SHIVIRs) • 18 day home care and follow up during home visit • Monitoring of weight gain after 12 days and 18 days	Moderately and Severely under-weight children &their mothers/careg iver	AWWs/ AWH/ supervisors/ Mothers' Group/PRIs / SHGs /MO ASHA and ANM as facilitator
3.	Health Services	Immunization and micronutrient supplementation	• Regular Fixed Monthly VHNDs • Primary Immunization • Boosters • TT for Pregnant women • Vitamin A supplementation (9 months – 5 years) • IFA supplementation (Infants after 6 months of age) • Deworming as per guidelines • Counselling	0-3 years 3-6 years P&PL Mothers	ANM / MO / ASHA/ AWWs as facilitator
		Health Check Up	• ANC / PNC / JSY • Support for IMNCI / JSSK • Identification of severely underweight children requiring medical attention • Support to Community based care of underweight children	0-3 years 3-6 years P&L Mothers	ANM / MO / ASHA /AWWs as facilitator
		Referral Services	• Referral of severely underweight to health facility/NRCs • Referral for complications during pregnancy • Referral of sick newborns • Referral of sick children	0-3 years 3-6 years P&L Mothers	ANM / MO / ASHA/ AWWs
4.	Community Mobilization, Awareness, Advocacy & IEC	IEC, Campaigns and Drives etc.	• Information dissemination & awareness generation on entitlements, programmes behaviours and practices • Sharing of nutritional status of children at gram sabha meetings • Linkage with VHSNC • Voluntary Action Groups • Village contact drives	Families & Community	AWW / Second AWW/ supervisors / FNB / Dist. & Block Resource Centres / ICDS Management

Accordingly, the core package of ICDS services has been revised and the write up on each service package is given at **Annexure – III.**

(iv) **Focusing on the under-3s and early child care and learning environment** by developing and implementing key strategies to promote optimal IYCF Practices through IPC, intense home contacts. Village drives using relevant IEC, would include improving knowledge and skill base of nutrition counsellors, supervisors and frontline workers. Institutions / voluntary organisations with expertise on IYCF practices, like Breastfeeding Promotion Network of India (BPNI) would be engaged.

Building capacities of the grassroots functionaries through joint training initiative (NRHM & ICDS) to strengthen the continuum of care during pregnancy and first 3 years would be undertaken. An additional worker in 200 high-burden districts or co-opting for a payment / incentive to ASHA (wherever existing additionally), besides recruitment of youth volunteers on stipend basis and / or through mobilisation of community women volunteers (one for 15-20 households) for improved family contact and prioritised home visits at critical contact points[3] would be attempted. The provision of additional worker / link worker would be provided on demand by State Government duly approved through APIPs by the EPC under the ICDS Mission. The incentives for link workers including ASHA workers would be directly linked to outcomes and subject to overall budgetary limitations.

Facility based management of severe undernutrition at Nutrition Rehabilitation Centres (NRCs) under NRHM. IMNCI initiative (community and facility based) in RCH / NRHM is implemented in several States along with joint actions of both WCD and Health on key interventions for home based essential newborn care, child health and nutrition.

(v) **Strengthening Early Childhood Care and Education (ECCE):** The focus would be on strengthening early childhood care and education as a core service of the Anganwadi Centres with dedicated four (4) hours of early childhood education sessions followed by supplementary nutrition, growth monitoring and other related interventions. Besides, content / quality enrichment in ECCE, including early stimulation through Mother Child Card package as well as early detection of delayed developmental milestones and early intervention for children with special needs would be undertaken.

In order to ensure essential elements of quality ECCE, following major activities would be undertaken:

(i) Setting up regulations, norms and standards;
(ii) Developing and Implementing activity based child centres and age appropriate curricula (Indicative activities are at **Annexure – IV**) aiming at all round development of children;
(iii) Ensure school readiness interventions for 5 plus year olds in AWCs and in schools as per State context;
(iv) Availability of quality workforce, fully motivated and appropriately trained, to work with young children, through experiential 'hands on' training;
(v) Facilitating adult child interaction, varying with the age of children;
(vi) Availability of supportive, child friendly, low cost and culture specific infrastructure;
(vii) Supervision and monitoring to ensure quality improvement;
(viii) Evolving a National Policy Framework to address the above issues and concerns;
(ix) Formulating respective context specific States/UTs action plans for implementation of the policy;
(x) Setting up National / State ECD Council;
(xi) Developing special modules of training in ECCE with emphasis on hands on training.

A national prototype of PSE kit will be prepared and states would need to procure the revised kit, adapted to the local context. The kit would comprise of play and learning material for fostering holistic development of children. AWW would be provided training and resources to develop

[3] An Additional AWW cum Child Development & Nutrition Counsellor in 200 high-burden districts, co-opting for a payment / incentive to ASHA (wherever existing additionally), recruitment of youth volunteers on stipend basis and / or through mobilisation of community women volunteers (one for 15-20 households) for improved family contact and prioritised home visits at critical contact points

teaching learning materials as well as for curriculum transaction. The cost norm of PSE kits would be revised @Rs.3000 per kit for AWCs and Rs.1500 per kit for mini AWCs, with Centre-State cost sharing being 90:10.

Monthly fixed Village ECCE day on the lines of VHND, for generating awareness about developmentally appropriate early childhood interventions and mobilization of community participation in ECCE through involvement of grandparents, elderly persons, local artisans etc., setting up activity corners, play material and toy banks with local community participation, ECCE demonstration, parent interaction etc. would be introduced as a new service delivery platform. Rs.1000 per AWC per annum would be provided under the ICDS Mission for organising Monthly fixed Village ECCE Days. Interventions relating to school readiness would be undertaken for mainstreaming the children to formal schools. Child development services beyond AWCs would be introduced through involvement of private sector schools (pre- primary & nursery etc.), NGOs and voluntary organisations under the innovations etc.

Child Development is continuous, cumulative and holistic. The early years of 0-6 are critical as the foundation for human development and cumulative lifelong learning. The comprehensive package of services as presently provided under ICDS encapsulates integrated provisions for health, nutrition and stimulation to support cognitive; physical, motor, emotional and socio- personal development.

- The Strengthened and restructured ICDS would reposition the AWC as the Early Childhood Development Centre, with an enabling environment for promotion of early childhood development, rather than the predominantly perceived 'feeding centre'.
- A Core Committee formed in MWCD, for preparing the National policy for Early Childhood Care and Education has formulated draft policy, curriculum framework standards and this is in the stage of finalization. An elaborate scientific research and resource based approach would now be adopted, for which it is proposed to have an ECCD Council. Developmentally appropriate, play based and home based early stimulation package and activity based developmentally appropriate Early childhood Education curriculum and pedagogy would be created besides, orienting and reaching school readiness. Age appropriate child assessment tools would also be developed and deployed and contextually adapted.
- In strengthened and restructured ICDS, ECCE would now be significantly positioned. Focus would also be placed on organization of the Fixed Monthly Village ECCE day, advocacy and awareness generation, parent and community advocacy and involvement, etc. as mentioned above.
- In the present system of ECE delivery, 98% of AWWs are already trained in imparting PSE to children. Thus, these AWWs are equipped to handle PSE children. As per CMU Data (2011), 91% of AWWs are above Matric/High school. More than 25% in Punjab, Assam, Orissa, Uttarakhand, Manipur, Maharashtra, Gujarat and Bihar are Graduate/Post Graduate. It has beeh observed that the qualification of the new AWWs is usually of secondary level or more. This trend is expected to be intensified with the lately increased honorarium amount and career pathway of promotion of 25% AWWS to supervisor posts. Subsequent to restructuring of ICDS, only incremental investment will result in multiplier effects and ensure higher results. The Additional Worker would provide an opportunity to get appropriately qualified personnel whose skill would be horned.
- Many states (Andhra Pradesh, Tamil Nadu, Chhattisgarh, Rajasthan, Himachal Pradesh, Orissa, MP, and Kerala) have already developed state specific curriculum and activity bank for pre-school under ICDS. Other states are also in the process of developing the PSE curriculum under ICDS. The state specific curriculum is expected to follow the guiding

principles and core content laid in the National Early Childhood Education Curriculum Framework.

- Following universalisation, the outreach of AWC would extend to 14 lakh habitations. This provides easy access for young children to utilize early childhood care and education (ECCE) services in their social setting. More than 80 per cent AWWs are from local village/ habitation (CMU, 2011). The proximity of AWW with the targeted beneficiaries aids in giving *locally responsive PSE inputs* and facilitates frequent interaction with community and parents.

- Non formal preschool education as currently imparted in AWC for children below six, provides necessary maturational and experiential readiness to the child, thus creating interest for learning and school readiness. International evidences have also recognized the significance of providing comprehensive package of care and non-formal early childhood education services before the child enters into class I. Developmental psychologists have also stressed the need of imparting Early Childhood Education in a child friendly environment so as to promote holistic development of the child.

- Putting children in a formal setup before six years of age, would lead to 'formalization of education in the early years, with structured time schedules and syllabi and may inadvertently also lead to harm, besides, missing out on the much needed exposure to the real ECCE in terms of inputs for good health, nutrition and psycho-social stimulation.

(vi) **Improving Supplementary Nutrition Programme:** In accordance with the revised feeding & nutrition norms issued by the Ministry of WCD dated 24.02.2009, the Anganwadi Centres would continue to provide morning snacks, hot-cooked meal and Take Home Rations (THR) to children and pregnant and lactating women. Presently, after revision of cost norms in 2008, the sharing ratio between the centre and States /UTs is on 50:50 basis and for NER it is 90:10. However, in view of the large scale escalation in food prices, the existing rates of Rs. 4, 5 and 6 have become inadequate in providing a morning snack, as well as, hot cooked meal, along with the necessary nutritional requirements. To meet the challenge of increase in prices of food items and fuel, the SNP financial norms has been revised based on the Consumer Price Index for Rural Labourer (CPI-RL) with base year 1986-87. Revised rates and roll out plan is detailed at Para 7.

Appropriate and adequate safeguards against commercial interference with infant feeding practices, guidelines regarding recipes and adherence to nutrition norms, monitoring of quality and compliance with the standards, ensuring delivery for minimum 25 days in a month would be laid down. A foolproof system of delivery including optimum and improved THR management would be emphasized. In respect of children of age group of 3 to 6 years, a gap of 2 to 3 hours between morning snack and hot cooked meal would be maintained.

States UTs have been experimenting with various models for SNP delivery like the using the SHGs as done in AP, Rajasthan, Orissa and MP, the centralized kitchen in Delhi and the Sanjha Chulha where cooking for SNP and MDM take place together. Under ICDS Mission, efforts would be made to rationalize and streamline methods of SNP delivery using learning of various innovative models. Bonafide manufacturer, who fulfils the norms and standard laid down may also be engaged. However, in all of this, the safety and adherence to standards (The Food Safety and Standards Act 2006) and guidelines of MWCD 24.02.2009 are paramount. The State Government / State Organisations and / or Cooperatives, SHG federations / manufacturers could be used for efficacious and nutritious food preparation.

(vii) **Care and Nutrition Counselling service** for mothers of children under three years has been introduced as one of the core services. This includes monitoring and promotion of young child using WHO growth charts and family retained mother & child protection card. Identification of growth faltering and appropriate counselling of care givers specially on optimal infant and young child feeding and health care would be reinforced. Nutrition and health education services would be redefined accordingly to include parent and community education on integrated child development, health and nutrition services. The approach has been adopted in West Bengal and Orissa and has shown decline in rates of undernutrition and sustained care practices which also results in prevention of malnutrition.

In order to focus on under 3 and to improve the family contact, care and nutrition counseling for pregnant and lactating mothers and children under three years of age, there is a need to enhance human resource at the grassroots level in terms of introduction of a care and nutrition counsellor/ additional AWW in AWCs. The presence of 2nd AWW would also enable the existing AWW to focus on improving the quality of centre based early learning and supplementary nutrition activities, related to children 3-6 years of age and in strengthening linkages with SSA and concentration on the centre based activities and mobilizing community support and SABLA programme.

Accordingly, a provision for an additional AWW cum Nutrition Counselior has been made in the selected 200 high-burden districts that would be provided on demand by State Governments through APIPs. Specifically, the Additional AWW cum Nutrition Counselior would be responsible for:

- Prime worker for Pregnant and lactating mothers and children under three years
- Ensuring the promotion, protection and support of optimal infant and young child feeding practices, especially early and exclusive breastfeeding for the first six months of life
- Contributing to the operationalisation of the National Guidelines on Infant and Young Child Feeding (MWCD 2006) and effective implementation of the Infant Milk Substitutes Feeding Bottles, and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992, and Amendment Act 2003 (IMS Act), IMNCI
- Ensuring services at family level for nutrition counselling
- Monitoring and promotion of young child growth and development
- Ensuring full usage and compliance of new Joint Mother and Child Protection Card
- Supporting community based child care arrangements and linkages with child care provisions
- Coordinate with ASHA and ANM for health related services for under 3 children
- Organisation of SNEHA SHIVIRS at the AWC, jointly with the AWW and ASHAs
- Facilitating linkage of mothers with IGMSY, a scheme addressing the inter-generational cycle of undernutrition and anaemia
- Promoting early stimulation and care package of ECD
- Early screening / interpersonal communication
- Interaction with community /family in respect of under twos and pregnant and lactating mothers

Alternatively, based on the state context (specifically on the qualification, skill and capability), the additional worker may focus on ECCE, while the existing worker focuses on the under threes.

Besides, in remaining districts, possibility of co-opting ASHA (wherever existing additionally) with payment / incentive, engagement of youth / other volunteers on stipend basis and / or through mobilization of community women volunteers (on a cluster of 4-5 AWC) for improved family contact and prioritized home visits will be explored. The incentives for link workers including ASHA workers would be directly linked to outcomes and subject to overall budgetary limitations.

Funds required for incentives @ Rs. 750/- per link workers would be drawn from the flexible pool under untied fund, with the approval of EPC. The ratio of Centre-State cost sharing would be 75:25.

(viii) **Management of severely and moderately underweight children:** Special and prompt actions would be taken for identification and management of severely and moderately underweight children through community based intervention and SNEHA SHIVIRs. Cases of severe underweight requiring medical attention would be referred to NRCs / MTCs set up under NRHM. Already, some states with high undernutrition prevalence are effectively providing care and treatment to undernourished children at health facilities through strong coordination between ICDS and NRHM.

Village Nutrition Counselling & Child Care Sessions (SNEHA SHIVIR) under the ICDS Mission would be designed to be a community based approach for the prevention and management of moderate and severe undernutrition. These SNEHA SHIVIRs would be held at an Anganwadi Centre selected from amongst the cluster of 4-5 Anganwadi Centres. SNEHA SHIVIR would be organised in the selected areas where numbers of moderately and severely underweight children are high. The overall goals of the SNEHA SHIVIRs would be to ensure quick rehabilitation of undernourished children; enable families to sustain rehabilitation; and prevent future undernutrition in community by changing behaviours in childcare, feeding and health seeking. The key strategies would include: (i) orientation of Anganwadi workers and Supervisors on the approach; (ii) 100% per cent weight monitoring and tracking using growth charts and the Mother and Child Protection Card; (iii) community orientation / sharing of the magnitude of the problem; (iv) showcasing the positive practices in the homes of well- nourished children in poorer households; and (v) setting up Nutritional care and counselling sessions. Each SNEHA SHIVIR would comprise 12 day monthly sessions followed by 18 days home based practices. During the 12-day monthly sessions, the best practices prevalent in the community would be learnt by caregivers of moderately and severely underweight children through a process of "Learning by Doing". This initiative is need based and wherever required additional funds can be sourced from normal SNP provisions.

The ANM / doctor under the NRHM would be responsible for health check up of all the underweight children reporting to SNEHA SHIVIRs. For those children who are attending the SNEHA SHIVIR and still not showing signs of improvement, the ANM or a doctor assigned by the NRHM would be responsible for deciding on type of referral or treatment facilities required as well as linking the child to the appropriate health care / treatment facility Outline for setting up SNEHA SHIVIRs in selected areas and modalities under this scheme are given at **Annexure – V**.

(ix) **Focussing on Children with special needs:** The ICDS Mission would facilitate integrated and inclusive early childhood care and development services to all children with special needs through its AWCs. A range of interventions including early identification, assessment and determination, care and counselling services as well as family and community based rehabilitation services for children with special needs would be facilitated by the Mission in

close convergence with the line departments including Health, Education and Social Welfare. A provision of Rs.2000/- per child (as untied fund) has been made under the ICDS Mission for ensuring various need based interventions / services, some of the major ones include:

a) **Identification of children with special needs:** In order to ensure early identification and detection of children with special needs, especially children with disabilities, facilities for early screening, determination and rehabilitation services would be made available in convergence with the line departments including Health, Social Welfare, Education, etc.

Functional and formal assessment of each identified child would be ensured in convergence with SSA (Block level team) / DDRCs (district level institution). If a provision under SSA (Block level team) is not available in a particular block, the AWW would get in touch with the concerned PHC / CHC / DDRC and ensure that this assessment is carried out, on the basis of which appropriate intervention for every child with special needs and their inclusion would ensured. In case assessment facilities available neither at the block nor at district levels, the AWW in consultation with the Medical Officer / ANM from NRHM Team may send a child with special needs (with prior intimation to the concerned Supervisor & CDPO) to a private institution / facility. In such cases, the cost of assessment / tests would be released by the concerned CDPO / DPO from the budget head of children with special needs available with them, i.e., Rs.2000/- per child after specific recommendation from the ALMC of the respective AWC.

b) **Linking children with special needs with existing service provisions:** The District Mission Directorate in each district would develop a convergence mechanism in consultation with the district level focal points from the Departments of Health, Education and Social Welfare – particularly to link children with disabilities with the services of District Disability Rehabilitation Centre (DDRC), Block / Cluster Resource Centre (BRC & CRC) under SSA, and any other similar institutions / interventions for children with disabilities being implemented at the district / state levels.

c) **Training and sensitization of AWWs, Link Workers and Families:** Training to AWWs and Link Workers (including ASHAs)as well as families / parents would be provided information on recognition of early symptoms, need for early action and where to go for receiving further assistance / services. Parents of children with disabilities would receive counselling and training on how to bring them up and teach them basic survival and coping skills. The advocacy and IEC campaign under the Mission would focus on educating families and community on children with special needs, issues related to them and how to access support and rehabilitation services for them and ensure that the environment is inclusive.

d) **Assistive devices / special education kit / books:** Children with special needs requiring assistive devices / special education activity kit / books would be linked with the provisions under relevant schemes of the Ministry of Social Justice and Empowerment, State Social Welfare Departments, National Institutions, voluntary organisations, among others. The concerned AWW and Supervisor would be responsible for making sure these provisions to every child with special needs.

e) **Improved Accessibility:** ICDS Mission would strive to remove architectural barriers in AWC buildings by building ramps etc., for ensuring easy accessibility to children with disabilities. Efforts would be made to ensure a disability-friendly environment for children with special

needs at AWCs including appropriate activity kits. Funds for building ramps in existing AWCs would be leveraged from the relevant scheme of the Ministry of Social Justice & Empowerment. Besides, for using funds available for up-gradation / improvement under ICDS Mission, construction of ramps and other barrier free facilities / access would be a necessary component. For all new AWC buildings, the accessibility features would be integrated in the design itself so as to ensure barrier- free access to children with disabilities.

f) **Referral Services:** Pre-identified referral systems, in convergence with line departments like Health, Education and Social Welfare, would be set up for the AWW, with the help of the ASHA, to refer such children for further care to the Primary Health Centre (PHC), Community Health Centre (CHC), Nutrition Rehabilitation Centre (NRC), District Disability Rehabilitation Centre (DDRC) or any other tertiary care facility. Supervisors would support AWWs in these endeavours.

Detailed guidelines for operationalizing these would be developed by the ICDS Mission for effective implementation and supervision.

(x) **Strengthening Human Resource:** In order to strengthen the human resources under ICDS, a comprehensive Human Resource Policy would be developed that would focus on development and introduction of a transparent appointment and selection policy for functionaries and, particularly, at Anganwadi level, introduction of a separate cadre for ICDS in States where such a cadre does not already exist, will be created, meking it essential for States to fill up vacancies at all levels. Allowing States to fill vacant positions on contractual basis for short periods and introducing welfare measures for ICDS functionaries, such as pension scheme for functionaries etc., will be considered. The policy will also prescribe the minimum education and age limit for AWW / AWH.

For better human resource management and to motivate the existing functionaries, the following specific actions would be undertaken:

a) **Evolving a transparent appointment and selection policy** including drafting of model recruitment guidelines for AWW and AWH, selection / appointment method / criteria, constitution of the selection committee, etc. Presently, the States/UTs are not following uniform and transparent HR policies due to which there have been allegations of corruption and favoritism in the matter of appointments, etc. The recruitment rules for different posts vary from State to State which are affecting the morale of the functionaries manning the posts. In spite of the guidelines having been issued, the selection committees are not uniformly constituted. Therefore, a model Selection Committee would be constituted uniformly by all States, subject to State-specific variations, as may be permitted by NMSG. All relevant guidelines etc. would be drafted under the supervision and control of the EPC / NMSG and the same would be issued after the approval of the said Committee.

b) **Separate cadre for ICDS.**A separate cadre for ICDS in States, wherever not existing, would be introduced under the ICDS Mission. The experience has shown that in the absence of dedicated cadre for ICDS, the persons manning various posts are posted for a short period and then transferred to another department by the State. Due to their frequent posting and transfers, they are not able to appreciate the importance of the scheme and are not able to implement it as required. The experience has shown that the posts of CDPO are being manned by the officers even from various un-related departments and officers from other

departments of the State which have no connection / experience in the field of child development. For proper implementation of the scheme and development of children, it is necessary that experienced persons should man the posts, for which a dedicated cadre catering to the ICDS scheme is essential. The dedicated cadre would facilitate their career progression from the level of Supervisor to the DPO by inter-linking their recruitment / promotion / appointment. A provision in the relevant rules and guidelines would be introduced to ensure that persons borne on the cadre of ICDS cannot be transferred to any other cadre, except on deputation as per the rules applicable in the State. While doing so, it would have to be linked to merit and upgradation of skill as well as knowledge in domains related to child development.

c) **Permitting the States to fill up vacant posts** through job contract from outsource/placement agencies on a temporary basis till such time the regular posts are filled to avoid any interruption in the services due to vacancies in any grade. The success of any field based programme depends on the availability of effective man power to man the posts and run the programme. For the success of ICDS programme, it is necessary that, at least, all the operational posts are filled. As per the incumbency position, on an average 15% of various posts sanctioned under the ICDS scheme including AWW/AWH are lying vacant. The States/ UTs have been trying their best to fill up these posts but there are practical problems faced by them such as longer time taken by the Staff Selection boards in filling up the vacancies, political interference, non-constitution of selection committees, allegations of corruption and favoritism, court cases, etc. which leads to inordinate delay in filling up the vacancies. Non-filling of the vacancies especially those of the front line workers directly affect the outcome of the scheme and affects the services delivered at the centre. The development and growth of the child who comes to the AWC at a very crucial age, cannot be allowed to be adversely affected due to non-availability of the human resource. Therefore, to overcome this difficulty and as a temporary and interim arrangement, the State Governments would have powers to fill up vacant posts through job contract from outsource/placement agencies on a temporary basis till such time the regular posts are filled to avoid any interruption in the services. The States/UTs may also explore the possibility of filling up such vacancies on deputation basis on temporary basis.

d) **Prescribing minimum education of Matriculation and age limit (18-35 years) for appointment as AWW/AWH.** AWW and AWH are the frontline workers under the ICDS scheme and are expected to deliver the services effectively. The delivery of service with quality largely depends on the knowledge, skill, experience and education of the AWW/AWH. For example, one of the six components of the scheme is pre-school non- formal education, which is to be provided to the children of 3-6 years of age. An AWW not being herself qualified is not expected to provide pre-school non-formal education and such an AWW cannot inspire confidence among the would-be beneficiaries. ICDS Mission would therefore prescribe minimum qualification of AWW/AWH as Matriculation and reduce the maximum age for appointment of AWW / AWH from 44 to 35 years.

e) **Relieving AWWs / AWHs on completion of 65 years of age.** The existing guidelines do not provide uniform age limit for their retirement. Rather, this has been left to the State Governments to decide. Thus, as on date no age has been prescribed for dispensing with the services of AWW/AWH. Prescribing maximum age limit of 65 years for an AWW/AWH has been supported by most of the State Governments at various forums. In view of the above,

a uniform policy decision would be undertaken to discontinue the services of AWW/AWH at the age of 65 years and EPC would ensure its implementation in all the States/UTs.

f) **Opening a Cluster Office.** With the aim to strengthen supervision under the Mission, a Cluster Office would be set up in a strategically located AWC for managing a cluster of 17 - 25 AWCs. One Supervisor in each of these Cluster Offices would be placed who would discharge her functions of supervising the AWCs within her jurisdiction from the said Cluster Office. At present, Supervisor has not been assigned any specific office and she performs her work by field visits only. Once she is strategically located, it will be convenient for her to supervise and monitor the work of AWCs and also she would be available for any guidance/ consultation to the concerned AWWs. Besides, additional Nutrition Coordinator and ECCE Coordinators would be engaged in each project who would act as master trainers on the project / block levels to promote maternal and child nutrition & development and ECCE.

g) **Enhancing the honorarium of AWWs of Mini-AWCs:** Mini AWC is manned by an AWW and there is no post of AWH. Most of these AWCs are located in remote and low populated hamlets/ villages in the far-flung areas of tribal blocks and difficult hilly terrains where the outreach is difficult. Worker of mini AWC manages all the six services without AWH. However, the honorarium being paid to the AWW of mini-AWCs is equivalent to the honorarium paid to the AWH although they are required to perform the duties of AWW of regular AWC single handedly.

The responsibility and duty hours of AWWs of mini-AWCs and conditions in difficult terrains in which they work and discharge their responsibility single handedly justify that the increase in their honoraria should, at least, be equivalent to the increase given to the AWW of regular AWCs. Thus, it is proposed to enhance the honorarium of AWW of mini- AWCs from Rs. 1500/- to Rs. 2250/-, subject to the condition that the educational qualifications of AWWs of mini-AWCs would be the same as those of Workers of regular AWCs. This cost will be shared on 90:10 ratio between the Centre and State. A separate administrative sanction and order would be issued in this regard.

h) **Rationalizing appointment of AWWs as Supervisors:** As a policy decision, about 25% posts of Supervisors reserved for AWWs would be filled by the method of induction under the ICDS Mission, subject to the fulfillment of desired educational and age criteria. Additional provision for filling up of 25% of vacant posts from AWW based on their merit and track record of service and additional qualification would also be made. Detailed guidelines would be notified with the approval of the NMSG.

i) **Revising cost norms for uniform:** The cost of uniform for the AWW and AWH has been revised from the present rate of Rs.400/- p.a. (for two sarees /suits) to Rs.600/- (for two sarees / suits), while the cost of badge would remain the same, i.e., Rs.25/- per badge. The Centre – State cost sharing pattern for this component has been revised from 90:10 to 75:25.

j) **Enhanced human resource structure** including new posts both regular and contractual would be created at all levels. The table below provides an overview of enhanced human resource structure at all levels approved under ICDS Mission. Details of the structure and number of posts to be created, in phased manner, under the ICDS Mission at all levels are given in **Section-5** of this document.

STAFFING AT EACH LEVEL				
Level	Sub Level	POSTS PER UNIT		Additional staff at each level
		Regular	Contractual	
National	Mission Directorate	[illegible]	[illegible]	Program Manager: 5; Prog Associate:5; Data Entry Operator: 5
	National ICDS Mission Resource Centre (NIMRC)	-	[illegible]	Advisor: 8; Sr. Consultant: 10; Consultant: 10; Data Analyst: 3; Data Entry Operator: 4
	Training Resource Cell , TRC (5 centers)	[illegible]	4	Training Officer: 1; Training Associate: 1; Trg. Methodology Specialist: 1; Curriculum Development Specialist: 1
State	State (Large states - 17)	21	26	Program Manager: 4; Sr.Consultant: 10; Consultant: 10; DataEntry Operator: 2
	State (Small states - 11)		15	Program Manager: 3; Sr.Consultant: 5; Consultant: 5; Data Entry Operator: 2
	UTs		3	Program Manager: 1; Sr. Consultant: 1; Consultant: 1
District	District Team	[illegible]	6	District Coordinator: 5; Data EntryOperator: 1
Project	Project ICDS Committee	-	3	M&E and Nutrition Surveillance Coordinator: 1, Nutrition Health Mobilizer: 1; ECCE Coordinator: 1
	Block ICDS Resource Centre(BIRC)#	-	3	Counsellor: 1; Para Counsellor: 1; Outreach worker cum Helpline operator: 1
Cluster	Supervisors (based onnumber of AWCs)	[illegible]	-	

NOTE: Supervisor post (not included) will continue as per the existing norms
**Total number of regular positions at state level*
#Only in 10% projects primarily located in 200 High Burden Districts

The posts mentioned in the above table are subject to final administrative approval as well as separate and specific sanction to be issued based on approval of the state-specific APIPs by EPC. Recruitment of staff under the ICDS Mission would be phased out in three years beginning with 200 high burden districts in the first year (2012 – 13); additional 200 districts in second year (2013 – 14) including districts from special category States (J&K, Himachal Pradesh and Uttarakhand) and NER and remaining 243 districts in third year (2014-15) of the 12th Five Year Plan. For those States not covered in the Implementation plan during initial two years, two technical persons would be provided (out of the total approved posts mentioned in the above table), until the State Mission Directorates are set up and functional in those States.

(xi) **Capacity Development to ensure professional child development services:** Based on training need assessment, regular training and capacity building of all service providers and functionaries at all levels would be ensured to equip and enhance their skills and knowledge on child care and development standards. Professional courses of distance learning would be encouraged to be obtained. NIPCCD, MLTCs and AWTCs would be engaged in carrying out training and capacity

development at all levels. It would be made essential for the MLTCs and AWTCs to run model ICDS Projects / AWCs in their respective practice areas.

States of Tamil Nadu, Rajasthan and Uttar Pradesh have taken various initiatives like putting in place a State Institute for training, cadre of training professional, mobile training teams and synergies with State Institute of Rural Development (SIRD) and similar State Institute of Health & Family Welfare, Home / Social Science Colleges, among others. Building on these innovations in training, ICDS Mission would strive to revamp the existing training mechanism. For this a Child Development Resource Centre at NIPCCD and State Child Development Resource Centres in States / UTs would be set up in collaboration with reputed voluntary organisations / institutions, Home / Social Science Colleges with extensive experience and capabilities.

(xii) **Promoting Community ownership:** The focus would be on mobilizing and engaging the community, especially parents and families, in ensuring maternal and child health, nutrition and development. Flexibility to the State Governments / UT administrations would be provided for putting in place most effective models / modalities for promoting community ownership in the implementation of ICDS.

The Village Health, Sanitation and Nutrition Committees (VHSNCs) would be actively engaged in the management and supervision of the ICDS programme at the village and local levels. They are also recognised as sub committees of the panchayat. A sub-committee of VHSNC (Maternal & Child Nutrition Committee) consisting of community representatives, members of PRIs and village level functionaries would be set up in each village for overseeing the functioning of all AWCs. Order of Ministry of Health & Family Welfare, Government of India, dated 25th July 2011 on expanding the role of Village Health & Sanitation Committee so as to include 'Nutrition' within its ambit is given at **Annexure– VI**.

Anganwadi Level Monitoring & Support Committee (ALMSC) recently constituted by MWCD would be organically linked with the VHSNC, with all AWCs / AWW from the catchment area as members. Several innovative, projects like Dular, INHP, have used local persons to bring about behaviour changes in target families. These groups have been able to effectively enhance visibility of the problems of malnutrition and generate community response to resolve the problem.

2.2.2 Management Reforms

In order to support the programmatic reforms envisaged above, a range of reformative actions related to programme management, monitoring and supervision from the central to the AWC level. The focus would be on:

(i) **Decentralized planning, management and flexible architecture**: The focus would be on identification of specific needs at the State, District, Project and local level through Annual Programme Implementation Plans (APIPs) prepared after carrying out needs assessment and local mapping. It would ensure decentrailzed planning and managements including timely delivery of services, expeditious / timely availiability of funds and human resource, based on state and progressively district specific plans of Action (PIPs) with flexibility in implementation.

Flexibility in implementation to the State Governments would be given in terms of developing innovative models for effectively delivering the core ICDS services in their states. Besides, delivering the core ICDS services, the State Government would also have flexibility in piloting targeted interventions based on local needs within the financial provision of the programme. The states will also have the flexibility to undertake modifications on all matters such as human resource, travel and transport, programme implementation, revision in population norms

considering local situations etc. However, such flexibility should be within the purview of the overall cost under the specific line item provided it is targeted towards more effective implementation of the programme. The States / UTs should include all such items within the APIPs and seek approval of the Empowered Programme Committee.

(ii) **Ensuring convergence** at the grassroots level by strengthening partnerships with PRIs, communities and civil societies to improve outreach and quality. Greater convergence with the health sector and education sector and in particular the NRHM (Reproductive and Child Health (RCH)) programme, Sarva Shiksha Abhiyan (SSA), Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS) and other programmes and Ministries will be ensured (Please refer Annexure IX & IXA).

At the grassroots level, the monthly fixed VHNDs, ECCE Day and other ceremonies would serve as the major platform for convergence of health and nutrition services. Examples of various convergence models that have shown results at the grassroots level include initiatives like joint training, micro-planning for VHNDs and integrated IEC, management of severe undernutrition in Maharashtra, MP and other States. Further the Village Health Sanitation and Nutrition Committees (VHSNC) are one of the major examples of convergent action at the grassroots levels with representation from different sectors.

(iii) (a) **Strengthening Governance – Involvement of PRIs and ULBs:** The Constitution has accorded PRIs and ULBs powers through the 73rd and 74th Constitutional Amendments. The States through their conformity legislations are mandated to devolve powers to the local bodies. As has always been the endeavour, States are encouraged to involve PRIs and ULBs in the implementation of ICDS. A statement indicating State-wise information on the extent of involvement of PRIs is given at **Annexure VI A.** In addition, under the five tier monitoring system PRIs and ULBs have been appropriately given prime position for involvement and participation in ICDS functioning (Refer Annexure XX). Besides for guidelines for supervision visits etc. also envisages role for PRIs and ULBs.

(b) **Civil society partnership:** The restructured ICDS envisages an important role for civil society, networks, Non-Governmental Organisations (NGOs) / Community based Organisations (CBOs), institutions and voluntary action groups. Comprehensive guidelines for engagement of such organisations / institutions would be developed by the Ministry of WCD. Efforts would be made to involve such organisations and institutions at different levels of the planning, management and service delivery of ICDS. Besides advocacy, they would be involved in strengthening capacity at different levels and evaluation of the child development sector, developing innovative approaches to child development and working together with community organisations and PRIs.

For all of the above, a norm of implementing up to 10% Projects in every State would be recommended following the MoU route. The States and UTs would develop legal instruments for their engagement in a manner that the financial liabilities stay within the norms prescribed.

(iv) **Strengthening of ICDS Management Information System (MIS):** Presently, ICDS has an in-built monitoring system through which regular reports and returns (MPRs) flow upwards from AWC to blocks, district HQs, State Directorates. However, the current monitoring system is geared towards coverage rather than outcome indicators. The revised monitoring system would focus on collecting & providing data on a real time basis to support the programmatic actions and timely interventions.

(v) **Using Information, Communication Technology (ICT):** In order to strengthen the information base and facilitate sharing and dissemination of information, the focus would be on promoting use of

ICT under ICDS. Since the reach of internet is limited at this stage and the mobile telephony has reached in all villages of the country, an effort would be made to link the ICDS with the mobile phones infrastructure.

(vi) **Allocating Adequate Financial Resources:** Adequate funds would be required to be made available by the Government of India for the implementation of strengthened and restructured ICDS. Enhanced / additional financial resources would be required for engaging additional human resource support to the State Governments for switching over to PIP mode, cost enhancement of SNP, additional AWW in all AWCs from 200 high-burden districts, strengthen ECCE component, allocation for the construction of AWCs, developing and implementing pilots of flexi models.

A pool of untied / flexi fund would be made available for promoting local innovations based on need-based district level planning. The fund flow mechanism would be reformed to ensure timely releases and removing all bottlenecks in financial management of ICDS.

2.2.3 Institutional Reforms

The programmatic and management reforms envisaged above would require strong institution structures and mechanism at all levels, including:

(i) **ICDS in Mission Mode:** In order to strengthen the existing service delivery mechanism by introducing ICDS in a mission mode with ICDS missions at National, State and District levels. The mission at different levels will have the required human and financial resources and will be empowered for action. It will have a defined structure at all levels and systems including financial, human resource, logistics and procurement, programme and operations monitoring etc. The Mission will support planning and implementation of state specific plans with measured inputs, processes, outputs and outcomes. It will ensure shared programmatic and resource commitments through the instruments of MoU and APIPs. The mission will allow speedy engagement of technical and management support for ICDS. More importantly, they with the collective responsibility of ICDS will be accountable for delivery of quality services. In order to carry out the functions of the mission, State Child Development Societies will be established with powers to establish district units.

(ii) **Guidance and Supervisory Bodies:** The ICDS at an overall level, will be guided by the National Mission Steering Group headed by the Honourable Minister (I/C) MWCD. The ICDS operations will be supervised and monitored at the national level by the Empowered Programme Committee under the Chairpersonship of the Secretary MWCD. Similarly, at the State level the State Mission Steering Group headed by the State Chief Minister will guide the ICDS programme. A State Empowered Programme Committee headed by Chief Secretary will supervise and monitor the ICDS programme. Advisory bodies at District and Block levels to oversee and guide the ICDS programme would also be created.

(iii) **Greater Involvement of PRIs:** States are urged to promote leadership and steering role at grassroots in order to implement the ICDS Scheme. Particularly States are encouraged to:

a) Support facilitative and supportive supervision in terms of ensuring entitlements and services and support of local gaps in critical and essential needs of AWCs;

b) Acknowledge and understand criticalities of needs of early childhood and maternal care and support systems and work to ensure an enabling and assuring environment free from discrimination, violence and biases to work towards removal of social barriers with knowledge, sense of duty and purpose;

c) Give greater roles, responsibilities to PRIs and ULBs with measures for ensuring their involvement, participation and accountability.

3. ICDS MISSION

3.1 Why ICDS Mission

Over the years, ICDS has become a programme that has been well discussed, debated and often blamed for its failure in single handedly meeting the huge challenges of reducing maternal and child undernutrition without appropriate investment of resources, both in terms of financial and human. Today, it is a well recognized fact that if appropriate and timely investment of resources is made for strengthening the ICDS Scheme, it has the potential of reducing undernutrition in children under three years of age and enhancing early development and learning outcomes in all children under six years of age.

In order to realize this vision implementation of ICDS in the **Mission Mode** with flexibility in implementation on the lines of NRHM and SSA is the utmost priority at this stage. The consensus of transforming ICDS in Mission Mode has emerged after a series of consultations and deliberations held with State Governments, line Ministries, Planning Commission and other stakeholders including members of the civil society and voluntary organisations across the country. The learning from recently initiated Annual Programme Implementation Plans (APIPs) and related discussion have also highlighted the need for transforming the implementation of ICDS in flexible Society / Mission Mode. The experience and lessons learned from the implementation of NRHM and SSA in Mission Mode have shown the advantages of implementing the programme in Mission Mode. These include:

- Improved focus on programme planning, management, monitoring and supervision;
- Improved operational efficiency and accountability at all levels;
- Decentralized, streamlined and accountable financial management systems – improved fund flow mechanism;
- Result based monitoring indicators at different levels;
- Time bound goals, outcomes;
- States' ownership and local solutions;
- Greater engagement with States with clearly laid down MOUs linked with performance based funding;
- Decentralised planning -State, district, block, village habitation;
- Convergent actions by bringing together different sectors;
- Clear and flexible implementation framework;
- Sustainable financing, beyond 5 year plans – greater commitments from States / UTs;
- Induction of professionals and voluntary action groups;
- Normative approach as well as defined service standards;
- Address of gaps as per standards-entitlements;
- Empowerment for local action - Greater participation of women's SHGs, mothers committees in delivery and decision making;
- Centrality of PRIs, partnerships with community based organisations and voluntary agencies;
- Comprehensive guidelines and tools for planning, management, monitoring and supervision at all levels.

3.2 Vision

A transformed ICDS to ensure holistic physical, psychosocial, cognitive and emotional development of children under 6 years of age in nurturing, protective, child friendly and gender sensitive family, community, programme and policy environments with greater emphasis on children under 3 and promotion of optimal early childhood care, development & learning including maternal care.

3.3 Goals

(i) **Preventing and reducing undernutrition as early as possible**, in a life cycle approach, recognising that growth and development deficits are cumulative and irreversible.

(ii) **Focusing on reaching children under three years of age**, pregnant and breastfeeding mothers, for enhanced child survival, nutrition, development and learning outcomes.

(iii) **An integrated approach to early child development**- addressing physical/motor, cognitive, emotional and social development holistically, enabling children to realise full development potential and active learning capacity -without discrimination.

(iv) **Extending from the centre to family and community** based approaches, recognising that service providers and community volunteers need to reach out to the most vulnerable age groups and the most excluded community groups.

(v) **Fostering decentralization, flexibility** and community based locally responsive child care approaches, relevant to diverse local contexts, and building upon local innovation and capacities.

(vi) **Ensuring equity** - inclusive approaches to reach the most vulnerable & disadvantaged community groups– Scheduled Castes, Scheduled Tribes, Minorities, etc.

(vii) **Strengthening convergence** to address the inter-related needs of young children, girls and women, in a gender sensitive life cycle approach.

(viii) **Promoting rights based approach, with women's empowerment** as the mover of social change.

(ix) **Moving from outlays to child related outcomes** and ensuring ICDS Universalisation with Quality.

(x) **Ensuring good governance**, accountability and enhanced community participation.

3.4 Objectives of ICDS Mission

(i) To institutionalize essential services and strengthen structures at all levels by:

- Implementing ICDS in Mission Mode to prevent undernutrition and assure children of the best possible start to life;
- Strengthening ICDS - AWC Platform as the first village post for health, nutrition and early learning – as transformed Early Childhood Development Centre (Anganwadi – Bal Vikas Kendra);
- Focusing on children under-3 years;
- Focussing on early child care and learning environment;
- Moving from outlays to child-related outcomes
- Fostering decentralization and community-based locally responsive childcare approaches;

(ii) To enhance capacities at all levels:

- Vertical integration of training of all functionaries / staff to strengthen field based joint action and teamwork to achieve desired results and laid down objectives
- Establish national training resource centres at central & state levels

(iii) To ensure appropriate inter-sectoral response at all levels:

- Ensure convergence at the grassroots level by strengthening partnerships with the panchayati raj institutions (PRIs), communities and civil societies to improve outreach and quality of child development services;
- Coordinate and network with all allied systems i.e. Government departments and Non-Government agencies providing services for children for effective implementation of the scheme.

(iv) **To raise public awareness and participation:**

- Strengthen maternal and child care, nutrition and health education;
- Raise public awareness at all levels on situation and vulnerabilities of children and families
- Inform the beneficiary group and public on the availability of the six core child development services under ICDS
- Promote social mobilization and voluntary action.

(v) **To create database and knowledge base for child development services:**

- Strengthen ICDS Management Information System (MIS);
- Use Information, Communication Technology (ICT) to strengthen the information base and facilitate sharing and dissemination of information;
- Undertake research and documentation.

3.5 Indicators of Achievement

Key indicators to achieve the goals and objectives will be as follows:

- Reduction in underweight prevalence
- Improved IYCF
- Contribute to reduction in anaemia, IMR and MMR in collaboration with health
- Reduction in incidence of low birth weight babies
- Improved early learning outcomes

At the outcome level, ICDS aims to increase the percentage of early initiation of breastfeeding within one hour of birth, exclusive breastfeeding till 6 months of age, timely introduction of complementary feeding after 6 months, children being weighed. ICDS will also focus on preventive measures and work towards increasing the percentage of pregnant and lactating mothers receiving counseling, use MCP and progress card, achieving age appropriate developmental milestones andearly stimulation practices.

ICDS has also formulated process indicators to track the quality and delivery of services. These process indicators include increase in: percentage of registered children under 6 years receiving supplementary nutrition, percentage of registered pregnant and lactating women receiving supplementary nutrition, percentage of registered children below 3 years who are weighed every month, percentage of AWCs organising VHNDs every month, percentage of AWCs that have regular health check-ups, percentage of AWCs that are open for at least 6 hrs a day, percentage of AWCs that have conducted fixed ECCE Day etc. The specific Impact, outcome and process indicators are given in **Annexure– VII.**

3.6 Core Strategies

The core strategies of the ICDS Mission would largely derive from the programmatic, management and institutional reforms discussed under ICDS restructuring section above. In particular, the core strategies of ICDS Mission would include:

(i) **Strengthening ICDS as a programme with clear focus on accelerating achievement of maternal and child outcomes, repositioning early child development centrally.** This mission will contribute to accelerated reduction in maternal and young child undernutrition and related mortality, and enhanced early child development and learning outcomes, in a nurturing and protective environment for the young child.

(ii) **Developing an implementation framework with programmatic, management and institutional**

reforms, in Mission Mode with a clear time frame for achieving stated monitorable outcomes for integrated early child development, using a life cycle approach.

(iii) **Strengthening partnership between the Central, State, PRIs /urban local bodies and communities** that recognizes and builds on local initiative and innovation, fostering convergent action with NRHM, SSA, TSC, MGNREGA and others.

(iv) **Facilitating States, districts and communities** to develop specific locally relevant strategies, based on a menu of innovative models/ pilots through decentralised, flexible, locally relevant plans first at state-level and gradually extending to the district plans of action capturing the samples and needs of block and village based pointers for plan of action, designed to achieve mission goals, maternal and child related outcomes, within a defined normative framework through the APIP route.

(v) **Transforming the ICDS system into a learning organization, backed by a strong monitoring and evaluation function, accountability and transparency** through community owned accreditation processes, building on best practices and lessons learnt from implementation experience.

(vi) **Involving PRIs and urban local bodies, community/women's groups/SHGs, mother's committees** in the planning, management and monitoring of AWCs. Strengthened partnerships with parents, families, mothers' committees, Women's SHGs, Mahila Samakhya, VHSNCs, VECs (village education committees), and other grass roots level structures are a key element of the same.

(vii) **Strengthening community and family empowerment approach that promotes nurturing family care behaviours** and a caring community environment for young children, girls and women- especially the most vulnerable and crucial younger child under three years.

(viii) **Functioning as instrument of social change for "more inclusive growth" that ensures equality of opportunity in the crucial early years of life** for fair inclusion and non-discrimination of children belonging to marginalized and /or vulnerable community groups such as SCs, STs, minorities, migrants, children with disabilities, children in need of care & protection.

(ix) **Strengthening capacity development and putting in place a resource network for young children** - networking across different sectors, professionals and institutions of excellence, voluntary agencies and action groups, programme functionaries, community based organizations, and Nutrition and Child Resource Platforms / Centres. National ICDS Mission Resource Centre and collateral strengthening of the NIPCCD, its regional centres and Food & Nutrition Board (FNB).

(x) **Improving basic infrastructure and service delivery through Anganwadi Centres (AWCs)** to progressively make all AWCs the first village post for women and children with community ownership and a child friendly environment.

(xi) **Institutionalising improved delivery of essential services and strengthening and up-scaling innovations in service delivery** - ICDS beyond Anganwadi Centres to fulfill the commitment to reach every young child.

(xii) **Initiating commensurate strategies** to achieve the objectives, goals and vision of the ICDS Mission.

3.7 Service Standards

The purpose of the service standards under the ICDS Mission are to promote and ensure consistent high-quality holistic child development services at all level, while enabling flexibility in the way services are provided to meet the varying needs and capacities of the target population. Largely based on the core service package of the strengthened and restructured ICDS, the service standards listed out at **Annexure – VIII** would provide the mandatory framework for service delivery at all levels.

4. MECHANISM FOR IMPLEMENTATION

In order to ensure that the restructured ICDS is implemented with the spirit and vision in which it is being conceptualized, it would be essential to run it in the **Mission Mode** on the lines somewhat similar of NRHM and SSA, and also learning from their implementation experience.

Restructured and strengthened ICDS would be rolled out in Mission Mode in three years beginning with 200 high burden districts (List of selected High burden districts at **Annexure – VIII A**) in the first year (2012 – 13); additional 200 districts in second year (2013 – 14) - *i.e., w.e.f. 1st April 2013* including districts from special category States (J&K, Himachal Pradesh and Uttarakhand) and NER and remaining 243 districts in third year (2014-15) - *i.e., w.e.f. 1st April 2014* of the 12th Five Year Plan.

4.1 Action at the Central Level

The Central Government's intervention would be on laying policy / guidelines strengthening convergence with key sectors, initiating decentralised planning and support for capacity development at all levels, monitoring and evaluation, providing more human and financial resources to drive reforms and accountability, and sharing the best practices across and within states/districts. In particular, the Central Government would continue to play a leadership role in areas such as:

- Policy and programmatic guidance on child development (and linked programmes) to facilitate states, related sectors, institutions and stakeholders.
- Developing a contextually relevant and flexible framework for effective child development interventions through decentralisation and capacity development
- Institutional capacity development, including development of partnerships with non-governmental stakeholders such as professional bodies, national councils, other related institutions of excellence. Ensuring requisite and sustainable human and financial resource investments in child development.
- Effective monitoring, analysis of programme implementation experience, feedback and mid course corrections, conduct of comprehensive field based reviews and commissioning independent evaluation/studies as needed.
- Convergence with related sectors/ministries to facilitate an enabling and supportive policy environment and enhanced resources.
- Ensure public information, social audits, grievance redressal and other public accountability mechanisms function effectively.

4.2 States' Leadership & larger Commitment in Implementation

The ICDS Mission is an endeavour to empower states to carry out the required reforms. While recognising the leadership and implementation role of the states, it is expected that the states would:

- Use the given flexibility to take care of the local needs and socio-cultural variations, within a normative framework.
- Advance towards mutually agreed outcomes, objectives, milestones and interventions within the existing national policy framework, which would be reflected in the MoU and APIP.
- Continue to provide additional resources to meet the diverse child development needs of young children through innovative approaches.
- Undertake action to create a separate department of Women and Child Development (if not done already) and move towards creating a dedicated cadre for ICDS and adequate human

resources, meet state commitments, increase their resources and expenditure on the child development sector by a stipulated percentage every year over the Mission period.

- Ensure that where posts are vacant for more than 60 days, interim contractual arrangements / outsourcing are made and an indication is given when State PIPs are finalised.
- Ensure decentralised planning and implementation arrangements to ensure that need-based and community-owned District Child Development Action Plans become the basis for interventions in the child development sector, converging interventions from related sectors.
- Constitute missions and other related structures / institutional mechanisms and enhance training capacity, as specified.
- Progressively devolve sufficient administrative and financial powers to the PRIs and ULBs, depending upon the state context- to improve the reach, coverage, quality, supervision, monitoring and effectiveness of childcare services.

4.3 Management of ICDS Mission Activities at State / District / Block and Village

Levels

The success of decentralisation of the functions of ICDS Mission would depend on the management capacities at all levels. The ICDS Mission at State / District / Block and Village levels would:

- Enhance human resource and capacity of the ICDS by appointing additional manpower (on contractual basis) with technical capacity for early child development, nutrition, and managerial skills for decentralised participatory district planning, improved community processes, communication and training, procurement and logistics, financial management, the use of information technologies, improved management information systems and evaluation.
- Establish strong managerial capacity at the block / project would be the essential link between villages and districts.
- Make State, District, and Block / Project level offices responsible for (i) planning (ii) community awareness and mobilisation (iii) capacity building at village level (iv) facilitating inter-sectoral convergence, especially with NRHM, SSA, TSC and (v) monitoring and feedback.
- Support the development of management capacities at the district level so that progressively, DPOs and their technical support units are equipped professionally.
- Make management structures at all levels accountable to various committees/mission structures, i.e., National-Level Mission/Steering Group, State-Level Mission and District/Block/ Village level mechanisms.
- Empower the district and regional councils (North-eastern States) in consultation with the tribal councils (as per Sixth Schedule) to decide about structures and representation in the ICDS Mission Councils and Committees at the district, block and village levels.
- Support utilization of amount available under the management cost for improving the work environment as such improvements directly lead to better outcomes
- Develop appropriate institutional arrangements for effective delivery of services under ICDS Mission
- Provide clarity of tasks, fund flow, powers, functions, account keeping, audit, etc. at all levels through implementation guidelines and financial rules.
- Undertake review of management structure and devolution of powers and functions to carry out any *mid-course* correction.
- Attempt to strengthen State, District, Block / Project level managerial capacities as per need
- Ensure assessment of the ratio of the CDPO and Supervisors to AWCs on priority, with the redefined role of supervisors in providing mentoring support to AWWs and ASHAs.

Enable capacity development in respect of additional AWW cum Child care and Nutrition counsellor and link workers, where taken up by States.

- Provide support to block level for improving the mobility (using revolving funds) and connectivity (using specified contribution for mobile phone charges) of the functionaries.
- Utilize existing NIC connectivity provided under programmes at district / block / village level – including to panchayats, optimally.

4.4 Convergence with Other Ministries/Departments

The indicators of early childhood development depend on psychosocial care, the early learning environment and the quality of caregiver interaction, nutrition, as well as upon health, drinking water, sanitation, female literacy, empowerment, etc. A detailed matrix of the programmatic and thematic multi-sectoral convergent actions under the ICDS Mission is attached at **Annexure–IX** and **Annexure– IX A.** Recognising the importance of wider determinants of child development, ICDS Mission seeks to adopt a convergent approach for intervention under the umbrella of the District Plan for ensuring the following:

- AWC at the village/ habitation level ALMCs to be the convergent point for child development action.
- ICDS Mission to progressively move toward one common Village Health Sanitation and Nutrition Committee as the institutional mechanism for convergence at village level (building on extending existing 4.97 lakh VHSNCs under NRHM).
- Involvement of PRIs and ULBs to ensure that the gains of integrated action are reflected in the District Child Development Plans and processes.
- Village Child Development Plan/Block Plan/District Plan to provide an opportunity for catalytic resources for convergent action.
- ICDS Mission's joint household surveys and village micro-planning exercises involving AWWs, ASHAs, community/women's groups, VHSNCs and PRIs to include availability of health outreach services, drinking water, sanitation, school linkages and related issues.
- APIPs of inter-related programmes to reflect programmatic & institutional cross-linkages and commitments.
- Appraisal of District ICDS Mission Plans to ensure that multi-sectoral interventions for young child health, growth and development are envisaged with convergent community action.

4.5 (a) Role of Local Bodies

As mentioned earlier, the Constitution has accorded PRIs and ULBs powers through the 73rd and 74th Constitutional Amendments. States are encouraged to involve PRIs and ULBs in the implementation of ICDS. The current level of participation of local bodies in different States has been discussed at Annexure VI A. The ICDS has issued guidelines for monitoring and supervision with the involvement of local bodies. Further, States are urged to support involvement of PRIs and ULBs in implementing the ICDS, wherever possible.

4.5 (b) Role of Civil Society and Voluntary Action

The ICDS Mission envisages an important role for civil society, networks, Non-Governmental Organisations (NGOs) and voluntary action. In a few states, partnerships with NGOs have already been established and the partnership is: (i) extending service management &outreach; (ii) enriching service quality; and (iii) strengthening specific components like training, communication and community mobilization and monitoring. Efforts would be made to involve NGOs at different levels of

the ICDS Mission delivery system. For this purpose, a norm of implementing up to 10% of the Projects in every State in collaboration with such agencies / institutions would be mandated under MoU, above guidelines and other legal instruments. Besides advocacy, NGOs would be involved in contributing to programme management, strengthening capacity at different levels and evaluation of the child development sector, developing innovative approaches to child development and working together with community organisations and PRIs. Outline for involving NGOs / voluntary organisations under the ICDS Mission are given at **Annexure – X.**

A norm of implementing up to 10% Projects in every State has been recommended. The States and UTs would develop legal instruments for their engagement in a manner that the financial liabilities stay within the norms prescribed.

4.6 Strengthening Human Resources

In view of expansion of the ICDS programme, inclusion of multifaceted activities in the programme for achieving its objectives, it would be necessary to:

- Design a need based training and a long term human resource policy envisaging motivation, recognition, pathways for development and enhancement of benefits to all
- Provision of adequate technical support at all levels for implementation of the programme
- Carry out need based assessment of the workload of AWW for rationalisation of the same with revised population norms, need for additional AWW cum nutrition counsellor, use of local women/ community volunteers/ ASHA as link workers and incentives for them.
- Appoint an additional AWW cum Nutrition Counsellor based on local need assessment and district plans initially in 200 high burden districts, to be provided on demand by State Government duly approved through APIP by the EPC under the Mission.
- Increase the availability of human resources through convergence and partnership
- Ensure that NRHM provides for a trained incentivised activist — ASHA — at the village level and for one ANM at each sub-health centre, with an additional ANM from NRHM in high focus states
- Ensure that child development related outcomes are achieved / improved through ECCE provisions and school readiness packages
- Ensure that MGNREGA provides a paid worker for each crèche, where childcare provisions are applicable
- Ensure appropriate orientation and joint training to support early child care and development initiatives and involvement of PRIs, communities and parents in the process.

4.7 Training and Capacity Development

Training and capacity building is crucial as the achievement of programme goals depend on the effectiveness of frontline workers in empowering families and communities for improved childcare practices and efficient and effective delivery of anganwadi service. The ICDS Mission would:

- Ensure that training needs assessment is carried out and based on that a comprehensive plan for training and capacity building of frontline workers as other stakeholders including members of panchayati raj institutions, etc. as well as families and community at all levels.
- Creating a training resource cell at NIPCCD including regional centres.
- Facilitate States to closely examine the training infrastructure available within the state, including Middle Level and AWW Training Centres, State Health and Family Welfare Institute, ANM Training Centres, State and District-Level Education Training Centres (SCERT, DIET), SIRD and Extension Training Centres (ETCs), Home Science, Nursing, Medical Colleges and

Management Institutes/Schools and identify the investment required in them to successfully carry out the training/sensitisation programmes.

- Develop and implement a comprehensive human resources management policy to provide support for capacity building at all levels including PRIs/community.
- Make essential for the MLTCs and AWTCs to run model ICDS Projects / AWCs in their respective practice areas.
- Revamp and strengthen the existing institutional structures and mechanism for training and capacity building at all levels.
- Strengthen National / State level Empowered Training Task Force/s to streamline mechanism and quality of ICDS training

Outline for strengthening training and capacity building at all levels under the ICDS Mission is given at **Annexure – XI**.

4.8 Strengthening and scaling up Evidence-based Innovative Interventions

Over the years, ICDS has evolved with differential approaches across the States and there are many examples of innovative and successful models implemented by the State Governments that have shown good results and have potentials of being up-scaled. Other innovations including graded best practices / potential good practices could be piloted by other states or scaled up under the central fund. State-wise list of some of these interventions along with their focus area has been detailed at **Annexure–XII**. Under this component, the ICDS would provide flexibility to the State Governments to initiate relevant innovative interventions with proven track record of improving the availability, accessibility and quality of child development services, especially those interventions that are not covered by the existing components of the ICDS Scheme. The State ICDS Mission would have an untied fund at its discretion for supporting such innovative interventions. Some of the major innovative interventions that could be piloted under this component would include:

(i) **Anganwadi cum Crèche / Day Care Centres:** Based on district child care needs assessment and district plans, different crèches models would be piloted and up-scaled - including making the AWC an AWC cum crèche, allowing MGNREGA crèches more flexibility, crèches at key work sites, community based volunteer child care arrangements in fields / forests, responding to local patterns of women's work and time, catalytic support from NGOs. ICDS services will be redefined to include provision for piloting of crèches and longer day care support and flexibility in timing provided to states to respond better to patterns of women's work and time. In this proportion of Central and State / UT share would be on 75:25 basis. Please refer Annexure – I for details regarding additional requirement of the Anganwadi-cum-crèche.

4.9 Logistics Management including Procurement

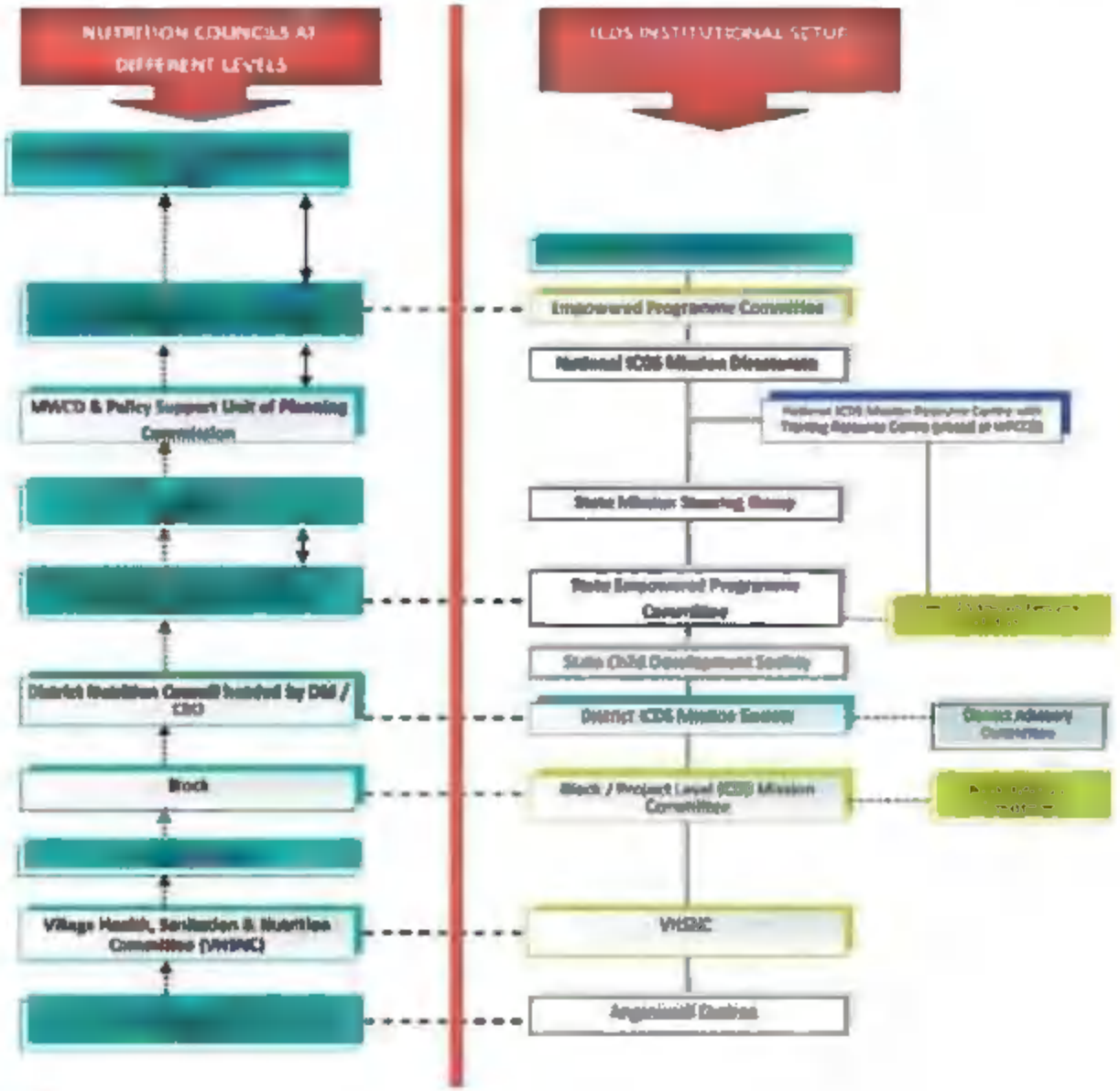
Timely supply of supplementary nutrition, availability of Kit A supplies, vaccines, medicine kits, pre-school play/learning kits, weighing scales, mother child cards, community charts, registers, their maintenance and replenishment and logistics management is important in the ICDS Mission framework. Under ICDS Mission, the capacity of States would be strengthened for more effective management of the supplementary nutrition component, as well as capacity for procurement, distribution and replenishment of goods and services. Detailed guidelines for logistics and procurement management under the ICDS Mission would be laid down under the Implementation Manual to be developed by the Ministry of WCD.

4.10 Monitoring/Accountability Framework

- The ICDS Mission proposes an intensive accountability framework through a three-pronged process: (I) community-based monitoring and accreditation, (Ii) internal monitoring and (iii) concurrent external monitoring of ICDS.
- AHS District Level Household Surveys and NFHS would act as the baseline for the ICDS Mission against which the progress would be measured.
- The Mission Steering Group and the Empowered Programme Committee at the Central and State / UT levels would also monitor progress periodically.
- Organisation of periodic public hearings and social audits would strengthen the direct accountability of the ICDS Mission system to the community and beneficiaries.
- The Mission would involve Voluntary Action teams, NGOs, resource institutions, other sectors and local communities in mission reviews, monitoring, thematic enrichment and mentoring support.
- Periodic external, household and facility surveys would track the effectiveness of the various activities under the ICDS Mission for providing quality child development services.
- Beside these surveys, supervision Missions would be conducted twice in every state to help monitor the outcomes.
- Linking family based mother and child protection card and cohort-tracking with ICDS MIS.
- The computer-based MIS would be strengthened for rigorous monitoring of activities,using real time data through ICT and mapping***(strengthening of monitoring and evaluation systems including MIS under ICDS has been discussed in details at Section – 8 below)***.

5. INSTITUTIONAL ARRANGEMENTS of ICDS MISSION

For the success of any programme efficient, effective and accountable implementation arrangements are essential. ICDS in Mission Mode would require a strong implementation, monitoring and supervision mechanism right from central level to the grassroots levels.ICDS mission would envisage creating such arrangements at all levels. The existing service delivery mechanism will be strengthened through setting up of a National ICDS Mission Directorate and Child Development Societies at State with powers to constitute District units. These Missions will be responsible for the effective implementation of the ICDS. Advisory bodies at all levels would be created to oversee and guide the ICDS Mission. An Empowered Committee at the National level will be set up and equipped with the decision making powers so as to ensure that the system keeps moving at a fast pace and work is not held up for lack of decision. **The institutional arrangement of ICDS will work in synchronisation with the institutional set up for nutrition in the country. An overview of the institutional arrangements under the ICDS Mission, along with proposed linkages to the Nutrition Councils at all levels** is given as under:



5.1 Institutional arrangements at Central Level

The Ministry of WCD would continue to be the focal point for the implementation of restructured ICDS Scheme in Mission Mode. It would continue to play a role in: (i) policy and programme development, providing guidance to enable states in more effective implementation, supervision and monitoring of the ICDS Scheme; (ii) developing a framework for effective interventions through decentralisation and capacity development; and (iii) development of partnership with all stakeholders including government and non-government agencies and civil society to achieve child related outcomes. The thrust of the Central Governments intervention would be on support for capacity development at all levels, monitoring and evaluation, providing more financial resources to drive reforms and accountability, and sharing the best national and international practices.

The ICDS Mission will be constituted to provide leadership, policy support and guidance to the states, with an empowered structure called the National Mission Steering Group (NMSG) and the Empowered Programme Committee (EPC) respectively under the chairpersonship of Hon'ble MOS (I/C) for Women and Children and the Secretary, MWCD. The National Mission Directorate of ICDS will be headed by a Mission Director - a Joint Secretary level officer of the Government of India, who will be responsible for handling day-to-day administration of the ICDS Mission. The National Mission Director will be vested with appropriate executive and financial powers as approved by the NMSG to enable him/her to function in effective manner to achieve the goals of the ICDS Mission. Besides, a National ICDS Mission Resource Centre would be set up that would serve as an apex body for technical assistance, dissemination and for functioning as a Centre of Excellence for facilitating the National and State ICDS Mission Directorates in all issues concerning implementation, supervision and monitoring of ICDS Scheme. Outline for setting up the institutional arrangements at the national level including the National ICDS Mission Directorate are given at **Annexure – XIII**. Detailed guidelines in this regard will be issued along with the implementation guidelines.

5.2 Institutional arrangements at State / UT Level

In order to provide leadership, policy support and guidance for effective implementation of ICDS in the State/UT, an empowered structure called the State Mission Steering Group (SMSG) and the State Empowered Programme Committee (SEPC) under the chairpersonship of the Chief Minister and Minister in-charge of the WCD Department of the State / UT as the Vice Chairperson and the Chief Secretary as Chairperson and the Secretary of the WCD Department of the State / UT as Vice Chairperson, would be set up respectively. The State ICDS Mission would provide additional resources to the States /UTs to enable them meet the diverse nutrition and child development needs of young children. The functions under the State ICDS Mission would be carried out through the State Child Development Society that will be headed by a State Mission Director at the rank of a Special Secretary/Additional Secretary (an IAS Officer of JAG/Selection Grade/ higher).The State Mission Director would be vested with appropriate executive and financial powers as approved by the SMSG to enable him/her to function in effective manner to achieve the goals of the ICDS Mission. Outline for setting up the institutional arrangements at the State levels including the constitution of the State Child Development Society are given at **Annexure – XIV.** Detailed guidelines in this regard will be issued along with the implementation guidelines.

5.3 Institutional arrangements at District Level

Every district would have a District ICDS Mission headed by the chairperson of its Zila Parishad and the District Magistrate / Collector of the concerned district would be the co-chairperson. In districts, where the District Magistrate / Collector is the Chairperson, the Zila Parishad Chairperson

will be the Co-Chairperson and the District Programme Officer ICDS as the District Mission Director. The Mission would include public representatives such as Members of Parliament (MP), MLAs, MLCs from the concerned district, chairpersons of the Standing Committees of Zila Parishad, chairpersons of Panchayat Samitis and district Programme Managers from relevant departments as official representatives, state representatives, representatives of NGOs and experts. The District ICDS Mission would serve as the District Unit of the State Child Development Society to effectively discharge all relevant roles and responsibilities of the ICDS Mission in the respective districts. District Mission Unit would be set up as per the phasing plan of the ICDS Mission. Besides, District ICDS Cells would continue to operate as per existing norms a nd District Cells would be set up in those districts where the Cell is not there.

Outline for setting up the institutional arrangements at the District levels including the constitution of the District Child Development Mission are given at **Annexure – XV**. Detailed guidelines in this regard will be issued along with the implementation guidelines.

5.4 Institutional arrangements at Block/Project Level

At the Block / Project level, each Block would have a Block ICDS Mission Committee headed by the SDM or the Chairperson of the concerned Panchayat Samiti. The Block Development Officer (BDO) of the concerned Block would act as the co-chairperson and Child Development Project Officer (CDPO) as the convenor of this Committee. Other members would include public representatives such as from the block, members of Panchayat and Block -Level Officers from relevant departments, such as Block Medical Officer, Block Education Officer, Extension Officer, Water and Sanitation, two or three ICDS Supervisors (on rotation), District-Level Officer, NGOs, two or three professionals/experts/ practitioners. Detailed guidelines in this regard will be issued along with the implementation guidelines.

The functions under the Block ICDS Mission Committee would be carried out through the Block ICDS Mission Team headed by the concerned Child Development Project Officer (CDPO).S/he will be responsible for ensuring effective implementation of the ICDS Scheme at the Block / Project levels as well as achieving the goals of the ICDS Mission in their respective work area with the help of a small team of professionals hired on contractual basis.

Block ICDS Resource Centre (BIRC) would be piloted in 10 per cent of the total Projects across the country to accelerate progress on nutrition and survival of women and children at block & village levels by effectively promoting exclusive breastfeeding for the first six months and timely and appropriate complementary feeding after six months along with continued breastfeeding, infant and young child feeding as well as lactation support counselling services. Besides, focussed attention on promoting ECCE activities and training & capacity building for all personnel and service providers on nutrition, IYCF, ECCE, growth monitoring and other related ICDS services will be given. Under the BIRC, a Nutrition Helpline will be set up that will help provide basic counselling services over the phone as well as act as the emergency outreach services for moderately or severely undernourished children at the block levels. The emergency outreach services will be ensured by the Nutrition Helpline in close collaboration with the Health Department / NRHM Team at the District and Block levels. State-wise selection of blocks where these BIRCs can be piloted will be done on the basis of needs and availability of infrastructure, planned by the respective State Governments / UT Administrations through respective APIPs, approved by the EPC headed by Secretary, Ministry of WCD.

Outline for setting up the institutional arrangements at the Block levels including the constitution of the Block Child Development Mission are given at **Annexure – XVI**.

5.5 Institutional Arrangements at Village /Ward Level

a) ***Village Health Sanitation and Nutrition Committee (VHSNC):*** At the village / ward (urban areas) level, the VHSNC would be responsible for all activities in the Child Development and Nutrition Sector would be under the committee to facilitate decision making at the AWC level. VHSNC would function as the sub-committee of PRI.

b) ***Anganwadi Centre – The first village post for Health, Nutrition & Early Learning:*** The AWC would remain the hub for promoting young child survival, growth and development activities at village habitation level. In ICDS Mission, the Anaganwadi platform would be strengthened as the first village/habitation post for health, nutrition and early learning, with provision of additional financial resources for infrastructure and facilities, anchoring ASHAs and converging multi sectoral interventions for young children, adolescent girls and women. At the AWC level, the ALMC would be responsible for the management and supervision, as prescribed.

Outline for setting up the institutional arrangements at the village / ward levels including are given at **Annexure – XVII.** Detailed guidelines in this regard will be issued along with the implementation guidelines.

6. STATE / DISTRICT ICDS PLAN (APIP)

In order to develop specific locally relevant strategies, based on a menu of innovative models / pilots through decentralised, flexible, locally relevant planning first at state -level and gradually extending to the district plans of action capturing the samples and needs of block and village based pointers for plan of action, designed to achieve mission goals, maternal and child related outcomes, within a defined normative framework, will be required. The management and institutional reforms would augment appropriat e human resource at the State, District and sub - district levels to support among others decentralized planning as in case of other flagship programmes including NRHM and SSA.

The State / District Child Development Action Plan would be the key strategy for Integrated action under the ICDS Mission. Since the success of ICDS Mission would depend upon the quality of the community-based planning process, it would be formulated on the premise that (i) the community can plan for its children's needs and (ii) ther e would be greater requirement for developing capacities in communities to do so. As even within a village there are different scattered habitations/ hamlets and community groups, the ICDS Mission would recognise a habitation, rather than a village as a unit of planning. In urban areas, a cluster of households in the same urban poor settlement would be a unit of planning. Provision of distinctive planning for young children from urban poor communities would be undertaken either as a separate plan or integrating the same in the district plans. Appropriate changes in urban planning and bye laws would have to be made appropriate authorities to provide earmarked land / child friendly building.

The State / District Child Development Plans would be prepared keeping the above in mind. The State would be expected to prepare a plan for the entire Mission period as well as an Annual Plan that would be based on resource availability and prioritisation exercise. The District Child Development Society will recommend the Annual Plan and Budgets to the State -Level ICDS Mission under the Chief Minister. Initially, only State Plan would be necessary and gradually on need basis, district specific plan may be prepared depending on the capacity and requirement .

Steps for Preparing Child Development Plans

At the state level, the State Child Development Society will need to ensure that the core teams at

the District and Block levels are carefully identified and are committed to the task of achieving the vision of ICDS in Mission Mode. The purpose is to have competent District Planning and Block-Level teams who would be able to mobilise community support for a new generation ICDS . Broadly, the process of the development of State and District Child Development Plans would be based on the following process:



Specifically, the key steps in the planning process for the development of district and state ICDS plans would include:

- Constitution of the Planning Teams at different levels with a clear demarcation of their roles and responsibilities. While specifying the broad norms for planning activities, it would be essential to provide for diversity and innovations. It is possible that the existing ICDS structure and the related departments may not have staff with adequate capacity to take up the planning assignment. In such cases, the States would engage professionals on contract at the State, District and Block levels.
- Study of the Census data for demarcating the population for an Ang anwadi/ Mini Anganwadi Centres. This would be essential for reaching the children in hamlets, scattered desert/hilly areas and urban areas (authorised slums and unauthorised urban poor settlements), migrant and/or construction labour and other children from socially excluded groups. This would also facilitate the assignment of (i) status of 'District' to mega cities and cities with larger number of slums, and (ii) smaller town and towns with smaller slum populations as part of the existing 'District'.
- Orientation & Training Modules would need to be developed for strengthening the capacity of existing staff and key members of the planning teams at various levels. Also, survey formats, focus group discussion guides, Village ICDS Mission Registers would be required to be developed.
- Understanding the nature of powers devolved to PRIs and ULBs in the state with respect to ICDS and related services.
- Mapping of AWC linked facilities and services such as health centres, schools, training centres etc.
- A survey of NGOs, women's SHGs and other organisations, for their possible role in planning activities and contribution to the ICDS Mission.
- Organisation of ICDS Mission village contact drives, public hearings and social mobilisation activities so that the planning process is also a process for creating community ownership of child care services and mobilising collective support for the same.
- Filling of vacant positions and recruitment of additional staff in ICDS.
- Release of untied grants to the State ICDS Mission to facilitate planning and social mobilisation activities at district, block and village levels.

7. FINANCIAL RESOURCES AND FLOW OF FUNDS

ICDS is an ongoing Centrally-sponsored programme being implemented through the State Governments/ UT administrations based on a cost sharing ratio between the Central Government and the State Government. Centre – State cost sharing pattern of all new components including staff salary (new staff to be recruited for the Mission) to be 75:25, other than NER, where it will be at 90:10. Besides, the major financial norms under ICDS Mission would be as under:

7.1 Construction of Anganwadi Centres (AWCs):

In order to facilitate better delivery of services, construction of AWCs, as a distinct activity, in a phased manner under the ICDS Scheme is extremely essential. A class infrastructure of requisite building (3-4 rooms) with facilities and skilled human resources is needed at the village level. The MWCD has issued guidelines stating that AWCs should be child friendly with all relevant infrastructure and the space should be at least 600 sq. ft. Please refer MWCD's letter in this regard at Annexure – II. Moreover, many states have developed designs and constructed AWCs that are locally viable. A sample design of the AWC is also given at Annexure –II. More designs are available at www.wcd.nic.in. Under the ICDS Mission, 2 lakh AWC buildings across the country in phased manner costing @Rs.4.5 lakh per unit would be constructed. This is on a 75:25 centre-state cost sharing basis. Further funds are also being allocated for up-gradation of at least 2 lakh AWCs (including crèche) @ Rs. 1 lakh per unit on 75:25 cost sharing basis. This includes making the AWC child friendly. States would be encouraged to co-locate AWC with schools, wherever feasible and practical. The construction would follow the phased roll out plan.

7.2 Rent for Anganwadi Centre:

According to the latest NCAER report, around 17 per cent of AWCs are functioning from the rented premises. The monthly rent of the AWC has increased from Rs.50 to Rs.200 for rural and tribal projects and from Rs.300 to Rs.750 for urban projects. However, this rate is grossly inadequate and it is very difficult to find a rented premise for AWCs within this range. Under the ICDS Mission, the monthly rent for the AWC would be enhanced. The monthly rent of the AWC is now revised as:

- Rs.200 to Rs.750 for AWCs / Mini-AWCs in rural and tribal projects
- Rs.750 to Rs.3000 for AWCs / Mini-AWCs in urban projects
- Rs.5000 for AWCs / Mini-AWCs in metropolitan cities

The revised rent for AWCs will only be applicable for centres offering a space of at least 500 - 600 sq. ft. The AWC should also have adequate infrastructure facilities. Guidelines and standards for a child-friendly AWC (including safe drinking water and sanitation) would be developed and it would be made mandatory in hiring rented accommodations. Wherever such space is not available, there will be proportionate decrease in rentals too. Further, additional rent for space for crèche is also envisaged.

7.3 Supplementary Nutrition:

Supplementary Nutrition is an important component as it acts as an entry point for other services provided by the AWC. The cost sharing ratio of the supplementary nutrition between the centre and States/UTs is on 50:50 basis for states other than NER and 90:10 for NER states. The cost norms for supplementary nutrition were last revised in October 2008. However, due to unprecedented increase in the prices of food items and fuel in the past two and half years, various State

Governments have expressed difficulty in providing supplementary nutrition within the prescribed financial norms. To meet this challenge, the SNP norms are revised based on the Consumer Price Index for Rural Labourer (CPI-RL) with base year 1986-87. Secondly, cost per beneficiary has been factored based on cost of food items (Mean BPL landing rates for cereals), transportation cost, cooking fuel cost, Micronutrient Fortification Cost, Processing & storage cost and others to the extent feasible. SNP in any case should adhere to the guidelines issued by MWCD on 24.02.2009 read with any further clarification.

Accordingly, the revised SNP cost norms under the ICDS Mission would be as under:

Category	Existing Norms (w.e.f. 16.10.08)	Revised Norms effective from the date of approval (per beneficiary per day)
(i) Children (6-72 months)	Rs.4.00	Rs.6.00
(ii) Severely underweight children (6-72 months)	Rs.6.00	Rs.9.00
(iii) Pregnant women and Nursing mothers	Rs.5.00	Rs.7.00

Roll out of SNP with revised norms will be according to implementation plan initiating with 200 high burden districts in Year-1 and achieving universalization in Year-3. Till Year-3, SNP norm in other districts will remain same as that of existing norm. States who are providing additional top up may continue to do so. Other states should also consider making additional provision. It will be prudent to request for food grains (wheat, rice, millets) under WBNP wherein facility to provide food grains at BPL rates is available.

In case of pilots of AWC cum Crèche / Day Care Centres, additional meal as per crèche norm would be provided to children for which additional financial resource would either be tapped from under the Crèche Scheme or supported by ICDS Mission through State APIPs approved by the Empowered Committee.

For better management and control, SNP with revised norms will be rolled out according to the phasing plan of ICDS Mission.

7.4 Grading and Accreditation:

Based on the achievement of pre-defined quality standards and child related outcomes, grading and accreditation of AWCs, ICDS Projects and District Mission would be carried out. This would be carried out through a participatory process with appropriate mechanisms for validation of child friendly AWC and better performing centres and projects. It would help improve motivation of ICDS functionaries and communities for enhanced performance outcomes and ICDS quality. In order to strengthen the concept of ECD beyond AWC, accreditation of private pre-schools would also be carried out. A lump-sum provision of Rs.2.5 lakh per district has been made for grading and accreditation under the ICDS Mission.

7.5 Operational Cost:

The operational cost of ICDS implementation in Mission Mode at National, State, District, Block/ Project and Village levels works out to be Rs. 1,23,580 crore for five years with the cost for 2012-13 being Rs. 16,542 crore. Besides the staff salary and honorarium, it will include recurring expenses, such as rent, travel allowances, administrative expenses, and funds for advocacy and public education, training, research, contingencies for AWW, preschool material, information education material and medical kit.

7.6 Budget:

A separate ICDS Mission Budget head would be created to allow flexibility and integration within the child development and nutrition sectors and for convergent action with wider determinants of maternal and child under-nutrition. In order to ensure effective implementation of ICDS in Mission Mode as well as to achieve the above mentioned goals and objectives, Rs. 1,77,456/- crore has been approved during the 12th Five Year Plan, of which Rs.1,23,580/- would be the GoI share and Rs.53,876/- State share. The comparative statement showing existing and approved norms under ICDS mission is given at **Annexure XVIII**. The detailed component-wise and year-wise break up of budgetary requirements for implementing the ICDS in mission mode during the 12th Five Year Plan is at **Annexure XIX**.

SUMMARY - XII PLAN APPROVED BUDGET (Rs. in Cr)			
Particulars		Total Plan (GOI)	% w.r.t. Total GoI Budget
Salary	-	16,829	13.6
Honorarium	-	31,386	25.4
SNP	-	42,626	34.5
Construction, Up-gradation andMaintenance of AWCs	-	8,771	7.1
Programme Components (ICDS)	New Components	11,522	9.3
	Existing Components	12,446	10.1
	TOTAL	1,23,580	100

YEAR -WISE BREAK-UP (Rs. In Cr)						
Plan Period - GOI Share	Year 1	Year 2	Year 3	Year 4	Year 5	Total (Rs in Cr)
Recurring	16,454	21,129	24,543	25,703	25,733	1,13,562
Non-Recurring	88	898	1,990	2,750	4,292	10,018
Year wise total (Rs in Cr)	16,542	22,027	26,533	28,454	30,025	1,23,580

7.7 Release of Funds and Fund Flow

The procedure for release of funds and fund flow mechanism under the ICDS Mission would be based on State APIPs, following the broad Framework for Implementation. A Memorandum of Understanding (MoU) between the Government of India (Ministry of WCD) and State Government/ UT administration would be executed through which State Governments / UT Administrations would be required to give written commitments regarding its additional contributions towards ICDS Mission. The fund allocations to the State Governments would be made on the basis of the magnitude of the problem / challenges, core services and activities and commitments to reforms and resources by the State Governments.

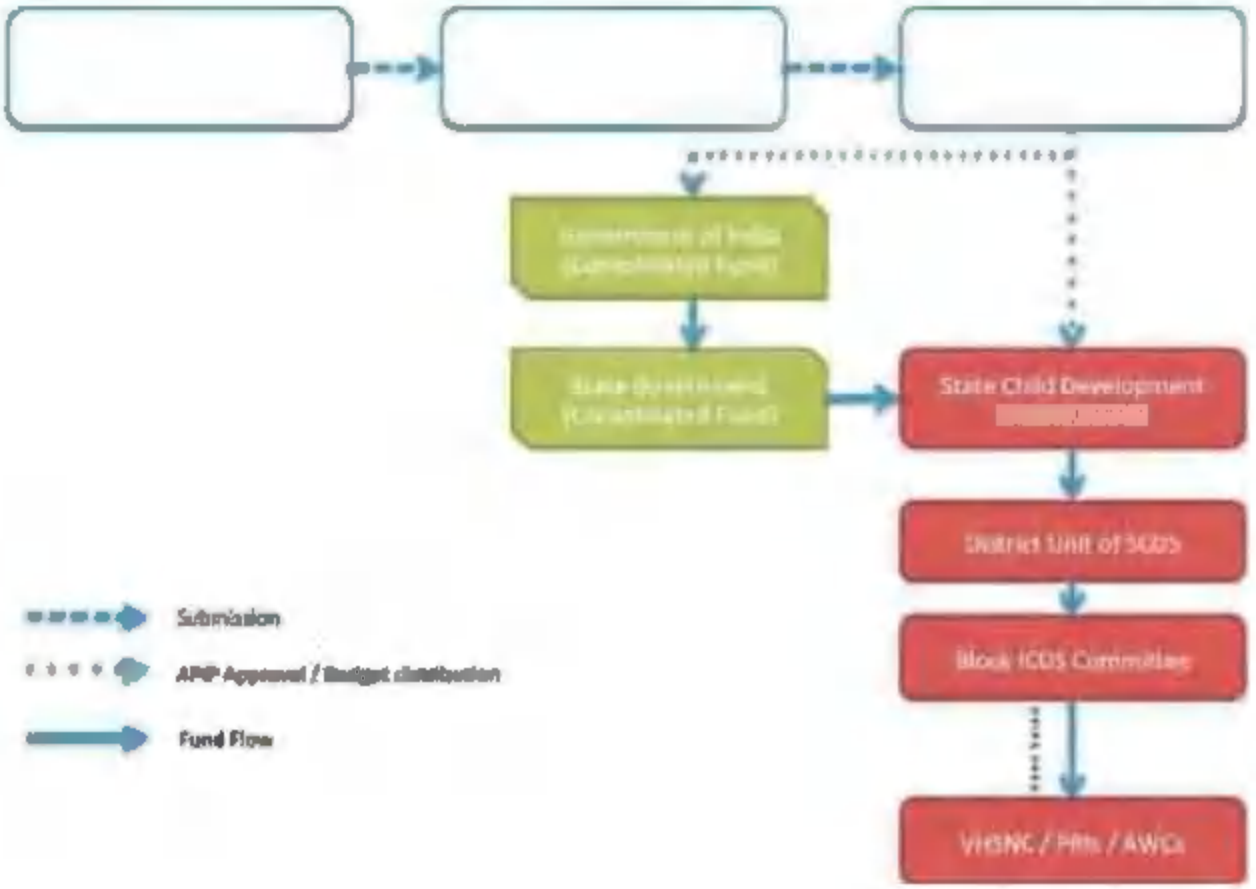
The Annual Programme Implementation Plans of the ICDS Mission would be jointly appraised by a team of experts constituted jointly by the National and State Level Society. The National ICDS Mission would approve the Annual Plan on the basis of relevant financial and technical guidelines and release funds to the State Child Development Societies. The release of the first instalment to the State/UT

would be processed after receipt of the above documents/commitments on a lump sum basis. The appraisal and approval of Plans would be completed in time for the first instalment, to meet the expenditure of the first six months, to be released by 15th April. There would be some departure from the norm in the first year.

Every year there would be two instalments the detailed instructions on which be issued separately : The second instalment would be based on the (i) adequate utilisation of 1st instalment and (ii) the quality of implementation and progress. Certain conditions like achievements in the previous year, fulfilment of commitments made in MoU, Utilization certificates / SoEs / Audit reports, Financial monitoring reports, etc. Approval of APIP by EPC would be essential before release of 2nd instalment in the subsequent year. Auditing requirements would be as per standard government practice.

Fund transfer of the ICDS Mission will be channeled through the Consolidated Fund of the State. However, in the event the State fails to transfer the funds within 15 -days, it will be liable to pay interest on the amount on the pattern of releases for the Finance Commission funds . Broadly, the fund flow mechanism for ICDS Mission would be as under:

Chart - I: Fund Flow Mechanism:



8. MONITORING, REVIEW AND EVALUATION

Under the ICDS Mission, monitoring would he carried out at Anganwadi / village, block, district, state and national levels. At each level, a standardized format and the set of input, output and outcome indicators for evidence based monitoring would be established. To improve public accountability and transparency, consistent with current government initiatives like Sevottam Compliance and Citizen's Charters, four major community based mechanisms would be introduced for monitoring and promoting child development outcomes. These are:

(i) **Introduction of a Common Review Mission (CRM)** on the lines of NRHM would be carried out on annual basis. Alternatively, considering the fact that MHFW / NRHM is responsible for three core service packages of ICDS, joint CRMs with NRHM could be carried out. The recommendations of the joint CRM would provide the basis for annual mid course corrections in the programme design and feedback to the National and concerned State & District ICDS Missions. The constitution of NRHM CRM Teams would be adjusted accordingly to reflect representation from the Women and Child Development sector as well as ICDS Mission at all levels.

(ii) **Jan Sunvai** where monitoring teams consisting of a mix group of National, State and District level (of different districts) officials and members of the Voluntary Action Group would visit a defined sample of hot-spots / areas repeatedly reporting higher numbers of moderate and / or severe undernourishment. Through public interaction and focused group discussion (FGDs) with members of families and communities, these teams would carry out qualitative analysis of interventions, gaps and further measures required for improving the child development outcomes and impact. The teams would prepare and submit analytical reports with recommendations to the District, State and National ICDS Missions. Jan Sunvai could either be linked to joint ICDS – NRHM CRM or could be need-specific based on nutrition surveillance data as may be decided by the National and State ICDS Mission.

(iii) **A community owned accreditation system** would be piloted and progressively expanded under the ICDS Mission to ensure quality standards in child care service delivery at different levels. This would imply the grading of service delivery points including AWCs, Health Sub Centres at village / cluster levels, mandals, blocks and districts based on health, nutrition and development outcomes. Community based recognition and awards would be instituted along the lines of the Nirmal Gram Puraskaar (TSC) for high performing panchayats, blocks, districts and states. The award could take the form of higher untied funds allocated through APIPs and other measures as decided by the National and State ICDS Mission from time to time. Higher performing districts would be 'living universities' for learning by other districts / states.

(iv) **Community disclosure and public information:** The community level indicators of the ICDS Mission would be tracked at the village level through the community chart with key indicators for the village displayed prominently outside the AWCs, Health Sub Centres and Gram Panchayats. At the AWCs, a community chart for monitoring development and nutrition status of children under five years in the community will also be displayed. This chart would be updated on fixed monthly Village Health & Nutrition Days (VHNDs) and should be validated based on family held Mother & Child Protection Cards.

Besides, in line with the guidelines for constitution of Monitoring & Review Committee at different level to review progress in implementation of ICDS scheme issued by MWCD on March 31, 2011 **[copy**

at Annexure XX), a five-tier monitoring and review mechanism from the Central level to AWC level would be set up. These include: (i) National Level Monitoring & Review Committee (NLMRC); (ii) State Level Monitoring & Review Committee (SLMRC); (iii) District Level Monitoring & Review Committee (DLMRC); (iv) Block Level Monitoring Committee (BLMC); and (v) Anganwadi Level Monitoring & Support Committee (ALMSC).

As part of the ongoing process of strengthening the ICDS, MWCD has already initiated the process of reforming the existing ICDS MIS that would be carried out in two phases. The first phase would include refining and revising the recording and reporting systems at various levels, while the second phase would include strengthening supervision and program management. Under the second phase new tools to achieve focus on quality of ECE, NHED, etc. as well as tools for programme management would be made available to the Supervisors / CDPO / DPO / Directorates.

The reformed MIS in ICDS is expected to (i) help AWWs spend less time on reporting and paperwork, making her time available for focused home contacts (ii) provide greater clarity of data flow from primary records to reports; (iii) generate more meaningful, credible and verifiable data for all users (iv) help digitization of MIS and (v) move towards results focus. Apart from revising/ developing the monitoring formats and tools, following new initiatives during the 12th Plan would be undertaken:

(i) ***Provision of data entry at AWC / Sector level by third party:*** All data and information pertaining to the services and the beneficiaries are captured at the AWC level. As outlined above, all other levels above AWC consolidate this data and process/analyze it and add some more data pertaining to each level. Ideally, data generated every month at AWCs should be electronically entered on computer and must be maintained at centralized server at State WCD and/or NIC/ MWCD. For this purpose, a provision of outsourcing the monthly data entry through pre-designed web-enabled software at block / district level @ Rs. 10 per AWC Report would be allowed.

(ii) ***IVR Based Monitoring through Nutrition Resource Platform:*** The MWCD has set up a Nutrition Resource Platform (NRP) at NIPCCD, New Delhi with support from CARE/USAID as part of their INHP Program. The objective of the NRP is to create an interactive knowledge resource base on Nutrition and Child Development. NRP will serve as digital resource on Nutrition including blasting of messages, provide interactive forum and exchange of information. In addition it will have facilities to capture Interactive Voice Response (IVR) system based data capturing mechanism. Data captured would be integrated in the MIS reporting system on identified indicators. To improve the connectivity/ communications with the AWCs by the ICDS functionaries, a mobile phone along with SIM card to Anganwadi Workers at AWCs would be provided.

Besides, the Ministry of WCD would also commission a third party evaluation of the ICDS Mission to review the impact of the programme. Based on the findings of the third party evaluation, the Ministry of WCD would carry out necessary mid-course correction for enhancing the overall impact of the programme.

Under the ICDS Mission, adequate allocation of both financial and human resource at all levels would be made available to strengthen the implementation of the ICDS MIS for enhancing data flow, accuracy and availability of credible and verifiable data for informing policy decisions pertaining to ICDS. Comprehensive guidelines for strengthening the monitoring, review and evaluation under ICDS Mission would be developed by the National ICDS Mission Directorate.

9. GRIEVANCE REDRESSAL SYSTEM

In order to strengthening accountability as well as providing a platform for registering and resolving complaints of beneficiaries / community, a grievance redressal mechanism would be put in place in consultation with the States / UTs. In the proposed mechanism, the VHSNC would act as the Grievance Redressal Committee at the village level, while at the block level, the Panchayat Samiti / Standing Committee would be the responsible committee for addressing all complaints / grievances. At the district level, the Zila Parishad lead by the CEO / District Magistrate / Collector (to be decided by States) would be responsible for the registration and redressal of all complaints / grievances. At the State level, the concerned Executive Committee under the State Nutrition Council and at the National level the Empowered Committee headed by the Secretary, MWCD would be responsible.The higher-level authority at block, district, state level would act as the Appellate Authority, MWCD being the highest level authority.

With the aim at enhancing the process of grievance registration and redressal, a web-enabled platform would be set up under the ICDS Mission. In this system, beneficiaries / citizens would be able to register their grievances either by calling a toll free number or by submitting a written complaint through fax, e-mail and / or by visiting the ICDS Mission web portal. Detailed guidelines for setting up the Grievance Redressal System will be mentioned in the proposed Implementation guidelines.

10. ANNEXURES

Annexure I

OUTLINE OF AWC-CUM-CRÈCHE IN SELECT AREAS

The provision of day care crèches is essential for care and development of children in the 0-6 years of age; whose mothers go for work. This is essentially required in cases where there are no adult care givers at home after the mothers have left for work. Currently, the State Governments are not investing at all in the day care centres. The availability of crèches under the Rajiv Gandhi Scheme for Crèches is limited to about 22000 Crèches for the entire country and is managed by mother NGOs without involvement of State / UT governments. That being the case, there is a need for providing day care crèche facilities at the AWCs which have an outreach upto the habitation levels. The AWCs are considered best suited to work as day care centres as they are meant for children 0-6 years of age for providing supplementary nutrition. Pre-school education and health check up. What will additionally be required is augmentation of physical infrastructure, human resource, care related equipments and facilities for children below 3 years of age. Specifically, the additional requirements will include:

1. *Personnel:* One additional Crèche worker who will primarily be responsible for providing care and attention to children under 3 at the centre and for providing supplementary nutrition. The honorarium of Crèche worker is kept at par with AWW at the rate of Rs 3,000/- per month.

2. *Supplementary Nutrition:* For children who stay in the crèche all day provisions will be made for breakfast/mid-morning snack, lunch and evening snack. All children at the centre may not stay the whole day. It is assumed that not more than 15 children will be left at the centre for the whole day by parents. Cost for supplementary nutrition for these children is kept at Rs 6/- per children per day in addition to the normal AWC – SNP provisions for 300 days in a year.

3. *Infrastructure:* Additional space of 6-8 sq. ft. (total: 150-175 sq. ft.) per child will be required to ensure adequate space for children to play, rest, and learn without any hindrance as well as for providing a safe and protective environment for under 3's. In AWCs where the introduction of crèche facilities will require construction of an additional room, or where there is a need to shift to a building with greater space, the cost sharing between the Centre and the State will be 75:25. This cost has been budgeted under AWC up- gradation at the rate of Rs 1 lakh per unit for 2 lakh units in a phased manner, of which the AWC cum crèche upgradation would be the priority.

4. *Timing:* The centre will have to be open for at least 8 hours. Timings should be set in accordance with mothers' requirements and may be different in different areas/ seasons. Largely, they may coincide with primary school timings as that makes it possible for older children to support the picking up and dropping of under six. The workers at the centre may plan their schedule (on a shift basis) such that the workers do not have to spend more than 6 hours at the centre.

5. *Training:* All three workers will require base training to care for children under six. Greater specialization for providing preschool education will be required for AWW 1, and more focused training for crèche management and care and stimulation for under threes will be required for Creche Worker. Supervisors and CDPOs will also need to be trained on the new model of AWC-cum-Crèche to enable them to guide and monitor it.

The AWC-cum-crèche model will be piloted in 5% AWCs on a 75:25 cost sharing cost sharing basis with the States. To begin with, emphasis will be placed on implementing the model in Urban Areas. Implementation schedule in Urban: Rural would be in a ratio of 60:40. Out of 60% Crèche in urban areas, 17% would be piloted in metropolitans. States may explore the engagement of non-governmental organizations in implementing the model. If the State wishes to implement the model on its own, it

may explore the engagement of non - governmental organizations with expertise in the provision of crèche facilities such as Mobile Crèches in developing AWC-cum-crèche models and in providing training and technical support to ensure smooth implementation of the same. States interested in piloting the model will work out detailed implementat ion arrangements and protocols for the model and place it for approval in their APIPs. Implementation of AWC cum Crèche in 70,000 AWCs in a phased manner will be done as per the following schedule:

Particulars	Year-1	Year-2	Year-3	Year-4	Year-5
Number of AWC cum Creche (in proportion with construction)*	**0**	**20,000**	**40,000**	**70,000**	**70,000**
Creche in Metropolitan area (40%)	0	8,000	16,000	28,000	28,000
Creche in Urban area (43%)	0	8,600	17,200	30,100	30,100
Creche in Rural area (17%)	0	3,400	6,800	11,900	11,900

ADDITIONAL DETAILS – AWC CUM CRECHE		
Facilities at AWC cum Crèche	**Cost Norm**	**Remarks**
Additional Crèche Worker	Rs 3000/- per worker per month	Honorarium
Cradles, additional bed and bedlinen	Rs 18,000/- per Crèche	Establishment cost (once in 5years)
Care items, soft toys and cleaningmaterials	Rs 1,000/- per annum	Misc requirements
Additional reht for additional space to be utilized for Crèche	Additional Rent (per Crèche permonth)Rural/Tribal – Rs 500/- Urban – Rs 1,000/- Metropolitan – Rs 2,000/-	Rent will be area specific and subject to state schedule of rent (SoR) and up to maximum ceiling as laid down in norms
Evening snack for all children atCrèche	Rs 6/- per beneficiary per day	Cost of evening snack/ milk etc.

NOTE: *All norms (incl. honorarium of Crèche worker) will be shared in a ratio of 75:25 between Centre and State*

Annexure II

No. 16-3/2009-ME Vol. II
Government of India
Ministry of Woman & Child Development

Shastri Bhawan, New Delhi,
Dated the 10th March, 2011

To

The Secretaries in all States/UTS dealing with ICDS

Subject: Construction of Anganwadi Centers.

Sir/Madam,

As you may be aware, the Integrated Child Development Service (ICDS) Scheme is one of the flagship programmes being implemented through a network of Anganwadi Centers (AWCs) across the country. The scheme offers a package of six services for children below six years of age and pregnant and lactating mothers. An AWC is, therefore, the first out post at the habitation level for nutrition, health and early childhood development and learning.

2. There is currently no provision for construction of Anganwadi buildings, except for North Eastern States under the ICDS Scheme. Several State Governments have been constructing AWCs by using their own funds and funds available under schemes of different Ministeries, such as BRGF, MPLADS, MLADS, NREGA, PRI, MSDP, ADP, BADP and State Plans including RIDF, etc. There is a need to accelerate such efforts in order to consolidate the AWC as a platform more so to focus on early childhood learning and also in visw of Sabla and IGMSY schemes being rolled out.

3. Keeping in view the important and enhanced role being played by the AWCs in the delivery of services to the targeted population, it has been felt necessary to give an indicative and suggestive model/layout of AWC building so that States/UTs make minimum provision for these facilities at the AWCs. This matter has been discussed with various agencies and it has been felt that an AWC must have a separate sitting room for children/ women, separate kitchen, store for storing food items, child friendly toilets and space for playing of children (indoor and outdoor activities) with safe drinking water facilities. It is also felt that it would meet the minimum requirements if an AWC is constructed in a covered area of **not less than 600 sq feet as per the standard specifications.**

4. Some of the **indicative layout models of the AWCs** received from CPWD New Delhi, State Governments of Andhra Pradesh, Rajasthan, Tamil Nadu, Bihar and Chhattisgarh are enclosed for ready reference. These are, however, **suggestive and do not represent any fixed parameters.**

5. It is requested that the foregoing details may be **kept in view while considering proposals for construction of AWCs is your State/UT.**

Yours faithfully,

(Dr. Shreeranjan)
Joint Secretary to the Govt. of India

Copy to:

i. Directors dealing with ICDS in States/UTs.

ii. TD (NIC) to upload on to the Website of MWCD

(H.S. Nanda)
Deputy Secretary to the Govt. of India

SAMPLE DESIGN OF THE AWC

CHHATISGARH

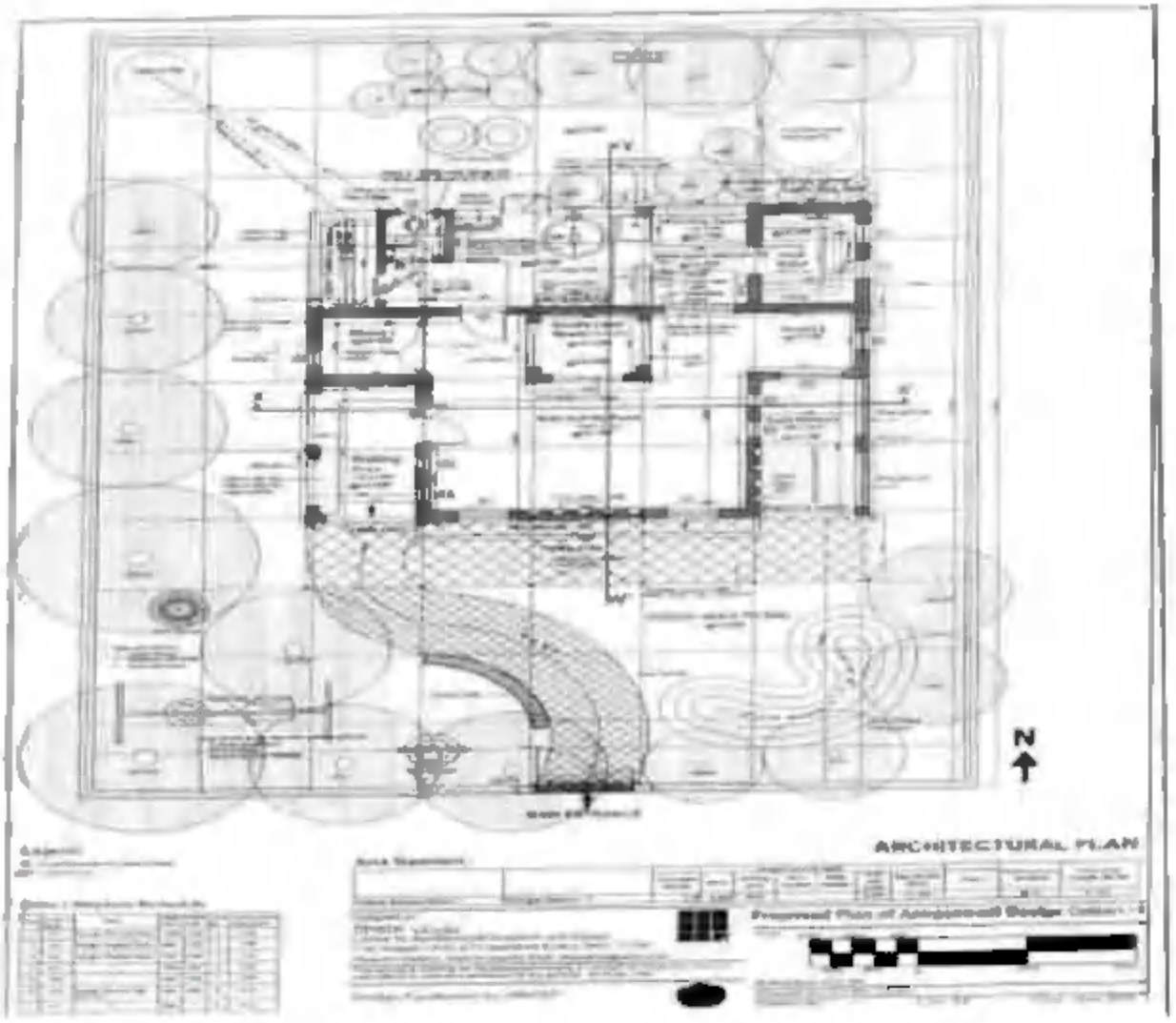
Alternative designs of AWCs

1. Design option 1 : Area = 84.31 sq.m. Costing @ Rs 4000/- per sq.m = Rs 3,37,240/-
2. Design option 2 : Area = 100.5 sq.m. Costing @ Rs 4000/- per sq.m = Rs 4,02,000/-

However note the following :-

1. We are suggesting use of various cost effective building technologies
2. Cost of toilet is included in the above
3. Convergence of scheme from various departments is not included here.
4. This is a tentative/ preliminary cost and due to lack of data from RES, it is based on previously available data.

One sample has been given below. Detailed sample of all relevant designs are available in www.wcd.nic.in



Annexure III

CORE PACKAGE OF SERVICES UNDER ICDS MISSION

1. Early Childhood Care Education and Development (ECCED)

Early Childhood Care and Development (ECCD) under the ICDS Mission is defined as holistic and integrated provisions / environment for children below 6 years, that would enable and ensure their care, protection, learning and all round development, through family, community and center based interventions. Within the framework of ECCD, the Early Childhood Care & Education (ECCE) refers to the informal early psychosocial stimulation for children below 3 years and more planned Non-formal Preschool Education for children between 3 to 6 years, which is child friendly, focused around play and individuality of the child and aimed towards the child's holistic development and readiness for school.

1.1 Non-formal Pre-school Education / Early Childhood Care & Education (ECCE):

The Preschool Education (PSE) is one of the most important components of the ICDS and in many ways can be considered to be the backbone of the programme. The purpose of PSE is to provide sustained activities through joyful play-way method that helps to prepare the child for regular schooling. PSE, as envisaged in the ICDS, focuses on holistic development of children up to six years. The Anganwadi strives to satisfy the curiosity of the child and channel the child's creative energy by providing a learning environment for promotion of social, emotional, cognitive, motor, physical and aesthetic development of the child. The early learning component of the ICDS Mission would ensure a significant input for providing a sound foundation for cumulative lifelong learning and development. It would also contribute to the universalization of primary education, by providing to the child the necessary preparation for primary schooling and offering substitute care to younger siblings, thus, freeing the older ones- especially girls-to attend school.

With the aim to strengthen the early child care and learning environment, ICDS in Mission Mode would invest resources on proper quality improvement in ECCE through the AWC platform, with joyful early learning initiatives that would increase the demand for ICDS services and participation in the same, by the local communities and other stakeholders such as mothers' groups. The focus would be on making AWCs as the ECCE child friendly centre equipped with the locally appropriate play / learning materials, aids, and facilities for teaching by trained AWWs. Details of key actions for strengthening ECCE under ICDS Mission at the micro and macro levels are given at **Appendix – I.**

In order to strengthen the existing ECCE services, ICDS would focus on providing a broad range of services to children both at the Anganwadi Centre and beyond Anganwadi Centre. These services would be broadly provided through the following main interventions:

(i) ***ECCE Services at Anganwadi Centres:*** The focus would be on strengthening early childhood care and education as a core service of the Anganwadi Centres with dedicated four (4) hours of early childhood education sessions followed by supplementary nutrition, growth monitoring and other related interventions. In particular, the ECCE Services at the Anganwadi Centres would largely be delivered through:

(a) **Anganwadi Worker-led Intervention:** In order to improve the quality of the ECCE service delivery under ICDS, the Anganwadi Worker would be trained. She would be responsible for the education and care of all children upto the age of 6 years with focus on the holistic development of the child. The AWW would provide home based guidance to care givers and

mothers and early stimulation of the under-threes. She will also undertake early screening for delayed development and referral. For children in the age group of three to six years effort would be on ensuring a natural, joyful and stimulating environment, with emphasis on necessary inputs for optimal growth and development. Developmentally appropriate curriculum would be designed in order to foster holistic development in all domains. Starting from planned play based programme for 3-4 year olds with more of free play, and thereafter, moving towards an increasing ratio of adult guided large group activities focused more on specific school readiness for 5-6 year olds. In order to ensure a joyful learning process and child friendly environment, provision of adequate space for a play based programme / activities and age specific developmentally appropriate play and learning materials would be made. In order to strengthen the Pre-school Education component, the ICDS Mission would encourage tapping existing resources at district level for additional inputs wherever required. Assistance of SSA would be sought for need based training of AWW, provision of learning materials, building advocacy on the importance of early childhood care & development, organizing training programmes for community leaders, providing for intensive planning for ECCE & promoting convergence between school system & ECCE.

(b) **Parent-led AWC – based Intervention:** As a pilot initiative, the parents would be encouraged to come forward to provide education and care for their children at AWC. The Mother's Groups and Parents' Groups (wherever available) would be involved in taking care of this intervention. The focus would be on parents as first educators, learning through play and the child's individual interests. Initially, the parents may be made responsible for supporting the management of the early childhood care and education services twice a week, with the support and guidance of the AWW. The number of days of parent-led ECCE intervention may be increased or decreased on the basis of the success of this pilot initiative. Monthly Fixed ECCE day will be organised at the AWCs for advocacy and capacity building of the parents including Grand Parents and elderly citizens.

(ii) ***ECCE Services beyond Anganwadi Centres:*** The focus would be on strengthening early childhood care and education as a core service with dedicated four (4) hours of early childhood education sessions followed by supplementary nutrition, growth monitoring and other related interventions. In particular, the ECCE Services beyond the Anganwadi Centres would largely be delivered through:

(a) **Parent-led home-based Intervention:** As a pilot initiative, the parents would also be encouraged to hold ECCE interventions in their home settings. Regular training and capacity building to parents would be ensured by the ICDS Mission to carry out this responsibility.

(b) **NGO-led Interventions:** In order to strengthen the ECCE services beyond Anganwadi Centres, voluntary organizations / NGOs would be involved to implement interventions. They would provide education and care services to young children either in the child's own home or centre based. This may be all-day or part-day education and care. The aim of this service would be to provide learning opportunities for children in small groups within homelike surroundings. Voluntary organization implementing this component would operate playgroups, so that educators and children can have regular social and educational contact. Voluntary organizations engaged for carrying out this activity would engage qualified and registered teachers as "ECCE Coordinators" to support the educators / caregivers. Behaviour change communication between parents and educators / caregiver

would be an important feature of this service. Regular training and capacity building of educators / caregiver would be carried out to improve their understanding and knowledge of how children learn. The ECCE Coordinators would regularly visit the community / families to check on children's safety, well-being and learning process.

(c) **Private sector schools (pre-primary & nursery etc.) led interventions:** Although there are no accurate figures available, according to some estimates, the number of children enrolled in private-sector initiatives (including day-care centres, nurseries, kindergartens, and pre-primary classes) was about 1 crore (2001), or about as many children as the number under ICDS at that time[1]. Today the initiatives of the private sector may be as large as the programmes undertaken by the government sector, which caters to different classes. Though originally confined to the upper and middle classes in cities, today private-sector initiatives have spread to small towns, villages, semi-urban areas, urban slums, etc., reflecting the unprecedented demand for and popularity of such services. However, within the private sector too, there is wide variability—ranging from a handful of well-established elite schools of high quality offering excellence, to the great mass of poorly managed, overcrowded, and under-equipped schools.[2] With the aim to ensure the quality and standards of ECCE services provided by above institutions, appropriate policies and regulations would be developed and implemented. All private sector schools (pre-primary & nursery etc.) would be brought in the ambit of such policies and regulations on ECCE.

In order to strengthen the concept of ECCE beyond AWC, various innovations would be piloted under the ICDS Mission including providing funds for promoting early intervention and stimulation, monthly monitoring and promotion of child growth and developmental milestones as well as linkage of such private sector schools with VHNDs among others. For this purpose, per child cost of SNP under ICDS Mission may be allocated on pilot basis to selected private sector schools (pre-primary & nursery etc.), if demanded or essentially required, while such institutions would also have freedom to raise funds from other sources for this purpose. Accreditation of private sector schools (pre-primary & nursery etc.) would also be carried out under the ICDS Mission to promote healthy competition and quality ECCE services.

1.2 Supplementary Nutrition: The supplementary nutrition component of ICDS would comprise of supplementary feeding component and survey of families in the community to identify the target beneficiaries etc. The beneficiaries will avail supplementary nutrition provision for 300 days in a year. By providing supplementary nutrition, the scheme attempts to bridge the calorie gap between the Recommended Dietary Allowance (RDA) and the Average

NUTRITIONAL & FEEDING NORMS ISSUED BY MWCD ON 24th FEBRUARY 2009

Category	Calories (K Cal)	Protein (g)
Children (6-72 months)	500	12-15
Severely underweight children (6-72 months)	800	20-25
Pregnant women and Nursing mothers	600	18-20

[1] *DEE & L, MHRD 2004 as quoted in the Position Paper - National Focus Group on Early Childhood Education, National Council of Educational Research and Training, 2005*
[2] *Ibid.*

DailyIntake (ADI) of children below six years and pregnant and lactating mothers. This pattern of feeding aims only at supplementing and not substituting for family food. Under the restructured scheme, these beneficiaries will continue to receive the supplementary nutrition as per provisions laid down under the revised nutritional and feeding norms issued by the MWCD in 24th February 2009 (see table on page 59). Based on the local needs and food habits, states would have flexibility in the selection of food supplements.

With the aim to ensure normative approach to SNP, the SNP financial norms are revised based on CPI-RL considering the inflationary price rise in the cost of food items, cooking fuel etc. Moreover, to facilitate the processing, storage and transportation from FCI warehouses/ SHGs to AWCs, provision has been included in the revised norm. Besides, states would be incentivized to manage SNP with minimal wastage and use the savings as flexi- funds / untied resources improvement of infrastructure of the centres, based on clearance from the EPC. Use of locally appropriate feeding choices for take home ration for pregnant and breastfeeding mothers and children 6 months - 3 years, with greater participation of local communities, women's SHGs, mothers' committees, village health, sanitation and nutrition committees would be promoted.

2. Care and Nutrition Counselling:

Child Care and Nutrition Counselling to all women in the age group of 15 to 45 years would be provided with the aim to enhance the child care abilities / capacities of mother and / or other caregivers to look after the health and nutritional needs of children within the family environment. The focus of this component would be to provide counselling and behaviour change communication (BCC) to women on issues relating to basic health care, nutrition, maternal care and healthy food habits, childcare, infant feeding practices, utilization of health services, family planning and environmental sanitation. The AWW / Additional AWW in 200 high burden districts would be responsible for imparting counselling and behaviour change communication through community and home visits as well as demonstrations of appropriate feeding practices. In order to achieve the objective of enhancing the child care abilities and promote health and nutrition of children, the services / interventions would be offered under this component:

(I) **Growth Monitoring and Promotion:** It being one of the vital services mandated under ICDS guidelines, all eligible children 0-3 years would be weighed monthly and 0-6 years children on quarterly basis. Identification of growth faltering and appropriate counselling of care givers specially on optimal infant and young child feeding and health care would be reinforced. Family retained Mother and Child Protection Card would be used by care givers to monitor the growth of their children,

(II) **Infant and Young Child Feeding (IYCF) Counselling:** IYCF practices comprising of both breastfeeding, especially early initiation and exclusive breastfeeding for the first six months of life, as well as appropriate complementary feeding help ensure young children the best possible start to life. Optimal IYCF practices can be enhanced with skilled one to one counselling through home visit and support to pregnant and lactating women, mothers of children under three, the family and the community. Under this component, these practices would be promoted. It would also include feeding and care during illnesses, addressing prevailing myths and misconceptions, preparation of complementary foods, hygiene and sanitation especially during feeding. During such counselling sessions, benefits of breastfeeding for both mother and baby would also be discussed.

(III) **Lactation Support:** This would include support for initiation of breastfeeding, women often not producing enough milk for their babies, breast milk immediately not produced after birth and

difficulty in breast feeding due to certain problems like cracked nipple etc. In order to help lactating women build their confidence in their abillty to fully breastfeed their babies especially immedlately after birth, skilled counselling support would be provided through home and community visits.

(iv) **Maternal Care Counselling:** In order to promote maternal health and nutrition during pregnancy and post delivery, counselling and behaviour change communication would be carried out. Pregnant women, their mothers, mother-in-laws and other caregivers will be counselled about care during pregnancy and birth, nutritious diet, rest, IFA compliance, information on ANC and postnatal check-ups, etc. The household elders would be involved to become facilitators instead of barriers in promoting good practices and reinforce the same. The Additional AWW cum Child Care and Nutrition Counsellor and ASHA under the overall supervision and guidance of ANM and other health functionaries would be responsible for this task.

(v) **Nutrition and Health and Hygiene Education:** VHND and SNEHA SHIVIRS under the ICDS Mission would serve as an important platform for nutrition and health education. Besides, nutrition and health and Hygiene education would also be imparted to the beneficiaries through monthly sessions, small group meetings of mothers / Mahila Mandals, community and home visits, THR days, village contact drives, local festivals / gatherings for nutrition, health and developmental education. Demonstration of low cost recipes, promotion of balance & nutritious diet, local nutritious foods, will be undertaken. Child care and nutrition counselling would be carried out at the AWC where women will be trained and would be able to approach the AWW cum Child Care & Nutrition Counsellor about queries related to child and maternal care. Celebration of special events and days like Nutrition Week, ICDS day, Breastfeeding week etc will be organized to sensitize the community and families.

(vi) **Monitoring & Promotion of Child Growth and Development:** Growth monitoring of children and nutrition surveillance are important activities of ICDS at grassroots level. Children under three would be weighed once a month and children 3-6 years of age would be weighed quarterly. For this purpose there is a provision of two types of weighing scales –baby weighing Scale and 25 kg Salter scale. Weight-for-age growth charts would be maintained for all children below six years as per WHO Child Growth Standards. These growth charts would help identify children in various categories like normal children, moderately underweight children and severely underweight children. There would be two separate charts for girls and boys. The tracking through these charts would help detect growth faltering and facilitate prompt action and referral. A joint Mother and Child Protection Card would be provided to each mother to track the nutritional status, immunization schedule and developmental milestones for both the child and the pregnant and lactating mothers. Through discussion and counselling, growth monitoring also increases the participation and capabilities of families to understand and improve childcare and feeding practices. It helps families understand the linkage between child growth and the dietary intake, and care

(vii) **Community based management of Severely and Moderately Underweight Children:** Hands on training on caring practices will be given at Sneha Shivirs to mothers and caregivers of underweight children at AWCs for 12 days, followed by 18 days of home practice. This will help the child to gain weight and within 6-8 sessions the child is on the path of rehabilitation. Those severe underweight children requiring medical attention will be referred to NRCs / MTCs in consultation with ANM and / or MO. Close monitoring and follow up of these children after discharge will be facilitated by AWWs.

3. Health Services:

The following three major health services under the ICDS Mission would continue to be delivered through public health infrastructure under the Ministry of Health and Family Welfare:

(i) **Immunization:** The focus would be on ensuring immunization of pregnant women and infants. Sub Health Centre would be responsible for carrying out immunization of infants and pregnant women as per the national immunization schedule. Children would also be given Vitamin A and booster doses. The AWW and ASHA would assist the health functionaries in complete coverage of the target population for immunization as well as in organizing the fixed day immunization sessions- popularly known as "Village Health Nutrition Days (VHND)" at the AWC.

(ii) **Health Check-up:** Health check-up under the ICDS would continue as health care of children under six years of age, antenatal care for pregnant mothers and postnatal care for lactating mothers. The various health services provided for children by ANM and PHC staff (MO) would include regular health check-ups, recording of weight, immunization, support to community based management of malnutrition, treatment of diarrhoea, deworming and distribution of iron and folic acid and medicines for minor illnesses. A medicine kit would be provided at every AWC every year containing basic medicines for controlling common ailments like fever, cold, cough, worm infestation, etc. including medicines and basic equipments for first aid.

NRHM would provide doctors for health check up at AWC level preferably on monthly basis but at least once in a quarter. Planning Commission would issue directives for making such mandatory provision under NRHM using doctors from their own pool including AYUSH doctors and involvement of appropriately trained RMP, where qualified doctors are not available.

(iii) **Referral services:** During health check-ups and growth monitoring sessions, sick and malnourished children as well as pregnant and lactating mothers in need of prompt medical attention, would be referred to health facilities. The Anganwadi worker would facilitate the referrals and also detect disabilities in young children and refer to health facilities. ANM and/or MO would be primarily responsible for referrals.

4. Community Mobilization, Awareness Advocacy and IEC:

Advocacy and Education & Communication would be used for promoting early child development, maternal & child care and nutrition for creating an enabling environment by the ICDS Mission. With the aim of enhancing the community participation and ownership in ICDS initiatives for social mobilisation and sensitisation of the community by involving community members /PRIs /women groups/villageelders/civil society organisations etc. would be undertaken. Appropriate IEC tools and training would be provided to the functionaries at all level. Specifically, the following advocacy and IEC activities would be carried out to achieve this vision:

(i) **Sensitization and Engagement of PRIs/Mothers Committees/SHGs on Nutrition & Child Development:** To increase community ownership, PRIs / SHGs / Mother Groups / prominent community members and motivators would be identified by the AWW and ASHA and oriented on child development and nutrition related issues like care during pregnancy and feeding, early and exclusive breastfeeding, timely initiation of complementary feeding, supervised growth monitoring, care for development, early learning, sharing of nutrition status at Gram Sabha meeting, etc.

(ii) **Social mobilization campaign in partnership with Song and Drama Division of Ministry of Information and Broadcasting:** In order to specifically target tribal areas, rural areas and other

areas where the mass media reach is poor, puppet shows, folk dances, plays, skits, in local languages would be carried out in association with the units of Song and Drama Division.

(iii) **Use of Mass Media for Awareness Generation:** Building on the National IEC Campaign against mainutrition to be launched by MWCD; the ICDS Mission would strive to extend the nutrition and health education activities to the district, block and village levels. Mainstream media channels like TV, radio, print media, newsletters, etc would be utilised for propagating nutrition and health related messages including promotion of IYCF practices, care during pregnancy, healthy food habits and program services like growth monitoring among others. Posters and banners would be put up at strategic locations. Feasibility of setting up and running community radio would also be explored. State level newsletters carrying key messages, information on feeding, low cost nutritious items and recipes would be published every quarter. The State ICDS Mission would be responsible for the implementation of the tasks associated with this activity with the technical support and inputs from the locally available team of the Food & Nutrition Board (FNB).

(iv) **Awareness Campaign /Village Contact Drives through Local / Folk media:** District ICDS Missions would be responsible for identifying local troupes, who would perform on the assigned themes in local language. The shows would be carried out at the village level so as to penetrate tribal / rural areas on, preferably on the VHND / ECCE Days / other village contact days.

(v) **Inter-personal Communication (IPC):** The inter-personal communication would be carried out in the context of local knowledge & practices and individual variation of abilities in accessing, adapting and applying knowledge and appropriate to the life cycle stage. The aim would be to create a demand for the ICDS services by generating awareness about the significance of IYCF, growth monitoring, supplementary nutrition, and early childhood & maternal care for the development of the child including appropriate food demonstrations. The mother-in-laws and other caregivers would also be sensitised to ensure appropriate care and feeding practices at home. IPC would be carried out both at the AWC as well as through home visits.

(vi) **Voluntary Action:** Voluntary action for promoting nutrition / ECCE, child development and maternal care actions through village and block level nutrition and other service oriented champions / mentors who would undertake to mobilise community / social mobilisation and participation in a big way. Block level Nutrition mobilisers and trained supervisors would have a role in capacity building of the functionaries and members of the community. The trained champions / mentors would be involved in undertaking home visits and counselling to mothers and families on breastfeeding and complementary feeding. The Voluntary Action Group (VAG) at various levels would include linkups with various relevant organisations, research and educational institutions, community based organisations, civil society groups, local community groups and institutions. In addition, the VAG would also draw a mix set of people from different spectrum of community including retired senior functionaries, teachers, doctors, parents etc. Amongst women, this could he an important channel for involving educated unemployed homemakers, who may feel the need to provide valuable service to the community.

Annexure IV

DEVELOPMENTALLY APPROPRIATE/AGE APPROPRIATE ACTIVITIES FOR ECCE

For Children Under 3 years

- Focus on Health, nutrition and early psycho social stimulation through free play and a lot of adult child interaction. Egs. (infant games, traditional songs & syllables, access to variety of play materials, individualized adult attention and interaction, opportunities to explore, early introduction to stories, infant books, drawings etc.) in safe, spacious and clean environment.
- Use the Mother Child Protection Card to enhance care for development, early stimulation and for early detection and intervention of developmental delays, linking this with other key care behaviours.

For Children between 3 to 4 years

- Planned play based programme for all round development with more of free play. (2-3 hours)
- Continuous opportunities, more free but some guided, for adult–child, child to child interaction and interaction with play materials and environment through a variety of individual, small group and large group activities.
- Opportunities to listen to stories, learn rhymes, create, indulge in imaginative play, ask questions, do simple problem solving, experiment to promote active and interactive learning and generally have a 'feel good' experience for a positive self image.

For Children between 4 to 5 years

- Moving towards an increasing ratio of adult guided vs. free play activities, and more of large group activities and focused more on specific school readiness, with increasing complexity in all of above.(3-4 hours)
- *Reading Readiness:* e.g. picture–sound matching, shapes, phonetics; increasing vocabulary; verbal expression, developing bond with and interest in reading through picture books, story telling, charts etc
- *Writing Readiness:* e.g. eye hand coordination, interest in writing, left to right directionality
  - *Math:* developing skills in classification, seriation, pattern making , reasoning, problem solving, forming concepts: pre number and number concepts and space concepts and vocabulary, environment concepts
  - *Motor development :* fine and large muscle development
  - *Creativity and aesthetic appreciation*

For Children between 5 to 6 years

- The concepts of school readiness on various facets would focus on; sentence comprehension, visual perception and discrimination, number and space concepts, concepts of more/less, near/far, thick/thin, classification of one and two; giving words for letters, reading readiness, colour, object identification, early numeracy, early literacy etc.

Annexure V

OUTLINE FOR SNEHA SHIVIRS IN SELECTED AREAS – COMMUNITY BASED APPROACH FOR PREVENTION AND MANAGEMENT OF MODERATE & SEVERE UNDERNUTRITION

Undernutrition in the first six years of life needs special emphasis since it has a lifelong adverse impact on growth and development and a much greater impact on child mortality. Nearly every second young child in India today is undernourished–underweight (42.5 % of children under five years) or stunted (48 % of children under five years) and 19.8 % are wasted. Several studies and evaluations have highlighted the major causes as: (i) irregularity and low coverage of children for growth monitoring; (ii) Absence of interpretation of the growth curve and counseiling; (iii) Poor visibility to mainutrition – a silent emergency; (iv) Lack of knowledge of mothers and caregivers especially among the first time mothers on proper feeding and caring practices for children under three; and (v) Sub optimal breastfeeding and inadequate focus on timely and appropriate complementary feeding.

Although addressing this challenge is a tough task, it is a well established fact that a very small section of the underweight children require medical attention and treatment at the health facilities. A large proportion of them could be easily rehabilitated and managed at the community / village level itself. In order to overcome the problem and accelerate the prevention and reduction of moderate and severe undernutrition under ICDS Mission, efforts would be made to ensure community based prevention and management of undernutrition through SNEHA SHIVIRs, conducted at an Anganwadi centres selected among a cluster of 4-5 Anganwadi centres. This approach is being adapted under the ICDS Mission based on the learning from the Positive Deviance Approach which has shown positive results in terms of rapid reduction of undernutrition in Vietnam, Mynamar, West Africa etc. In India, the approach was piloted using the ICDS structure in West Bengal and then Orissa, which has shown positive results and potentials for scaling up as an innovative intervention.

The Positive Deviance approach is an effective community based approach which galvanizes communities and families into action for solving the problem of undernutrition. It focuses on solutions within the community, use of local resources and sustained changes in behaviour. It is based on the premises that some children thrive better than others in the same socio economic strata basically because their care givers follow some positive care practices. These practices need to be discovered and promoted to convince mothers / caregivers of undernourished children. As the practices are local and indigenous it is culturally acceptable, affordable, and sustainable. Propagating them at Nutritional Care and Counseling Sessions has made a dent on the nutritional outcomes. Care behaviours are intrinsically linked and include infant and young child feeding, health, hygiene, psychosocial care and care for girls and women.

Using this approach, SNEHA SHIVIRs under the ICDS Mission would be designed to be a community based approach for the prevention and management of moderate and severe undernutrition. The overall goals of the SNEHA SHIVIRs would be to ensure quick rehabilitation of malnourished children; enable families to sustain rehabilitation; and prevent future malnutrition in community by changing behaviours in childcare, feeding and health seeking. The key strategies would include: (i) orientation of Anganwadi workers and Supervisors on the approach; (ii) 100% weight monitoring and tracking using growth charts and Mother Child Protection Card; (iii) community orientation / sharing of the magnitude of the problem; (iv) enlisting the positive practices in the homes of well-nourished children in poorer household; and (v) setting up Nutritional care and counselling sessions.

During the SNEHA SHIVIRs the Anganwadi workers with the help of community volunteers, mothers groups and SHGs would facilitate a-learning–by doing technique for mothers and caregivers of moderate and severe underweight children. Caregivers and mothers of these children would practice new cooking, feeding, hygiene, health and caring behaviours shown to be successful for rehabilitating underweight children. The selected practices would come from both public health accepted behaviours and from the positive practices seen in the homes of healthy children living in the same milieu and belong to similar socio economic group. The SNEHA SHIVIRs would promote behaviour change and empower caregivers to take responsibility for nutritional rehabilitation of their children using local knowledge and resources and peer learning at 12 day sessions followed by 18 days home based practices.

During the 12 days children would be fed additional high calorie local foods, provided by ICDS and from contribution from individual caregivers of underweight children and community, demonstrating positive care practices and optimal feeding behaviours. Children regain appetite and visible changes are seen as also indicated by gain in weight. A gain of 200-400 gms is expected during these 12 days. The 12 day session is followed by 18 day home based care during which the practices learnt at the sessions are followed at home. Anganwadi workers will closely monitor these children through home visits during 18 days. A further weight gain is expected if the practices are followed. During this process of rehabilitation the mothers will imbibe the practices thoroughly so that they can sustain the rehabilitation and prevent malnutrition in other siblings. There is also a ripple effect which leads to an improvement in care practices in other families.

Key interventions of SNEHA SHIVIRs organised during the 12 day session would largely include:

- Selection of moderate and severe undernourished children (preferably not more than 15 per AWC / cluster)
- Orientation of mothers and caregivers of selected children
- Weight monitoring of the selected children
- Deworming of these children
- Ensure IFA and complete immunization for these children
- 12 day hands on practice sessions for mothers and care givers to promote improved feeding and child care practices.
- Recording of weight on first day, 12th day and after 18 days
- Theme based education using IEC on feeding, health, hygiene and psychosocial care on each of the 12 days, using mother child protection card package
- Health check-up and referral services
- 18 days home based practices
- Repeat of session for each child till child becomes normal
- Monitoring progress – child-wise, AWC-wise as well as at the block and district levels.

Annexure VI

Order on Expanding the Role of Village Health & Sanitation Committee

Z.18015 / 8 / 2011-NRHM-II
Government of India
Ministry of Health and Family Welfare
National Rural Health Mission

Nirman Bhawan, New Delhi
Dated 25 July 2011

ORDER

It has been decided to expand the role Village Health & Sanitation Committee (VHSC) so as to include 'Nutrition' within its ambit with the active participation of Anganwadi Workers, ANMs and ASHAs. The committee henceforth will be named as Village Health, Sanitation and Nutrition Committee (VHSNC). In addition to the defined activities of VHSC as per NRHM framework of implementation, VHSNVC will also engage with and monitor status, issues and action pertaining to nutrition. The **broadened mandate of VHSNC will include the following activities in addition to the existing mandate of VHSC.**

- Create awareness about nutritional issues and significance of nutrition as an important determinant of health.
- Carry out survey on nutritional status and nutritional deficiencies in the village especially among women and children.
- Identify locally available food stuffs of high nutrient value as well as disseminate and promote best practices (traditional wisdom) congruent with local culture, capabilities and physical environment through a process of community consultation.
- Inclusion of Nutritional needs in the Village Health Plan- The committee will do an in-depth analysis of cause of malnutrition at the community and household levels, by involving the ANM, AWW, ASHZA and ICDS Supervisors.
- Monitoring and Supervision of Village Health and Nutrition Day to ensure that it is organized every month in the village with the active participation of the whole village.
- Facilitate early detection of malnourished children in the community tie up referral to the nearest Nutritional Rehabilitation Centre (NRC) as well as follow up for sustained outcome.
- Supervise the functioning of Anganwadi Centre (AWC) in the village and facilitate its working in improving nutritional status of women and children.
- Act as a grievances redressal forum on health and nutrition issues.

The committee may, preferably, act as a sub-committee of Gram Panchayat and function under the overall supervision of Gram Panchayat. States are accordingly advised to issue the necessary notifications and guidelines on constitution of VHSNC to all concerned. States are also requested to consider notifying VHSNC as subcommittee of Gram Panchayat.

(P.K. Pradhan)
Special Secretary & Mission Director (NRHM)
Government of India

To,

Pr. Secretaries (H&FW) / Secretaries (H&FW) / Mission Directors (NRHM) of all States/ UTs.

Copy to:

1. Secretary (WCD)
2. Sr. Advisor, Planning Commission
3. All programme officers in the Ministry of Health & FW
4. NRHM Facility Centre for uploading in website.

Involvement of Panchayat Rai Institutions [PRIs] in the implementation of ICDS Scheme

PRIs are actively involved in implementation of ICDS Scheme in different States in various activities. States have devolved responsibilities, powers and involvement to PRIs depending upon their presence and effectiveness in the State. The various activities in which PRIs involved are as under:

PARTICIPATION LEVEL		Supervision of PRIs	Selection of AWWs/AWHs	Location/ Construction/ Maintenance of AWCs	Supervision of SNP	Member of Monitoring/ Supervision Committee	Monitoring of Honorarium
STATES/UTs							
1.	Andhra Pradesh						
2.	Bihar	✓	✓	✓	✓	✓	✓
3.	Chandigarh -UT		✓	✓			
4.	Chhatisgarh		✓			✓	
5.	Daman & Diu			✓			
6.	D & N Haveli		✓	✓			
7.	Delhi	Does not have PRIs.					
8.	Goa					✓	
9.	Gujarat	✓	✓		✓	✓	
10.	Haryana	✓	✓		✓		✓
11.	J & K	✓			✓		
12.	Karnataka	✓		✓		✓	

Selection of AWWs/AWHs	Location/ Construction/ Maintenance of AWCs	Supervision of SNP	Member of Monitoring/ Supervision Committee	Monitoring of Honorarium
	✓	✓	✓	
✓			✓	
✓	✓	✓	✓	
✓			✓	
			✓	
	VC	VC		
	✓			
✓	✓	✓	✓	
✓				
	✓		✓	
✓			✓	

Annexure VII

List of Result Indicators with Targets

Indicators	*Current Status*	*Target (End 12th Plan)*	*Means of verification*
A. Impact Level			
i. Reduction in percentage of underweight (<-2SD) children below 3 and 5 years *(separately)*	42.5 % (NFHS-3) for below 5 yrs	10 percentage point	NFHS/AHS/Periodic Surveys
	40.4 % (NFHS-3) forbelow 3 yrs		Do
ii. Reduction in percentage of severely underweight (<-3SD) children below 3 years	16.0 %(NFHS-3)	50%	Do
iii. Reduction in prevalence of anaemia in under-5 children	78.9 % (NFHS-3)	20 %	Do
iv. Reduction in prevalence of anaemia in pregnant women	57.9 % (NFHS-3)	20%	Do
v. Reduction in incidence of low birth weight babies	22% (NFHS-3)	10%	Do
vi. Percentage of 5-6 yrs children at the AWCs who are school-ready	NA	60%	Periodic survey
B. Outcome Level			
ICDS Core:			
i. Percentage of children weighed at birth within 24 hours	46.5%(NCAER, 2009)	90%	AHS/ Independent survey
ii. Percentage of children initiated breastfeeding within one hour of birth	40.5% (DLHS-3)	75%	NFHS/ DLHS/ AHS
iii. Percentage of children exclusively breastfeeding till 6 months of age	46% (NFHS-3)	75%	NFHS/ DLHS/ AHS
iv. Percentage of children 9-23 months who have been given complementary feeding after 6 months in addition to breastfeeding	57.1% (DLHS-3)	90%	NFHS/ DLHS/ AHS
v. Percentage of mothers receiving counseling on post weighing of their children	48.9 (NFHS-3)	100%	NFHS/AHS Independent survey
vi. Percentage of mothers of 0-3 yrs children who are using MCP card and are aware of early stimulation practices as outlined in MCP Card	NA	90%	
vii. Percentage of families using child progress card for tracking children in 3-6 years age achieving age appropriate developmental milestone	NA	50% of those attending ICDS PSE	Independent Survey
Common with Health[2] 3			
i. Percentage of children 12-23 months received full immunization	20 % (NFHS-3)	(85 %)	NFHS / AHS /DLHS
ii. Percentage of children who received Vitamin A dose in last 6 months	24.9% (NFHS-3)	(75%)	NFHS/AHS
iii. Percentage of children below 3 years with diarrhoea treated with ORS	34.2 (DLHS-3)	(70%)	NFHS/ DLHS/ AHS
iv. Percentage of pregnant women receiving at least 3 or more ANC checkups	50.7 (NFHS-3)	(80%)	NFHS/ DLHS/ AHS
v. Percentage pregnant women who consumed at least 100 IFA tablets	46.6 (DLHS-3)	(80%)	NFHS/ DLHS/ AHS

[2]As per Health targets

Indicators	*Current Status*	*Target (End 12th Plan)*	*Means of verification*
C. Process Level			
i. Percentage of registered children 6 to 71 months who received supplementary nutrition for at least 21 days/month *during the last 3 months*		100%	ICDS MIS
ii. Percentage of registered pregnant and lactating women receiving supplementary nutrition for at least 21 days per month *during the last 3 months*		100%	Do
iii. Percentage of eligible children below 3 yrs who are weighed every month *during the last three months*		100%	Do
iv. Percentage of AWCs organized VHNDs every month *during the last 3 months*		80%	Do
v. Percentage of AWWs who conducted at least one session on health and nutrition issues per month *during the last 3 months*		70%	Do
vi. Percentage of AWCs that have regular health check-ups		70%	Do
vii. Percentage of AWWs who have been imparted job/ refresher training (separately)		90%	Do
viii. Percentage of AWCs that are open for at least 6 hrs per day during the reporting month		90%	Do
ix. Percentage of AWCs that have conducted at least 4 activities on PSE *(as per new MIS)*		70%	Do
x. Percentage of AWCs that have conducted fixed monthly ECCE Day		50%	ICDS MIS/ Periodic survey/ assessment
xi. Percentage of AWWs who have conducted *Sneha Shivirs*		50%	Do
xii. Percentage of AWWs reporting at least 15 home visits in a month		70%	Do
xiii. Percentage of AWCs conducting one ALMC per month		80%	Do
xiv. Percentage of AWCs conducting PSE and ECCE activities for atleast 21 days in a month		70%	Do
xv. Percentage of AWWs who are able to identify growth faltering and provide counselling support		70%	Do
D. Input Level			
Percentage of AWCs equipped with: a. Adequate indoor and outdoor space b. Adult & baby weighing scales c. WHO new growth charts d. Joint MCP Cards e. PSE kits and graded curriculum f. Medicine kits g. Revised MIS Registers		100%	ICDS MIS

Annexure VIII

SERVICE STANDARDS UNDER ICDS MISSION

1. **Early Childhood Care Education and Development (ECCED):**
   - A functional child friendly AWC based on population norms with a trained AWW, which is open for 6 hours daily (including 4 hours of ECCED, SNP and 2 hours for home visits and other AWC related services) and provides all ICDS services – through respective service providers/programmes
   - A safe, protective & joyful early learning environment with necessary building, infrastructure and facilities (including clean environment, safe drinking water, child friendly toilet, play space and local play/learning activity support material)
   - SNP for P&L mothers (as per norms)
   - Need based services for Crèches and day care as locally determined
   - Supplementary nutrition as per norms for children 6 months – 6 years (THR, Morning snack, food supplement, differential provisions for moderately & severely underweight, as per norms) for at least 300 days in a year
   - Developmentally appropriate early joyful learning activities (ECCE) for 3-6 year olds for 4 hours a day for at least 21 days in a month
   - School readiness interventions/package for 5 plus & linkages with school (pre-primary / primary)
   - Platform for out of school adolescent girls (where applicable)
   - Regular Monthly fixed ECCE Day (Anganwadi/ Balbodh Divas)
2. **Child Development, Care and Nutrition Counselling**
   - Skilled counselling support for Infant and Young Child Caring and Feeding practices for under 3s (including EEBF for 0-6 months)
   - Availability of support materials (weighing scales, cards, charts, PSE kit, local play / learning materials, medicine kits, mats, cooking facilities, utensils, records and registers etc.)
   - Home visits at critical contact points (including at least newborn postnatal and neonatal care (Days 1, 4,7, 14, 21 and 28) by respective service providers
   - Monthly monitoring and promotion of young child growth and development of children under 3 years - using new WHO child growth standards and MCP Card package and quarterly for 3-5 year olds.
   - NHED for mothers and women (at least 1 sessions/month)
   - SNEHA SHIVIRs for locally appropriate feeding and care, nutrition care and counselling sessions with feeding demonstrations for prevention of nutritional deterioration and referral support for severely undernourished children in high burden pockets
   - Parenting support for families through prioritized home visits and counselling
   - Regular Quarterly parents meet (for under 3 and 3-6 on both nutrition & development indicators using joint MCP card, community charts and ECCE card) (applicable when rolled out)
   - Maternity benefits for pregnant mothers as may be applicable
3. **Health Services**
   - Linkages with ASHA, ANM & others under JSY & JSSK for early registration of pregnancy and at least 3 ANCs, IFA supplementation and institutional delivery.
   - Linkages with health for timely and complete immunisation, Vitamin A supplementation, IFA supplementation (as per norm). [Deworming as per national guidelines]
   - Linkages with health for management of common neonatal and childhood illnesses such as diarrhoea with ORS and zinc supplements and ARI
   - Regular Health check-ups for all Infants and children – by health functionaries / systems
   - Priority care at health centres when referred for sick and / or severely undernourished children
   - Regular Monthly fixed VHND
4. **Community Mobilization, Advocacy and IEC**
   - Quarterly AWC management committee meetings (M&E circular)
   - Quarterly VHSNCs meeting (as collective action)

*Above standards would imply involvement of PRI and local community and appropriate social commitments and agreements

Annexure VIII A

SELECTED HIGH-BURDEN DISTRICTS

A. COMMON DISTRICTS SELECTED ON THE BASIS OF UNDERNUTRITION AND ANAEMIA USING DLHS-3 DATA AS WELL AS FROM EAG STATES											
Sl. No.	State	Districts	No. of Blocks	Sl. No.	State	Districts	No. of Blocks	Sl. No.	State	Districts	No. of Blocks
1	Bihar	Bhagalpur	16	51	Madhya Pradesh	Raisen	7	101	Uttar Pradesh	Chitrakoot	5
2		Buxar	11	52		Rajgarh	6	102		Etawah	8
3		Darbhanga	18	53		Ratlam	6	103		Faizabad	11
4		Gopalganj	14	54		Shajapur	8	104		Farukhabad	7
5		Jamui	10	55		Sheopur	3	105		Fatehpur	13
6		Jehanabad	7	56		Shivpuri	8	106		Ghaziabad	8
7		Lakhisarai	7	57		Sidhi	8	107		Ghazipur	15
8		Madhepura	13	58		Tikamgarh	6	108		Hamirpur	7
9		Madhubani	21	59		Ujjain	6	109		Hardoi	19
10		Munger	9	60		Unnao	3	110		Hathras/ Mahamaya Nagar	7
11		Muzaffarpur	16	61		Vidisha	7	111		Jhansi	8
12		East Champaran	27	62		Khargone (West Nimar)	9	112		Kanpur Nagar	10
13		Purnia	14	63	Orissa	Boudh (Baudh)	3	113		Kaushambi	8
14		Saharsa	10	64		Dhenkanal	8	114		Sant Kabir Nagar	7
15		Samastipur	20	65		Gajapati	7	115		Lucknow	8
16		Sitamarhi	17	66		Kalahandi	13	116		Mahoba	4
17		Supaul	11	67		Koraput	14	117		Mainpuri	9
18	Chhattisgarh	Bastar	14	68		Malkangiri	7	118		Maunathbhanjan	9
19		Dantewada	11	69	Rajasthan	Ajmer	8	119		Meerut	12
20		Durg	12	70		Alwar	14	120		Moradabad	13
21		Jashpur	8	71		Baran	7	121		Muzaffarnagar	14
22		Kanker	7	72		Barmer	8	122		Siddharth Nagar	14
23		Kawardha	5	73		Bikaner	6	123		Jalaun	9
24		Korba	5	74		Chittorgarh	14	124		Kushinagar	14
25		Mahasamund	5	75		Churu	6	125		Pilibhit	7
26		Raipur	15	76		Dausa	5	126		Rae Bareli	21
27	Jharkhand	Chatra	10	77		Dholpur	4	127		Rampur	6
28		Dhanbad	8	78		Dungarpur	5	128		Shahjahanpur	15
29		Dumka	4	79		Jaipur	13	129		Unnao	15
30		Giridih	12	80		Jhunjhunun	6	130	Uttaranchal	Chamoli	9
31		Koderma	5	81		Jodhpur	10	131		Champawat	4
32		West Singhbhum	15	82		Karauli	5	132		Haridwar	6
33	Madhya Pradesh	Barwani	7	83		Kota	5	133		Pauri Garhwal	15
34		Betul	6	84		Rajsamand	7	134		Tehri Garhwal	10
35		Chhindwara	13	85		Sawai Madhopur		135		Udham Singh Nagar	6
36		Damoh	7	86		Sirohi	5			Total (No. of Blocks)	355
37		Dhar	3	87		Tonk	7				
38		Dewas	6	88		Udaipur	11				
39		Dindori	7	89	Uttar Pradesh	Bijnor Dehat	10				
40		Khandwa (East Nimar)	7	90		Aligarh	11				
41		Guna	5	91		Allahabad	20				
42		Hoshangabad	7	92		JP Nagar	6				
43		Indore	4	93		Auraiya					
44		Jabalpur	6	94		Azamgarh	21				
45		Jhabua	6	95		Baghpat	6				
46		Katni	6	96		Banda	8				
47		Mandsaur	5	97		Barabanki	17				
48		Morena	7	98		Sant Ravidas Nagar	6				
49		Narsimhapur		99		Bulandshahr	15				
50		Panna	5	100		Chandauli	9				
	Total (No. of Blocks)		482		Total (No. of Blocks)		416		Grand Total (No. of Blocks)		1253

B. DISTRICTS* SELECTED ON THE COUNT OF UNDERNUTRITION AND ANAEMIA USING DLHS-III DATA FROM NON - EAG STATES

Sl. No.	State	District	No. of Blocks	Sl. No.	State	District	No. of Blocks
1	Andhra Pradesh	Dhalfar		36	Maharashtra	Nashik	13
2	Andhra Pradesh	Srikakulam		37	Maharashtra	Gondiya	8
3	Andhra Pradesh	Karimnagar		38	Rajasthan	Dhaulpur	5
4	Assam	Golaghat	8	39	Punjab	Muktsar	4
5	Assam	Karimganj	7	40	Punjab	Firozpur	10
6	Assam	Nagaon	10	41	Punjab	Sangrur	12
7	Daman & Diu (UT)	Daman	1	42	Punjab	Amritsar	9
8	Daman & Diu (UT)	Diu	1	43	Punjab	Hoshiarpur	10
9	Haryana	Faridabad	3	44	Punjab	Mansa	5
10	Haryana	Kaithal	6	45	West Bengal	Dakshin Dinajpur	8
11	Haryana	Gurgaon	6	46	West Bengal	Paschim Medinipur	20
12	Haryana	Panipat	5	47	West Bengal	Birbhum	19
13	Haryana	Yamunanagar	6			Total (No. of Blocks)	126
14	Karnataka	Kolar	5				
15	Karnataka	Bagalkot	6				
16	Karnataka	Bellary	7				
17	Karnataka	Gulbarga	6				
18	Karnataka	Mysore	8				
19	Maharashtra	Buldana	13				
20	Maharashtra	Nandurbar	6				
21	Maharashtra	Nanded	16				
22	Maharashtra	Gadchiroli	12				
23	Maharashtra	Chandrapur	15				
24	Maharashtra	Jalgaon	15				
25	Maharashtra	Washim	6				
26	Maharashtra	Ahmednagar	14				
27	Maharashtra	Parbhani	9				
28	Maharashtra	Dhule	4				
29	Maharashtra	Beed	11				
30	Maharashtra	Amravati	14				
31	Maharashtra	Jalna	8				
32	Maharashtra	Nagpur	13				
33	Maharashtra	Latur	10				
34	Maharashtra	Mumbai					
35	Maharashtra	Nagpur	1				
		Total (No. of Blocks)	264		Grand Total (No. of Blocks)		390

Sl. NO.	CRITERIA FOR SELECTION	NO. OF DISTRICTS	NO. OF BLOCKS
A.	Common Districts Selected on the Count of Undernutrition and Anaemia using DLHS - 3 data as well as from EAG States	130	1268
B.	Districts selected on the Count of Undernutrition and Anaemia using DLHS - 3 data from Non - EAG States	47 + 18* = 65	380 + 145* = 525
	Total No. of Districts	200	1793

*Remaining 18 Districts And 145 Blocks will be notified later

MATRIX ON PROGRAMMATIC AND THEMATIC CONVERGENCE IN ICDS

Theme	Critical Service	Activities	Primary Responsibility		Supportive Responsibility		Site of service delivery	Means of Verification	Guidelines available
			Ministry	Worker	Ministry	Worker			
Care of Adolescents	Nutrition education and Life Skill Education	Awareness generation	MoHFW	ANM	MWCD	AWW	AWC	SABLA records	Guidelines for ARSH/ SABLA/ WIFS
		Counseling					AWC	SABLA records	
		Training						SABLA records	
	Deworming and Anaemia Control	Counseling					AWC	Kishori card	
		Supervised administration of IFA	MWCD	AWW	MoHFW	ANM	AWC	Kishori Card	
		Twice annual deworming	MWCD	AWW	MoHFW	ANM	AWC	Kishori card	
Care of Pregnant Women	Early Registration	Registration at SHC	MoHFW	ANM	MWCD	AWW	SHC	ECCR/ MCPC	Operational Guidelines for MCHN
		Confirmation of Pregnancy	MoHFW	ANM	MOHFW	ASHA	SHC/ PHC	ECCR	
		History Taking	MoHFW	ANM	MWCD	AWW	SHC	ECCR/MCPC	
		Laboratory examination	MoHFW	ANM	MOHFW	ASHA	SHC/PHC	ECCR	
	Antenatal Care	Measurement of BP	MoHFW	ANM			VHND	MCPC	
		Weight Recording	MoHFW	ANM	MWCD	AWW	VHND/ AWC	MCPC	
		IFA and anaemia	MoHFW	ANM/ ASHA	MWCD	AWW	VHND/AWC/SHC	MCPC	
		TT	MoHFW	ANM			VHND	MCPC	
		Abdominal Examination	MoHFW	ANM			VHND/SHC	MCPC	
		Check up for oedema	MoHFW	ANM	MWCD	AWW	VHND	MCPC	
		Counseling on diet , rest , use of iodized salt and SNF	MWCD	AWW	MoHFW	ANM/ ASHA	VHND/ AWC/HV	AWC records	
		Detection of danger signs and referral	MWCD	AWW	MoHFW	ASHA	VHND/HV	MCPC	
	Birth planning	Counseling for birth preparedness	MoHFW	ANM/ ASHA	MWCD	AWW	VHND/ HV		
	Safe Delivery	Institutional delivery and transportation	MOHFW	ASHA			Health Facility	MCPC	Guidelines for JSY
		Preparation for home delivery only if institutional delivery not possible	MoHFW	ASHA			Home	MCPC	

Care of Mother including Postnatal Care and Essential New Born Care	Support for initiation of breastfeeding	Initiation of breast feeding, correct positioning no prelacteal feeding	MoHFW	ASHA/ Staff Nurse	MWCD	AWW	Place of delivery		IYCF and IMNCI guideline
	Examination of mother	Fundal height	MoHFW	ANM			VHND	Record of ANM	Operational Guidelines for MCHN
		Temperature	MoHFW	ANM			VHND	Record of ANM.	
		Identification of complication	MoHFW	ASHA/ ANM			HV/VHND	Record of AWW/ASHA	
		Referral	MoHFW	ASHA			HV /VHND	Health facility	
	Lactation and infant feeding	Counseling for Exclusive breastfeeding, management of lactational failure	MWCD	AWW	MOHFW	ANM/ ASHA	Home visit	Record of AWW	IYCF and IMNCI
	Counseling of mother	Advice on diet and rest	MWCD	AWW	MOHFW	ANM	HV/ VHND	Record of AWW	
		Counseling for family planning and spacing	MOHFW	ANM	MWCD	AWW	HV/VHND	Record of ANM / ASHA	
		Home visits within 6 weeks of delivery	MOHFW	ASHA/ ANM	MWCD	AWW	Home	Record of AWWs	
		Birth Registration	MoRD	Panchayat	MoHFW / MWCD	ASHA, ANM, AWW		Panchayat Records MCPC	
	Examination of baby	Birth Weight	MOHFW	Staff Nurse	MWCD	AWW	Place of delivery	Record of Institution / MCPC	Guidelines for Essential New born Care/ Home Based Newborn Care
		Referral	MoHFW	ASHA	MWCD	AWW	HV	MCPC	
		Care of umbilical cord	MOHFW	ASHA/ ANM	MWCD	AWW	HV		
		Management of hypothermia			MWCD	AWW	HV		
		Care of low birth weight	MWCD	AWW			HV / Health Facility	Health facility records	
		Recognition of danger signs	MoHFW	ASHA	MWCD	AWW	HV	Records of HV	
	Examination of baby	Identification of congenital malformation and disability	MWCD	AWW	MoHFW	ANM	HV	AWWs Records	
		Referral	MoHFW	ASHA	MWCD	AWW	HV	MCPC / records of AWW/ ASHA	
	IYCF	Exclusive breast feeding	MWCD	AWW	MoHFW	ASHA	HV	HV records	

Care of children under 3	Growth monitoring and development	Monthly Growth Monitoring, identification of growth faltering and counseling	MWCD	AWW			ANC/ VHND	MCPC/ Wall Growth Chart	Guidelines for growth monitoring
	IYCF	Counseling and follow up for appropriate complementary feeding with continued breastfeeding	MWCD	AWW			ANC/VHND / HV	Records of AWW	IYCF Guidelines
	Rehabilitation of malnourished children	Referral of severely malnourished children	MWCD	AWW	MOHFW	ANM	ANC/ VHND/ HV	Records of AWWs	
Care of children under 3	Rehabilitation of Malnourished children	Follow up of severely malnourished children	MWCD	AWW			HV/ ANC	Records of AWW	
		Rehabilitation of Severe malnourished children with medical complication	MoHFW	MO	MOHFW	ANM	Health Facility	Institution records	Protocol for facility based management of severe acute malnutrition
		Community based approaches for care and rehabilitation	MWCD	1S AWW	MoHFW	ANM ASHA	AWCs	AWC records	
	Care of sick children	Identification of common childhood illnesses	MOHFW	ANM	MWCD	AWW	HV	Records of ANM/ AWW	IMNCI guidelines
		Management of childhood diseases diarrhoea, ARI, Malaria, fever	MoHFW	ANM	MWCD	AWW	HV	Records of ANM/ AWW	
	IMP	TFR	MWCD	AWW			ANC	AWWs records	
	Immunization	Primary immunization	MoHFW	ANM/ ASHA	MWCD	AWW	VHND	MCPC	Guidelines for immunization
		Booster doses	MoHFW	ANM	MWCD	AWW	VHND	ANMs records	

Annexure IX A

Issues for Convergence with ICDS

Ministry (in partnership with organizations)	Issues for Convergence
MOHFW / NRHM (NIHFW, ICMR, NIN, Nutrition Foundation of India, BPNI, PFI, Pediatric association of India, IIPS, NYKs, MCI, National level medical colleges)	• Regular Fixed Monthly VHNDs • Joint training of ANMs and AWWs on IMNCI and IYCF. • Adoption of joint MCP Card and New WHO Child Growth Standards • Concerted efforts for ANC / PNC check up and rehabilitation of severely underweight children. • Earmarking a counter for referrals of AWCs and official recognition to referral slips of AWWs. • Increasing priority to MCHN support services through ANMs, designated MOs for ICDS beneficiaries. • Immunization Sessions • Ensure availability and supply of medicine kits, drugs and contraceptives. • Ensure health services to ECD centres beyond ICDS like ECE under SSA, Creches, NGOs etc. • Joint visits of AWW and ANMs to ECD centres beyond AWC. • Joint review and planning meetings at the State, District and Block level. • Participation of in Village Sanitation and Nutrition Committee meetings. • Joint planning and implementation by ANM ASHA and AWW in SABLA, Kishori Shakti Yojna and Nutrition Programme of Adolescent Girls. • Ayush package/ tools and linkages with Practitioners.
Department of Drinking Water and Sanitation, Ministry of Rural Development (NIRD, State Resource Centres)	• Provision of safe drinking water and sanitation facilities in all habitation and AWCs • Constitution of Joint Village, Health, Sanitation and Nutrition Committees. • Implementation of Vector Borne Diseases Control Programme (VBDCP) activities by the village and Sanitation Committees (VHSC) for prevention of vector borne disease at the village level out of annual untied grants of Rs. 10,000 to each VHSC. • Community mobilization on importance of sanitation facilities and health and hygiene education programmes particularly in school and anganwadis. • Capacity building programmes for ASHA, ANMs, MPHW, AWW & other officials under TSC. • Integrated Information Education Communication (IEC) action plans.
Ministry of RuralDevelopment (NIRD, SIRDs)	• Implementation of the enabling provision for women and children under MGNREGS. • Construction & repairs of AWCs, kitchen and other facilities of AWCs to be funded under MGNREGS in convergence. • Ensure employment for families of malnourished children. • Preference for construction of AWCs in works undertaken out of funds for post natural calamity. • Supply of smokeless chullahs at AWC.

	• Provision of rural godowns at CDPO office. • Linkages with rural livelihoods programmes.
Ministry of Housing & Urban Poverty Alleviation	• Allocation of land / building for AWC especially in urban poor settlements. • Inclusion of provisions related to ICDS in all urban and housing development plans. • Support the development of innovative city models run by ULBs especially within the 200 high burden districts and metropolis.
Sarva Shiksha Abhiyan, School Education and Literacy, Ministry of HRD (NCERT, NCTE, SCERT and higher learning organizations for Child Development)	• Harmonisation with primary Schools for direct enrolment. • Joint planning in SSA PIP. • Preferably collocating AWC in primary school wherever feasible. • Monthly fixed village ECCE day. • Local teacher participation in ECCE day. • School Readiness Package.
Ministry of Panchayati Raj (NIRD , SIPRD/SIRDs)	• Provide support in mobilization and sensitization of village community • Collaboration and coordination of PRIs with Monitoring & Review Committees at different levels to review progress in implementation of ICDS Scheme.
Ministry of I & B (Song and Drama Division / Field Publicity Division and other Units)	• Support for wider awareness generation on maternal and child care through measures to promote good life supporting IEC ad BCC measures. Integrate child development, maternal care, nutrition and ECE in its localised activities such as Songs and Drama Division / Field Publicity Units etc. • Regulating false claims and promoting maternal and child care provisions as CSR by private channels or in allocation of licences etc.
Ministry of Social Justice and Empowerment (RRTCs and State Vocational Rehabilitation Centres)	• Extending disability detection services through AWC • Referrals to District Rehabilitation centres / Health System. • Devising special training courses for AWWs and other functionaries through RRTCs. • Preparation of reference material for AWWs on early detection of disabilities. • Block level special centres for early intervention.
Ministry of Agriculture and Allied Departments	• Promotion, production and consumption of fruits, vegetables, protein sources, promotion of millet usage etc. • Kitchen gardening, promotion of vegetable mini kits and preferably leafy vegetables for anaemia prevention. • Increase availability of locally available animal food sources like fish, poultry and dairy products at affordable prices. • Promotion for consumption of animal foods • Other measures to promote food diversification, nutrition orientation in research, production and extension. • Agro-horti afforestation along with forestry practices in community.
Ministry of Food	• Provision of foodgrain at BPL rates for SNP preparation in ICDS under WBNP. • Provision of rural godowns at project / cluster level for storage etc. • Adequate buffer stocks for difficult and far flung areas.

Annexure X

OUTLINE FOR INVOLVING NGOS / VOLUNTARY ORGANISATIONS UNDER THE ICDS MISSION

In order to promote involvement of NGOs / voluntary organisations in the planning, implementation, monitoring and supervision of ICDS, the Ministry of WCD has made provisions for handing over implementation of ICDS Projects / AWCs to them. Various state-specific assessments / studies on the NGO run AWCs / ICDS Projects have found the overall performance of NGO managed AWCs to be better in terms of service delivery and outreach, ECE activities, supplementary feeding activities, governance in terms of AWCs maintenance, child attendance, community involvement, record maintenance, continued capacity development, monitoring etc.

Despite the provision for the engagement of NGOs / voluntary organisations in the implementation of the ICDS by the Ministry of WCD, the total number of ICDS projects run by NGOs has remained at 67 between 1992 and 2010. Reasons behind this could be either NGOs are not coming forward in very large numbers in taking up the programme or there has been a lack of initiative from the State Governments to involve NGOs in implementation of ICDS. In order to strengthen involvement of NGOs / voluntary organisations in the implementation, monitoring and supervision of ICDS under the ICDS Mission, following key steps would be undertaken:

- Allocation of entire project to a particular NGO rather than allocating a cluster / group of 20-40 such AWCs.
- MOUs with NGOs that are implementing the projects for more than five years on a continuum basis to be renewed for at least three fiscal years at a stretch with condition of their third party accreditation / performance report.
- State ICDS Mission to be responsible for managing and monitoring all tasks connected with implementation of ICDS by NGOs involvement like selection of NGOs, reviewing the progress of the NGOs running ICDS Projects, granting extension, withdrawing the work of ICDS Project implementation, signing of MOUs, accreditation/performance appraisal, release of grants in aid etc needs to be executed only after approval of this committee.
- Involvement of NGOs / voluntary organisation having infrastructure and requisite experience as well as in position to provide some additional inputs to ICDS. NGOs / Voluntary organisation to be engaged in running ICDS in those areas in which they have already established their credentials.
- Regular engagements of DPOs in the ICDS Project / AWCs run with the involvements of NGOs including identification of the potential NGOs, supporting them in fulfilling various administrative tasks connected with implementation of ICDS project in the concerned district among others.
- Flexibility to NGOs to re-appropriate the budgetary provisions from one head to another with the approval of the State / District ICDS Mission. For this, the concerned NGOs would be required to submit a revised budget proposal to the State / District Mission before actually incurring the expenditure. The pattern of expenditure may again vary from year to year depending upon the changing needs of the project. However, this provision would exclude the expenditure head like salary and supplementary feeding. The NGOs would also need to be given the appropriate functional autonomy aimed at better implementation of ICDS.

Detailed operational guidelines for the engagement of NGOs / Voluntary organisations in the implementation of ICDS Projects / AWCs would be laid down in the Implementation Guidelines of the ICDS Mission.

Annexure XI

OUTUNE FOR STRENGTHENING TRAINING AND CAPACITY BUILDING AT ALL LEVELS UNDER THE ICDS MISSION

Training is the most crucial element in ICDS, since the achievement of programme goals depends upon the effectiveness of frontline workers in improved delivery of packages under ICDS. At the National level, the National Institute of Public Cooperation and Child Development (NIPCCD) is an apex institution for ICDS training programme. It has the overall responsibility of planning, coordination and monitoring of ICDS training programme, designing curricula, training contents and materials. NIPCCD has been responsible for developing training curricula for various categories of functionaries ranging from Job training courses of longer duration to short term courses like refresher courses, induction and skill development courses. The Institute is also the nodal institute for conducting regular training of CDPOs/ACDPOs and regular refresher courses for them from time to time. Prior to 1999, the Middle Level Training Centers (MLTCs) were under the administrative & financial control of NIPCCD and therefore it was also responsible for quality monitoring of training of Supervisors as well. However, with the launch of Project UDISHA during 1998-99, training was decentralized and the MLTCs were brought under the control of respective State Governments.

At the State level training centers engaged in the training of Supervisors and Instructors of AWWs and Helpers are called as Middle Level Training Centres (MLTCs) whereas those engaged in the training of AWW and AWH are known as Anganwadi Workers Training Centres (AWTCs). The MLTCs and AWTCs are engaged in different kinds of training on a regular basis such as Induction, Job / orientation and Refresher Training for Supervisors, AWWs and AWHs. Other than this, the MLTCs are also engaged in imparting Orientation Training to In structors of AWTCs. There are altogether 526 Training Centres including 498 AWTCs and 28 MLTCs (as on 31.12.2010) that are functioning all over the country. Most of these Training Centres are run by NGOs, Trusts and professional / technical institutions like Schools of Social Work and Colleges of Home Science. There are also a few States / UTs which are running their own AWTCs and MLTCs for imparting training to AWWs and Supervisors.

Despite the presence of the above training institutions and range of training and capacity building programmes carried out by them, there exists some gaps and lacunae in the existing training systems and structures. These include: (i) ad-hocism in training and capacity building, despite massive expansion of ICDS due to universalisation and third phase of expansion; (ii) absence of management structures for training and capacity building at state levels; (iii) ad-hocism in increasing and decreasing the actual duration of training syllabi and contents without any systematic & scientific evaluation; (iv) weakening of NIPPCD and other training institutions due to downsizing of these institutions due to economic measures; (v) inadequate financial norms; and (vi) inadequate monitoring and evaluations of training and capacity building programmes for understanding its impact as well as to facilitate informed planning and implementation.

In view of bridging the above gaps and strengthening training and capacity building of ICDS personnel at all levels, the following core actions would be taken under the ICDS Mission:

1. **Strengthening Training at State levels:** In order to strengthen training and capacity building of ICDS functionaries at State and local levels, the following major steps would be undertaken:

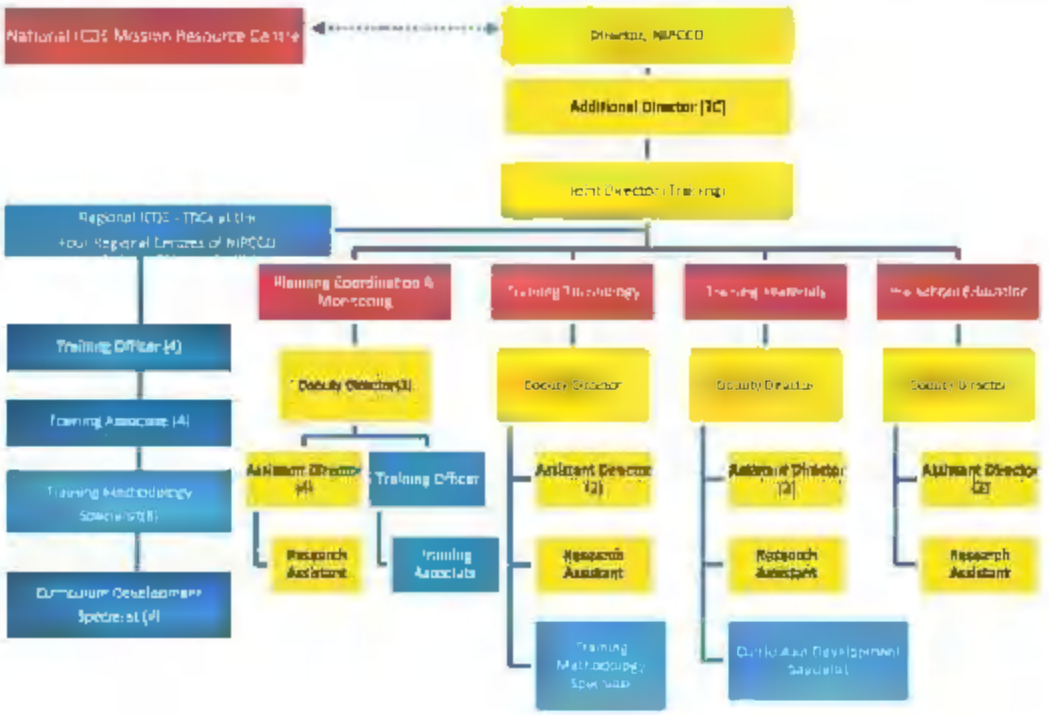
   a) **Setting up of Training Cells at State level:** In order to facilitate proper planning, implementation, monitoring and evaluation of training and capacity building for the ICDS functionaries and stakeholders at the State level, a Training Cell would be set up under the State ICDS Mission. This Training Cell would be responsible for carrying out all activities for strengthening training and capacity building at the state level including carrying out training needs assessment, coordination between the training institutions, ICDS National / State Missions and the State Government, creation and maintenance of proper database on the status of training of all functionaries, monitoring of state - level training institutions, ensuring timely release of funds to State-based training institutions, among others. Such a Training Cell would function under the overall supervision and control of the State ICDS Mission and would be manned by one State Coordinator (Training), one Programme Associate (Training) and one Data Entry Operator. The State Coordinator (Training) appointed in each State ICDS Mission Directorate would provide support to the State Training Cell in managing all training and capacity building activities in the respective district. Flexibility will be provided to the State

Governments for increasing the number of personnel at the State Training Cell based on the need through APIPs approved by EPC. The State Training Cell would be eventually transferred to the State ICDS Mission Resource Centre as and when it is set up by the concerned State Government.

b) **Setting up of State Training Institutes (STIs) for ICDS (in 10 States):** Training of the field level ICDS functionaries, viz., AWWs, AWHs and Supervisors, is mostly conducted through NGO-run AWTCs/MLTCs and continuation of these training centres is made on year-to-year basis. NIPCCD is responsible for training of CDPOs/ACDPOs and also Training of Instructors of MLTCs. However, it is found that the existing infrastructure for training is inadequate to cater the emerging needs of training and capacity building, especially in view of the huge backlogs that are accumulated due to universalization of the ICDS Scheme and also introduction of new schemes like SABLA, IGMSY which are implemented using AWC platform. Except in Tamil Nadu, which has established its own Training Institute at the State level for training of CDPOs/ACDPOs, and other senior functionaries, out of the funds available under the erstwhile Udisha Project, there is no permanent training infrastructure for ICDS in the States, which has adversely impacted continuous training and capacity building of functionaries. This is in contrast with the Health; Education or Rural Development programmes which have their own State / District based permanent training institutes (SIHFWs / SIRDs / DIETs etc).

Keeping in view of this, State Training Institutes (STIs) for ICDS in 10 major States would be setup in association with SIRDs / SIHFWs etc., during the 12th Plan. It is envisaged that the STIs will cater to the needs of the individual States as well as the neighboring States for the training of district / block ICDS officers and other senior officials of the State ICDS Directorates.

2. **Strengthening of NIPCCD:** NIPCCD which is the apex training institution of the MWCD for training of ICDS functionaries needs to be adequately strengthened to enable it to play its role effectively. Currently, this responsibility is being carried out by NIPCCD with the help of four main units created under its Training Wing. These units include: (i) Planning Coordination & Monitoring; (ii) Training Technology; (iii) Training Materials; and (iv) Pre-school Education. Each of these units is headed by a Deputy Director level officer who is assisted by one Assistant Director and one Research Assistant. In order to strengthen the institutional capacity of NIPCCD to improved training and capacity building outcomes, a separate ICDS Training Resource Centre (ICDS– TRC) would be set up within NIPCCD, under the ICDS Mission. The above-mentioned human resource responsible for ICDS training would be subsumed within the ICDS – TRC. Accordingly, the structure of the ICDS – TRC would be as under:



The management and monitoring of MLTCs would be carried out by the Planning, Coordination and Monitoring Unit within the ICDS – TRC based at NIPCCD Headquarters with the active support of its regional centres. For this purpose, a Regional ICDS – TRC would be set up in each of the five regional centres of NIPCCD. These Regional ICDS – TRCs would function under overall supervision and guidance of the concerned Regional Director. A Deputy Director level officer would head this unit in each regional centre who would be assisted by one Assistant Director, one Research Officer and one Assistant cum Data Entry Operator. Similar, ICDS – TRC would be set up in new Regional Centres of NIPCCD to be set up in Bihar and Punjab.

The ICDS – TRC would keep a close liaison with the training cells within the State ICDS Mission to plan, implement and monitor training of CDPOs / ACDPOs, master trainers and other service providers and stakeholders. It would also create and maintain a national and state-specific database of the ICDS functionaries trained to monitor the requirement of skill training, job / refresher training etc. The ICDS – TRC would draw a National and State-specific Annual Action Plan of Training of ICDS functionaries for its headquarters, Regional Centers of NIPCCD and State Training Cells. The TRC would be responsible for carrying out periodic revision/development of the training modules/contents as well as relevant research and evaluation of training across the country with the support of the respective regional centres, state training cells and other training institutions. It would also provide academic support to the AWTCs/MLTCs and STIs (when established) and would be responsible for the management of all the MLTCs including release of funds, monitoring and training of trainers.

3. **Strengthening of MLTCs and AWTCs - Monitoring and Accreditation:** Institutional strengthening of training institutions like MLTCs and AWTCs would be one of the major training reforms under the ICDS Mission. While the existing system of contracting these training centers to NGOs would be continued, a system of long-term partnership would be put in place by contracting NGOs for at least three - five years. Such long-term contracts would be initially awarded to at least 10% of the better performing MLTCs and AWTCs in each State. This would not only provide some kind of permanency to these centers but also motivate the parent NGOs to raise better infrastructure for training. Additional funds for improving the existing infrastructure including Hostel, Furniture, furnishing of classrooms and audio-visual aids etc. would also be provided to these centres.

   Monitoring and accreditation of all such training institutions would be the responsibility of the ICDS – Training Resource Centre based at NIPCCD headquarters. However a committee of experts who have experience of ICDS training would be constituted on the pattern being followed by NCTE, AICTE etc. This committee will make on the spot visits to organizations running these training centres and give its recommendations for accrediting these.

4. **Revision and development of course curricula / modules / training and learning materials:** Considering the fact that a number of new interventions are to be introduced under ICDS Mission, which would result into additional responsibilities of various ICDS functionaries at all levels, revision / modification and development of training curricula / modules / training and learning materials would be given high priority. Careful review and revision of training curricula / contents would be undertaken for making them more focused on core service delivery packages of ICDS Mission including: (i) Early Childhood Care Education and Development (ECCED); (ii) Child Care, Development and Maternal Counselling; (iii) Health and Nutrition Education with special focus on IYCF; and (iv) IEC, Social Mobilization & voluntary action. Strengthening training contents on the roles and responsibilities of functionaries especially in the context of evolving priorities of the programme would also be undertaken. Emphasis would also be given on providing more

hands on training to various levels of functionaries. Revision and development of course curricula / modules / training and learning materials would be undertaken in consultations with States, NIPCCD, experts, trainers of MLTCs / AWTCs and some of the selected functionaries.

5. **Up-gradation of Training Facilities:** Various assessment reports highlighted the need for up-gradation of training facilities at the training centres, viz. equipments, furniture etc for better management of training programmes. Currently an amount of Rs. 1.25 lakh as one –time grant has been provisioned for the newly opened AWTCs. No such funds are available for old AWTCs or old/ new MLTCs. A lump-sum amount of Rs. 2.5 lakh would be provided for up-gradation of training facilities to each of the newly opened AWTCs and also to the old AWTCs who are in operation continuously for at least 5 years. Similarly, an amount of Rs. 3 lakh is would be given as one-time grant to all newly opened MLTCs as well as to the old MLTCs that are in operation for at least 5 years.

6. **Regular Training Programmes:** All ICDS functionaries, viz., AWHs, AWWs, Supervisors, ACDPOs / CDPOs and also Instructors of AWTCs / MLTCs are imparted mandatory regular trainings viz., job / orientation training on their initial appointment. Short duration induction training is also given to AWWs, Supervisors and CDPOs / ACDPOs in order to operationalize the ICDS projects / AWCs, before they are deputed to one- time job training course. During their service, refresher training is given to the ICDS functionaries and Instructors of AWTCs / MLTCs every two years to equip them with knowledge, skills and capabilities to implement the ICDS Scheme. These regular training programmes along with other innovative training, workshops, seminars etc. would continue to be organized with revised financial norms detailed out in section – 9 below until the National and State ICDS Mission Directorates are set up and functional. After which a comprehensive training need assessment would be carried out across the country to ascertain the training requirement of each functionary at all levels, based on which all regular / existing training programmes / plans would be revised and / or strengthened.

7. **Training Need Assessment:** The National ICDS Mission Directorate with the support from National ICDS Mission Resource Centre, NIPCCD and State Mission Directorates would carry out a comprehensive training need assessment across the country to ascertain the training requirement of each functionary at all levels. The training needs assessment would be outsourced to a third party organization / institution with extensive knowledge and experience of conducting training needs assessment and / or similar activities. Based on the findings of the training needs assessment, National and State level Training Plans would be drawn up and implemented during the remaining period of the 12th Five Year Plan.

8. **Revision of financial Norms:** Financial norms relating to training of various ICDS functionaries and trainers, conducted at AWTCs/MLTCs and NIPCCD, were last revised in April 2009 after a gap of 10 years, based on recommendations of a specially constituted Committee. Since 2009, due to escalation of prices, the revised norms have become inadequate. Some studies have highlighted that due to the low financial norms, quality of training is considerably affected and often Training Centres are not able to retain good Trainers, who are mostly post graduates in Nutrition, Home Sciences or Child Development. Therefore these norms would be enhanced by a suitable percentage under different items of training courses as per the detailed given at Table-1 .

Detailed guidelines on strengthening training and capacity building under ICDS Mission would be laid down in the Implementation Guidelines of the ICDS Mission to be prepared by the Ministry of WCD.

Table-1: Comparative Statement on Existing and Revised Norms for some Unit Costs (where changes suggested) for various ICDS Training Courses

Cost Classification	Item Head/ Category of Staff/Programme	Existing Norms/Provision (W.e.f. 1.4.2009)	Revised Norms/ Provision
I. Fixed Cost			
IA. Anganwadi Training Centre (AWTC)			
a. Recurring	Rent	Average @ Rs.5000/- pm *i. Metro/A-1/A Cities: Rs.12, 000/- p.m.* *ii. B-1/B Cities: Rs.10, 000/- p.m.* *iii. District Level Towns: Rs. 7,000/- p.m.* *iv. Block Level & Other Towns: Rs. 6,000/- p.m.)*	Average 13,000/- pm *i. Metro/A-1/A Cities: Rs.18,000/- p.m.* *ii. B-1/B Cities: Rs.15,000/- p.m.* *iii. District Level Towns: Rs. 10,000/- p.m.* *iv. Block Level & Other Towns: Rs. 9,000/- p.m.)*
	Electricity & water charges	*(@ Rs.2000/-pm for electricity &* *@ Rs.500/- pm for water*	*(@ Rs.3000/-pm for electricity &* *@ Rs.750/- pm for water*
	Communication (Tele/fax)	Rs. 750/- per month	Rs. 1000/- pm
b. Non-Recurring			
	Up-gradation of equipments, furniture, training materials etc (for both old and new Training Centres)	Rs.1.25 lakh	Rs. 2.5 lakh
IB. Middle Level Training Centre (MLTC)			
a. Recurring	Monitoring visits by MLTC faculty to AWTCs and ICDS Projects/AWCs	Rs. 12,500/- per annum (5 visits per year)	Rs. 18,000/- per annum (10 visits per year)
	Newspaper, Magazine, Fax, Internet etc.	Rs. 750/- per month	Rs. 1500/- pm
	Electricity and Water	Rs.2000/- for electricity and Rs.500/- for water	Rs. 4000/- for electricity & Rs.1000/- for water
b. Non-recurring	Up-gradation of equipments, furniture, training materials etc	No provision	Rs. 3.00 lakh (for both old and new MLTCs)
II. Recurring Variable Cost (both for AWTC and MLTC)			
A. Graded Honoraria to AWTC/MLTC Staff	Coordinator of MLTC	Rs. 2000/- (fixed)	Rs. 3000/- (fixed)
	Principal of AWTC/ Instructor of MLTC	i) Initial appointment: Rs.10000/-	Rs. 12250/-
		ii) On completion of 5 yrs: Rs. 12,500/-	Rs. 15625/-
		iii) On completion of 10 yrs: Rs. 15,000/-	Rs. 18750/-
		iv) On completion of 15 yrs: Rs. 17,500/-	Rs. 21875/-
		v) On completion of 20 yrs: Rs. 20,000/-	Rs. 25000/-
		vi) On completion of 25 yrs: Nil	Rs. 30000/-
	Instructors of AWTC	i) Initial appointment: Rs. 8000/-	Rs. 10,000/-
		ii) On completion of 5 yrs: Rs. 10000/-	Rs.12,250/-
		iii) On completion of 10 yrs: Rs. 12000/-	Rs. 15,000/-
		iv) On completion of 15 yrs: Rs. 14000/-	Rs. 17,500/-
		v) On completion of 20 yrs: Rs. 16000/-	Rs. 20,000/-
		vi) On completion of 25 yrs: Nil	Rs. 25,000/-
	Accounts Clerk at AWTC Typist at AWTC Typist-cum-clerk at MLTC Assistant Accountant at MLTC	i) Initial appointment: Rs. 6000/-	Rs. 7,500/-
		ii) On completion of 5 yrs: Rs. 7500/-	Rs. 9, 375/-
		iii) On completion of 10 yrs: Rs. 9000/-	Rs. 11,250/-
		iv) On completion of 15 yrs: Rs. 10500/-	Rs.13,125/-
		v) On completion of 20 yrs: Rs. 12000/-	Rs. 15,000/-
		vi) On completion of 25 yrs: Nil	Rs. 18,000/-
	Lady Warden at AWTC/MLTC	i) Initial appointment: Rs.5000/-	Rs. 6,250/-
		ii) On completion of 5 yrs: Rs. 6000/-	Rs. 7,500/-

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	Electricity & water charges	*(@ Rs.2000/-pm for electricity &* *@ Rs.500/- pm for water*	*(@ Rs.3000/-pm for electricity &* *@ Rs.750/- pm for water*
	Communication (Tele/fax)	Rs.750/- per month	Rs. 1000/- pm
b. Non-Recurring			
	Up-gradation of equipments, furniture, training materials etc (for both old and new Training Centres)	Rs.1.25 lakh	Rs. 2.5 lakh
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a. Recurring	Monitoring visits by MLTC Faculty to AWTCs and ICDS Projects/AWCs	Rs. 12,500/- per annum. (5 visits per year)	Rs. 18,000/- per annum (10 visits per year)
	Newspaper, Magazine, Fax, Internet etc.	Rs. 750, - per month	Rs. 1300/- pm
	Electricity and Water	Rs.2000/- for electricity and Rs,500/- for water	Rs. 4000/- for electricity & Rs.1000/- for water
b. Non-recurring	Up-gradation of equipments, furniture, training materials etc	No provision	Rs. 1.00 lakh (for both old and new MLTCs)
II. Recurring Variable Cost (both for AWTC and MLTC)			
A. Graded Honoraria to AWTC/MLTC Staff	Coordinator of MLTC	Rs. 2000/- (fixed)	Rs. 3000/- (fixed)
	Principal of AWTC/ Instructor of MLTC	i) Initial appointment: Rs.10000/	Rs. 12250/-
		ii) On completion of 5 yrs: Rs. 12,500/-	Rs. 15625/-
		iii) On completion of 10 yrs: Rs. 15,000/-	Rs. 18750/-
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Table-1: Comparative Statement on Existing and Revised Norms for some Unit Costs (where changes suggested) for various ICDS Training Courses

Cost Classification	Item Head/ Category of Staff/Programme	Existing Norms/Provision (W.e.f 1.4.2009)	Revised Norms/ Provision
	Job training of CDPOs/ACDPOs	Rs. 24,000/- per course	Rs. 30,000/- per course
	Refresher training of CDPOs/ACDPOs	Rs. 3000/- per course	Rs. 4500/- per course
	Induction Training of CDPOs/ACDPOs	Rs. 1000/- per course	Rs. 3000/- per course
	Orientation/Refresher training of MLTC Instructors	Rs. 3000/- per course	Rs. 4500/- per course
F. Incentives	Incentives to Trainee AWWs on completion of job training	Rs. 500/- per trainee	Rs. 1000/- per trainee
G. Contingencies	Job training of AWWs	Rs. 3000/- per course	Rs. 4500/- per course
	Refresher training of AWWs	Rs. 500/- per course	Rs. 2000/- per course
	Induction training of AWWs	Rs. 1500/- per course	Rs. 2000/- per course
	Job training of Supervisors	Rs. 5000/- per course	Rs. 7500/- per course
	Induction/Refresher training of Supervisors and Orientation training of Instructors of AWTCs	Rs. 2000/- per course	Rs. 3000/- per course
	Refresher Training of Instructors of AWTCs	Rs. 1500/- per course	Rs. 2000/- per course
	Job training of CDPOs/ACDPOs	Rs. 10,000/- per course	Rs. 15,000/- per course
	Induction/Refresher training of CDPOs	Rs. 5000/- per course	Rs. 7,500/- per course
	Orientation/ Refresher Training of Instructors of MLTCs	Rs. 3000/- per course	Rs. 4,500/- per course

ICDS OPERATIONALIZATION IN DIFFERENT STATES – MODELS OF POTENTIAL GOOD PRACTICES

Practice / Intervention	State and Support	Approach	Thrust Areas	Outcomes/ Results
Tamil Nadu Integrated Nutrition Program	Dept. of Social Welfare and Women and Child Development, Govt. of Tamil Nadu and World Bank.	- Provisioning of a package of services - nutrition education, primary health care, supplementary on-site feeding of children who were severely malnourished or whose growth was found to be faltering, education for diarrhoea management, administration of vitamin A, periodic deworming, and supplementary feeding of a limited number of women - Establishment of a Community Nutrition Centre (CNC).	- Growth monitoring, nutrition education and food supplementation	- Vit A supplement increased from 36% in 1982 to 70% in 1986 but dropped to 57% in 1990. - Deworming coverage increased from 42% in 1982 to 66% in 1986 and dropped to 51% in 1990. - 63% of children were completely immunized in 1982, this increased to 79% in 1986 and further increased to 83% in 1990.
INHP II in Reproductive and Child Health, Nutrition and HIV/AIDS (RACHNA) Program	CARE-India USAID , ICDS	- Demonstration and innovation of best practices through NGO partnerships. - Replication through the government systems. - Strategic alliances with stakeholders. - Promotion of Gender equity.	- Cadre of Community volunteers catering to 15 – 20 Households. - Nutrition health days synergized with Take Home Ration - Community based monitoring systems utilized - Block level resource mapping used for review.	- Impact on improving appropriate complementary feeding practices was disappointing. - Prevalence of providing recommended quantity of semisolids to children of 12 – 23 months was low. - No significant improvement in providing semi solids to 6 -11 months children - No improvement in mothers including at least 3 different food groups (no adding oil to the diet) for 6.– 23 months children. - No improvement in feeding 6- 23 months children with adequate frequency. - Less than 5 % of children 12 – 23 months had consumed any food ration in last 24 months.
Dular Strategy	UNICEF, ICDS and Govt. of Jharkhand	- Dular adopts a life course approach to the care of children under three children. - The Dular strategy seeks to ensure that girls and women of reproductive age have access to adequate nutrition, health care, and information about childcare throughout their lives especially while they are pregnant and nursing their young children. - The Dular strategy initiated community mobilization effort and specially trained community members to	- Community mobilization - Village Contact Drive - Growth Monitoring	- 2005 evaluation indicates that Dular villages had a significantly higher rate of colostrum feeding at 34 per cent than the non-Dular villages (64%). - However the median age of introduction of complementary feedings for six to 12 months did not show any significantly different between the two groups and remained high at eight months - For ages six to nine months: Dular 48.3 per cent and Non-Dular 52.7 per cent (P=.641) have received solid foods in the previous 24 hours and 48.9 per cent and 51.3 per cent (P=.871) had respectively had given milk outside of breast milk. - For ages 9 to 12 months 73.8 per cent of Dular and 72.5 per cent of non-Dular (P=1)

		disseminate information and to encourage healthy behaviors and practices in the places where they live. – Dular initiated a two-day village contact drive (VCD) where the whole community participates. The VCD uses participatory methods and demonstrations to enhance awareness and participation of the community. - Dular introduced a new cadre of volunteers named Local Resource Persons (LRPs) to assist the AWW. - Household counselling on various issues related to health and nutrition - Regular weighing of children.		had received complementary solid foods in the previous 24 hours, and 42 per cent and 48 per cent (P=.140) respectively had milk other than breast milk.
Kano Parbo Na (Why can't we do it?) –West Bengal Positive Deviance Model	Integrated Child Development Services (ICDS), West Bengal	- The PD approach seeks to identify the feeding practices of mothers in the community with healthy children and transmit them to other mothers through a community based approach using locally available resources. -Community mobilization around the Positive Deviance Approach through participatory processes, which involve the formation of village committees and pro-active dialogues between social groups and institutions, using cultural methods such as village picnics, fairs, etc. -Convergence and partnership between the service providers, administration and NGOs involved in implementation. - Capacity building of childcare functionaries and the community through regular review of activities. - Community based management of malnutrition emphasizing on positive behavioral changes in childcare practices (12 days of spot feeding and 18 days of take-home rations for grade II, III and IV children) - Hands-on training of mothers or caregivers over a 12 day period, on infant feeding, healthcare, hygiene and psycho-social care practices followed by practice sessions at home for a further 18 days. The cycle extends over 6-9 months within which period mothers/caregivers start showing behavior changes.	-Community Mobilisation - Growth Monitoring - Nutrition Counselling and Childcare	- Initiation of Complementary Feeding was in relatively higher proportion of children in PD area (37%) compared to control area (19%). - The proportion of children receiving formula milk was relatively lower in PD area (5% to 9%) compared to control area (6% to 13%). - Relatively small proportion of children reportedly was receiving semisolids or solids in the PD area (3% each) compared to control area. - At 6 months of age, a relatively higher proportion of infants received home made semi-solid or solid foods (33%) in PD area compared to (21%) in control area. - In children aged 7-11 months of age, 44% in PD and 34% in control areas were receiving home made solid foods. - Among 6 months old children currently receiving complementary feeding, around 40% in PD and 43% in control area were receiving the same 3 times a day, while the rest, it was 4 times a day. A significantly (p<0.01) higher proportion (58%) of children in PD area were receiving complementary feeding 4 times a day, compared to control area (29%). - Of those who were receiving complementary feeding, a higher proportion (53%) of mothers <12 months children in PD area were reportedly using spoon to feed the children, compared to control area (44%). - In about 44% of children in PD area and 29% in the control area, complementary feeding was initiated at 6 months of age, the difference in proportions being statistically significant (p<0.01), while in a higher (p<0.05) proportion of children in control area (50%) compared to 41% in PD, the same was initiated at 7 months of age. -The types of complementary foods given were mostly homemade solids (PD: 78%; Control: 82%) followed by homemade semisolids (PD: 16%; Control: 9%, p<0.01). A significantly (p<0.01) higher proportion (52%) of children in PD area received such foods 4-5 times a day, compared to only 33% in the control area. - The extent of sub-optimal complementary feeding in terms of frequency (2-3 times a day) was significantly (p<0.01) lower in the PD area (21%) compared to 61% in the

				control area • Significant higher (p<0.01) proportion (50%) of children in FD areas were weighed 1-9 times in a year, compared to only about 13% in control areas
Community Based Mother and Child Health and Nutrition Project	UNICEF and ICDS – Govt. of Uttar Pradesh	-Multi sectoral (Health,ICDS,PRI) participation, for addressing immediate and underlying determinants of malnutrition. -Promoting community mobilization and concentrating on selected "at risk" families who are reached through elected community volunteers.	- Community mobilization and HH counseling. - Involvement of local volunteers (Ex: Priya Mitra/Friends - Establishing 3 district and two state nutrition centers	- The practice of initiating breast feeding within one hour of birth increased by five times, (base line 4.8% and end line 23.8%) - Nearly 78 per cent mother confirmed having given something or other (pre-lacteal feeds) to their infants before initiating the breast feeding. - 48 per cent of mothers were aware about the importance of colostrums feeding. - There was significant improvement regarding the practice of colostrums feeding in the end line (Baseline 28% – 59%). - Semi solid food was introduced between six to nine months, substantial increase from 16 per cent in the baseline to 49 per cent in the end line. - High proportion of cases 87 per cent washing hands with soap by person assisting delivery was observed in the end line, similarly bathing of new born after third day of birth was reported in 22 per cent cases but base line figures were not available for comparison with both the variable. - Groups of advice given antenatal diet and IFA during pregnancy clearly shows the functioning of IPHs, 61.9 per cent beneficiaries got advice on additional diet from IPHs; 10.1 per cent from AWWs eight per cent from ASHA & others. - Source of information on immunization & VD-A by IPHs 28.9 per cent ANM 27.4 per cent AWW38.7 and others 27 per cent, clearly show that IPHs emerged as the main source of information in the community
Anchal Se Angan Tak	Integrated Child Development Services, Govt. of Rajasthan and UNICEF	- Life cycle approach is the cornerstone of the program strategy. - Counselling on health and nutrition at the household level. - Advocacy for awareness generation in the community, mass media, counselling, folk media. - Training and capacity building. - Gram Sampark Samooh (GSS)-Community based action, group of 15-25 members in each group. Each household is responsible for 15-20 households. -Maternal and Child Health and Nutrition (MCHN) Days held at the AWC and facilitated by the ANM and AWW with assistance from the Sahyogini and the AWC.	- HH level counseling and centre based health and nutrition education services	-Significant difference in the per cent of women who feed the newborn colostrums (18% versus 47%). - 25.8 per cent of ASAT mothers gave sugar water compared to 3.3 per cent of non ASAT mothers to child before breast feeding. - Mean age of introduction of complementary foods was 5.39 in ASAT and 5.52 in Non-ASAT
Community Based Nutrition Education for Improving Infant Growth	Relaks Trust and UNICEF	- Appropriate use of locally available food, appropriate feeding frequency, gradually increasing food density in complementary feeding by counselling.	- Nutrition Education -	- 41 per cent & nil 29 per cent (p value 0.15) were not feeding animal milk between ages seven to eleven months. - 83 per cent and nil 72 per cent (p value 0.08) did not use bottle for feeding children (7-11 months) - 32 per cent & nil 26 per cent (p value 0.48) were fed semi solid food in 7-11 months

				age. - 39 per cent & Nil three per cent (p value < 0.001 with very high significance) children 7 -11 months were fed banana. -78 per cent Vs 55 per cent (p value <0.001 with very high significance) were fed at least four times in 24 hrs in addition to breast milk ages seven months to 11 months; - At age 11 months; (A 42 per cent & Nil 19 per cent (p value 0.01 with significance) were fed at least five different food groups.(dairy, cereal, protein, fruit, vegetable, oil/fat, sugar and savory snacks)
Bal Poshan Swasthya Mah in Madhya Pradesh, Uttar Pradesh and Jharkhand.	National Rural Health Mission (NRHM), the Department of Health (DOH), Reproductive and Child Health (RCH) program and Integrated Child Development Services (ICDS)	- Sustainable high coverage vitamin A supplementation (VAS) - Maternal anemia reduction - Reducing anemia in children 6-23 months	- Build partnerships to expand vitamin A coverage.	- Child Health and Nutrition Months strategy in Jharkhand. - Statewide use of VAS tool package. - Strong advocacy with state government ensuring timely supply of vitamin A. - Strengthened HMIS by introducing a twice-annual reporting format and instituting timely reporting.
Maharastra Nutrition Mission	State of Maharastra	- Training and Motivation - Coordination - Monitoring and Evaluation - Community involvement and participation	- State evolves a coordinated and integrated approach in its efforts to significantly reduce child malnutrition and mortality.	- 39 per 1000 live births in 2005-06 (NFHS III - MMR 1.49 per 1000 live births - CBR 18.1 in 2007 (SRS 2008) - TFR 2.2 in 2005 (SRS 2006)
Mother's Committee	Andhra Pradesh	- Formation of Mother's committee who are devolved multifunctional responsibilities	- Mother's Committee act as change agents within the village.	- 40% of mothers' committees are formally involved in the ICDS Program - Awareness of the committees is higher in tribal areas (49% of women and 34% of adolescent girls) than in rural areas (25% of women and 15% of girls) and urban areas (20% of girls)

Annexure XIII

OUTLINE FOR SETTING UP THE INSTITUTIONAL ARRANGEMENTS AT THE NATIONAL LEVEL

The National ICDS Mission will be constituted to provide policy support and guidance to the states, with an empowered structure called the National Mission Steering Group (NMSG) and the Empowered Programme Committee (EPC) respectively under the chairpersonship of Hon'ble MOS (I/C) for Women and Children and the Secretary, Ministry of Women and Child Development. The institutional arrangements at the national level would be as under:

1. **The National Mission Steering Group (NMSG)** will be the apex body for providing direction, policy and guidance for implementation of ICDS and will have the following composition:

1. Minister of State (I/C) for Women and Child Development - Chairperson	Chairperson
2. Member, WCD, Planning Commission	Vice Chairperson
3. Ministers of 5 Region by rotation	Member
4. Secretary, Ministry of WCD	Member
5. Secretary, Expenditure, Ministry of Finance	Member
6. Joint Secretary & FA, Ministry of WCD	Member
7. Secretaries of line Ministries / Departments such as Health and Family Welfare,Panchayati Raj, Rural Development, Drinking Water Supply, Agriculture and Food.	Members
8. Chief Secretaries of 5 regions (but different States) by rotation	Members
9. Experts in the relevant fields (5) – to be co-opted	Members
10. Mission Director - Member Secretary and Convener.	Member

The National Mission Steering Group will meet once in six months and will be responsible for following functions:

- Approval of policies and programmes for the Scheme of ICDS;
- Ensure effective convergence of policy and administration among the various Departments;
- Advise the Empowered Programme Committee of the ICDS Mission on policies and oversee programme implementation;
- Review the outcomes and suggest mid course corrections that may be required in the policy design;
- Appraise recommendations of the EPC related to proposals and schemes and approve them based on the broad normative framework;
- Appraise and approve recommendations of the EPC on hiring of experts and functionaries on a contractual basis for carrying out the activities under the ICDS Mission;
- Carry out any such modifications in operational modalities as may be warranted, from time to time, for effective implementation of the ICDS Mission
- Any other matter with policy implications affecting the target group of this Scheme.

2. **The Empowered Programme Committee (EPC)** headed by the Secretary, Ministry of Women and Child Development would be the highest technical body for planning, supervising and monitoring the effective implementation of ICDS Mission. The composition of the EPC will be as under:

1. Secretary, Ministry of Women and Child Development	Chairperson
2. Senior Advisor, Planning Commission	Member
3. Joint Secretary, Department of Expenditure, Ministry of Finance	Member
4. Joint Secretary & FA, Ministry of WCD	Member
5. Representatives of line Ministries / Departments, such as Health and FamilyWelfare, Human Resource Development, Drinking Water & Sanitation, Panchayati Raj, Food, Rural Development	Member
6. Director, NIPCCD	Member
7. Joint Secretary (Incharge), SABLA, MWCD	Member
8. Secretary of States from five regions by rotation	Member
9. Director, NIN	Member
10. Mission Director	Convener

The chairperson of the EPC may co-opt other members to assist the committee in its task or invite to the meetings as special invitees such persons as may be deemed necessary. For effective functioning, the EPC would be empowered on the lines of empowerment already provided in SSA and the NRHM. The EPC will meet once in every quarter (three months) and will be responsible for the following functions:

(i) Plan, and monitor Mission activities and programmes, to achieve stated goals and objectives. (ii) Frame rules and procedures and place the same before the NMSG for approval.

(iii) Facilitate State ICDS Missions in planning, implementing and monitoring State/District ICDS plans.

(iv) Approve APIPs as well as make modifications of norms of approved schemes / items of expenditure, within the overall budget of ICDS Mission / Ministry of Women and Child Development.

(v) Carry out any such modifications in operational modalities as may be warranted, from time to time, for effective implementation of the ICDS Mission.

(vi) Track progress on key outcomes with an analysis of lagging states and supportive action.

(vii) Make recommendations regarding programmes, personnel and budget etc. for approval of the Mission Steering Group.

(viii) Exercise executive and financial powers to implement the ICDS Scheme. (ix) Approve the plans under the broad approved framework.

(x) Approval of new Projects/AWCs recommended by the State Empowered Programme Committee. (xi) Approval of proposals on training, advocacy and IEC, monitoring including MIS and evaluation. (xii) Mentor and support State EPCs for effective decentralized functioning

(xiii) Any other relevant tasks assigned by the National Mission Steering Group.

3. **The National ICDS Mission Directorate:** In order to carry out the functions mandated by the NMSG / EPC, a National ICDS Mission Directorate would be established in the Ministry of Women and Child Development. The National Mission Directorate of ICDS will be headed by a Mission Director - a Joint Secretary (in-charge, ICDS) of the Government of India will be responsible for handling day-to-day administration of the ICDS Mission. The National Mission Director will be vested with appropriate executive and financial powers as approved by the NMSG to enable him/her to function in effective manner to achieve the goals of the ICDS Mission. The overall structure of the ICDS Mission Directorate would be as under:

The specific roles and responsibilities of the National Mission Directorate will include:

(i) Operationalise planning, implementation and monitoring of the Mission activities;

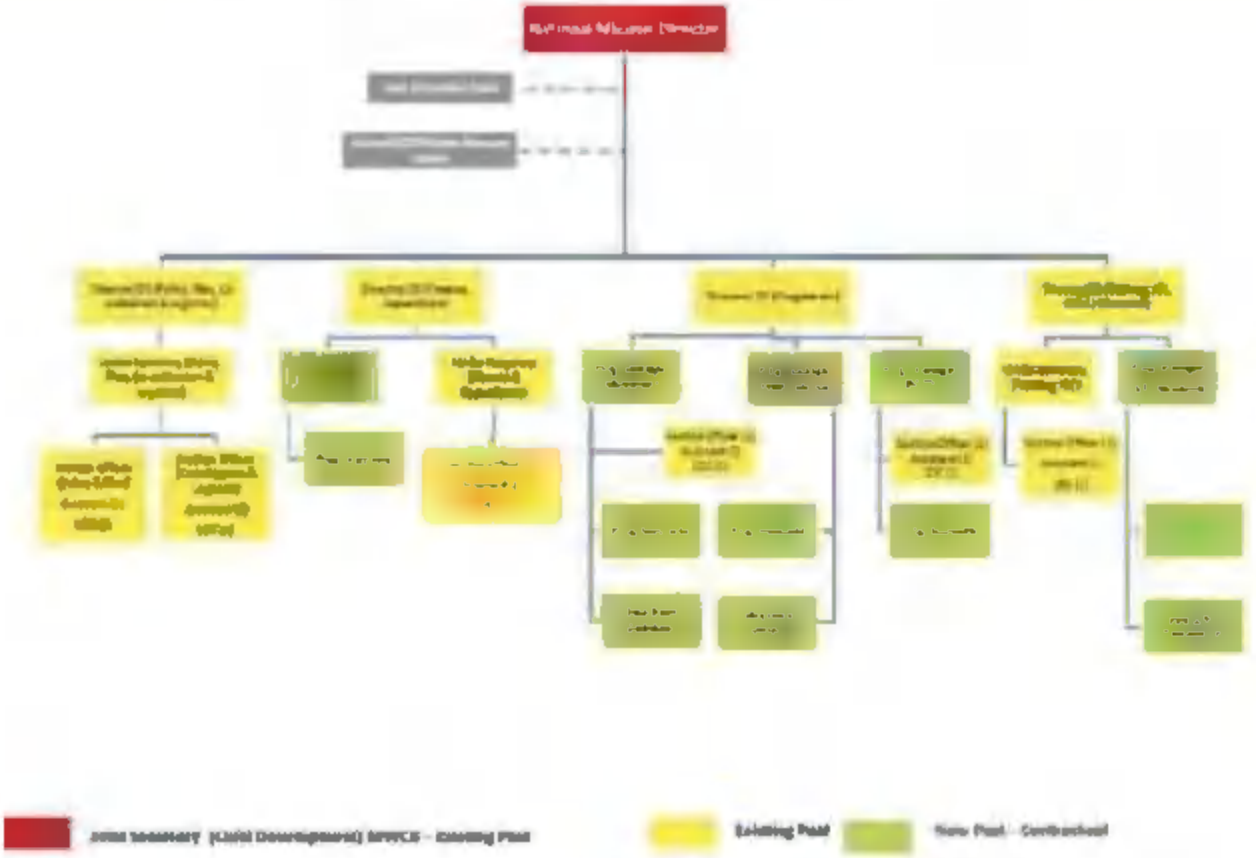
(ii) Planning and effective implementation of the ICDS Scheme;

(iii) Track progress on key outcomes– with an analysis of lagging states/ high burden districts and supportive action;

(iv) Exercise the executive and financial powers as may be approved/delegated by the National Mission Steering Group/Empowered Programme Committee;

(v) Facilitate evaluation, operations research, independent studies to assess progress and ensure mid - course correction as needed;

(vi) Ensure effective operational coordination and linkages with key sectoral ministries / programmes such as NRHM, SSA, TSC, MGNREGS for effective implementation of scheme as well as management of supplies, infrastructural inputs and other resources;



(vii) Appraise and process the State Plans under ICDS Mission for approval from NMSG / EPC;

(viii) Work closely with States / UT Administrations to improve their capacity to plan and implement programmes as well as provide mentoring support to the State Mission Directorates;

(ix) Ensure advocacy and public education (IEC) with a view to achieve the enunciated objectives of ICDS Mission;

(x) Supervise and review the work of FNB & NIPCCD administration through concerned Joint Secretary;

(xi) Develop parameters and tools for effective monitoring and supervision of ICDS throughout the country;

(xii) Carry out monitoring, supervision and evaluation of the programme from time to time;

(xiii) Facilitate training and capacity building of functionaries with the help of National ICDS Mission Resource Centre, NIPCCD & its regional Centres, FNB and other relevant training institution at national, state and district level;

(xiv) Enable institutional capacity Development, supervise and review the functioning of the National ICDS Mission Resource Centre;

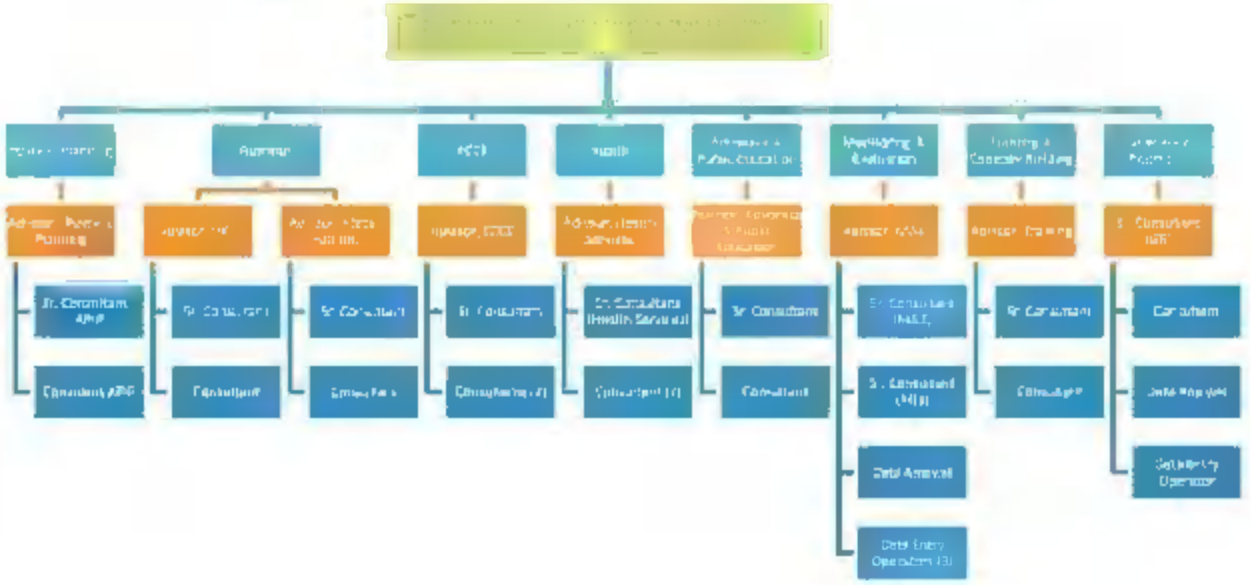
(xv) Provide regular feedback to EPC on any outstanding issues that need to be resolved or referred to the NMSG;

(xvi) Any other task (s) assigned by the NMSG / EPC / Ministry of Women and Child Development, Government of India.

4. **The National ICDS Mission Resource Centre:** A National ICDS Mission Resource Centre would be set up in NIPCCD that would serve as an apex body for technical assistance, dissemination and for functioning as a Centre of Excellence for facilitating the National and State ICDS Mission Directorates in all issues concerning implementation, supervision and monitoring of ICDS Scheme. This resource centre would provide necessary technical assistance to the Mission Directorate. Besides having experts in the areas such as nutrition (IYCF, Micronutrients), psychosocial care and early learning, communication (social mobilisation and advocacy) and nutrition surveillance, monitoring and evaluation, it would be assisted by four to five thematic groups such as IYCF, micronutrients, communication for changing care and feeding practices, early learning / preschool education, nutrition surveillance, monitoring and evaluation, etc. These groups, involving different professionals, institutions, voluntary agencies would assist in developing strategies and capacity- building activities.

The National ICDS Mission Resource Centre would draw up on resources from and link with other national institutions to respond to requests from states and districts for technical support in planning and implementation of the programme. Besides facilitating programme implementation, it would also improve the quality and relevance of work done in these institutions. National institutions would also catalyse the creation of a network of state, district resource institutions to promote local capacity development.

STRUCTURE OF THE NATIONAL ICDS MISSION RESOURCE CENTRE



Annexure - XIV

OUTLINE FOR SETTING UP THE INSTITUTIONAL ARRANGEMENTS AT THE STATE LEVEL

The ICDS Mission would be an endeavour to empower States / UT Administrations to carry out the required reforms for achieving the vision of restructured ICDS to reduce undernutrition in children under three years of age and to enhance early development and learning outcomes in all children under six years of age. Recognising the leadership role of the States, ICDS Mission would provide necessary flexibility to the State Governments / UT Administrations to take care of the local needs and socio-cultural variations. The States/UTs would be expected to adhere to mutually agreed objectives/milestones which would be reflected in a Memorandum of Understanding (MoU) signed with Centre by each state.

The ICDS Mission would also provide additional resources the States /UTs to enable them meet the diverse nutrition and child development needs of young children and would be urged to take up innovative approaches to deal with local issues. States would also be required to take action for increasing their expenditure on the child development sector by a stipulated percentage every year over the Mission period.

The states, in turn, will decentralise planning and implementation arrangements to ensure that need-based and community-owned District Child Development Action Plans become the basis for interventions in the child development sector. Keeping in view the decentralisation envisaged under ICDS Mission, states would be required to devolve sufficient administrative and financial powers to the PRIs and ULBs to improve the reach, coverage, quality, supervision and monitoring of childcare services.

At the State / UT level, the State Child Development Societies will be constituted to provide policy support and guidance for effective implementation of ICDS in the State/UT. An empowered structure called the State Mission Steering Group (SMSG) and the State Empowered Programme Committee (SEPC) respectively under the chairpersonship of the Minister in-charge of the WCD Department of the State / UT and the Secretary of the WCD Department of the State / UT.

1. **The State Mission Steering Group (SMSG):** The State Mission Steering Group headed by the Chief Minister will be the apex body for providing direction, policy and guidance for implementation of ICDS in respective State / UT and will have the following composition:

   (i) The Chief Minister - Chairperson
   (ii) The Minister in-charge of Women and Child Development in the State – Vice Chairperson
   (iii) Chief Secretary – Executive Vice Chairperson
   (iv) Secretaries of the relevant State Departments – Members
   (v) Representative of National ICDS Mission Directorate - Member
   (vi) Representative of Food and Nutrition Board – Member
   (vii) Regional Director of NIPCCD – Member
   (viii) District Magistrate / Dy. District Collector from two / three districts(on rotation) – Members
   (ix) Four-Six Non-official experts, Mother's Committee and Voluntary Agencies – Members.
   (x) Principal Secretary / Secretary in-charge of ICDS – Member Secretary and Convener.

The State Mission Steering Group would meet at least once in three months and would be responsible for following tasks:

(i) Appraisal of the proposals and schemes and approve them on the broad normative approved framework;
(ii) Consideration and approval of Annual State Action Plan for ICDS Mission;
(iii) Appraisal and review of implementation of Annual Action Plan and achievement of child related outcomes;
(iv) Suggest any mid course correction that may be required in the State mission strategy design framework.
(v) Ensure effective convergence of policy and administration among the various Departments;

(vi) Review the follow up action on decisions of the State ICDS Mission;
(vii) Approval of proposals for institutional management reforms for ICDS in the State;
(viii) Advise the State Empowered Programme Committee on policies and oversee programme implementation;
(ix) Appraise recommendations of the SEPC related to proposals and schemes and approve them based on the broad normative framework;
(x) Appraise and approve recommendations of the SEPC on hiring of experts and functionaries on a contractual basis for carrying out the activities under the ICDS Mission;
(xi) Any other matter with policy implications affecting the nutritional status of the target group of this Scheme.

2. **The State Empowered Programme Committee (SEPC):** The State Empowered Programme Committee headed by the Chief Secretary of the State would be the highest technical body for planning, supervising and monitoring the effective implementation of ICDS at the State / UT levels. The composition of the EPC will be as under:

(i) Chief Secretary of the State – Chairperson.
(ii) Pricipal Secretary/ Secretary, WCD – Vice Chairperson
(iii) Principal Secretary/ Secretary, Finance & Planning - Member
(iv) Principal Secretaries of the relevant Departments– Members
(v) State Mission Director – Convener.

The chairperson of the SEPC may co-opt other members to assist the committee in its task or invite to the meetings as special invitees such persons as may be deemed necessary. The SEPC will meet once in every month and will be responsible for the following functions:

(i) Consider and approve proposals from districts and other implementing agencies/District Action Plans;
(ii) Prepare State Action Plan for approval of State Mission Steering Group;
(iii) Execution of approved State Action Plan;
(iv) Review implementation and achievement of child related outcomes;
(v) Analysis of lagging districts and supportive action;
(vi) Finalization of working arrangements for inter-sectoral coordination;
(vii) Coordination with NGOs/Donors/other agencies and organisations; (viii) Review of expenditure;
(ix) Release of funds to the District Societies as per Annual Action Plan;
(x) Establish Resource Group of Professionals to facilitate design and implementation of the core strategies; and
(xi) Any other task assigned by the State Mission Steering Group.

3. **The State ICDS Mission:** Headed by the Chief Minister of the concerned State, the State ICDS Mission will be responsible for overseeing child development and nutrition system, consideration of policy matters related with child development and nutrition, review of progress in implementation of ICDS in Mission Mode by tracking child-related outcomes, using nutrition status of young children under three years as the lead outcome indicator; facilitate inter-sectoral coordination & convergence, advise on advocacy measures required to promote ICDS visibility in the State among others. The concerned State WCD / Social Welfare / Justice Minister would be the co-chairperson of the State ICDS Mission, with the Secretary/Principal Secretary/ Secretary WCD /Social Welfare/Justice as the convenor. Other members of the State ICDS Mission would include:

- Ministers In-charge of Departments relevant to Child Development such as Health, Rural Development/Water and Sanitation, Urban Development PHED, Panchayati Raj, Tribal Welfare, Minorities, Elementary Education, Planning, Finance;

- Five to ten public representatives such as Members of Parliament (MP), MLAs, chairperson Zila Parishad, local bodies;
- Official representatives — Women and Child Development, Development Commissioner, Secretaries in - charge of relevant departments stated above, representative of MWCD, GoI, NIPCCD HQ/ Regional Centre and representation from two or three districts—DM/DDC/ZP (on rotation basis).
- Two or three members drawn from ICDS field functionaries such as DPOs/CDPOs/LS/AWWs
- Five to eight nominated non-official members such as Child Development, Nutrition, Health, Early Education experts and voluntary agencies

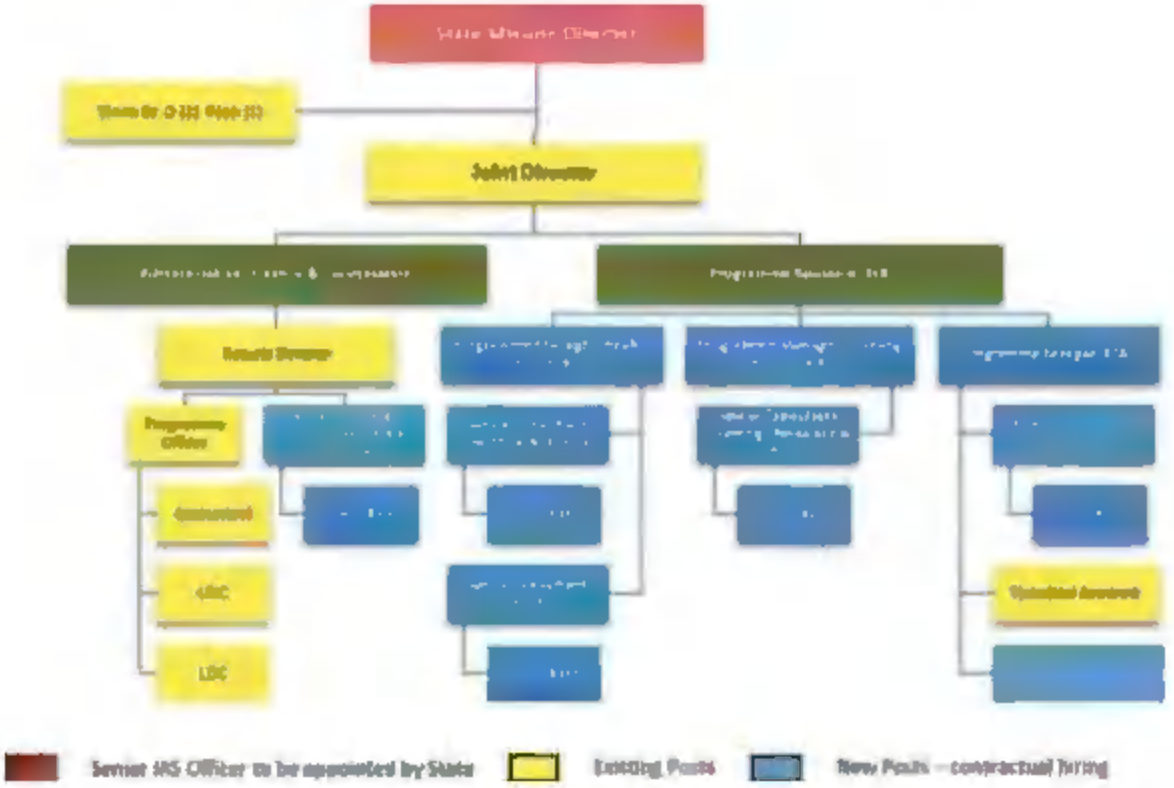
The State ICDS Mission would meet at least once in every six months and would have powers to co-opt members as and when needed.

The functions under the State ICDS Mission would be carried out through the State Child Development Society that will be headed by a State Mission Director who will be a senior officer of the State Government / UT Administration of the rank of a Special Secretary/Additional Secretary (an IAS Officer of JAG/Selection Grade). The State Mission Director will be vested with appropriate executive and financial powers as approved by the SMSG to enable him/her to function in effective manner to achieve the goals of the ICDS Mission. The infrastructure and human resource of the existing State ICDS Cell would be subsumed with the overall structure of the State Child Development Society. Accordingly, the structure of the Child Development Society in every State / UT would be as under:

Chart – 1: Mission Directorate in large States (with 15 or more districts)



Chart – 2: Mission Directorate in smaller States (with less than 15 districts)



Note: In case of UTs one Programme Manager, one Senior Consultant and one Consultant would be supported under the ICDS Mission. As discussed above, the implementation of ICDS Mission would be rolled out in a phased manner, therefore, the staff appoints would also be phased out accordingly. For those states not covered in the implementation plan during initial two years, two technical persons (One Programme Manager and One Senior Consultant) would be provided, until the State Mission Directorates are set up and functional.

4 **The State Child Development Society:** In order to carry out the functions of the State ICDS Mission there is a strong need for a dedicated institutional mechanism. Therefore, a State Child Development Society will be set up in every State / UT, with powers to set up its District units, to carry out functions of the State Mission Directorate and all other functions mandated by the SMSG / SEPC for effective implementation of the ICDS Scheme at the State / UT level. The State Child Development Society would have a Governing Body and an Executive Committee under the respective chairperson of the Chief Secretary and Principal Secretary / Secretary Women and Child Development.

The Governing Body would include as members: Secretaries of the relevant departments; GoI representative - MWCD; Regional Director NIPCCD, representation from two or three districts-DM / DDC / ZP (on rotation basis) and two or three Divisional Deputy Directors ICDS / DPOs, selected representation of ICDS functionaries/ mothers committees, four to six non-official nominated experts and voluntary agencies etc. The Governing Body of the State Child Development Society will be responsible for:

- Endorsement of Annual State Action Plan for ICDS Mission and a longer term road map;
- Review of Implementation of Annual Action Plan and achievement of child-related outcomes;
- Suggest any mid-course correction that may be required in the state Mission strategy design framework;
- Review of inter-sectoral coordination;
- Review of status of follow-up action on decisions of the State ICDS Mission;
- Appraise recommendations of the Executive Committee of the proposals and schemes and approve

them based on die broad normative approved framework;

- Approval of proposals for institutional reforms; **and**
- Approve recommendations of the EPC on hiring of the experts and functionaries.

The Executive Committee of the State Child Development Society would function under the chairpersonship of the concerned Principal Secretary / Secretary Women and Child Development / Social Welfare / Social Justice. The convenor would be the State Mission Director and members would include Secretaries / Technical Officers from Child Development-related sectors, GoI-MWCD representative, Development of North-East Region in applicable states; Financial Advisor, Women and Child Development; and two or three Divisional Deputy Directors ICDS / DPOs, selected representation of ICDS functionaries / mothers committees, as well as two to three professionals/ experts (by rotation for a period of two years). The Executive Committee would meet once every month and would be responsible for:

- Approving proposals from districts and other implementing agencies / District Action Plans (DAPs);
- Review implementation and achievement of child-related outcomes;
- Execution of approved State Action Plan (SAP);
- Analysis of lagging districts and supportive action;
- Finalisation of working arrangements for inter -sectoral coordination;
- Follow-up on action on decisions of the Governing Body;
- Coordination with NGOs / donors / other agencies and organisations;
- Review of detailed expenditure;
- Release of funds for programmes at state level as per Annual Action Plan;
- Release funds to the District, Block and Gram ICDS Mission Societies;
- Provide leadership to state and district teams;
- Finalisation of working arrangements for intra -sectoral and inter-sectoral coordination; and
- Establish a resource Group of professionals to facilitate design and implementation of the core strategies.

Annexure XV

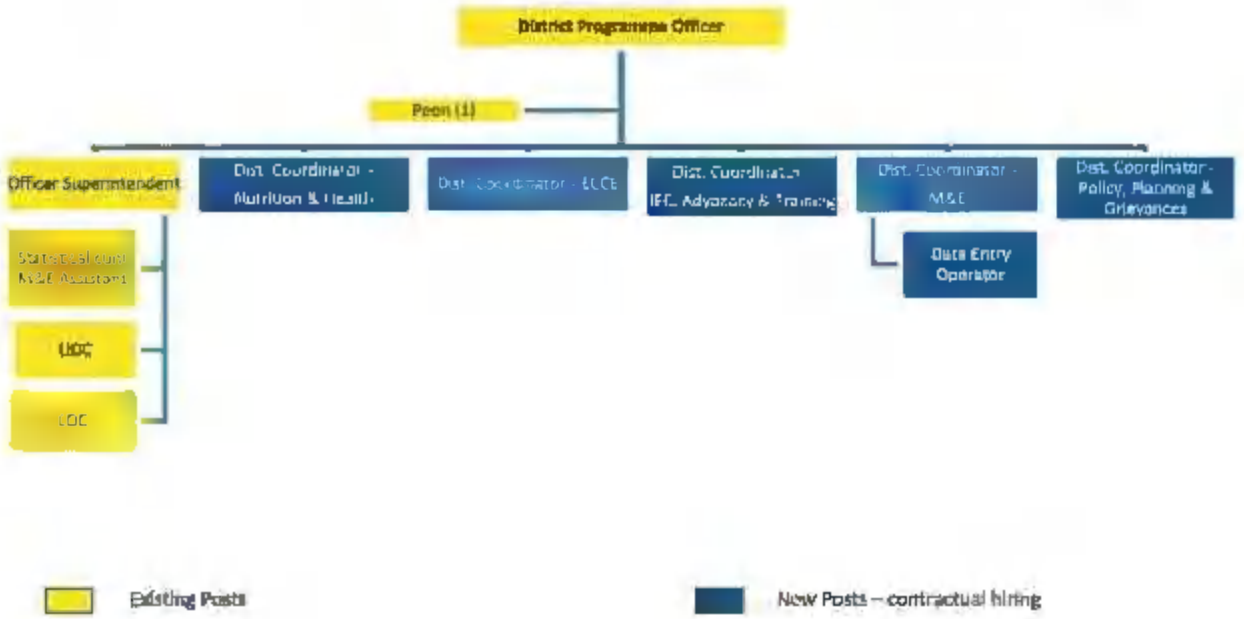
OUTLINE FOR SETTING UP THE INSTITUTIONAL ARRANGEMENTS AT THE DISTRICT LEVEL

Every district would have a District ICDS Mission headed by the chairperson of its Zila Parishad. The District Magistrate / Collector of the concerned district would be the co-chairperson and the District Programme Officer ICDS as the District Mission Director. The Mission may include public representatives such as Members of Parliament (MP), MLAs, MLCs from the concerned district, chairpersons of the Standing Committees of Zila Parishad, chairpersons of Panchayat Samitis and district Programme Managers from relevant departments as official representatives, state representatives and representatives of NGOs. These guidelines are indicative and may be appropriately customised by the State.

The District ICDS Mission would provide a platform where the three arms of governance, ZP/Urban Local Bodies, District Child Development Administration and District Programme Managers or ICDS Mission sectors, would get together to operationalize ICDS in Mission Mode. They would discuss and take decisions on child development issues of the district and delineate their mutual roles and responsibilities. Specifically, the District ICDS Mission would be responsible for following functions:

- Promote integrated planning;
- Endorse Annual District Child Development Plans;
- Review district child-related indicators and outcomes and recommend district-specific interventions;
- Outcome-based assessment of progress;
- Ensure inter-sectoral convergence and coordination;
- Review annual Plans for the district.
- Ensure that institutional reforms are carried out; and
- Supervise the process of hiring of experts and functionaries at district and local levels.

District ICDS Mission Directorate: A District ICDS Mission Directorate would be set up in every district to support the District ICDS Mission in effectively discharging its duties. The infrastructure and human resource of the existing District ICDS Cell would be subsumed with the overall structure of the District ICDS Mission Directorate. Accordingly, the structure of the District ICDS Mission Directorate in every district would be as under:



The District ICDS Mission Directorate would be responsible for following tasks:

- Planning, implementing, monitoring and evaluating the progress of ICDS Mission at the district level;
- Review child-related indicators and outcomes and make recommendations for interventions;
- Outcome-based assessment of progress, with nutrition status of young children under three years as the lead outcome indicator;
- Ensure facilities for information compilation and data analysis;
- Review and approve District Child Development and Nutrition Annual and Prospective Plans;
- Conduct ICDS accreditation of AWCs, projects;
- Review budget and budget analysis;
- Approve transfer of funds to Projects, VHSNCs and AWCs;
- Facilitate the working of the District ICDS Mission;
- Coordinate with NGOs/donors/other agencies and organisations.
- Ensure recruitment of staff for the District Mission Directorate;
- Ensure support for hiring of technical experts on a contractual basis;
- Establish transparent systems of procurement and accountability; and
- Any other task(s) assigned by the National / State Mission Directorate from time to time.

Annexure XVI

OUTUNE FOR SETTING UP THE INSTITUTIONAL ARRANGEMENTS AT THE BLOCK / PROJECT LEVEL

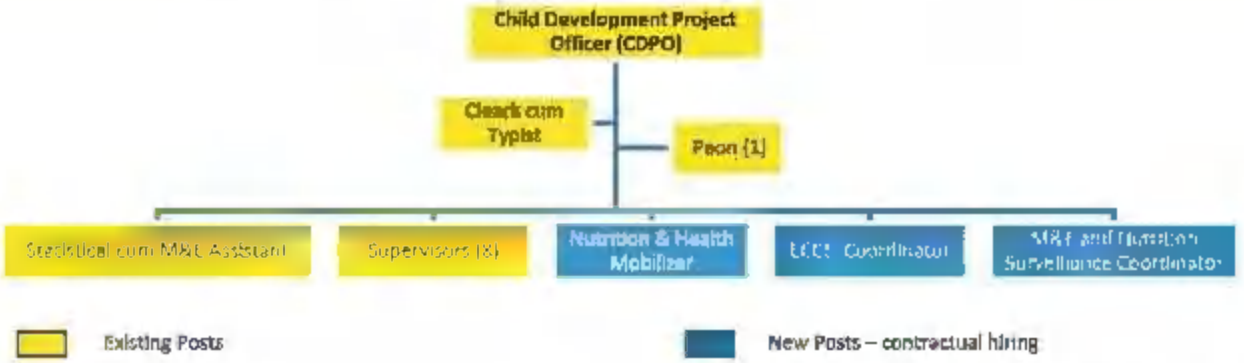
Block ICDS Mission: At the Block / Project level, each Block within a district would have a Block ICDS Mission Committee that would be headed by the chairperson of the concerned Panchayat Samiti. The Block

Development Officer (BDO) of the concerned Block would act as the co-chairperson and Child Development Project Officer (CDPO) as the convenor of this Block ICDS Mission Committee. Other members of this Committee may include public representatives such as MLAs, MLCs from the block, members of Panchayat and Block-Level Officers from relevant departments, such as Block Medical Officer, Block Education Officer, Extension Officer, Water and Sanitation, two or three ICDS Supervisors (on rotation), District-Level Officer, representatives of NGOs and two or three professionals / experts / practitioners. These guidelines are indicative and may be appropriately customised by the State.

The Block ICDS Mission Committee would meet once in every month and would be responsible for following tasks:

- Finalise Block-Level Child Development Plans to meet the needs of children in the Block;
- Track nutrition status of young children with intensive support to lagging villages/habitations;
- Facilitate conducting of habitation surveys, and determine the number of AWCs required in the block and local innovative strategies to reach the younger infant/child. Based on survey findings, determine location of the AWCs and Mini Anganwadi Centres (AWC);
- Provide assistance for establishing AWCs/mini AWCs;
- Provide guidance for preparation of village/gram/urban centre ICDS Mission Plans;
- Provide supportive supervision to supervisors and AWWs;
- Facilitate procurement of the Nutrition Supplement by the village/urban centre ICDS Mission Committee;
- Ensure proper distribution of supplies and equipment to AWCs;
- Facilitate organising a fixed monthly Mother-Child Day linked to NRHM Village Health Day;
- Participate in monthly Mother-child Divas and facilitate organising of theme exhibitions in the village/urban centre;
- Facilitate in conducting feedback through public hearings, ICDS community accreditation systems, etc.;
- Strengthen linkages for making AWCs child friendly, with local contributions of play/learning materials and joyful learning activities;
- Facilitate convergence with MOs, LHVs, ANMs, ASHAs and SSA. Provide supervision for civil works in the villages;
- Conduct / organise orientation / training programmes for AWWs, community leaders and also organise mobile training teams;
- Facilitate coordination and converge with all stakeholders and line departments;
- Compile monitoring reports and share feedback;
- Prepare budget for the block and conduct budget analysis;
- Ensure timely audit of accounts;
- Review village/habitation/urban centre-level budgets;
- Development of operational policy and time schedule for various activities;
- Ensure that rules and procedures are adhered to in hiring the staff and experts on a contractual basis;
- Hiring of adequate contingent of staff and experts.

Block Mission Team: The functions under the Block ICDS Mission Committee would be carried out through the Block ICDS Mission Team headed by the concerned Child Development Project Officer (CDPO). S/he will be responsible for ensuring effective implementation of the ICDS Scheme at the Block / Project levels as well as achieving the goals of the ICDS Mission in their respective work area with the help of a small team of professionals hired on contractual basis. Accordingly, the structure of the Block / Project level ICDS Mission, for a Project with 100 Anganwadi Centres, would be as under:



Block ICDS Resource Centre (BIRC): The above mentioned institutional arrangements will be operational in 90 per cent of the Projects across the country, while in remaining 10 per cent Projects, the concept of Block ICDS Resource Centre (BIRC) will be piloted. State-wise selection of blocks where these BIRCs can be piloted will be done on the basis of needs and availability of infrastructure, planned by the respective State Governments / UT Administrations through respective APIPs, approved by the EPC headed by Secretary, Ministry of WCD.

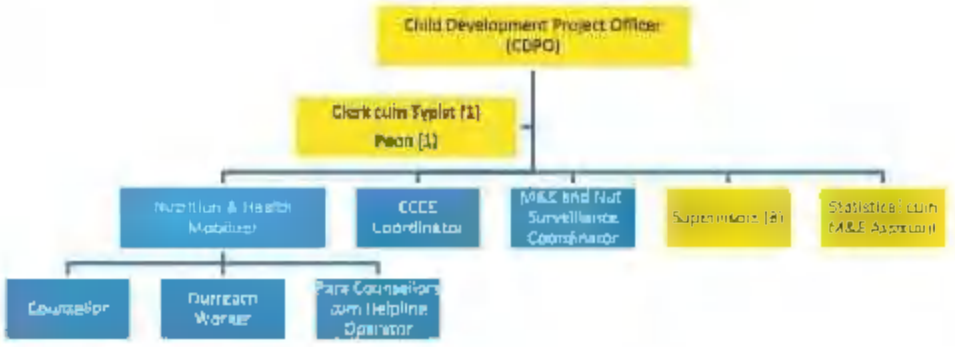
The goal of setting up BIRCs will be to accelerate progress on nutrition and survival of women and children at block & village levels by effectively promoting exclusive breastfeeding for the first six months and timely and appropriate complementary feeding after six months along with continued breastfeeding, infant and young child feeding as well as lactation support counselling services. Besides, focussed attention on promoting ECCE activities and training & capacity building for all personnel and service providers on nutrition, IYCF, ECCE, growth monitoring and other related ICDS services will be given. Under the BIRC, a Nutrition Helpline will be set up that will help provide basic counselling services over the phone as well as act as the emergency outreach services for moderately or severely undernourished children at the block levels. The emergency outreach services will be ensured by the Nutrition Helpline in close collaboration with the Health Department / NRHM Team at the District and Block levels.

During the piloting of BIRCs, following two models will be piloted:

(i) **NGO led Model:** In this model, the services pertaining to Nutrition & IYCF and training at the Block level will be outsourced to a selected NGO. Accordingly, the unit lead by the Nutrition & IYCF Coordinator, in the structure of the BIRC given below, will be outsourced to the selected NGO. The selected NGO will be required to ensure services pertaining to Nutrition / IYCF Counselling, Nutrition Helpline, IYCF Training for the respective BIRC under the overall guidance and supervision of the concerned CDPO.

(ii) **Project led Mode:** In this model, the entire services of the BIRC will be carried out by the respective ICDS Project itself. The respective CDPO will be the focal point for the implementation and management of the BIRC with the assistance of the project staff at the block levels. For this model, the staff as per the structure of the BIRC given below will be hired on contractual basis, who will work under direct supervision and control of the concerned CDPO for implementation of all activities of the BIRC.

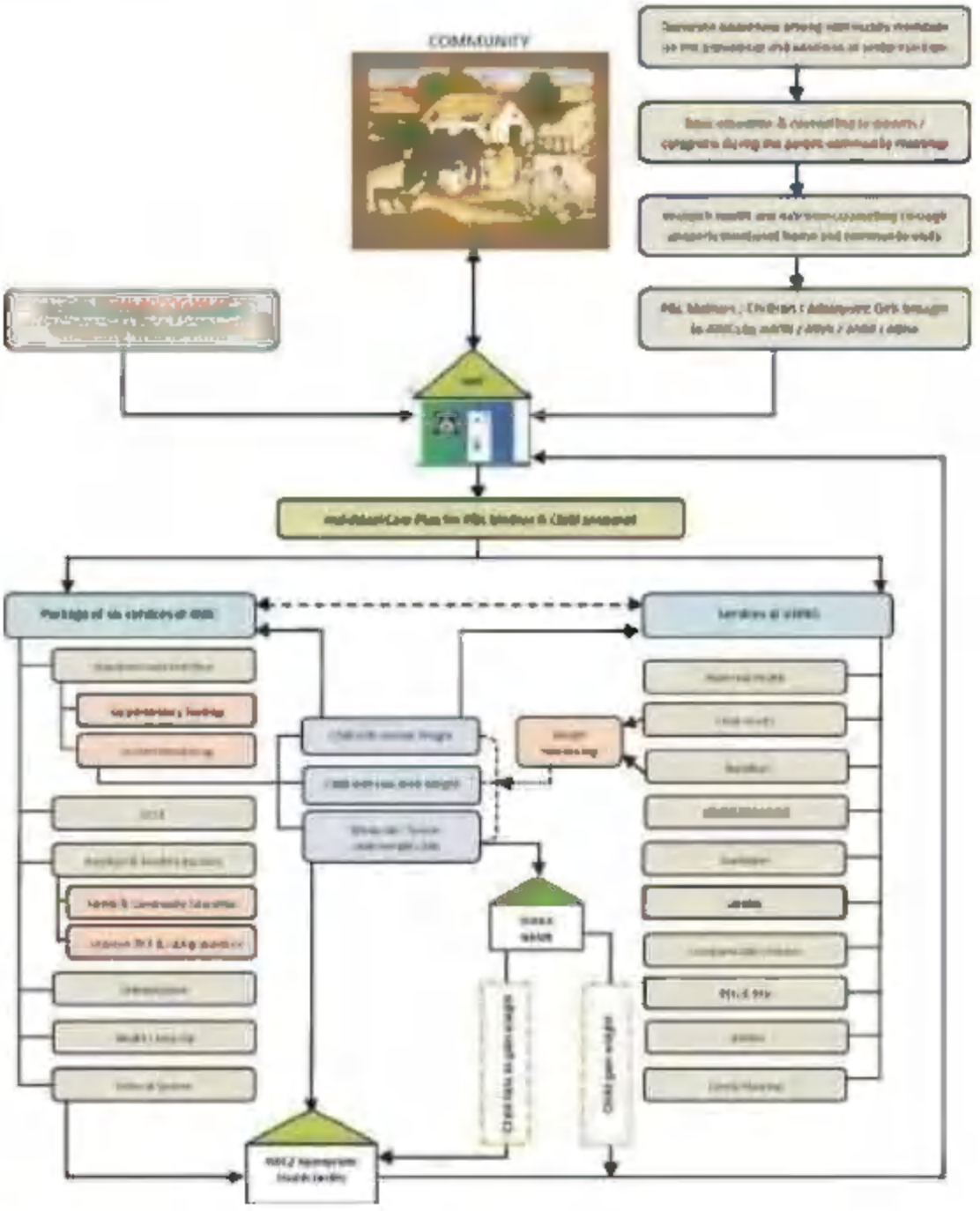
Accordingly, the structure of Block ICDS Resource Centre is given below:



Annexure XVII

OUTLINE FOR SETTING UP THE INSTITUTIONAL ARRANGEMENTS AT THE VILLAGE / WARD LEVEL

At the village / ward (urban areas) level, the VHSNC would be responsible for all activities in the Child Development and Nutrition Sector and would facilitate decision making at the AWC level. VHSNC would function as the sub-committee of PRI. The services of an Anganwadi Centre (AWC) under the revamped ICDS would be largely based on the following conceptual model:



In order to achieve this vision, the AWCs would be strengthened as a comprehensive village maternal, child & adolescent girl care centre with adequate space for children with adequate infrastructure, facilities and resources. Specifically, the following major steps would be undertaken for strengthening the Anganwadi platform:

- **Expanding operations & activities:** The focus would be on expanding the activities of the AWC to regularly provide a package of core services including crèche & day care, early childhood education, nutrition & health counselling, balanced & nutritious diets, among others. For ensuring such services, pilots in selected areas would be conducted where the AWCs may be opened for at least 6-7 hours a day, on a time conveniently determined by the local community and parents.

- **Strengthening the physical infrastructure:** In order to facilitate better delivery of services under the Scheme, construction of Anganwadi Centre, as a distinct activity, in a phased manner under the ICDS Scheme will be undertaken. The Planning Commission has also supported the idea during the Mid-Term Appraisal. Adequate financial allocations for this critical intervention will be required for developing a class infrastructure of requisite building (3-4 rooms) with facilities and skilled human resources at the village level. In this setup, a separate room for Ante Natal Care checkups for pregnant women and centre for adolescent girls (RGSEAG), hygienic SNP arrangements with a kitchen, store, safe drinking water and child friendly toilets, gas stove, utensils and early play/learning material etc., would be constructed.

- **Strengthening human resource – Provision of a second Anganwadi Worker:** The position of a second anganwadi worker would be created under the restructured ICDS in 200 high burden districts. This second AWW would be responsible for visiting and counselling families on better nutrition and ensuring that the children below 2 who do not come to the centre get food supplements. Such a person would be additional to ASHA. In addition to reaching food supplements, she would provide crèche services, and assist in pre-school education and all other functions of the first anganwadi worker. She would also weigh newborns and children below 2- at home. Growth monitoring and food supplementation and nutrition counselling are thus the three key functions which she provides plus crèche where this is possible and assistance to the first AWW in managing the AWC.

- **Safe Water and Toilet Facilities:** Provision of safe drinking water and toilet facilities in all AWCs would be mobilised through convergence with the schemes of the Department of Drinking Water Supply through the Accelerated Rural Water Supply Scheme and Total Sanitation Campaign.

- **Weighing scales:** The monitoring and promotion of young child growth and development is an important component of the ICDS programme. All the AWCs would be provided with the following three types of weighing scales:

  (I) Salter Baby Weighing Scales - To weigh neonates and infants.

  (II) Dial Salter or Equivalent balance: To weigh children from 6 months up to five years of age.

  (III) Adult Weighing Scale: To weigh pregnant and nursing mothers & adolescent girls.

- **Mother and Child Protection Cards & other monitoring tools:** The Joint Mother-Child Protection Cards, Cohort Registers, Growth Monitoring Registers and community charts would be provided to every AWC. Mother-Child Protection Cards would be provided to every pregnant mother and would be used for family empowerment, counselling, mother-child tracking and monitoring. A Parenting Support Kit, including counselling cards and charts on issues of nutrition, growth and development would be provided to every AWC for use during home visits, and observance of the fixed monthly Village Mother Child Day and Anganwadi Divas.

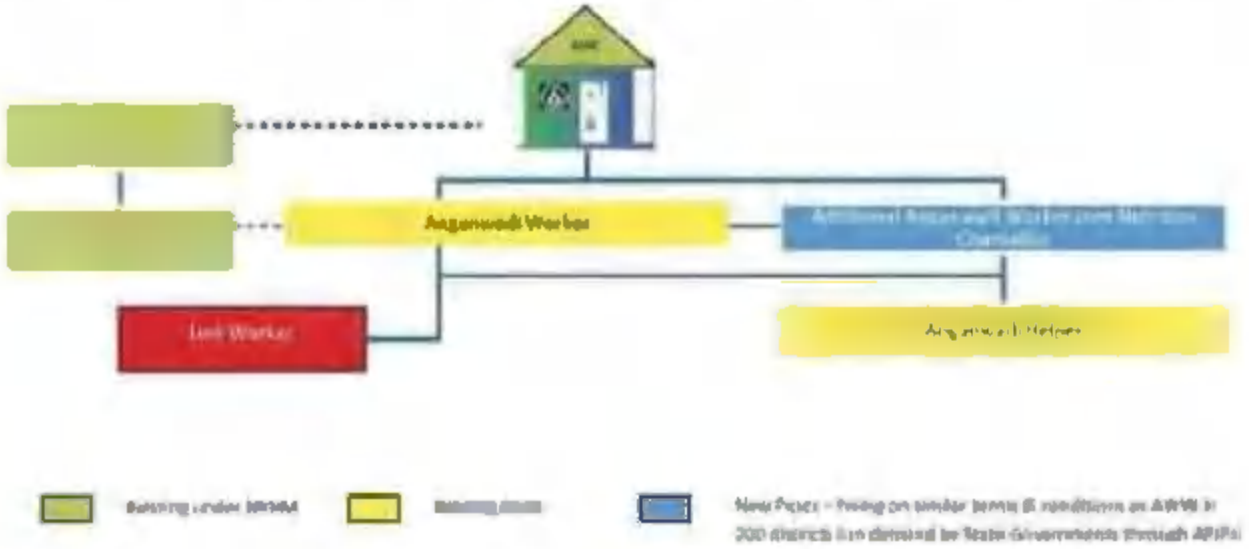
- **Kitchen equipments and utensils:** Every AWC would be equipped with appropriate kitchen equipments and utensils for cooking, serving and eating. A provision would be made for the procurement of these items every five years by the ICDS Mission at the district level.

- **Early Play and Learning Material:** An essential and critical aspect of the ECCE programme is the nature and range of play experiences it provides to children. There is a need for essential early learning play materials at every AWC, through interaction with which, children's learning and development would be fostered. A basic minimum kit, which would cater to about 30-40 children in the age-group of three to six years, would be

identified by experts in the area of ECE. This kit would be procured by the ICDS Mission at the district level, ensuring that it is suited to the local context. This would be complemented by local early learning play activity support materials made by AWWs/women's SHGs/mothers' committees through contingency amounts for raw material/or through community contribution.

- **Medicine Kit:** As ASHA of the NRHM also gets a medicine kit containing basic medicines for use in the village, the list of medicines in ASHA's kit would be reviewed before finalising the list for AWC. However, there is a need to upwardly revise the unit cost of medicine kits for AWCs.

AWCs would be strengthened as "vibrant ECD centres" to become the first village outpost for health, nutrition and early learning with adequate infrastructure and human resources. Strengthening of human resource at AWC would be undertaken by appointing an Additional AWW cum Child Development & Nutrition Counsellor in 200 high-burden districts and / or co-opting for a payment / incentive to ASHA (wherever existing additionally), recruitment of youth volunteers on stipend basis and / or through mobilisation of community women volunteers (one for 15-20 households) for improved family contact and prioritised home visits at critical contact points. Accordingly, the AWC level structure would be as under:



The roles and responsibilities of the Village / Ward level ICDS Mission Committee would include:

- Promote integrated planning, management and implementation;
- Endorse Village Child Development Plans;
- Review village-level child-related indicators and outcomes and recommend village / habitation / family-specific interventions, including local solutions to reach the younger infant child;
- Monitor and supervise activities of the AWC and other projects / personnel involved with ICDS Mission;
- Coordinate with NGOs/CBOs, SHGs, Mothers Groups / Mahila Mandals among others;
- Appraise proposals and approve them based on the broad framework.
- Approve use of untied funds;
- Ensure that institutional reforms are carried out;
- Approve recommendations on service delivery, programme components and social mobilisation and capacity building;

- Provide guidance in preparing Annual Action Village/Urban Centre Plans based on the felt-needs of the children and women in the village/urban settlement.
- Assist in conducting habitation/household survey;
- Ensure participation of all children under six years, pregnant and nursing women, including innovative strategies to reach the younger infant/child;
- Provide guidance for implementing the activities;
- Facilitate procurement and proper distribution of nutrition supplements;
- Facilitate organising of a fixed monthly Village Mother—Child Day, linked to NRHM Village Health Day;
- Provide assistance for organising a monthly Anganwadi Divas in the village/urban settlement;
- Contribute to making AWCs child friendly, with play/learning materials and joyful learning activities;
- Facilitate converge with ASHAs, ANMs, SSA and other relevant service providers at the village level;
- Facilitate in conducting feedback through ICDS accreditation systems and community public hearings;
- Facilitate proper maintenance of registers and monitoring formats;
- Monitor programme activities and assist in preparing monitoring reports; and
- Provide supervision for civil works in the villages/urban centre.

However, States / UTs may assign the above roles to either the VHSNC or ALMSC as per local context and efficiency in programme management.

Annexure XVIII

COMPARATIVE STATEMENT OF EXISTING AND APPROVED NORMS UNDER ICDS MISSION

COMPARATIVE STATEMENT OF EXISTING AND APPROVED NORMS UNDER ICDS MISSION

ITEM	EXISTING	APPROVED	SHARING PATTERN	ITEM SUB COMPONENTS
Supplementary Nutrition (SN)	(i) Children (6 months to 72 months) Rs. 4.00 per child per day	(i) Children (6 months to 72 months) Rs.6.00 per child per day	90:10 (NER States) 50:50 (Other States)	Food items cost, Transportation cost, Fuel cost for cooking, Micronutrient Fortification cost, Monitoring cost, Processing &Storage cost
	(ii) Severely malnourished Children (6 months-72 months) Rs. 6.00 per child per day	(ii) Severely malnourished Children (6 months-72 months) Rs. 9.00 per child per day		
	(iii) Pregnant women and Nursing mothers/ Adolescent Girls (under KSY) Rs. 5.00 per child per day	(iii) Pregnant women and Nursing mothers/ Adolescent Girls (under KSY) Rs. 7.00 per beneficiary per day		
Medicine Kit	AWC/Mini AWC Rs. 600/- per AWC per annum Rs. 300/- per Mini AWC per annum	AWC/Mini AWC Rs 1000/- per AWC per annum Rs 500/- per Mini AWC per annum	90:10	As per revised approved kit
Pre-school Education(PSE) Kit	AWC/ Mini AWC Rs. 1000/- per AWC per annum Rs. 500/- per Mini AWC per annum	AWC/ Mini AWC Rs. 3000/- per AWC per annum Rs. 1500/- per Mini AWC per annum	90:10	Puppets, Soft toy sets, Mirror and props for play, Strings & beads, Pre number cards, Shape cut outs, Pre reading/writing cards, Story flash cards, Wooden blocks, Clay/ Plasticine, Colour & paint brushes and Balls
Contingencies/ (Renamed as Admin Expenses)	State Cell (per state cell per annum) Rs. 1,20,000 (with less than 50 Projects) Rs. 1,60,000/-(with 50 to 200 Projects) Rs. 2,00,000/- (with more than 200 Projects)	State Cell No change	75:25	Electricity and water expenses, Minor repairs, Misc expenses not covered under other budget heads
	District Cell Rs. 1,00,000/- per district cell per annum	District Cell No change	75:25	Electricity and Water bills, Telephone expenses, Minor repairs, Internet Expenses and Misc expenses not covered under other budget heads
	Project Rs. 40,000/- per project per annum	Project Rs. 60,000/- per project per annum	75:25	
	AWC/ Mini AWC Rs. 600/- per AWC per annum Rs. 300/- per Mini AWC per annum	AWC/ Mini AWC Rs. 1000/- per AWC per annum Rs. 500/- per Mini AWC per annum	90:10	
IEC/IYCF	District Cell NIL	District Cell Rs 1,00,000/- per district cell per annum	75:25	
	Project Rs 60,000/- per project per annum	Project No Change	90:10	
	AWC/ Mini AWC Rs. 1,000/- per annum per operational AWC	AWC/ Mini AWC No Change	90:10	
Rent	National NIL	National Rs. 6,00,000/- per month for Training Resource Centre/ Mission Resource Centre at National level	100:0	Maximum cap for the rent norms is indicated. Approval would be given only after assessment by authorized agency of corresponding state (in correspondence with SoR)
	State Cell Rs. 10,000/- per month	State Cell NIL		

ITEM	EXISTING	APPROVED	SHARING PATTERN	ITEM SUB COMPONENTS
	District Cell NIL	District Cell NIL	-	
	Project Rural/Tribal - Rs. 30,000/- per project per annum Urban - Rs. 40,000/- per project per annum	Project Rs. 79,200/- per project per annum (Rs. 6,600/- per project per month)	75:25	
	AWC/Mini AWC Rs. 200/- per AWC per month in Rural/Tribal Projects. Rs. 750/- per AWC/per month in Urban Projects	AWC/Mini AWC Rural/Tribal - Rs. 750/- per AWC per month Urban – Rs. 3000/- per AWC per month Metropolitan - Rs. 6000/- per AWC per month	90:10	
Petrol, Oil and Lubricant (POL)	State Cell Rs. 1,20,000/- per vehicle per annum at State cell (where hired vehicle are not provided, NER States) Rs. 2,15,000/- per vehicle per annum at State cell (where hiring of vehicles is allowed; Other states)	State Cell No Change	75:25	POL includes the cost of fuel provided at different levels for field visits and official travel.
	District Cell Rs. 1,20,000/- per vehicle per annum at district level	District Cell Rs. 1,50,000/- per vehicle per annum at district level	75:25	
	Project Rs. 1,25,000/- per vehicle per annum at project level	Project Rs. 1,75,000/- per vehicle per annum at project level	75:25	
Purchase of vehicles (For NER states only)	State Cell Rs. 5,00,000 - 7,00,000/- per vehicle	State Cell Rs. 5,00,000 - 7,00,000/- per vehicle	90:10	Provision of purchase for NER states only within budgetary allocation (as per existing pattern)
Monitoring and Evaluation	AWC Rs. 500/- per operational AWC per annum Mini AWC Rs 100/- per operational Mini AWC per annum	AWC/ Mini AWC Rs 1000/- per operational AWC/ Mini AWC annum Rs 50/- per AWW for ICT	90:10	Printing of various records/registers, Monthly mobile recharge cost per AWW at each AWC/ Mini AWC
Equipment/ Furniture (Non-recurring – Once in 5 years)	National NIL	National - Rs 62 lakh for TRC, Mission Resource Centre and other requirements	100:0	Furniture for office staff, Computer/Laptop, Printer, Fax machine (figures are according to additional staff at each level)
	State Cell - Rs. 1,00,000/- (For less than 50 Projects) - Rs. 2,00,000/- (For more than 50 Projects)	State Cell - Rs. 5,00,000/- per state cell (For all states excluding UTs) - Rs. 2,00,000/- per cell (For UTs)	75:25	
	District Cell Rs. 1,50,000/-	District Cell Rs. 4,00,000/- per district cell	75:25	
	Project Rs. 1,50,000/- per project	Project Rs 2,00,000/- per project	75:25	
	AWC/ Mini AWC Rs. 5,000/- per AWC (Incl. weighing scales)	AWC/ Mini AWC Rs 7,000/- per AWC Rs 5,000/-per Mini AWC	90:10	Gas burner with connection, Utensils, Mat/ Carpet and other necessary equipments

ITEM	EXISTING	APPROVED	SHARING PATTERN	ITEM SUB COMPONENTS
Uniform	AWC/ Mini AWC Rs 200/- per Saree	AWC/ Mini AWC Rs 300/- per Saree	75:25	2 Sarees/ Uniform set for each AWW, AWW cum Nutrition Counsellor and AWH per annum
Badge	AWC/ Mini AWC Rs 25/- per badge	AWC/ Mini AWC No Change	75:25	1 Badge for each AWW, AWW cum Nutrition Counsellor and AWH per annum
AKBY	AWC/ Mini AWC Rs 100/- per beneficiary per annum (LIC)	No change	100:0	Premium paid by GoI against insurance of AWW/AWH
Fluid Fund	AWC/ Mini AWC Rs 1,000/- per AWC per annum	No change	90:10	For sudden requirements like referral arrangements, meeting up any shortage of medicines, utensils etc.
Weighing Scale	AWC/ Mini AWC Rs 500 per AWC per annum (only repair cost merged with Monitoring previously)	AWC/ Mini AWC Rs 5,000 per AWC/Mini AWC for replacement at 15% AWC per annum	90:10	Flat weighing machine, Suspended type weighing machine, Adult weighing machine
NEW ITEMS UNDER ICDS MISSION (FOR NER States Centre: State sharing ratio 90:10)				
ECCE Day	NIL	AWC/ Mini AWC Rs 1,000/- per AWC per annum	75:25	Parents meet, involvement of local artistes and craftsmen for making toys, community involvement etc
Grading & Accreditation	NIL	District Cell Rs. 2,50,000/- per district cell (twice in 5 years)	75:25	Grading and Accreditation of AWCs and other pre schools (ECCE beyond AWCs)
Construction of AWC Building	Rs 1,75,000/- per AWC Building (NER States only)	Rs 4,50,000/- per AWC Building (All States subject to total cap)	75:25	Total 2,00,000 buildings to be constructed in XII plan
Maintenance of AWC Building	AWC/ Mini AWC NIL	AWC/ Mini AWC Rs 3,000/- per AWC per annum (For owned AWCs)	75:25	Applicable to Govt. owned and non rental ICDS buildings
Up-gradation of AWC Building	AWC/ Mini AWC NIL	AWC/ Mini AWC Rs 1,00,000/- per AWC Building including additional room for AWC cum Creche (All States subject to total cap)	75:25	Maximum ceiling is given while allocation will be based on APIP approval
Sneha Shivir	AWC/ Mini AWC NIL	AWC/ Mini AWC Rs 5,950/- per camp over a cluster of 4 AWCs (3 camps per annum)	75:25	Nutrition cost, Medical facilities and Misc camp requirements (200 HB districts)
UNTIED FUND - AWC Cum Creche	AWC NIL	AWC Rs 18,000/- per AWC (non-recurring cost, once in 5 years)	75:25	Cost of cradles, additional bed and bed linen (Establishment cost)
	AWC NIL	AWC Rs 3000/- per worker per month	75:25	Honorarium to Additional Creche Worker
	AWC NIL	AWC Rs 18,000/- per AWC per annum	75:25	Care items, soft toys, cleaning materials, cost of additional evening snacks to children etc.
	AWC NIL	AWC (per AWC per month) Rural/Tribal – Rs 500/- Urban – Rs 1,000/- Metropolitan – Rs 2,000/-	75:25	Additional Rent for additional space required for Creche purpose only
UNTIED FUND - Additional AWW cum Nutrition Counsellor	AWC NIL	AWC Rs 3,000/- per worker month	75:25	Honorarium of additional worker (200 HB districts) on demand from states on approval of APIP
UNTIED FUND - Honorarium of AWW at Mini AWC	Mini AWC Rs 1,500/- per worker per month	Mini AWC Rs 2,250/- per worker per month	90:10	Increment of Rs 750/- per worker per month (Separate AA would be issued)
UNTIED FUND - Link Worker	AWC/ Mini AWC NIL	AWC/ Mini AWC Rs 750/- per worker per month	75:25	One worker over a cluster of 4 AWCs in remaining 440 districts (Need based/ on demand approval through APIP)
UNTIED FUND - Children with Special Needs	AWC/ Mini AWC NIL	AWC/ Mini AWC Rs 3,000/- per children	75:25	Subject to total cap within the budgetary allocation and Subject to conditions as per guidelines

NOTE: Existing norms will continue to remain wherever no change has been made
Revised Training norms will be as per guidelines

COST OF ICDS MISSION AT NATIONAL, STATE, DISTRICT, BLOCK / PROJECT AND VILLAGE LEVELS

YEAR-WISE BREAK-UP SUMMARY SHEET (Rs in Cr)							
Sl. No.	Particulars	XII PLAN					Plan Total (GOI)
		Year - 1	Year -2	Year - 3	Year - 4	Year -5	
1	Recurring	16,454	21,129	24,543	25,703	25,733	1,13,562
2	Non Recurring	88	898	1,990	2,750	4,292	10,018
	TOTAL	16,542	22,027	26,533	28,454	30,025	1,23,580

Sl. No.	RECURRING Budget Heads	XII PLAN					Plan Total (GOI)
		Year - 1	Year -2	Year - 3	Year - 4	Year -5	
1	Salaries	2,304	3,177	3,783	3,783	3,783	16,829
2	Honoraria	5,715	5,890	6,593	6,593	6,593	31,386
3	SNP	6,635	7,927	9,151	9,457	9,457	42,626
4	Rent	217	833	738	615	479	2,883
5	PSE Kit	117	360	360	360	360	1,559
6	Medicine kit	68	126	126	126	126	572
7	Flexi Fund	122	126	126	126	126	626
8	Uniform and Badges	122	135	140	146	146	689
9	Monitoring	140	307	268	258	274	1,247
10	Hiring and POL	120	122	122	122	122	607
11	IEC (including IYCF activities)	169	174	174	174	174	864
12	Admin Expenses	161	165	165	165	165	820
13	Rewards	4	4	4	4	4	18
14	AKBY	31	31	31	31	31	155
15	Training	116	174	232	290	348	1,159
16	ECCE	102	210	240	272	272	1,095
17	Sneha Shivir	194	194	194	194	194	970
18	Grading & Accreditation	-	16	-	-	16	32
19	Voluntary action, NGO, Innovations etc	58	58	464	811	927	2,318
20	Untied fund for Creche	0	147	266	459	419	1,291
21	Untied fund for link worker	0	163	163	163	163	651
22	Untied fund for additional AWW	0	705	1,058	1,411	1,411	4,585
23	Management cost	58	87	145	145	145	580
	Total	16,454	21,129	24,543	25,703	25,733	1,13,562

Sl. No.	NON RECURRING Budget Heads	XII PLAN					Plan Total (GOI)
		Year - 1	Year -2	Year - 3	Year - 4	Year -5	
1	Construction of AWCs	0	343	1,199	1,884	3,426	6,851
4	AWC Upgradation & Maintenance cost	0	330	480	555	555	1,920
3	Weighing scales replacement @ 15% per annum	0	95	95	95	95	378
6	Purchase of vehicles	2	2	2	2	2	10
5	Cost of establishment	86	129	215	215	215	859
	Total	**88**	**898**	**1,990**	**2,750**	**4,292**	**10,018**

NATIONAL LEVEL - BUDGET SHEET (Rs. in Cr)

Sl. No.	Particulars	Heads	Sharing Pattern (Centre: State)	GoI Share					
				Year-1	Year-2	Year-3	Year-4	Year-5	Total
	Non-Recurring Heads				Non-Recurring Expenditure				
1	Office equipments for National ICDS Mission Resource Centre (NIMRC) & Training Resource Centre (TRC)	Equipments	100:0	0.06	0.09	0.16	0.16	0.16	0.62
	Total - A			0.06	0.09	0.16	0.16	0.16	0.62
	Recurring Heads				Recurring Expenditure				
2	New staff salary (Regular/Contractual Staff) at National level including NIMRC and TRC	Salary	100:0	1	8	8	8	8	32
3	Office space for additional staff and NIMRC (including ECCE cell, Training cell and M&E cell) with increase of 10% every year	Rent	100:0	0	1	1	1	1	3
4	Administrative expenses (Taxi, Staff hiring for clerical work) subject to actuals with a maximum limit upto 20 lakhs per annum	Admin	100:0	-	0.20	0.20	0.20	0.20	1
5	Monitoring cost (Online web portal, Mid term and End term evaluation, PRI line and server installation)	ME	100:0	0.04	56	25	9	25	114
6	Grading & Accreditation of AWC, ICDS projects, District @ Rs 1,50,000/- per district cell and for other pre schools @ Rs 1,00,000/- per district cell	Grading	75:25	-	16	-	-	16	32
7	Rewards for staff at each level	Reward	100:0	3.6	3.6	3.6	3.6	3.6	18
8	IEC and Advocacy (Lumpsum) at National level (including ECCE, New interventions etc)	IEC	100:0	10	10	10	10	10	50
9	GOI contribution to LIC for Anganwadi Karyakartn Bima Yojana (AKBY) @ Rs 100/- per AWW/AWH per annum (incl additional AWW)	AKBY	100:0	31	31	31	31	31	155
10	**UNTIED FUND**								
10A	Untied Fund for Link Worker like ASHA, required over a cluster of 4 AWCs @ Rs 750/- per month	Link Worker	75:25	0	163	163	163	163	651
10B	Untied fund for additional AWW in 200 high burden districts @ Rs 3000 per month (as per phasing plan)	Add. AWW	75:25	0	705	1,058	1,411	1,411	4,585
10C	Untied Fund for AWC cum Creche (5% of total AWC to be transformed into AWC cum Creche)	Creche	75:25	0	147	266	459	419	1,291
10D	Untied for Innovation, Best practices & Voluntary action, implementation through NGOs, fund for facilitating referrals for children with Disabilities or children with special needs	Innovation	75:25	58	58	464	811	927	2,318
10E	Management Cost	Mgmt	75:25	58	87	145	148	145	580
	Total-B			161	1,285	2,174	3,052	3,159	9,830
	Total A+B			161	1,285	2,174	3,052	3,159	9,831

STATE LEVEL - BUDGET SHEET (Rs. In Cr)

Sl. No.	Particulars	Heads	Sharing Pattern (Centre: State)	GoI Share					
				Year-1	Year-2	Year-3	Year-4	Year-5	Total
	Non-Recurring Heads			Non-Recurring Expenditure					
1	Office equipments for State Mission directorate & State Mission Resource Centre @ Rs 5 lakh/ state cell and @ Rs 2 lakh/ UT	Equipments	75:25	0.14	0.21	0.35	0.35	0.35	1.39
2	Construction (OTHER STATES) of 1.85 lakh AWCs @ Rs 4.5 lakh per AWC building (Year-1: 0; Year-2: 18,500; Year-3: 46,250; Year-4: 55,500; Year-5: 64,750)	Construction	75:25	0	312	1,093	1,717	3,122	6,244
3	Construction (NER STATES) of 15,000 AWCs @ Rs 4.5 lakh per AWC building (Year-1: 0; Year-2: 1,500; Year-3: 3,750; Year-4: 4,500; Year-5: 5,250)	Construction	90:10	0	30	106	167	304	608
4	Upgradation of 2.0 lakh AWCs (in a phased manner: Year-2: 30000; Year-3: 50000; Year-4: 60000; Year-5: 60000) for making them child friendly @ Rs 1 lakh per unit	Upgradation	75:25	0	225	375	450	450	1,500
5	Maintenance of 7.0 lakh AWCs for making them child friendly @ Rs 2000 per unit per annum	Maintenance	75:25	0	105	105	105	105	420
6	Weighing scale (Baby, Adult and Suspended type) replacement/repair cost @ Rs 5,000/- per AWC/ Mini AWC considering replacement at 15% AWCs (w.r.t. total AWCs) each year	Weighing scale	90:10	0	95	95	95	95	378
7	Purchase of 200 vehicles for projects in a phased manner @ Rs 6,00,000/- per vehicle for NER states only (as per existing norms)	Vehicles	90:10	2	2	2	2	2	10
	Total - A			2	769	1,776	2,536	4,077	9,161
	Recurring Heads			Recurring Expenditure					
8	Existing staff salary at State cells (Year-1: 80% actualization; Year-2: 90% actualization)	Salary	90:10	28	32	36	36	36	167
9	New staff (Regular/Contractual Staff) salary at State Mission Directorates	Salary	75:25	0	67	97	97	97	379
10	POL cost for mobility @ Rs 1.75 lakh per state cell per annum	POL	75:25	0.46	0.46	0.46	0.46	0.46	2
11	Administrative Expenses (water electricity postage stationary telephone, xeroxing etc.) subject to actuals @ Rs 1,20,000/- per annum for State with less than 50 projects, @ Rs 1,60,000/- per annum for States with 51-200 projects and @ Rs 2,00,000/- per annumfor States with more than 200 projects	Admin	75:25	0.51	0.51	0.51	0.51	0.51	3
12	Cost of printing of ECCE activity book for 3.7 Cr children, expert team on call, consultations for drafting policy framework and printing of child assessment card	ECCE	75:25	0	105	135	167	167	573
13	Monitoring cost (Printing cost for MCP card and Data entry of MPRs)	ME	90:10	0	23	9	9	9	50
14	Training cost for all levels (incl. training of additional AWW)	Training	90:10	116	174	232	290	348	1,159
	Total-B			146	421	510	599	657	2,333
	Total A+B			148	1,190	2,286	3,135	4,735	11,494

DISTRICT LEVEL - BUDGET SHEET (Rs. In Cr)									
Sl. No.	Particulars	Heads	Sharing Pattern (Centre: State)	GoI Share					
				Year-1	Year-2	Year-3	Year-4	Year-5	Total
	Non-Recurring Heads			Non-Recurring Expenditure					
1	Office equipments for District cell @ Rs 4 lakh per cell	Equipments	75:25	2	3	4	4	4	17
	Total - A			2	3	4	4	4	17
	Recurring Heads			Recurring Expenditure					
2	Existing staff salary at District cells (Year-1: 80% actualization; Year-2: 90% actualization)	Salary	90:10	140	175	194	194	194	899
3	New staff (Regular/Contractual Staff) salary at District Mission Team	Salary	75:25	-	68	109	109	109	397
4	Administrative Expenses (water, electricity, postage, stationary, telephone, xeroxing etc.) subject to actuals @ Rs 1,00,000/- per annum per district cell	Admin	75:25	5.2	5.8	5.8	5.8	5.8	28
5	POL cost for mobility @ Rs 1.50 lakh per district cell per annum	POL	75:25	6.5	7.2	7.2	7.2	7.2	35
6	IEC and Advocacy (including Breastfeeding promotion campaigns for IYCF) @ Rs 1,00,000/- per district cell per annum	IEC	75:25	5.2	5.8	5.8	5.8	5.8	28
	Total-B			157	262	329	329	329	1,387
	Total A+B			159	265	327	327	327	1,404

PROJECT LEVEL - BUDGET SHEET (Rs. In Cr)									
Sl. No.	Particulars	Heads	Sharing Pattern (Centre: State)	GoI Share					
				Year-1	Year-2	Year-3	Year-4	Year-5	Total
	Non-Recurring Heads			Non-Recurring Expenditure					
1	Office equipments for Project team @ Rs 2 lakh per project	Equipments	75:25	10	14	24	24	24	96
	Total - A			10	14	24	24	24	96
	Recurring Heads			Recurring Expenditure					
2	Existing staff salary at Project Level (Year-1: 80% actualization; Year-2: 90% actualization)	Salary	90:10	2,134	2,422	2,691	2,691	2,691	12,628
3	New staff (Regular/Contractual Staff) salary at Project level	Salary	75:25	-	385	647	647	647	2,326
4	Rent for block office premises @ Rs 79,200 per annum (Year-1: Budgeted with existing norm of Rs 40,000 p.a.)	Rent	75:25	21	42	42	42	42	191
5	Administrative Expenses (water, electricity, postage, telephone, xeroxing etc.) subject to actuals @ Rs 60,000/- per annum per project	Admin	75:25	38	38	38	38	38	191
6	IEC and Advocacy (including Breastfeeding promotion campaigns for IYCF) @ Rs 50,000/- per projetc per annum	IEC	90:10	32	32	32	32	32	159
7	POL cost for mobility @ Rs 2.15 lakh per project per annum which includes cost of hiring a vehicle	POL	75:25	113	114	114	114	114	570
	Total-B			2,338	3,033	3,565	3,565	3,565	16,065
	Total A+B			2,347	3,047	3,589	3,589	3,589	16,160

AWC/MINI AWC LEVEL - BUDGET SHEET (Rs. In Cr)									
Sl. No.	Particulars	Heads	Sharing Pattern (Centre: State)	GoI Share					
				Year-1	Year-2	Year-3	Year-4	Year-5	Total
	Non-Recurring Heads			Non Recurring Expenditure					
1	Requirements at AWCs/ Mini AWCs like Utensils, Furniture, Cooking stove, Carpet etc. @ Rs 7,000/ AWC and @ Rs 5,000/ Mini AWC	Equipments	90:10	74	112	186	186	186	744
	Total - A			74	112	186	186	186	744
	Recurring Heads			Recurring Expenditure					
2	Honorarium of existing AWW and AWH (Year-1: 90% actualization; Year-2: 90% actualization)	Hon	90:10	5,715	5,890	6,593	6,593	6,593	31,386
3	SNP at AWC/ Mini AWC (As per revised norms in selected districts- Year-1: 200 districts (Budgeted for 75 days); Year-2: 400 districts; Year-3 onwards: 640 districts (Full scale)); Remaining districts till Year-3 will continue to operate with existing norm.	SNP	50:50; 90:10 (NER)	6,635	7,927	9,151	9,457	9,457	42,626
4	Rent of AWC Buildings @ Rs 750/- per month for Rural/ Tribal, @ Rs 3000/- per month for Urban and @ Rs 5000/- for AWCs in Metropolitans (AWCs phasing in proportion with construction)	Rent	90:10	196	790	695	572	436	2,689
5	Administrative Expenses (water,electricity,postage, xeroxing etc.) Subject to actuals @ Rs 1000/- per AWC per annum and @ Rs.500/- per Mini AWC per annum	Admin	90:10	117	120	120	120	120	598
6	Cost of conducting ECCE day at each AWC in a month (Including Parents meet, involvement of local artisians and craftsmen for making toys, community involvement etc) @ Rs 1000/- per AWC/ Mini AWC per annum	ECCE	75:25	102	105	105	105	105	522
7	IEC @ Rs 1,000 per AWC/ Mini AWC per annum	IEC	90:10	122	126	126	126	126	626
8	Monitoring @ Rs 1,000/- per AWC per annum and @ Rs 500/- per Mini AWC per annum which includes cost of stattionary required for rolling out of revised MIS. (Incl. ICT cost)	ME	90:10	140	228	234	240	240	1,083
9	Uniform (2 Sarees/- for each AWW incl. additional AWW & AWH) @ Rs 300/- per saree and badges (1 badge for each AWW incl. additional AWW and AWH) @ Rs 25/- per badge per person per annum	Uniform	75:25	122	135	140	146	146	689
10	Flexi Fund @ Rs 1,000/- per annum for each AWC/ Mini AWC	Flexi Fund	90:10	122	126	126	126	126	626
11	Medicine Kit @ Rs 1,000/- per kit p.a at each AWC & @ Rs 500/- per kit per annum at each Mini AWC	Med kit	90:10	68	126	126	126	126	572
12	PSE Kit @Rs 3,000/- per kit p.a at each AWC and @ Rs 1,500/- per kit per annum at each Mini AWC	PSE kit	90:10	117	360	360	360	360	1,559
13	Sneha Shivir (3 roends per annum) over a cluster of 5 AWCs in 200 HB districts	Sneha Shivir	75:25	194	194	194	194	194	970
	Total-B			13,652	16,128	17,972	18,165	18,029	83,946
	Total A+B			13,726	16,240	18,158	18,351	18,215	84,690

Annexure XX

GUIDELINES FOR CONSTITUTION OF MONITORING & REVIEW COMMITTEE AT DIFFERENT LEVEL TO REVIEW PROGRESS IN IMPLEMENTATION OF ICDS SCHEME ISSUED BY MWCD ON MARCH 31, 2011

F.NO. 16-8/ 2010-ME
GOVERNMENT OF INDIA
MINISTRY OF WOMEN AND CHILD DEVELOPMENT
(ICDS M & E UNIT)

Shastri Bhavan, New Dlehi-110001
Dated: 31 March 2011

To

1. Chief Secretaries in all States/ Principal Advisors to Administrators in all UTs
2. Secretaries dealing with ICDS Scheme - 35 States/ UTs
3. Directors dealing with ICDS Scheme - 35 States/ UTs

Subject: Guidelines for Constitution of Monitoring & Review Committees at different levels to review progress in implementation of the ICDS Scheme—*Regarding*.

Sir/ Madam,

1) The Government of India (GoI) has taken several measures for strengthening the monitoring and supervision mechanism in the Integrated Child Development Services (ICDS) Scheme for its better and effective implementation. The Scheme has a Management Information System (MIS) through which monthly progress reports (MPRs) on Key programme indicators are generates by each of the Anganwadi Workers (AWWs) at the AWC level and by the Child Development Project Officers (CDPOs) at the block/ project level. The MIS in ICDS is under final stage of revision by the Ministry of Women and Child Development (MWCD) for making it more results-focused and also web-enabled.

2) In the past, guidelines on developing Community Based Monitoring Mechanism (CBMM) were issued by GoI [*vide* F.NO. NI/No. 12-11/93 CD-I dated 20.1.1994] to ensure monitoring of the Scheme at the grass roots level by the community themselves. The CBMM envisaged constitution of *Bal Vikas Mahila Samitis* at the village, block and district levels.

3) Recently, the MWCD has issued guidelines [*vide* F.NO. 16-3/2004-ME (Pt) dated 22.10.2010] on monitoring and supervision visits to AWCs/projects by officials from various levels and also involvement of PRIs in monitoring of AWC activities. All these measures are directed towards strengthening the existing monitoring and supervision mechanism under ICDS.

4) In the context of universalisation of ICDS with focus on improved quality in delivery of services and also proposed strengthening and re-structuring of ICDS, it is now proposed to put in place a **5-tier monitoring and review mechanism** at the central level and up to AWC level. This is also proposed to rationalize and harmonize of such mechanisms which are in vague in several States/ UTs with and objective of strengthening the co-ordination and convergence with the line departments and also monitoring and reviewing the progress made in the implementation of the Scheme.

5) Composition and key roles of such Committees at different levels are outlined in the following sections. States/ UTs may make adjustments and appropriate changes in the designations of Officers/ functionaries at various levels as per local conditions and institutional structures.

I. NATIONAL LEVEL MONITORING & REVIEW COMMITTEE (NLMRC) ON ICDS

A. Composition

i.	Secretary, Ministry of Women & Child Development	Chairperson
ii.	Principal Advisor, WCD, Planning Commission	Member
iii.	Secretary, Ministry of Health and Family Welfare	Member
iv.	Secretary, Ministry of Human Resource Development	Member
v.	Secretary, Deptt. of Food	Member
vi.	Secretary, Ministry of Rural Development	Member
vii.	Secretary, Ministry of Minority Affairs	Member
viii.	Secretary, Deptt. of Drinking Water Supply & Sanitation	Member
ix.	Secretary, Ministry of Panchayati Raj	Member
x.	Secretaries from any 5 States from each region *(on rotation basis)*	Member
xi.	Additional Secretary & Financial Adviser, MWCD	Member
xii.	Director, NIPCCD, New Delhi	Member
xiii.	Director, National Institute of Nutrition, Hyderabad	Member
xiv.	Joint Secretary (ICDS), MWCD	Member
xv.	Director (ICDS), MWCD	Member Secretary

Note:

- Two Experts on child development/ nutrition/ ECE and representatives from the Development Partners may be called to the meeting as Special Invitee.
- The Committee shall meet once in six months or as and when required at the direction of the Chairperson.

B. Roles

The National level Committee will monitor and review the following key issues and recommend appropriate actions:

i. Overall progress made by the States/ UTs in ICDS with regard to:

- *Universalization of ICDS—status of operationalization of projects/AWCs;*
- *Implementation of State Annual Programme Implementation Plans (APIPs);*
- *Nutritional status of children below 6 years- weighment, roll out of WHO growth standards and joint mother and child protection cards; reduction in proportion of underweight and severely undernourished children*
- *Performance of pre-school education.*

ii. Convergence and coordination with other programmes:

- Health/ NRHM: *Issues relating to micronutrient supplementation and fortification, management of severely malnourished children, health related service delivery at AWC or at VHNDs - immunization, antenatal check-ups of pregnant women, supply of Vit-A, de-worming and IFA tablets, referral services, health check-ups; Functioning of VHSC etc;*

- Water & Sanitation: *Provision of potable water and sanitation Campaign and Rajiv Gandhi National Drinking Water Mission;*
- *Sarva Siksha Abhiyan (SSA): Co-location of AWCs with primary schools, integration of PSE in AWCs, support form SSA, etc.*
- *PRIs: Involvement of PRIs and Community in overseeing and coordination the delivery of services at AWC.*

iii. Status and number of State/ UT-wise coverage of SC/ST and minority concentrated habitations;

iv. Manpower vacancies at the field level and States action plan thereon;

v. Status of State/ UT-wise supply of essential items to AWCs – Medicine and PSE kits, weighing scales, joint MCP card, WHO Growth monitoring charts, etc.

vi. Leveraging funds for construction of AWC Buildings with NREGA, Multi-Sectoral Development Programme (MSDP), BRGF, IADP, MPLADS, etc;

vii. Status of arrangement for supplementary nutrition; status of release and lifting of food grains under the Wheat Based Nutrition Programmed (WBNP);

viii Identification of local/ community level innovative practices which yielded results and exploration of the possibility of scaling up of the same;

ix. Review of reposts of the field visits undertaken by MWCD/Planning Commission etc., along with assessment/ evaluation reports on ICDS (if any) and suggesting corrective active;

x. Financial management: funds flow mechanism, utilization of funds, estimated requirements etc;

II. STATE LEVEL MONITORING & REVIEW COMMITTEE (SLMRC) ON ICDS

IIA. Composition

i.	Chief Secretary	Chairperson
ii.	Secretary, Planning	Member
iii.	Secretary, Finance	Member
iv.	Secretary, Health & Family Welfare	Member
v.	Secretary, Rural Development	Member
vi.	Secretary, Panchayti Raj Institution	Member
vii.	Secretary, Drinking Water Supply & Sanitation	Member
viii.	Secretary, Education	Member
ix.	Secretary, Agriculture	Member
x.	Secretary, Food	Member
xi.	Secretary, WCD *(in charge of ICDS)*	Member
xii.	5 Members of Parliament (MP)*	Member
xiii	5 Members of Legislative Assembly (MLAs)**	Member
xiv.	State Mission Director, National Rural Health Mission	Member
xv.	Regional Director, NIPCCD *(from the region)*	Member
xvi.	Food & Nutrition Board, State/ Regional Office	Member
xvii.	Principal, Middle level Training Centre (MLTC)**	Member
xviii.	Principal, Anganwadi Worker Training Centre (AWTC**)	Member
xix.	Director, WCD *(in-charge of ICDS)*	Member-Secretary

Guidelines for Constitution of Monitoring & Review Committees in ICDS Programme

- *Members of Parliament and MLAs in the State/UT would be Members of the Committee on rotational basis for one year and their selection shall be such as to give representation to as many political parties as possible.*
- *On rotation basis in each year;*

NOTE:

- Experts/ Representatives from the prominent Institutions and Development Partners, who are working in the State with ICDS programme, may also be invited as Special Invitees.
- The Committee will meet every six months or earlier as and when required on the notice of the Chairperson. The Chief Secretary will, however chair the meeting once in six months.

BB. Roles

The State level Committee will monitor and review the following key issues and recommend appropriate actions:

i. Overall progress with regard to:

- *Universalization of ICDS—status of operationalization of sanctioned projects/AWCs, coverage of all habitations/ hamlets in the State and factors coming in their way;*
- *Preparation and implementation of State Annual Programme Implementation Plan (APIP) in ICDS;*
- *Status of nutritional status of children below 6 years – weighment, roll out of WHO growth standards and joint mother and child protection cards; district-wise comparison of proportion of moderate and severely undernourished children; Measures being taken for addressing them and progress thereon on half yearly basis;*
- *Performance of non-formal pre-school education provided at AWCs Methodology and participation of children in non-formal pre-school education at AWCS; use of locally developed learning on play materials, toy bank and other initiatives;*
- *Identification of low performing districts in ICDS and factors responsible for it.*

ii. Convergence with line departments/ programmes:

- Health/ NRHM: *Status of full immunization at AWCs, provision of ante-natal and health check-ups, referral services and supply of micronutrients (Vit-A, IFA, de-worming tablet) to AWCs; Functioning of VHND, VHSC and promotion of IYCF.*
- Water & Sanitation: *Provision of potable water and sanitation facility at AWCs through convergence with Total Sanitation Campaign and Rajiv Gandhi National Drinking Water Mission or any other schemes of State Govt;*
- *Sarva Siksha Abhiyan (SSA): Co-location of AWCs with primary schools, integration of PSE in AWCs, support form SSA, etc.*
- *PRIs: Involvement of PRIs and Community in overseeing and coordination the delivery of services at AWCs;*

iii. Coverage in general and, specifically, of SC/ST/Minority habitations/ beneficiaries against the surveyed population;

iv. Other issues relating to programme implementation and actions thereon with respect to:

a. *Regularity of functioning of AWCs—overall and specifically, those in SC/ST/minority concentrated habitation;*

b. *Manpower vacancies at AWW/Supervisor/CDPO level and their training status;*

c. *Fund flow and timely payment of honoraria to AWWs/AWHs;*

d. *Availability of funds for POL, contingency etc at district/block level and flexi-fund at AWC level as per revised norms;*

e. *Disruptions in supply of supplementary nutrition at AWCs as per revised norms and reasons for it, such as method of delivery, engagement of SHGs etc;*

f. *Arrangement for fortification of supplementary food and use of iodized salt at AWCs;*

g. *Methodology and participation of children is non-formal pre-school education at AWCs;*

h. *Procurement and supply/availability of essential items to AWCs-medicine and PSE kits, weighing scales, joint MCP card, WHO Growth Charts, etc;*

i. *Monitoring and supervision visits by officials at different levels as per norms;*

j. *Engagement of ICDS functionaries in no-ICDS activities and arrangements to desist them from it;*

k. *Any other matter as may be relevant for improved implementation;*

v. Improving the AWC infrastructure: Construction of AWC buildings by leveraging funds from under different schemes/ programmes, such as BRGF, MSDP, MPLADs etc.;

vi. Use of IEC in creating awareness about ICDS services/health and nutrition issues and possibility of convergence with IEC activities under other schemes/ programmes.

III. DISTRICT LEVEL MONITORING & REVIEW COMMITTEE (DLMRC) ON ICDS

IIIA. Composition

i.	District Magistrate/Collector/Dy. Commissioner	Chairperson
ii.	Chief Executive Officer (CEO)	Vice-Chairperson
iii.	District Development Officer, *Zilla Parishad*	Member
iv.	Chief Medical Officer, Health & Family Welfare	Member
v.	District Planning Officer	Member
vi.	District Social Welfare Officer	Member
vii.	District Agriculture/Horticulture Officers	Member
viii.	District Officer, Rural Development/MNREGA	Member
ix.	Executive Engineer, PHED	Member
x.	District Education Officer	Member
xi.	Member of Parliament (MP) in the District	Member
xii.	Members of Legislative Assembly (MLAs)	Member
xiii.	Principal Middle Level Training Centre (MLTC)*	
xiv.	Principals, AWTCs *(any 2)**	Member
xv.	Field Unit of Food & Nutrition Board	Member
xvi.	CDPOs *(any 3)**	Member
xvii.	District Programme Officer (ICDS)	Member Secretary

❖ *On rotation basis in each year*

NOTE: The Committee will meet *at least* once in a quarter or as when required on the notice of the chairperson and will submit its review to the Chief Secretary/ Secretary (WCD) clearly outlining actions taken at the district level and support required from the State Govt.

Guidelines for Constitution of Monitoring & Review Committees in ICDS Programme

IIIB. Roles

The District level Committee will monitor and review block/ project-wise progress of implementation of the Scheme and suggest/ take appropriate corrective actions with regards to following issues:

i. Overall progress in implementation with regard to :

a) ***Status of operationalization*** *of all sanctioned projects/ AWCs, coverage of all habitations/ hamlets in the district, especially SC/ST and minority concentrated and remote areas;*

b) ***Coverage of beneficiaries:*** *Block-wise analysis of registered vs. actual beneficiaries for supplementary nutrition and pre-school education at AWCs as against surveyed population;*

c) ***Regularity in supply and quality of supplementary nutrition*** *at AWCs as provision of take surveyed home ration, morning snacks and hot cooked meals for stipulated number of days in a month and block-wise comparison of feeding efficiency;*

d) ***Nutritional status of children 0-3 years and 3-6 years*** *– weighment, roll out of WHO growth standards and joint mother and child protection cards; block-wise comparison of proportion of moderate and severely undernourished children; Measures being taken for addressing them and progress thereon on half yearly basis;*

e) ***Performance of non-formal pre-school provided at AWCs;***

ii. Coordination and convergence with line departments/programmes:

a. Health/NRHM: *Immunization of children at AWCs, ante-natal and health check-ups, referral services and supply of micronutrients (Vit-A, IFA, de-worming tablet) to AWCs; Functioning of VHSC, VHND and promotion of IYCF; joint visits of health and ICDS functionaries to AWCs;*

b. **Water & Sanitation:** *Provision of potable water and sanitation facility at AWCs;*

c ***Sarva Siksha Abhiyan (SSA):*** *Co-location of AWCs with primary schools, integration of PSE in AWCs, support from SSA, etc.*

d ***PRIs:*** *Involvement of PRIs and community in overseeing and coordinating the delivery of services at AWCs;*

iii. Other issues relating to programme implementation and actions thereon with respect to:

a) *Regularity of functioning of AWCs—overall and specifically, those in SC/ST/minority concentrated habitations;*

b) *Manpower vacancies at AWW/Supervisor/CDPO level and training status of functionaries;*

c) *Payment of honoraria to AWWs/AWHs and travelling allowances to Supervisor;*

d) *AWC infrastructure: Construction of AWC buildings through convergence with other scheme/programmes;*

e) *Supply of essential items to AWC – medicine and PSE kits, weighing scales, joint MCP card, WHO Growth Chart, etc;*

f) *Availability of funds for POL, contingency etc at district/block level and flexi fund at AWC level as per the revised norms;*

g) *Mobility of CDPOs/Supervisors—availability of vehicles and non requisitioning of programme related vehicles;*

h) *Monitoring and supervision visits by CDPOs/Supervisors to AWCs as per norms and submission of reports;*

i) *Method (s) of delivery of supplementary food at AWCs – engagement of SHGs and use of Iodized salt at AWCs and addition of leafy vegetables;*

j) *Methodology used and participation of children in non-formal pre-school education at AWCs; use of locally developed learning and play materials, toy bank and other initiatives;*

k) *Engagement of ICDS functionaries in non-ICDS activities and arrangements to desist them from it;*

l) *Identification of low performing blocks in ICDS implementation and factors responsible for it;*

m) *Any other matter as may be relevant for improved implementation.*

iv. *Financial issues:* Fund flow and status of component-wise allocation and expenditures during the reported period and adherence to revised financial norms prescribed by GoI;

v. *Complaints/grievance redressal mechanism:* Actions on the complaints received from individuals, community, PRIs, etc regarding ICDS services such as regularity in AWC functioning, quality of supplementary nutrition, etc and ICDS functionaries;

vi. *IEC:* Preparation and undertaking of IEC action plan on issues like location of AWCs, service available under ICDS, entitlement of beneficiaries, grievances redressal mechanism, etc;

Note: The following sources of information may be used for the review meeting:

a. Minutes and reports of the Block Level Monitoring Committees;

b. Analysis of Block Monthly Progress Reports (MPRs) and Block Annual Status Reports (ASRs);

c. Reports of field visits by Members of the Committee, and other officials in the district and any evaluation/ assessment report; and

d. Reports from the public/media (if any).

IV. BLOCK LEVEL MONITORING COMMITTEE (BLMC) ON ICDS

IVA. Composition

i.	Sub Divisional Magistrate (SDM)	Chairperson
ii.	Block Development Officer/TDO	Vice-chairperson
iii.	*Block representative of Health (BMO/MO in charge PHC/CHC)*	Member
iv.	*Block representative of* Education *(Block Education officer/Dy. Inspector of School/in charge of SSA)*	Member
v.	*Block Extension officers* of Agriculture/Horticulture	Member
vi.	Representative of Block/*Nagar/Taluka Panchayat*	Member
vii.	Principal, Anganwadi Training Centre*	Member
viii.	Representatives, local NGOs (2)	Member
ix.	CDPO	Member

* *if there is any.*

Note:

- The Committee will meet once in a quarter and will submit its report to the District Committee with a copy to the State Directorate of ICDS
- Representation of level of officials from concerned departments at the block level in the Block level Committee may be deemed fit by State Govt.

- Representatives of Animal Husbandry/Dairy/Fishery etc., may be invited as required
- 2-3 Supervisor (ICDS) in the block may be invited to meeting on rotation basis.

IV. 8. Roles

The Block level Committee will monitor and review the follpwing issues and suggest/take appropriate acitons:

I. Overall progress in implementation with regard to :

a) Coverage of all habitation/hamlets in the block, especially in SC/ST and minority concentrated and remote areas;

b) Coverage of beneficiaries: Sector-wise analysis of registered vs. actual beneficiaries for supplementary nutrition and pre-school education at AWCs as against surveyed population;

c) Quality of supplementary nutrition;

d) Nutritional status of children 0-3 years and 3-6 years – weighment, roll out of WHO growth standards and joint mother and child protection cards; sector-wise comparison of proportion of moderate and severely undernourished children; Measures being taken for addressing them and progress there on half yearly basis;

e) No. of AWCs providing take home ration, morning snacks and hot cooked meals for more than 21 days in the reporting month;

f) Number of AWCs which organized the monthly Village and Health Nutrition Days (VHNDs) and details of activities undertaken during VHNDs.

II. Coordination and convergence with line departments/programmes:

a) Health/NRHM: *Joint planning and implementation of timely immunization of children at AWCs, ante-natal and health check-up, referral services and supply of micronutrients (Vit-A, IFA, de-worming tablet) to AWCs; Functioning of VHND And VHSC and promotion of IYCF; planned visits of ANM to AWCs;*

b) Water & Sanitation: *Provision of potable water and sanitation facility at AWCs;*

c) PRIs: *Involvement of PRIs and community in overseeing and coordinating the delivery of services at AWCs*

III. Other issues relating to programme implementation and action s thereon with respect to:

a) Regularity of functioning of AWCs – overall, and specifically, those in SC/ST/minority concentrated habitations and submission of MPRs by. AWWs;

b) Manpower vacancies at AWW/Supervisor/CDPO level and their training status;

c) Payment of honoraria to AWWs/AWHs and travelling allowances to Supervisors;

d) AWC infrastructure: Construction of AWC buildings through convergence with other schemes/programmes;

e) Status of supply of all essential items to AWCs (Medicine and PSE kits, weighing scales, joint MCP card, WHO Growth Chart, etc);

f) Availability of funds for POL, contingency etc at the block level and flexi-fund at AWC level as per revised norms;

g) Home visits by AWWs during critical contact periods – counseling of pregnant and lactating mothers and families of children under two on key health and nutrition issues;

h) *Supportive supervision by the Supervisor; organization of sector level review meetings; analysis of MPRs; etc.* [to review frequency of supervisory visits and reasons for lower than expected frequency]

i) *Observance of Village Health & Nutrition Days (VHNDs) – participation of ANM and PRI Members;*

j) *Method(s) of delivery of supplementary nutrition at AWCs– engagement of SHGs and use of iodized salt at AWC;*

k) *Methodology and participation of children in non-formal pre-school education at AWCs – use of locally developed learning and play materials, toy bank and other initiatives;*

l) *Engagement of AWWs and Supervisors in non-ICDS activities and arrangement to desist them from it;*

m) *Identification of low performing AWCs/Sectors in ICDS implementation and factors responsible for it;*

n) *Any other matter as may be relevant for improved implementation*

iv. *Complaints/grievance redressal mechanism:* Actions taken on the complaints received from individuals, community, PRIs, etc regarding ICDS services such as regularity in AWC functioning, quality of supplementary nutrition, etc and also on dereliction of duties by Supervisors/ AWWs;

Note: The following sources of information may be used for the review meeting:

- Minutes and reports of the AWC Level Monitoring Committees;
- Analysis of AWC Monthly Progress Reports (MPRs)/ Annual States Reports (ASRs);
- Reports of field visits to AWCs by Members of the Committee, and other officials in the block/district;
- Reports from the public/media (if any).

V. ANGANWADI LEVEL MONITORING & SUPPORT COMMITTEE (ALMSC) ON ICDS

VA. Composition

i.	Gram Panchayat/ ward member *(preferably woman member)*	Chairperson
ii.	*Mahila Mandal (2 Members on rotation)*	Members
iii.	ASHA	Members
<u>Representatives of:</u>		
iv.	Community Based Organization (2)	Members
v.	Community (Teachers/Retired Govt Officials/ Parents of Children attending AWC) (3)	Members
vi.	*Sakhi under* SABLA Programme *(if any)*	Members
vii.	Anganwadi Worker	Convener

Note:

- The Committee will organize regular monthly meetings to discuss various issues in the Anganwadi area in the village or ward/slum and record minutes of the meeting. A copy of the minutes may be sent to the Block level Committee and CDPO.
- ICDS Supervisor, ANM, LHV may be invited to the meeting as may be required.

VB. Roles

The Anganwadi level Committee will review and take/suggest actions to improve delivery of services at the AWC. The Committee is authorized and expected to play the following roles:

i. Check regularity of functioning of AWC;

ii. Ensure coverage of all eligible beneficiaries as against the surveyed population;

iii. Review status of supply of supplementary food to all beneficiaries for at least 21 days in a month;

iv. Review nutritional status of children 0-3 years and 3-6 years, weighment, availability of WHO New Growth Charts and joint mother & child protection card; and number of moderate and severely undernourished children and steps taken;

v. Review functioning of non-formal PSE – activities per day, development/use of local learning and play materials, organization of parents meet; etc.

vi. Ensure participation of AWWs at VHSC meetings;

vii. Ensure participation of at least one of the Members [other than AWW, ASHA and ANM] on the monthly Village Health and Nutrition Day at each AWC and to ensure that it is well-organized and well-attended, and that all due services are rendered on that day;

viii. Review facilities available at the AWC in the light of established norms (Infrastructure including clean water, functioning toilet, play area, PSE/medicine kits, cooking utensils, etc);

[The Committee may consider ways of locally strengthening the AWC infrastructure mobilizing resources from the community/other schemes]

ix. Review receipt and utilization of consumables such as food supplements and medicines as well as physical stocks;

- *Find reasons for any shortfalls from expected norms, or discrepancies in stocks;*
- *Document and report such shortfalls and discrepancies to the Block Level Monitoring Committee and CDPO;*

x. Attend to any local disputes related to the AWC or AWW, and resolve such disputes amicably; flag unresolved disputes to the *Gram Panchayat or Block level Monitoring Committees;*

xi. Interact with the AWW/ICDS Supervisor to understand reasons for any short falls in services provided at the AWC, and find ways to locally strengthen services or correct shortfalls; formally document and report unresolved issues to the Block Level Monitoring Committee, with a copy to CDPO, MO/PHC and *Gram Panchayat as appropriate & concerned.*

xii. Any other matter as may be relevant for improving service delivery.

NOTE:

i. To ensure any/all of the above, the AWC level Committee Members are expected to:

- *Familiarize themselves with the objectives and spirit of the ICDS programme.*
- *Familiarize themselves with the established norms and guidelines for ICDS by obtaining a copy of such guidelines from the Block Level Monitoring Committee; interact with Members of the Block level Monitoring Committee, or the Supervisor or CDPO, or with the LHV or MO/PHC to seek any clarifications regarding these norms.*

- *Visit the AWC periodically and interact with other members of the community to enquire about ht functioning of the AWC.*
- *Convene a monthly meeting to transact its business, preferably soon after the preparation of the AWC MPR, and maintain minutes recording the attendance of Members, issues reviewed, findings and action taken.*
- *Send a copy of the minutes of the monthly meeting to the Block Level Monitoring Committee.*

ii. On any issue, while it is always preferable to have negotiated and unanimous decisions, the Members present may take decision based on guidelines and norms. Unresolved issues may be sent to higher level for direction.

iii. The committee and its Members will conduct their business in a manner that does not disturb the day-to-day activities of the AWW/AWC.

6. States/UTs are requested to take necessary actions in constituting the Monitoring & Review Committees at different levels as suggested in para 5 above. An action taken report on this may be sent to GoI by **30 June 2011** along with a report on the impact of the above monitoring mechanism, for discussions in the meeting of the National Level Monitoring & Review Committee and/or review meeting with the State Secretaries.

Yours faithfully,

(Dr. Shreeranjan)
Joint Secretary to the Government of India
Tel: 2338 7683

Copy:

i. *Secretary, Ministry of Health & Family Welfare*
ii. *Secretary, Ministry of Human Resource Development*
iii. *Secretary, Ministry of Rural Development*
iv. *Secretary, Ministry of Minority Affairs*
v. *Secretary, Department of Food*
vi. *Secretary, Department of Drinking Water Supply & Sanitation*
vii. *Secretary, Ministry of Panchayati Raj*
viii. *Principal Advisor (WCD), Planning Commission*
ix. *Director, NIPCCD, New Delhi*
x. *Regional Directors, NIPCCD (Guwahati, Bangalore, Indore and Lucknow)*
xi. *Director, National Institute of Nutrition, Hyderabad*
xii. *All Directors/Dy. Secretaries dealing with ICDS Scheme, MWCD*
xiii. *Joint Technical Advisor, Food & Nutrition Board, MWCD*
xiv. *PS to MOS (I/C), MWCD*
xv. *PPS to Secretary, MWCD*
xvi. *PS to AS & FA (WCD)*
xvii. *PS to JS(Cd) JS (WD) JS (WW) EA/SA*
xviii. *US (CD-I)/US (CD-II) US (Training)/AD (WB/ME)*
xix. *Guard File/Sanction Folder*
xx. *Technical Director, NIC, MWCD – with a request to upload in Ministry's website child Development Section)*

(Dr. Shreeranjan)
Joint Secretary to the Government of India

No. 16-3/2004-ME (Pt.)
Government of India
Ministry of Woman & Child Development

Shastri Bhawan, New Delhi 110001

To

a) State Secretaries in charge of ICDS Scheme (All States/UTs)

b) Directors in charge of ICDS Scheme (All States/UTs)

Subject: Guidelines for Monitoring and Supervision Visits to ICDS Blocks and AWCs by Officials of State and Central Governments – Regarding

Sir/Madam,

The monitoring and supervision of the ICDS Scheme is recognized as one of the essential requirements for effective working of the Scheme. The Ministry of Women and Child Development has been taking steps to revamp the whole management information system (MIS) under the programme. Along with collection of regular monitoring data through the MIS, regular field visit to the AWCs/ICDS Blocks by programme Officials at different levels are essential to monitor the working of Anganwadi Centres (AWCS) throught intensive monitoring and supervision visits, problems/bottlenecks in the delivery of services at AWCs can be addressed. Along with, the views and perspectives of the community for improvement in day-to-day functioning of AWCs and service delivery can be elicited for taking appropriate corrective actions.

2. In order to standardize the existing practice of monitoring and supervision visits which are being followed differently by different States/UTs, the Ministry of Women and Child Development has prepared the Guidelines which cover Officials at both State and Central Governments. The Guidelines prescribe the minimum requirements of visits that are to be made at various levels. **A copy of the Guidelines is attached herewith.**

3. The States/UTs are requested to adhere to the Guidelines and share the same with the Health Department and District Collectors for implementation. The States/UTs may ensure having a mechanism for reviewing the monitoring and supervision Reports at the appropriate levels for necessary corrective actions.

The State Govts/UT Administration may inform this Ministry about the action taken for implementation of these Guidelines. In case, they already have a system in place that meets the requirement laid down in these Guidelines, they may intimate the details to this Ministry.

Yours sincerely,

(Dr. Shreeranjan)
Joint Secretary
Tel: 2338 7683

Copy:

i. Director, NIPCCD
ii. Regional Directors of NIPCCD (Guwahati, Indore, Lucknow, Bangalore)
iii. Food and Nutrition Board and its all Field Units
iv. Directors/Dy. Secretaries in CD Bureau, MWCD
v. US.(CD-I/III)/ US (CD-II)/ US (WB)/ US (Training)/ US (ME)/ Sr. Programmer/ AD (WB &ME)
vi. Plan and Research Unit, MWCD

Guidelines for
Monitoring and Supervision Visits to ICDS Blocks and Anganwadi Centres (AWCs) by Officials of the State and Central Governments and Involvement of PRIs in Monitoring of AWC Activities

October 2010

ICDS MONITORING & EVALUATION UNIT
MINISTRY OF WOMEN AND CHILD DEVELOPMENT
GOVERNMENT OF INDIA

Guidelines for Monitoring and Supervision Visits to ICDS Blocks and AWCs by Officials of the State & Central Government and Involvement of PRIs in Monitoring of AWC Activities

The Integrated Child Development Services (ICDS) Scheme has an in-built monitoring system since its inception through which regular reports and returns flow up wards from Anganwadi Center (AWC) to block, district, State and finally in an aggregated form to the Government of India (GoI). In addition to collection of regular monitoring data through the programme management information system (MIS), periodic field visits to ICDS blocks/AWCs by officials at various levels and review of the programme implementation at different levels are also undertaken as part of the regular monitoring of the programme.

2. To provide necessary support to the ICDS field functionaries in improving the quality of service delivery by addressing various problems/botrlenerks and also to elicit view and perspectives from the community for improvement in day-to-dav functioning of AWCs and services delivery, intensive monitoring and supervision visits by Programme Officials at different levels are essential for taking appropriate corrective actions. In order to standardize the existing practice of monitoring and supervision visits which are being followed differently by different States/UTs, the following Guidelines are prescribed, that provide minimum requirements of monitoring and supervision visits to ICDS Blocks/AWCs by Officials from both State and Central Governments. It also outlines involvement of PRIs in monitoring of AWC activities.

3. Monitoring and Supervision Schedule: The following monitoring and supervision schedule to ensure effectiveness in the delivery of service sin ICDS is stipulated and directed for the State and Central Officials:

Sl.#	*Category of officials(s)*	*Schedule/proppsed requirement*
A.	**At tbe Central level**	
1	Supervisors (ICDS)	A minimum of 50% of AWCs under the Supervisor's Jurisdiction every month
2	Joint visit by ICDS Supervisors with ANM/LHV	At least 2-3 AWCs every month and the visits given in sl.no 1 can also be under this category.
3	CDPOs/ACDPOs	At least 20 AWCs per month on a rotational basis and to ensure coverage of 100% AWCs in a year.
4	Joint visit by CDPOs/ACDPOs with Medical Officer (MO)	At least 5 AWCs per month and these can be as part of the visits mentioned under sl.no 3.
5	ICDS District Programme Officers (DPOs)/ADDs/ Dy. CEOs	All blocks to be covered per quarter. At least 3 AWCs during each block visit to ensure 10% AWC coverage in a year equally spreading them across the year.
6	Joint visit by DPOs with CMHO	At least 1 Block and 2 AWCs each month
7	District Magistrates/Collectors (DMs/DCS)/ADMs/Planning Officers/District Social Welfare Officer	At least 15 AWCs (preferably on village Health and Nutrition Days) and 25% blocks every 6 months.
8	*CEO/Zilla Parishad Officer (wherever entrusted the Responsibilities of ICDS)*	At least 15 AWCs (preferably on village Health and Nutrition Days) and 25% blocks every 6 months.

Sl.#	*Category of officials(s)*	*Schedule/proposed requirement*
9	Nodal Officer (M & E/MIS) from State Directorate *(wherever in position)*	At least 10 AWCs and 2 Blocks each month.
10	Other Directorate Officials (Dy. Director/Jt. Director/ Asstt. Director)	At least 5 AWCs each month and 20% of Blocks every year *(to be equally distributed across all district in the state)*
11	State Director (ICDS)	At least 20 AWCs in each quarter and 10% of blocks every Year *(to be equally distributed across all district in the state)*
12	State Secretary (WCD) (including officials from Under Secretary to Special Secretary)	At least 50 AWC and 25 blocks every year *(to be equally distributed across all district in the state)*
13	Official from Field units of Food & Nutrition Board (CFENU)	10 AWCs per month or as prescribed, whichever is more. *(to be equally distributed across all districts in the state)*
14	Instructors of AWTCs/MLTCs	5 AWWs/5 Supervisors after 2 months of completion of each of the Job/Refresher trainings of AWWs/Supervisors as a follow-up of training courses conducted at AWTCs/ MLTCs respectively
15	Consultants from Home Science Colleges/Medical Institutes, appointed by Central Monitoring Unit (CMU) of NIPCCD	As per the agreement made in the terms of references of CMU
B.	**At the Central level**	
16	Officials from ICDS M & E Unit of MWCD	1 State per month *(@ 1 district per state, 2 blocks per district, 4 AWCs per block per visit)*
17	Other Senior Officials of MWCD (Dy. Secretary/Director/Joint Secretary)	At least one State in a month *(@ 2-3 AWCs per state/1 district HQs/1 block office)*
18	Faculty of NIPCCD (including all regional centres)	2 States per quarter *(@ 2 project & 2-3 AWCs, 1 AWTC and 1 MLTC per State)* OR as per the existing arrangement whichever is more
19	Officials from Food & Nutrition Board (HQs)	1 State per month *(@ 2-3 AWCs per state per visit)*

4. **Preparation of Action Plans:** States will prepare district-wise action plans in advance on the monitoring and supervision visits by the Officials at various levels for every six months. For joint visits along with the Health Officials, an advance plan would be prepared in consultation with the Health Department by aligning with their monitoring visits. States may enhance the scope of joint visits by involving Officials from other line departments as *viz, Sarva Siksha Abhiyan* (SSA), PRI and Rural Development, Drinking Water Supply and Sanitation etc., in order to assess/strengthen effectiveness of convergence of ICDS Scheme with these programmes.

5. Checklists for making monitoring & supervision visits to ICDS Blocks and AWCs by the State and Central Government Officials

A. *For Officials at the State level*

The following aspects of the ICDS programme implementation are to be monitored/supervised during the field visits:

i. Availability of infrastructural facility (building adequate space, toilets, separate closed kitchen and space for women health check-up); provision for electricity; supply of potable water to AWC; etc

ii. Availability of functional weighing scales (baby and adult) and growth charts for all children;

iii. Availability of cooking utensils, water storage container, medicine and PSE kits, all prescribed registers/reporting formats (MPR) in printed form;

iv. Regularity in working of AWCs and also to see whether AWW is present daily at centre.\

v. Whether snacks and hot cooked supplementary food are provided 25 days a month without disruption to the children 3-6 years and Take Home Rations (THR) to pregnant women, lactating mother, and children 6-36 months;

vi. Involvement of Self-Help Groups or any women groups in preparation and distribution of supplementary food/or any other decentralized arrangements;

vii. Whether the beneficiaries liked the taste and quality of the supplementary food;

viii. Whether prescribed calorific norms are being met or not? *(to be validated by all monitors from Food & Nutrition Board/State and Central Govt.)*

ix. Whether regular weighing of the children is done(to check growth charts and verify age and weight of a few sample children and their nutritional status as recorded in the growth charts)

x. Whether immunization and health check-ups are done regularly *(to check last 2 months records);*

xi. Observance of village health and nutrition days (VHNDs). The monitors need to look for village-wise micro plan for VHNDs and it should be available with the CDPO t the block and district level.

xii. No. of children present at the AWC on the day of visit and received supplementary food as against total registered; (to compare this figure with the previous one week's average figure).

xiii. No. of children who received pre-school education at the AWC *(what activities were undertaken by the AWW?)* on the day of visit as against total registered;

xiv. Whether there is any community support to the AWC. If not, why? *(to talk with some village committee/PRI members).*

xv. Whether AWW's make regular home visits and counsel the mothers and their families during critical contact periods of pregnancy, infancy or during sickness of the children (to validate by visiting a few such households);

xvi. General perception of the community towards functioning of the AWC. Whether there has been any improvement over the last 2-3 year?

xvii. Suggestions, if any.

B. For Officials at the State level

Besides the above checklist, Officials from the Central Ministry would take up some of the following issues with the State Government Officials:

i. Status of operationalization of new blocks and AWCs;

ii. Organizational structure of ICDS at the state and district level (staffing positions, vacancies, timeline and processes for filling-up vacancies, whether separate cadre of ICDS officials; etc);

iii. Promotional avenues for AWWs/Supervisors/CDPOs;

iv. Mechanism to monitor regular reviews and monitoring visits to AWCs/blocks;

v. Fund flow from Govt to Directorate to District/Blocks/AWCs – Time taken at each level;

vi. Adherence to the GOI prescribed financial/feeding norms at all levels for effective programme implementation (e.g. SNP, POL, contingency, MIS, IEC, flexi funds at AWC;

vii. State's plan for strengthening the AWC infrastructure *(leveraging resources from other programmes/ departments);*

viii. Mechanism for effective convergence with health and other line departments;

ix. Lifting position of food grains under Wheat Based Nutrition Programme (WBNP) and its end use; etc.

Note:

i. *The above points are only indicative. The States/UTs can add more indicators based on specific need/ problem of the area.*

ii. *During joint visits with health, issues like regular immunization, drop-outs of immunization, ANM's presence on VHNDs, referral services etc should be taken up.*

iii. *Some of the visits should be made during the VHNDs.*

iv. *Officials should devote considerable time to one AWC visit to get a clear and true picture of the programme and its delivery to the intended beneficiaries.*

v. *Selection of AWCs for inspection should be done in a manner that interior areas are covered and there is no undue emphasis on visiting the road side villages.*

vi. *Some of the visits to AWCs by the state and national level Officials should be from those that have been recently visited by the CDPOs/DPOs to see whether any action has been taken based on their field reports and also to ensure some quality improvements at the block/AWC level.*

6. **Reporting and Feedback:** Each Official up to the level of DPO will prepare a brief report *(maximum 2 pages)* critically analyzing the programme implementation in respect of the aforesaid aspects/issues and ensure necessary feedback is given to AWWs/Supervisors/CDPOs. The Supervisors and CDPOs/ACDPOs will reflect the findings of their field visits in their respective monthly/quarterly progress reports. Findings from the field visits would be discussed at the sector/block/district/state level review meetings. State Directorate will have the overall responsibility to compile the district-wise key findings of the field visits at the end of every quarter and submit the same to the GoI. Officials from the central level would prepare state specific reports by analyzing key factors and ensure transmission of the feedback to the State Governments through the bureau-head of the MWCD within ten days of their visits.

7. **Involvement of PRIs in monitoring of AWC activities:** The need for involvement of PRIs in monitoring of ICDS activities has been always felt and desired in order to build an accountability mechanism for delivery of services and availability of supplies at AWC level. However, in the absence of clear defined guidelines, involvement of PRIs in supporting the implementation of ICDS has rather been sporadic and limited to selection of AWWs and AWHs, construction of AWC buildings etc. It is proposed that PRIs may be involved in monitoring of the day-to-day functioning of the AWCs, especially with respect to the following:

   i. Regularity in functioning of AWCs

   ii. Regularity in supplementary food (snacks, hot-cooked meals and THR), its quality and acceptance by the community

   iii. Coverage of all households and eligible beneficiaries.

   iv. Regular weighing of children.

   v. Regular supply of IFA, vitamin A and de-worming medicines by health.

   vi. Organization of the monthly joint meetings between health and ICDS (Village Health and Sanitation Committees)

   vii. Monthly observance of Village Health and Nutrition Days (VHNDs)

   viii. Availability of prescribed records and registers at AWC.

   ix. Monitoring of regular payment of honoraria to AWWs & AWHs.

   x. Construction of AWCs and its maintenance

   xi. Community mobilization by motivating people to participate in ICDS service delivery; and

   xii. Involvement in Health, Nutrition and Sanitation Education

States may devise appropriate reporting mechanism in consultation with the State PRI Department to review the feedback received from the PRI members and to take necessary corrective actions.

Note: The above guidelines may be appropriately embedded into the existing monitoring and supervision mechanism in ICDS programme implementation as being followed by the States/UTs.

सत्यमेव जयते

Report of the Comptroller and Auditor General of India on Social, Economic, Revenue and General Sectors for the year ended 31 March 2019



लोकहितार्थ सत्यनिष्ठा
Dedicated to Truth in Public Interest

GOVERNMENT OF TRIPURA

Report No. 1 of 2021

Report of the Comptroller and Auditor General of India on Social, Economic, Revenue and General Sectors

for the year ended 31 March 2019

GOVERNMENT OF TRIPURA

Report No. 1 of 2021

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PREFACE

1. This Report for the year ended March 2019 has been prepared for submission to the Governor of Tripura under Article 151 of the Constitution of India.

2. This Report contains significant results of the performance and compliance audit of the departments of the Government of Tripura under Social, Economic, Revenue and General Sectors including the departments of Education (Social Welfare & Social Education), Public Works (Roads & Buildings), Animal Resource Development, Industries & Commerce, Finance (Excise & Taxation), Transport and Law Department.

3. The cases mentioned in this Report are those which came to notice in the course of test audit during the year 2018-19 as well as those which came to notice in earlier years but could not be dealt with in the previous Reports. Matters relating to the period subsequent to 2018-19 have also been included, wherever necessary.

4. The audits have been conducted in conformity with the Auditing Standards issued by the Comptroller and Auditor General of India.

OVERVIEW

OVERVIEW

Chapter-I

Introduction

This Report of the Comptroller and Auditor General of India (C&AG) relates to matters arising from the Performance Audits and test audit of transactions of various departments of the Government of Tripura pertaining to Social, Economic, Revenue and General Sectors. The primary purpose of this Report is to bring to the notice of the State Legislature, significant results of audit.

During 2018-19, total 304 auditee units out of 1,651 units, were planned for audit after carrying out risk assessment and keeping in view the available manpower, of which 207 units were actually audited during 2018-19. This Report *inter alia* contains two Performance Audits titled "Implementation of Integrated Child Development Services (ICDS) Scheme" and "Development of Infrastructure Facilities for the Judiciary" and 12 Compliance Audit paragraphs.

Chapter-II
Social Sector

Performance Audit

Education (Social Welfare and Social Education) Department

Implementation of Integrated Child Development Services (ICDS) Scheme

Integrated Child Development Services (ICDS) one of the flagship programmes of Government of India (GoI), launched in 1975 as an early childhood development programme is aimed at addressing health, nutrition and the development needs of young children, pregnant and nursing mothers. In order to address the gaps in implementation of the scheme, GoI repositioned ICDS as a Mission Mode programme in 2012, with appropriate institutional mechanisms at Central, State, District & Block levels, as well as adequate human and financial resources linked to accountability and outcomes.

The Performance Audit of ICDS done by the Principal Accountant General (Audit), Tripura covering the period of 2014-15 to 2018-19 revealed the following:

The Annual Project Implementation Plan (APIP) of the ICDS did not demonstrate a bottom-up, decentralised and participatory approach, so as to incorporate the roles of ICDS and Health functionaries at the district and village level. There was no evidence of involvement of local governance, institutions such as District Council and Village Panchayats in the planning process.

Paragraph 2.2.8

Convergence of ICDS with other Social sector schemes and Departments as envisaged in the ICDS Scheme (2012 Framework) was weak and ineffective.

Paragraph 2.2.9.1

The Department spent ₹ 836.29 crore under ICDS during 2014-19 and savings in expenditure of ₹ 62.84 crore, pointed out the need for adequate spending of funds to improve programme outcomes. The State had short released its share of funds for the programme by ₹ 75.92 crore.

The Department could utilise only ₹ 5.94 crore of the ₹ 8.47 crore received (October 2013), for construction of 132 Anganwadi Centres (AWCs) and submitted Utilisation certificate for the entire amount, though there was a shortfall in construction of 56 AWCs. Further, the Department did not utilise GOI funds of ₹ 8.47 crore, even after 36 months (March 2019), and delayed the construction/repair of the AWCs for which the funds were meant for.

The Department also failed to utilise GoI funds of ₹ 36.29 lakh for infrastructure development in AWCs to provide basic facilities like drinking water/toilets, *etc.* even after 15 months (March 2019) from the date of release of funds (December 2017).

Paragraphs 2.2.10.1 & 2.2.10.2

The Department did not plan for and utilise funds of ₹ 4.95 crore meant for training, Early Childhood Care and Education Programme, Supply of medicine kit and pre-school kits and instead kept funds idle in Civil Deposits.

Paragraph 2.2.10.4

The Department had spent ₹ 28.29 crore during 2014-19 for procurement of rice under Supplementary Nutrition Programme (SNP), but they could not furnish details of district wise distribution of the food grains procured.

Paragraph 2.2.10.5

During 2014-19, the Department achieved 86 to 98 *per cent* coverage of the targeted beneficiaries of children (below three years and above three to six years old), and pregnant/lactating women under the Scheme. However, there was a significant gap in the numbers of pregnant and lactating women as per the Department and the health authorities.

Paragraph 2.2.11.1

The Early Childhood care, Education and Development Component of ICDS saw a shortfall in coverage of enrolled children ranging from eight to 14 *per cent* in the State. In the sampled AWCs, the shortfall was between 14 to 17 *per cent* due to poor infrastructure facilities and resources.

Paragraph 2.2.11.2.1

The Department had rolled out Take Home Ration (THR) under SNP in one district out of eight districts in the State. They did not furnish any reasons for the non-implementation of THR despite procuring food grains.

Paragraph 2.2.11.4.1

Severely malnourished children in 0-5 years' age group were 0.15 to 0.25 *per cent* of total number of children weighed and position did not improve during the period. AWCs did not capture data of additional food, health check-up and referral services provided to the malnourished children.

Paragraph 2.2.11.4.2

The primary objective of the Supplementary Nutrition Programme (SNP) namely development of nutritional and health status of children in the age group of 0-6 years and pregnant women could not be achieved, as evident from the increased trend of low birth weight of new born babies and anaemic pregnant women.

Paragraph 2.2.11.4.3

Food and Nutrition Board had never carried out any periodic sample checks to ensure the safety as well as quality of nutrient composition of supplementary food supplied to Anganwadi Children. The Department, thus, did not ensure quality of the food supplied under the ICDS.

Paragraph 2.2.11.4.4

The shortfall in providing full immunisation to children of the age group of 0-1 year was ranging from 16 to 22 *per cent* in the State. There was also shortfall in providing antenatal and post-natal care. Though the Health Department was responsible for this activity, the AWCs were the important link in ensuring doses to the children in the villages on special days (VHND).

Paragraphs 2.2.11.5.2 & 2.2.11.5.3

The State had 9,911 operational AWCs, of which 9,334 AWCs had their own buildings, 273 were in rented houses and 304 AWCs were running from other places like community centres, *etc.* Test checked AWCs suffered due to poor infrastructure facilities like absence of toilets, safe drinking water, electricity, kitchen without LPG facilities, *etc*.

Paragraph 2.2.12

The Department engaged excess number of staff in the State cell at Agartala for most part of the period covered in audit i.e 2014-19, whereas there was consistent shortfall in staff engaged in the projects.

Paragraph 2.2.13.1

Considering the overburdened status of Anganwadi workers, a review was required on their role and status.

Paragraph 2.2.13.3

Capacity Building of staff was inadequate due to trainings not conducted. The Department had not established any middle level training centre for imparting training to Supervisors and Instructors of Anganwadi Training Centres (AWTCs).

Paragraph 2.2.13.4

Monitoring mechanism in the Department for the ICDS was ineffective and there was no record of the Departmental inspections conducted or review meetings held. All the 189 test checked AWCs did not/partially maintained the records and registers prescribed for the services provided by them. The poor outcomes and infrastructure facilities of AWCs coupled with unspent funds pointed out towards ineffective monitoring of the programme.

Paragraph 2.2.14

Chapter-III
Economic Sector

Compliance Audit Paragraphs

Public Works Department

There was unproductive expenditure of ₹ 9.15 crore on work relating to Construction of Kailashahar District Jail which remained incomplete due to poor contract management and negligence of the Home Department in not supervising the work closely.

Paragraph 3.2

The Executive Engineer, Belonia Division, PWD (R&B) had irregularly drawn funds of ₹ 8.70 crore for procurement of material without actual requirement, resulting in blocking of public funds for more than four to eight years.

Paragraph 3.3

The Department delayed construction of Vigyan Gram (Phase-I) at Agartala, a DoNER project funded by GoI, resulting in the facility remaining incomplete even after the lapse of four years from the stipulated date of completion (June 2015) and expenditure of ₹ 58.82 lakh.

Paragraph 3.4

Non-compliance with codal provisions by the Executive Engineer, Mohanpur, PWD (R&B), regarding issue of stores, led to suspected misappropriation of materials valued at ₹ 35.15 lakh issued in works.

Paragraph 3.5

Tripura Housing and Construction Board

Unfruitful expenditure of ₹ 4.07 crore was incurred due to delay of four years in construction of the District Sports Complex at Ambassa, Dhalai District due to unrealistic preparation of DPR and non-inclusion of penal clause in the agreement with the contractors.

Paragraph 3.6

Failure to utilise the set apart funds towards charitable purposes within the stipulated time frame in order to avail of income tax exemption, led to loss towards payment of income tax of ₹ 5.28 crore and loss of interest of ₹ 99.84 lakh.

Paragraph 3.7

Animal Resources Development Department

A PPP project in Unakoti District for meeting requirement of milk was taken up by the Animal Resources Development Department without ensuring availability of funds, creation of proper infrastructure and without selecting bona fide beneficiaries. An infructuous expenditure of ₹ 1.13 crore was incurred on the failed project.

Paragraph 3.8

Chapter-IV
Economic Sector
(State Public Sector Undertakings)

Functioning of Public Sector Undertakings

As on 31 March 2019, the State of Tripura had 15 PSUs (14 working and 1 non-working), which included 14 Government companies and one Statutory Corporation. As on 31 March 2019, the investment of the State Government (capital and long-term loans) in 15 PSUs was ₹ 1,675.55 crore consisting of 87.69 *per cent* (₹ 1,469.29 crore) towards capital and 12.31 *per cent* (₹ 206.26 crore) towards long-term loans.

Paragraph 4.1.1 and 4.1.2

As per the information furnished by the PSUs, during 2018-19 the State Government has provided budgetary support of ₹ 105.58 crore in the form of capital (₹ 34.81 crore) and grants/subsidy (₹ 70.77 crore).

Paragraph 4.1.4

As per the latest finalised accounts of PSUs as on 30 September 2019, the accumulated losses (₹ 406.23 crore) of two out of 14 working PSUs had completely eroded their paid-up capital (₹ 270.04 crore). During 2018-19, out of 14 working PSUs, four PSUs earned an aggregate profit of ₹ 8.87 crore, while 10 PSUs incurred loss of ₹ 220.73 crore as per their latest finalised accounts.

Paragraph 4.1.9.2

Compliance Audit Paragraphs

Tripura Industrial Development Corporation Limited

Development of Industrial Infrastructure -a thematic audit

The Government of Tripura (GoT) took up (2014) Modified Industrial Infrastructure Upgradation Scheme (MIIUS) for up-gradation of infrastructure in the existing industrial areas of Bodhjungnagar Industrial Estate (IE) and R. K Nagar IE in two

phases, *viz*. MIIUS-I (Bodhjungnagar IE) and MIIUS-II (R. K Nagar IE). The objective of the scheme was to enhance competitiveness of industry by providing quality infrastructure to catalyse and promote industrial growth, employment generation and technology up-gradation.

Paragraph 4.2.2

Tripura Industrial Development Corporation Limited (TIDCL), being the Scheme Implementation Agency (SIA) for MIIUS projects was responsible for creation of industrial infrastructure and to provide requisite infrastructure and finance for promotion and development of industries in the State. As of November 2019, TIDCL had allotted land and sheds to 220 Industrial Units (IUs) in 15 Industrial Estates (IEs) across the State.

Paragraph 4.2.3

As on 30 September 2019, TIDCL provided total 761.89 acres of land to the two sampled IEs; of which, 442.60 acres of land was available for allotment as on 31 March 2019. As against this, the IEs allotted 288.66 acres of land (65 *per cent*) to total 111 IUs. Similarly, out of total 41 sheds available in two sampled IEs (Bodhjungnagar: 23 sheds; R. K Nagar: 18 sheds) as on 31 March 2019, TIDCL could allot only 24 sheds (59 *per cent*).

Paragraph 4.2.7

There were considerable delays at each stage of land allotment process, which had correspondingly delayed the final allotment of land at an average, by 99 days after receipt of applications in 46 out of total 56 cases test checked.

Paragraph 4.2.8.1

As per the land allotment conditions, the TIDCL and the Industrial Units were to execute a registered deed of lease agreement within three months after the allotment. Audit observed that out of 56 sampled IUs, TIDCL had not executed lease deeds with 16 IUs during the period covered by Audit. In the absence of formal lease deeds/agreements, TIDCL was exposed to possible financial risks and damage to the leased out property.

Paragraph 4.2.8.2

Fifty-one out of 56 sampled IUs had defaulted in making lease rent payments for periods ranging from three to more than 24 months. As a result, dues of ₹ 3.84 crore were pending for recovery (30 September 2019) on account of monthly lease rent. TIDCL, however, did not take necessary steps to cancel or take possession of the leased land and sheds from the defaulting units except issuing show cause notices to 21 IUs.

Paragraph 4.2.8.3

There was low and inconsistent demand for industrial plots in the sampled IEs during 2014-19. This was evident from the fact that during period covered in audit, TIDCL could allot land only one to eight units per year in the two sampled IEs. The fact that there were few takers for industrial plots even in the two most developed IEs in the

vicinity of the State capital Agartala and despite provision of large number of Central and State Government incentives, pointed towards inadequacy of the policy environment to attract industrial investment in Tripura. As a result, employment generation was also low. As regard technology upgradation though optical cable Network was laid down in IEs by BSNL, the demand for the facility provided remained weak.

Paragraph 4.2.10

Tripura Handloom and Handicrafts Development Corporation Limited

Non-recovery of rental and user charges

Tripura Handloom and Handicrafts Development Corporation Limited could not recover the rental and user charges of ₹ 45.11 lakh from the two operating Agencies due to non-execution of formal lease agreements with these Agencies.

Paragraph 4.3

Chapter-V
Revenue Sector

Compliance Audit Paragraphs

Finance (Excise & Taxation) Department

During the year 2018-19, the revenue raised by the State Government was ₹ 2,138.11 crore which was 17.77 *per cent* of the total Revenue Receipts. The State received balance 82.23 *per cent* of the revenue receipts of ₹ 9,892.78 crore from the GoI, comprising of GIA and net proceeds of State's share of Union Taxes and Duties.

Paragraph 5.1.1

Assessing Authority allowed inadmissible ITC claim and failed to take note of the incorrect stock of a dealer, resulting in under-assessment of tax of ₹ 26.20 lakh of the dealer.

Paragraph 5.2

The Assessing Authorities short determined turnover of a dealer due to under assessment of purchases made resulting in short levy of tax of ₹ 18.08 lakh besides penalty and interest leviable.

Paragraph 5.3

Transport Department

District Transport Authorities failed to renew lapsed permits of transport vehicles resulting in non-realisation of permit fee of ₹ 12.51 lakh from the 2,440 commercial vehicles owners and fine was leviable.

Paragraph 5.4

Chapter-VI
General Sector

Performance Audit

Law Department

Development of Infrastructure Facilities for the Judiciary

Development of infrastructure for judiciary is primarily the responsibility of the State Governments. However, the Central Government has been augmenting the efforts and resources of States for construction of court buildings and residential accommodation for judicial officers/judges covering District and Subordinate Courts since 1993-94 through Development of Infrastructure facilities for the Judiciary, a Centrally Sponsored Scheme (CSS).

The scope of the scheme encompassed construction of new court buildings, upgradation or renovation of existing court buildings, barrier free access to senior citizens and persons with disability (PwD) and provision for safety measures in courts and of residential quarters for judicial officers. Implementation of e-Courts was taken up as part of the National e-Governance Plan *(NeGP).*

The Performance Audit of Development of Infrastructure facilities for the Judiciary covering the period 2014-19, revealed the following deficiencies:

The State received ₹ 70.54 crore from Government of India (GoI) upto 2014-15 and did not receive any further funds due to non-utilisation of previous year's funds and slow progress of works. The construction of six court buildings and residential quarters at two locations taken up during 2014-19, remained incomplete as of October 2019 despite expenditure of ₹ 27.39 crore.

Paragraph 6.2.7.1

The Department diverted ₹ 1.11 crore during 2017-18 and 2018-19 for construction of staff quarters of the High court. Besides, Executive engineer, PWD (Roads & Buildings), Khowai division diverted ₹ 25.50 lakh to bridge works.

Paragraph 6.2.7.2

The Law department and Executive Department failed to effectively manage projects and consequently six out of nine projects (six court buildings and three quarter complexes taken up) during 2012-19 suffered from time overruns.

Paragraph 6.2.9.1

Various amenities and safety measures as envisaged in the scheme guidelines (April 2017) and National Court Management System Plan (NCMS) guidelines (May 2012) which were different from mere creation of physical infrastructure were either not planned or added later on.

Paragraph 6.2.9.2

Video conferencing (VC) facilities with connectivity between Jails and each court as envisaged in Phase-II of e-court project was provided to all district and subordinate

courts. However, the courts failed to utilise the VC facilities due to poor internet connection at Jail premises.

Paragraph 6.2.10.1

Diesel Generator (DG) sets were provided to all court complexes including State Judicial Academy (SJA) under phase I & II. However, DG set at Agartala court complex was lying out of order since May 2019.

Paragraph 6.2.10.2 (a)

Installation of Solar Photo Voltatic (SPV) power plants was not completed in any of the seven court complexes by Tripura Renewable Energy Development Agency (TREDA) through advance payment of ₹ 1.05 crore was made to the agency.

Paragraph 6.2.10.2 (b)

E-court database server of Tripura was not maintained centrally at the State level, as Cloud Computing work was not completed.

Paragraph 6.2.10.3

Hardware procured (September 2017) for installation of LAN at District Legal Services Authorities (DLSAs) and Taluka Legal Services Committee (TLSCs) at a cost of ₹ 6.29 lakh was lying idle in 15 out of 22 DLSAs/TLSCs due to inadequate infrastructure facilities.

Paragraph 6.2.10.4

Computer networking hardware including VC set procured at a cost of ₹ 30.23 lakh for State Judicial Academy (SJA), were lying idle for want of suitable space.

Paragraph 6.2.10.5

Construction of a room for digitisation of records of High Court of Tripura was not completed despite passage of more than a year and available funds of ₹ 77.03 lakh remained unutilised.

Paragraph 6.2.11

Various service deliveries for litigants and advocates planned under e-court like e-filing portal, payment of court fee, providing certified copies online with bar coding *etc*. were not implemented as of October 2019.

Paragraph 6.2.12

System of periodical reports and returns, agenda for meeting of the monitoring committee and minutes of the meetings of the monitoring committee were not available to assess the effectiveness of monitoring system.

Paragraph 6.2.13.1

The monitoring of implementation of e-court was ineffective as the authorities did not take necessary/ timely action for installation of VC connectivity, procurement of hardware without ensuring availability of adequate space and failure in ensuring installation of solar power system in courts.

Paragraph 6.2.13.2

Chapter-VII
Follow up of Audit observations

As of November 2019, 15 out of 18 departments did not submit explanatory notes on 68 paragraphs (46 paragraphs and 22 performance audit) out of 93 paragraphs (64 paragraphs and 29 performance audits) of Audit Reports awaiting discussion by Public Accounts Committee (PAC) relating to the Audit Reports from the years 2001-02, 2004-05 to 2017-18.

Paragraph 7.1.1 (a)

As of November 2019, two departments did not submit explanatory notes on 12 paragraphs (nine paragraphs and three performance audits) out of 20 paragraphs (14 paragraphs and six performance audits) of Audit Reports awaiting discussion by Committee on Public Undertakings (COPU) relating to the Audit Reports from the years 2011-12 to 2017-18.

Paragraph 7.1.1 (b)

Analysis of the position of outstanding IRs showed that 3,446 paragraphs included in 552 IRs issued during the last five years up to 2018-19 were pending for settlement as of September 2019. Of these, even the first reply had not been received in respect of 131 IRs in spite of repeated reminders.

Paragraph 7.3

There are 3,446 paragraphs involving ₹ 71,529.26 crore relating to 552 IRs issued during the last five years 2014-15 to 2018-19 which remained outstanding at the end of 30 September 2019, under Social, Economic, Revenue and General Sectors.

Paragraph 7.5

CHAPTER I: INTRODUCTION

CHAPTER I: INTRODUCTION

1.1 About this Report

This Report of the Comptroller and Auditor General of India (C&AG) relates to matters arising from the performance audits and test audit of transactions of various departments of the Government of Tripura pertaining to Social, Economic, Revenue and General Sectors.

The primary purpose of this Report is to bring to the notice of the State Legislature, significant results of audit. Auditing standards require that the materiality level for reporting should be commensurate with the nature, volume and magnitude of transactions. The findings of audit are expected to enable the Executive to take corrective action, to frame appropriate policies as well as to issue directives that will lead to improved financial management and contribute to better governance.

This chapter in addition to explaining the planning and coverage of audit, provides a synopsis of significant instances of non-compliance with applicable laws, rules, regulations, various orders and instructions issued by competent authorities.

1.2 Authority for Audit

This office functioned as a Branch Office of the Accountant General, Assam from 1967. Since 18 November 1974, it has been functioning as an independent office. Following a restructuring of cadres in 1984, the audit functions were entrusted to the office of the Accountant General (Audit), Tripura and the Accounts and Entitlement functions were entrusted to the Accountant General (A&E), Tripura.

Under the directions of C&AG, the Office of the Accountant General (Audit), Tripura conducts audit of government departments, Public Sector Undertakings, Autonomous Bodies and other Institutions[1] under Social, Economic, Revenue and General Sectors, which are spread all over the State. The Accountant General (Audit) is assisted by two Deputy Accountants General.

The authority for audit is derived from Article 149 and 151 of the Constitution of India and the Comptroller and Auditor General's (Duties, Powers and Conditions of Service) Act, 1971 (C & AG's (DPC) Act). Under Section 13 of the C & AG's (DPC) Act the Office of the Principal Accountant General (Audit) has been entrusted with the audit of all expenditure incurred from the Consolidated Fund of Government of Tripura. This office conducts audit of revenue receipts of Government of Tripura under Section 16 of the C & AG's (DPC) Act. This office conducts supplementary audit of the Balance Sheet of all State Government companies under Section 143 (6) (a) of the Companies Act, 2013. This office is responsible for audit of accounts of autonomous bodies and authorities falling under Section 14, 15, 19 (2), 19 (3) and 20 (1) of C & AG's (DPC) Act.

[1] Audit of World Bank assisted projects, Asian Development Bank assisted projects, *etc*.

Besides these, this office is also responsible for audit of accounts of Tripura Tribal Areas Autonomous District Council (TTAADC) constituted under the provision of 6th Schedule of the Constitution. The Audit Report on the accounts of the Council is prepared separately for laying before the Council. The C&AG prescribes the principles and methodologies for various audits in the Auditing Standards and the Regulations on Audit and Accounts, 2007.

1.3 Planning and conduct of Audit

Audit process commences with the assessment of risk of the departments based on the expenditure incurred, criticality/complexity of activities, priority accorded for the activity by the Government, level of delegated financial powers, assessment of internal controls, concerns of stakeholders, previous audit findings, *etc*. Based on this risk assessment, frequency and extent of audit are decided and an annual audit plan is formulated to conduct audit.

After completion of each audit, Inspection Report (IR) containing audit findings is issued to the Head of the unit with a request to furnish replies within one month of receipt of the IR. Wherever replies are received, audit findings are either settled or further action for compliance is advised. Significant audit observations pointed out in these IRs, which require attention at the highest level in the Government, are processed for inclusion in the Audit Report which are submitted to the Governor of Tripura under Article 151 of the Constitution of India for causing them to be laid on the Table of the State Legislature.

Audit Plan is prepared in such a way that it fits into the long term and short term goals of audit in consonance with the overall "Vision and Mission" of the Indian Audit & Accounts Department. It has been prepared after carrying out risk assessment and keeping in view the available manpower. Elements of the Audit Quality Management Framework (AQMF) *viz*. materiality, inputs from Voucher Level Computerisation (VLC), financial size of the units, data from various e-governance initiatives taken by government, flagship programme undertaken by auditees, press criticism/ electronic media coverage, expected audit impact and continuous improvement based on past experience, *etc*. were taken into account to the extent possible while framing out the plan. A sector wise analysis of government spending, investment policy of the government in infrastructure development, industrialisation and socio-economic activities alongwith due consideration of possible audit impact were taken into account in prioritising auditee units for preparing the audit plan.

Considering the availability of resources, focus has been given in areas of high financial risk than to thinly spreading out the resources throughout the Government activities. This would have better socio-economic impact and add value to governance. Out of 1,651 auditee units, 304 units were planned for audit during 2018-19 after carrying out risk assessment and keeping in view the available manpower, of which 207 units were actually audited during 2018-19.

1.4 Significant Audit Observations

During the year 2018-19, the State Government had incurred an expenditure of ₹ 13,668.48 crore against the budget provision of ₹ 17,421.39 crore under Social, Economic and General Sectors. Sector wise expenditure is depicted in the **Charts 1.1** and **1.2**.

Chart 1.1: Sector-wise Budget Estimates (₹*in crore*)

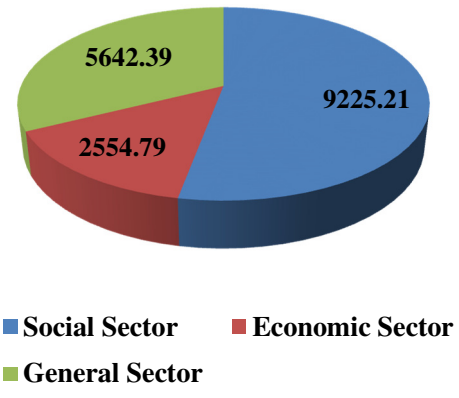
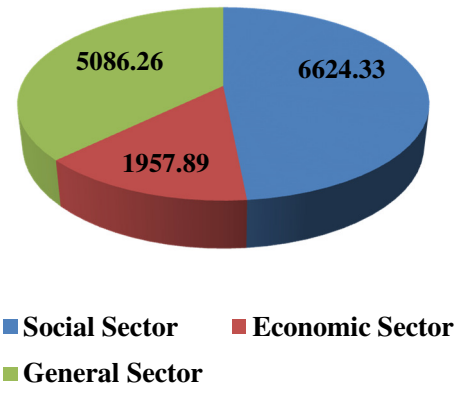


Chart 1.2: Sector-wise expenditure (₹*in crore*)



***Source**: Appropriation Accounts 2018-19*

This Report *inter alia* contains two performance audits titled **"Implementation of Integrated Child Development Services (ICDS) Scheme" and "Development of Infrastructure facilities for the Judiciary"** and 12 compliance audit paragraphs on major findings of audit from test check of the transactions of 78 units[2] in the Social, Economic, Revenue and General Sectors involving an expenditure of ₹ 3,208.05 crore[3]. Significant audit findings are discussed in the respective succeeding chapters.

[2] Social Sector: 30 units, Economic Sector: 38 units and General Sector: 10 units

[3] Social Sector: ₹ 721.12 crore, Economic Sector: ₹ 1,312.63 crore and General Sector: ₹ 1,174.30 crore

CHAPTER II: SOCIAL SECTOR

CHAPTER II: SOCIAL SECTOR

2.1 Introduction

This Chapter of the Audit Report deals with the findings of audit of Government units under Social Sector.

The total budget allocation and expenditure of the departments under Social Sector during the year 2018-19 are given in **Table 2.1**.

Table 2.1: Details of allocation and expenditure under Social Sector

(₹in crore)

Name of the Department	Budget allocation	Expenditure
Education (Higher)	200.87	139.46
Education (School)	1,804.79	1,439.61
Education (Social)	729.24	725.48
Elementary Education	1,013.59	883.75
Education (Youth Affairs and Sports)	78.12	72.33
Food, Civil Supplies and Consumer Affairs	156.53	133.22
Family Welfare and Preventive Medicine	552.86	480.69
Health	526.94	476.54
Labour Organisation	12.36	11.95
Panchayati Raj	325.51	281.42
Public Works (Drinking Water and Sanitation)	538.07	448.03
Rehabilitation	51.24	47.05
Rural Development	1,061.99	304.96
Tribal Welfare (Research)	7.39	2.70
Kokborok and other Languages	0.76	0.69
Tribal Welfare	834.46	492.06
Tribal Rehabilitation in Plantation and Particularly Vulnerable Tribal	35.43	31.50
Urban Development	829.18	526.30
Welfare of Scheduled Castes	308.11	56.22
Welfare of Minorities	82.11	36.82
OBC Welfare	51.60	33.42
Skill Development	24.07	0.13
Total number of departments = 22	**9,225.22**	**6,624.33**

***Source**: Appropriation Accounts – 2018-19*

We audited 30 auditee units under the Sector covering expenditure of ₹ 721.12 crore (including of the previous year). This Chapter contains a Performance Audit on Implementation of Integrated Child Development Services (ICDS) Scheme.

EDUCATION (Social Welfare and Social Education) DEPARTMENT

2.2 Implementation of Integrated Child Development Services (ICDS) Scheme

2.2.1 Introduction

Integrated Child Development Services (ICDS) one of the flagship programmes of Government of India (GoI), launched in 1975 as an early childhood development programme aimed at addressing health, nutrition and the development needs of young children, pregnant and nursing mothers. The programme recognises that early childhood development constitutes the foundation of human development and is designed to promote holistic development of children under six years, through strengthened capacity of caregivers and communities, and improved access to basic services at the community level. ICDS emphasises convergent interface between communities and other services such as primary healthcare, education, water and sanitation among others.

The package of services provided as part of the programme comprised, *inter-alia* (i) Supplementary Nutrition Programme (SNP) (ii) Immunisation, (iii) Health Check-up (iv) Referral Services, (v) Non-formal Pre-school Education (PSE) and (vi) Nutrition and Health Education (NHED).

In order to address the gaps in implementation of the scheme, GoI repositioned ICDS as a Mission Mode programme in 2012, with appropriate institutional mechanisms at Central, State, District & Block levels, as well as adequate human and financial resources linked to accountability and outcomes. The restructured ICDS was rolled out in the North Eastern States from the year 2013-14 and was implemented universally across districts, regions and socio-economic groups.

2.2.2 Organisational set-up

The Social Welfare and Social Education Department (SW&SE) is responsible for implementation of ICDS in the State. It implements three components of the programme *viz.*, supplementary nutrition programme, non-formal pre-school education and nutrition and health education directly, while the other three components are implemented in coordination with the Directorate of Food, Civil Supplies and Consumer Affairs and Health and Family Welfare Department (health check-up and referral services and immunisation).

At the apex level, the Secretary/ Special Secretary of the Department and the Director of Social Welfare and Social Education are responsible for policy, planning, coordination and implementation of the programme. At the field level, the Child Development Project Officers (CDPO) and Anganwadis worker (AWW) are responsible for implementing various activities relating to the programme. Medical Officers, Auxiliary Nurse Midwife (ANM) and Accredited Social Health Activist (ASHA) form a team with the ICDS functionaries to achieve convergence of different services.

The organogram of the Department for implementation of ICDS and institutional arrangement at the Mission Directorate are given in **Charts 2.2.1** and **2.2.2.**

Chart 2.2.1: Organisational set-up of the Department

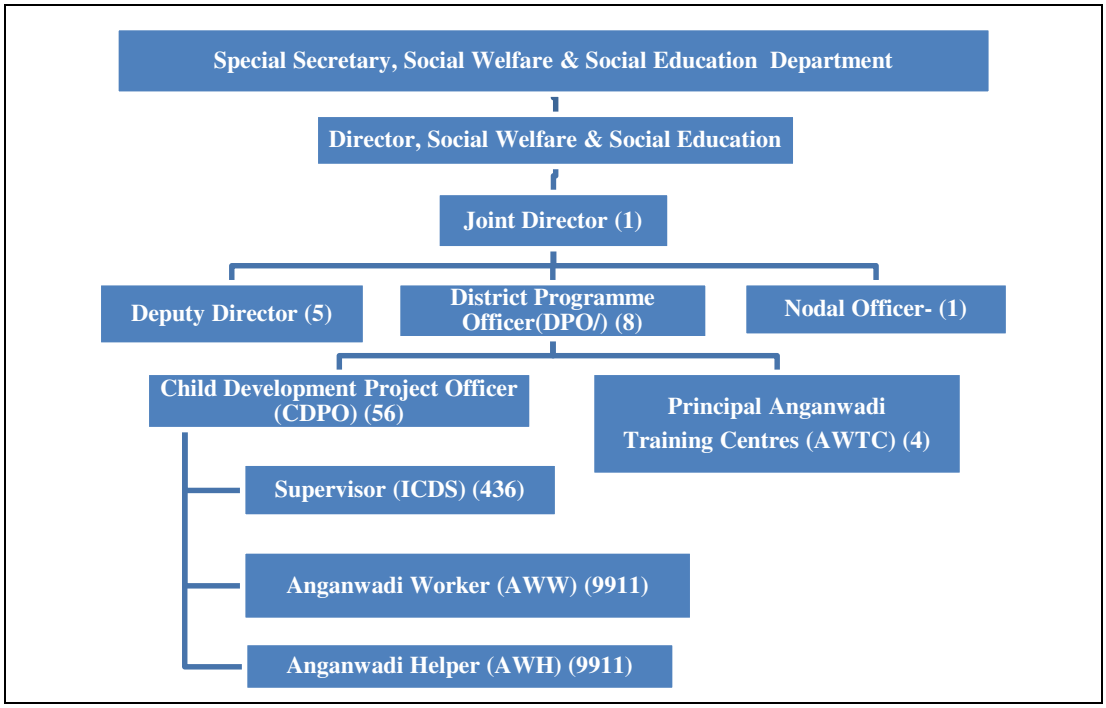


Chart 2.2.2: Institutional arrangement at Mission Directorate

State Empowered Programme Committee

Headed by Chief Secretary. Secretary of the Department of the Social Welfare and Social Education acts as vice Chairperson of the committee and Secretary/Commissioner/ Principal Secretary of other Department converging Department are the members of this Committee. This committee is responsible for planning, supervision and monitoring the effective implementation of ICDS.

⇩

District ICDS Mission Society

Chaired by Sabhadhipati and co-chaired by District Magistrate and Collector. It is responsible for coordinating of the Scheme in the district and its monitoring and supervision.

⇩

Block/Project Level ICDS Mission Committee

Chaired by Chairperson of Block Panchayat Samity/BAC and co-chaired by Block Development Officer. It is responsible for effective implementation of ICDS Programme in the Projects/Block.

⇩

Anganwadi Level ICDS Mission Committee

Chaired by the Pradhan of Gram Panchayat/Chairperson of Village Committee/Ward Commissioner and assisted by other members like mothers from Mahila Mandal, Teacher of locality, Retired Government official of the locality, *etc*. It is responsible for effective implementation of ICDS Programme in the AWC level.

2.2.3 Audit Framework

The Office of the Principal Accountant General (Audit), Tripura had carried out (July – September 2012) Performance audit (PA) on 'Integrated Audit of the Education (Social Welfare and Social Education) Department'. The PA also covered the implementation of ICDS during the period 2007-12 and the same was included in the Audit Report of the Comptroller and Auditor General of India for the year 2011-12, Government of Tripura. The report was tabled in the State Legislature on 27 September 2013. It brought out significant lapses in construction of Anganwadi Centres (AWC), non-availability of drinking water facilities, toilets and kitchen sheds in AWCs, non-provision of supplementary nutrition to enrolled beneficiaries, absence of linkages, *etc*.

The current PA is a follow up audit to assess the status of implementation of the programme post restructuring and designating it as a Mission Mode programme in 2012.

2.2.4 Audit objectives

Performance audit was taken up with objectives to ascertain whether:

- the planning for implementation of the Scheme was proper and as per GoI guidelines;
- the funds received under the Scheme were adequate and they were utilised economically and efficiently;
- the infrastructure facilities provided were adequate for Anganwadi Centres for effective delivery of services;
- the various targeted services under the Programme relating to supplementary nutrition, health of mothers and children and education/development of the beneficiary children were delivered/implemented effectively as per norms;
- the monitoring of the Programme was effective;
- the overall Programme implementation was effective and achieved the desired outcomes.

2.2.5 Audit criteria

Audit findings were benchmarked against the following sources of criteria:

a. Government of India's Scheme guidelines, Broad Frame Work for Implementation, 2012 and other instructions;

b. General Financial Rules (GFR) (2005 and 2017), Delegation of Financial Power Rules, Tripura (DFPRT) (2011 and 2017), Perspective Plan, Annual Programme Implementation Plan (APIP), *etc*;

c. Instructions issued by Government of Tripura pertaining to procurement, quality control, distribution and maintenance of records, *etc*.;

d. Prescribed norms for staffing and skill up-gradation;

e. Standards fixed by the National Institute of Public Co-operation and Child Development (NIPCCD) for infrastructure of ICDS projects and training programmes; and

f. Government of India and State Government's prescribed monitoring mechanism.

2.2.6 Scope, Sample and Audit Methodology

Performance audit of ICDS was conducted during July 2019 to November 2019 and covered the implementation of the programme during the period 2014-15 to 2018-19. Audit methodology involved an examination of the records in the Directorate of Social Welfare and Social Education Department at the apex level, four out of eight District Inspectors of Social Education (DISEs) at the district level, three out of four Anganwadi Training Centres (AWTCs), 14 Child Development Project Officers (CDPOs) out of 56 Child Development Project Officers (CDPOs) and 189[1] Anganwadi Centres (AWCs)[2] out of 9,911 AWCs in the State.

Districts were selected for audit sample through Simple Random Sampling (SRS) method and projects and AWCs were selected through Simple Random Sampling Without Replacement (SRSWOR) method. The Department authenticated the findings of the joint physical inspection of assets and infrastructure conducted by the audit along with the departmental representatives.

To support our findings, we also conducted a beneficiary survey covering 50 beneficiaries (February 2020) in Mandainagar Village Council and Ashigarh Village Council under Mandai Block, West Tripura District.

We discussed the Audit objectives, criteria, scope and methodology in an Entry Conference held on 24 June 2019 with the Special Secretary, Department of Social Welfare and Social Education before commencement of Audit. Draft audit findings were issued to the Government in April 2020 for response. Significant findings were discussed with the Special Secretary of the Department in an Exit Conference (28 May 2020). The responses of the Department have been incorporated in the Report appropriately.

2.2.7 Constraints

Audit was conducted primarily with reference to documents and records of the audited entity. However, various records were either not maintained or maintained partially. Details of the records which were not maintained or partially maintained are given in **Table 2.2.1**.

---

[1] Out of the sampled 191 AWCs (six *per cent* of AWCs under each sampled project), two AWCs did not furnish records due to resignation of the concerned Anganwadi Workers (AWWs). Therefore, records of 189 AWCs were checked and physical verification of infrastructure was done in all the 191 AWCs

[2] Six *per cent* operational AWCs from each Project

Table 2.2.1: Status of maintenance of records in AWCs

(Number, percentage of shortfall in parenthesis)

Register No.	Name of Register	No of AWCs checked	No. of AWC not maintaining the records	No. of AWC Partially maintaining the records
3	Supplementary Food Distribution	189	09(4.76)	37(19.58)
4	Pre-School Education	189	18(9.52)	108(57.14)
5	Pregnancy and Delivery	189	31(16.40)	123(65.08)
6	Immunisation and Village Health and Nutrition Day (VHND)	189	19(10.05)	134(70.90)
7	Vitamin A Biannual Rounds	189	63(33.33)	93(49.21)
9	Health check-up/referral	189	133(70.37)	45(23.81)
11	Weight Records of Children/Growth chart	189	25(13.23)	90(47.62)

***Source**: Sampled AWCs Record*

Further, CDPOs and Supervisors entrusted for monitoring of the services delivered at AWCs did not record the quality of food served and pre-school education, lack of infrastructure and shortage of PSE kits in the Inspection diary maintained at the AWCs.

Audit findings

2.2.8 Planning

A Planning process

Planning is a key management process and accordingly ICDS scheme (2012 Framework) envisaged preparation of the State/ District Child Development Plans- a plan for the entire Mission period based on community-based planning process and an Annual Plan that would be based on resource availability and prioritisation exercise. Further, initially, only State Plan would be necessary and gradually on need basis, district specific plan was to be prepared depending on the capacity and requirement. The State/ District Child Development Action Plan was to be the key strategy for integrated action under the ICDS Mission. It was to be formulated on the premise that (i) the community can plan for its children's needs and (ii) there would be greater requirement for developing capacities in communities to do so.

The scheme envisaged key steps in the planning process for the development of district and State ICDS plans *viz.* constitution of the Planning Teams at different levels with a clear demarcation of their roles and responsibilities; need for orientation and training modules; filling of vacant positions and recruitment of additional staff in ICDS; development of survey formats, focus group guides and ICDS mission Registers; mapping of AWC linked facilities and services such as health centres, schools, training centres; and organisation of ICDS Mission village contact drives, public hearings and social mobilisation activities and release of

untied grants to the State ICDS Mission to facilitate planning and social mobilisation activities at district, block and village levels.

B Deficiencies in Planning

As required under ICDS broad framework, the State prepared Annual Project Implementation Plan (APIP) annually and submitted them to GoI to get funding for the programme (GoI funded 90 *per cent* of approved APIP outlays for the North East region). However, the quality of APIP was highly deficient as discussed in subsequent paragraphs.

Test check of APIP, related records and replies to audit revealed that:

- The State APIP did not demonstrate bottom up, decentralised and participatory approach to incorporate the roles of ICDS and Health functionaries in planning while formulating APIPs though they are required to work in a convergence mode. Further, there was nothing on record to demonstrate convergence with local Governance institutions (Tripura Tribal Areas Autonomous District Council, District and Village Panchayats, *etc*.)
- The Central Government while approving each year's APIP laid down certain conditions and suggestions. The conditions and suggestions *inter alia* includes head count of the beneficiaries, restrict payment of salary to the selected regular posts, construction of AWC building in rural areas in convergence with MGNREGA, *etc*. The State APIPs, however, did not explicitly give any assurance about fulfillment of head count of beneficiaries, surprise check, restrict the payment of salary only to the sanctioned posts, *etc*.
- The Directorate/DPO/CDPO had not hired professional experts to facilitate decentralised planning process; and had neither trained Village Health Sanitation Committees (VHSCs) for decentralised planning.
- Village Health Sanitation and Nutrition Committee (VHSNC) had little or no visible role in effective functioning of the AWCs. There was no visible role or active participation of Civil society organisations at AWC or State levels.

The Department stated (December 2020) that there were no ghost beneficiaries and that no salary was claimed in APIP by the State in excess of post sanctioned as per the Scheme norms. Further, recruitment of professional experts on outsourcing basis are under process. The VHSCs are being monitored by Health Department in convergence mode.

The replies of the Department on ghost beneficiaries is not tenable in absence of any record showing the headcount of the beneficiaries. Besides, the Department needed to coordinate better with the Health Department for improving the role of VHSCs in implementation of the Scheme.

2.2. 9 Convergence

2.2.9.1 Convergence framework

ICDS scheme (2012 Framework) and related sectorial programmes such as National Rural Drinking Water Programme (NRDWP), Sarva Shiksha Abhiyan (SSA), Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS) envisaged convergence in planning, funding and delivery of services. The salient features of the convergence framework were formation of one common Village Health Sanitation and Nutrition Committee (VHSNC) as the institutional mechanism for convergence at village level with AWCs playing critical role; preparation of Child Development Plan at Village, Block and District levels based on joint household surveys and village micro-planning exercises involving AWWs, ASHAs, community/women's groups, VHSNCs and Panchayati Raj Institutions (PRIs); appraisal of District ICDS Mission Plans to ensure multi-sectoral interventions for young child health, growth and development .

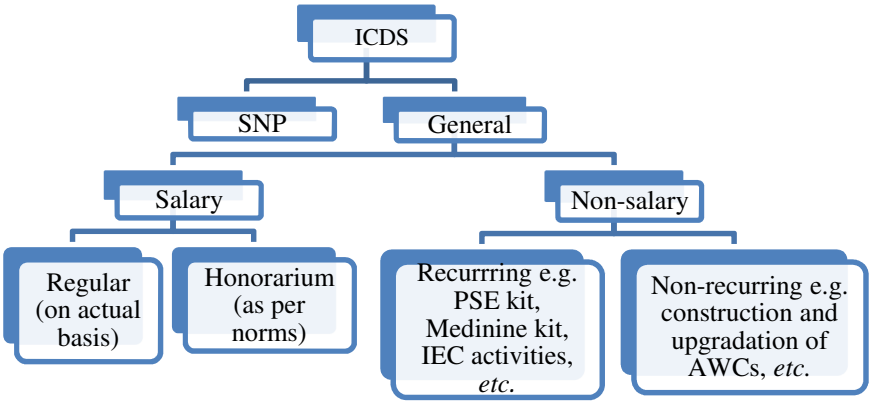
On review, we noticed that there was no institutional mechanism of data sharing and cross validation of data amongst the functionaries of ICDS (AWW) and NHM (ASHA, ANM). Further, CDPOs and MOs did not undertake joint inspection of AWCs.

The Department accepted (December 2020) the audit observation and stated that convergence with MGNREGS was partially implemented.

2.2.10 Financial Management

Fund under ICDS are allocated under two heads, *viz.* the ICDS General (Gen) and the Supplementary Nutrition (SN) to the State. The composition of ICDS scheme components including different core services and activities under different heads is shown in **Chart 2.2.3**.

Chart 2.2.3: Composition of ICDS scheme components



2.2.10.1 Budget, fund release and expenditure under ICDS

The year-wise budget provision and release of fund by GoI and State Government and expenditure incurred during 2014-15 to 2018-19 is given in **Table 2.2.2**.

Table 2.2.2: Budget provision, actual release and expenditure on ICDS Scheme

(₹in crore)

Financial Year	Budget Provision			Release			Expenditure incurred		
	GoI	State	Total	GoI	State	Total	GoI	State	Total
2014-15	241.65	26.48	268.13	140.74	12.69	153.43	162.67	12.68	175.35
2015-16	183.23	42.48	225.71	181.95	12.75	194.70	135.31	18.80	154.11
2016-17	260.26	26.97	287.23	121.34	4.46	125.80	177.08	9.29	186.37
2017-18	134.84	10.63	145.47	131.01	9.22	140.23	126.69	6.83	133.52
2018-19	225.17	23.82	248.99	187.14	15.34	202.48	173.01	13.93	186.94
Total	**1045.15**	**130.38**	**1175.53**	**762.18**	**54.46**	**816.64**	**774.76**	**61.53**	**836.29**

***Source**: Finance Accounts of Government of Tripura & Statement of Expenditure furnished by DSWSE*

During 2014-15 to 2018-19 total release of fund under ICDS was ₹ 816.64 crore (Central share ₹ 762.18 crore and State share ₹ 54.46 crore) against which the Department incurred expenditure of ₹ 836.29 crore (Central share ₹ 774.76 crore and State share ₹ 61.53 crore). The savings of ₹ 62.84 crore during the period were set off by excess expenditure of ₹ 82.49 crore. The reasons for excess expenditure /savings during 2014-19 have not been intimated (September 2020). Further, during the period the State Government did not release the money as per the budget provisions, the shortfall in release being ₹ 75.92 crore.

2.2.10.2 Non-utilisation of funds provided for Infrastructure Development, Repair of AWCs and basic facilities

The Ministry of Women and Child Development (MWCD) had issued guidelines stating that AWCs should be child friendly with all relevant infrastructures. It was seen that the Department was slow in spending the funds received from GoI, the details of which are given below:

(i) The MWCD, GoI released first instalment of ₹ 8.47 crore (October 2013) for construction of 188 AWCs, of which the Department utilised ₹ 5.94 crore only for construction of 132 AWCs (August 2019) as against 188 AWCs for which the fund was sanctioned. Construction of 56 AWCs (estimated cost of ₹ 2.52 crore) remained incomplete (November 2019). The Department could not utilise the fund as on 31 March 2019 even after a lapse of 36 months from the date of release of fund. They however submitted (February 2016) false utilisation certificate to GoI of having spent the entire fund of ₹ 8.47 crore (first instalment) for construction of all 188 AWCs to obtain further fund.

The Department did not furnish the reasons for non-utilisation of fund. During Exit Conference (May 2020), the Department informed that the funds were being sub-allocated during 2020-21 to the DM & Collector for construction and up-gradation of AWCs in convergence with MGNREGS.

(ii) Similarly the second instalment of ₹ 8.47 crore received from GoI (March 2016) for construction of 119 AWCs and repairing of 500 AWCs could not be utilised by the Department as on 31 March 2019, even after a lapse of 36 months since receipt of the fund, though they were required to spend the funds within six months of receipt.

As a result, no new construction and repairing works was carried out with the second instalment.

(iii) GoI sanctioned and released (December 2017) ₹ 36.29 lakh for construction of toilets and providing drinking water facilities. However, the State was unable to utilise the funds even after 15 months (March 2019) from the date of release. As a result of non-utilisation of fund within the stipulated time, AWCs suffered from poor infrastructure facilities as described in subsequent paragraphs.

The Department accepted (May 2020) the audit observations and assured to monitor the timely utilisation of fund in future. They also assured that the completion certificates would be obtained from the line departments in future to ensure the execution of the works before sending the utilisation certificates to GoI. The Department also stated that it would request the State/Finance Department to release the pending State share for better implementation of the scheme.

This indicated that the Special Secretary, being the chief accounting authority of the Department had failed to ensure timely utilisation of funds.

2.2.10.3 Shortfall in expenditure under non-salary component under ICDS (Gen)

Expenditure on non-salary component under ICDS (Gen) like providing preschool kit, medicine kit, flexi fund, Information Education, communication (IEC), Early Childhood Care & Education Development (ECCED), uniform, *etc*. forms the integral part of the packaged services delivered under ICDS.

Micro analysis of component wise expenditure for salary and non-salary component revealed that the core non-salary component like supply of PSE kit, medicine kit, organisation of ECCED, IEC, *etc*. was not funded adequately during the period 2014-19, with the shortfall ranging between ₹ 1.23 crore (IEC) to ₹ 3.96 crore (Medicine Kit) which was 24.85 *per cent* and 80 *per cent* respectively. As a result, delivery services in ICDS were largely affected.

2.2.10.4 Idle parking of funds in Civil Deposits

Financial Rules [3] provides that, unless there is an immediate requirement of disbursement, no money should be drawn from State exchequer to avoid lapse of budget grants. Directorate of Social Welfare and Social Education had drawn ₹ 5.08 crore between March 2016 and July 2017 in anticipation of providing fund to different projects for organising training programme, Early Childhood Care and Education programme, supplying of medicine kit and pre-school kit. Audit noticed that out of the total fund of ₹ 5.08 crore, the Department provided only ₹ 0.13 crore to the projects and the balance of ₹ 4.95 crore was deposited[4] in '8443-Civil Deposits' and funds remained unspent (April 2020).

[3] Rule 290 of the Central Treasury Rules, Volume-I

[4] ₹ 14.38 lakh on September 2016 and ₹ 480.04 lakh on December 2017

The Department accepted (May 2020) the audit observation and assured that necessary steps have already been taken to utilise the funds.

2.2.10.5 Grains procured under the ICDS

Director of Food, Civil Supplies and Consumer Affairs (DFCS&CA) and Directorate of Social Welfare and Social Education (DSW&SE), Government of Tripura maintained Food grain accounts. The accounts are required to be reconcile on monthly basis as per agreement[5].

On review, Audit noticed that during 2014-15 to 2018-19 the Department had booked 51,004 MT rice against the actual requirement of 55,042 MT rice for implementation of SNP. The Department had lifted 43,478 MT of rice during that period for supplying to different CDPOs. Thus, there was shortfall of 11,564 MT rice against the actual requirement for distribution under the SNP. The Department paid the full cost of ₹ 28.29 crore on DFCS&CA for 51,004 MT rice. As a result, the cost of total short lifted quantity of 7,526 MT food grains amounting to ₹ 3.33 crore had been lying with the Food and Civil Supplies Department. Further, the Department did not reconcile the Food grain accounts to know the exact quantity of short lifting as per the agreement, and neither did they furnish district wise details of the food grains lifted.

The Department admitted (May 2020) the facts and assured that necessary measures would be taken to reconcile the food grain account and the accounts maintained by DSW&SE and the correct figure would be reflected in the UC.

2.2.10.6 Cash payment by Anganwadi Training Centres in violation of GoI instructions

GoI made it mandatory[6] to transfer all types of payments like Honorarium, TA/DA, *etc*. to the trainees and guest faculty through Direct Benefit Transfer (DBT) mode to ensure transparency in payment. Besides that, Government of Tripura restricted[7] all types of payments exceeding ₹ 500 (Rupees five hundred) in Cash, in respect of payment of salary, wages and other dues/claims of officers/employees and all third party payments.

Scrutiny of records during 2014-15 to 20181-9 revealed that in three districts of Kulai, Dhalai District, Kakraban, Gomati District and Narshingarh, West District, the AWTCs made cash payment of ₹ 1.55 crore for disbursement of various allowances, honorarium and payments to NGOs (for food) instead of payment through DBT, thereby violating the GoI/State instructions.

The Department admitted the facts and assured that necessary steps would be taken to make all payments through DBT mode/ through cheques from the financial year 2019-20 onwards.

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5 As per memorandum issued by the Director of Food, Civil Suppliers and Consumers Affairs dated December 13, 2005

6 From April 2017

7 vide No.F.28 (6) FIN (G)/75 dated 11.07.2005

2.2.11 Scheme Implementation

2.2.11.1 Enrolment of beneficiaries and coverage of beneficiaries

The coverage of beneficiaries under the programme is detailed in **Table 2.2.3**.

Table 2.2.3: Coverage to beneficiaries in the State

(in number, percentage in parenthesis)

Type of beneficiary	Year	2014-15	2015-16	2016-17	2017-18	2018-19
Children (3 to 6 years old)	Eligible	176735	176313	176788	171907	169911
	Enrolled	176581	176313	176788	170469	169871
	Coverage	152728	157055	155666	157567	152174
	Shortfall	23853(14)	19258(11)	21122(12)	12902(8)	17697(10)
Children (6 months to 3 years old)	Eligible	170982	166573	163356	162096	155608
	Enrolled	170828	166573	163356	160446	155548
	Coverage	147179	149455	147024	151995	147470
	Shortfall	23649(14)	17118(10)	16332(10)	8451(5)	8078(5)
Pregnant Women	Eligible	31987	31259	31259	30544	29232
	Enrolled	31982	31244	31244	30544	29225
	Coverage	29082	29005	29005	29192	28539
	Shortfall	2900(9)	2239(7)	2239(7)	1352(4)	686(2)
Lactating Women	Eligible	51586	44664	44664	38760	34190
	Enrolled	51581	44643	44643	38760	34190
	Coverage	47138	41271	41246	36920	32530
	Shortfall	4443(9)	3372(8)	3397(8)	1840(5)	1660(5)

***Source**: Departmental figures*

From the **Table 2.2.3** it appears that:

i) The Department could achieve 86 to 98 *per cent* coverage of the targeted beneficiaries during 2014-19 which is encouraging.

ii) In the Health Management Information System (HMIS) report of Health Department it was noticed that there was discrepancy in the number of pregnant women and lactating mother identified for SNP under ICDS. As per HMIS report, the number of pregnant woman during 2014-19 ranged from 72,307 to 77,290 whereas that of lactating mothers ranged between 49,477 and 51,833. It appeared that all pregnant and lactating women eligible for SNP had not been identified.

On being pointed out, the Department stated (May 2020) that it was providing SNP to all the eligible beneficiaries who had enrolled as per scheme guidelines.

The gap between the two set of figures needs to be addressed in consultation with the Health Department.

2.2.11.2 Early Childhood Care Education and Development (ECCED)

Early Childhood Care & Education (ECCE), earlier named as Pre-School Education (PSE) refers to the informal early psychosocial stimulation for children below three

years and more planned non-formal Pre-school Education for children between three to six years, which is child friendly, focused around play and individuality of the child and aimed towards the child's holistic development and readiness for school.

The status of delivery of early child hood care and development during 2014-19 were as follows:

2.2.11.2.1 Coverage of beneficiaries under Pre-school Education

The scheme mandates enrolment of all eligible children of the age group of three to six years for non-formal preschool education for at least 21 days in a month. However, the Department could not provide non formal pre-school education to all eligible beneficiaries enrolled as shown in **Table 2.2.4**.

Table 2.2.4: Shortfall in providing Preschool education to 3-6 years' children

(in number, percentage of shortfall in parenthesis)

Year	2014-15	2015-16	2016-17	2017-18	2018-19
No of children enrolled in the State for pre-school education	176581	176313	176788	170469	169871
No of eligible children in the State who were not provided pre-school education for at least 21 days in a month	23853 (14)	19258 (11)	21122 (12)	12902 (8)	17697 (10)
No of children enrolled in the Sampled AWCs for pre-school education	3501	3702	3804	3752	3529
No of eligible children in the sampled AWCs who were not provided pre-school education for at least 21 days in a month	567 (16)	633 (17)	597 (16)	517 (14)	563 (16)

***Source**: Records of Department and sampled AWCs*

During the period 2014-15 to 2018-19 the achievement for enrollment for pre-school education ranged from 86 to 92 *per cent* in the State and it ranged from 83 to 86 *per cent* in the sampled AWCs. The shortfall in coverage of enrolled children for pre-school education ranged between eight to 14 *per cent* in the State whereas in the sampled AWCs the shortage was between 14 to 17 *per cent*. The reasons for such decline was due to poor infrastructure facilities, non-availability of pre-school kit, monthly ECCE days not organised to address the various issues. These are discussed in subsequent paragraphs.

The Department while acknowledging (May 2020) the shortfall in providing ECCE could not furnish reasons for low coverage[8].

2.2.11.2.2 Delay in implementation of ECCE curriculum and Child assessment card

The Early Childhood Care Education and Development (ECCE) component of ICDS envisaged roll out of age and development appropriate annual contextualised ECCE Curriculum and Child Assessment Card simultaneously on per child basis.

[8] A child is deemed to be covered under ECCED if he/she is enrolled and attends AWC for 21 days or more in a month

Accordingly, GoI released ₹ 9.45 lakh[9] in July 2015. On review, Audit observed that, the Department delayed rolled out the ECCE curriculum in local language by 27 months[10] after the stipulated date of circulation and even then could not publish the assessment cards for use of AWCs for over 22 months[11] after receipt of funds. Failure of the Department to roll out the assessment cards to AWCs made it difficult to assess the effectiveness of ECCE.

The Department accepted the fact and stated (May 2020) that the ECCE curriculum in local language were printed and distributed to each AWW during May 2017 to September 2017.

2.2.11.3 Care and Nutrition Counselling

Child Care and Nutrition Counseling to all women in the age group of 15 to 45 years would be provided with the aim to enhance the child care abilities/capacities of mother and/or other caregivers to look after the health and nutritional needs of children within the family environment.

2.2.11.3.1 Nutrition and Health Education (NHED)

The scheme envisaged Nutrition and Health Education Day (NHED) as the key element to educate the beneficiaries on the interventions[12] provided under 'Care and Nutrition Counseling' service. To achieve the objectives, the AWWs should conduct activities like home visits and demonstration course, films and slides shows and mothers meetings. Monthly mothers' meeting was to educate the mothers on improving the child caring practices, feeding, health and hygiene and psychological development

Test check of records maintained at 189 sampled AWCs revealed the shortfall, as detailed in **Table 2.2.5**.

Table 2.2.5: Shortfall in Home Visits and Mother Meetings in sampled AWCs
(*in number, percentage of shortfall in parenthesis*)

Service/Year	2014-15	2015-16	2016-17	2017-18	2018-19
Home visit target[13]	15012	14648	13856	14032	13508
Shortfall in Home visit	14242 (95)	13551 (93)	11909 (86)	10834 (77)	9433 (70)
Mothers meeting target[14]	2268	2268	2268	2268	2268
Shortfall in Mother meetings	1256 (55)	1234 (54)	1087 (48)	1133 (50)	1143 (50)

***Source**: Sampled AWCs record*

[9] ₹ 5.62 lakh for Printing Charges for 10,000 copies of ECCE curriculum *plus* ₹ 3.83 lakh for printing of evaluation sheets

[10] By 27 months from the prescribed roll out date to the date of supplying it to the AWCs

[11] The fund for ecce curriculum was received in July 2015

[12] 1) Infant and Young Child Feeding (IYCF) Counselling; 2) Maternal Care Counselling; 3) Care, Nutrition Health and Hygiene and Education; 4) Community based care and management of underweight children

[13] AWW has to conduct 4 visits within 4-9 months of pregnancy and 12 visits after delivery till the child is 24 months old

[14] Mother meeting should be conducted once in every month in each AWC. Target=2268 (i.e., 189 AWCs x12 months)

It was noticed that the AWWs in the sampled AWCs could not conduct monthly meeting as per the target envisaged in the guideline. The shortfall in home visits ranged between 70 *per cent* to 95 *per cent* and the shortfall in conducting of mother meetings ranged between 48 *per cent* to 55 *per cent* during 2014-19.

Further, no seminar, street show, drama cultural events were organised during 2014-19 at field level in any of the sampled AWCs under 14 selected ICDS Projects. No expenditure was incurred at AWC level on print media, audio visual media, pamphlets, hoarding, and wall paintings to give wide publicity to IEC activities.

In reply, the Department stated (May 2020) that actual details of home visits and mothers' meeting undertaken were not adequately captured in the records maintained at AWCs. Further, the Department also stated that for wide publicity of IEC activities the same was covered under the POSHAN Abhiyan[15].

The Department's reply is not verifiable in absence of any documentary evidence in support of its claim of having conducted mothers' meetings and home visits.

2.2.11.4 Supplementary Nutrition Programme

Supplementary Nutrition Programme (SNP) is an important component of ICDS to bridge the protein-energy gap between the recommended dietary allowance and average dietary intake of children, pregnant women and lactating mothers. ICDS programme envisaged Supplementary Nutrition[16] (SN) for pregnant and lactating women, infants (six months to three years) and children (three to six years). The audit findings are discussed in subsequent paragraphs.

2.2.11.4.1 Non implementation of Take Home Ration

The Scheme envisaged provision of Take-Home-Ration (THR) as supplementary nutrition to pregnant and lactating women and infants (six months - three years). On review, Audit observed that the Department had rolled out THR in only one district (Gomati) in the State. This was against the Para No. 2.2.1 (vi) of the Broad framework for implementation of ICDS.

As per instruction (6 March 2010) the concerned Supervisor shall verify fortnightly to THR register maintained at the AWCs under his/her jurisdiction and submit consolidated report to the CDPO by 5th working day every month about the quality of mixed rice and dal provided as THR to the beneficiaries. The CDPOs shall compile the reports of the Supervisor under his/her jurisdiction and send the complied report of THR to the Directorate. However, none of the Supervisor in the sampled AWCs in Gomati district had furnished the consolidated report of THR to the CDPOs. As a result, the CDPOs also did not furnish the complied report to the Directorate. Thus,

[15] POSHAN Abhiyaan or National Nutrition Mission, is Government of India's flagship programme to improve nutritional outcomes for children, pregnant women and lactating mothers

[16] The supplementary nutrition to children was to be provided for 300 days in year while Pregnant and Lactating women were to be provided during pregnancy and lactation period of six months. Besides, differential provisions for moderately & severely underweight children were applicable. Further, the supplementary nutrition was to be provided universally irrespective of income, residence

data of food grains distributed in the selected districts as THR was not available.

Though the Department assured (May 2020) to take all necessary steps for implementation of THR throughout the State, it did not furnish any cogent reasons for not fully implementing THR, despite scheme guidelines and availability of food grains as mentioned earlier in **Paragraph 2.2.10.5**.

2.2.11.4.2 Nutritional status of children

Under the scheme, children in accordance with their age, weight, status are divided into five categories *viz*. normal, grade-I, grade-II grade-III and grade-IV. The children falling under grade-I and grade-II are treated as moderately malnourished whereas children under grade-III and grade-IV are treated as severely malnourished and are required to be provided additional Supplementary Nutrition, regular health check-up and referral to the health centres. The year wise nutritional status of children in the State during 2014-15 to 2018-19 are shown in **Table 2.2.6** and **2.2.7.**

Table 2.2.6: Year wise nutritional status at State level

Year	Total number of Children weighed	Gr-I &II (Moderately malnourished)		Gr-III&Gr-IV (Severely malnourished)	
		Number	Percent	Number	Percent
2014-15	302225	38286	12.67	567	0.19
2015-16	291015	28307	9.73	611	0.21
2016-17	297678	26560	8.92	449	0.15
2017-18	288958	26099	9.03	717	0.25
2018-19	298939	27823	9.31	579	0.19
Total	**1478815**	**147075**	**9.95**	**2923**	**0.20**

***Source**: Departmental Records*

The analysis of data at the State level indicated that during 2014-19, percentage of severely malnourished children in 0-5 years' age group was 0.15 *per cent* to 0.25 *per cent* of total number of children weighed. It suddenly increased in 2017-18 to 0.25 *per cent* from 0.15 *per cent* of the previous year. Similarly, in the sampled AWCs the percentage of severely malnourished children was stagnant during audit period as detailed in **Table 2.2.7**.

Table 2.2.7: Year wise nutritional status at sampled AWCs

Year	Total weighed (Nos)	Grade-III Moderately malnourished (Nos)	*Per cent*	Grade-IV Severely Malnourished (Nos)	*Per cent*
2014-15	5378	285	5.30	37	0.69
2015-16	5602	411	7.34	32	0.57
2016-17	5646	371	6.57	32	0.57
2017-18	5573	384	6.89	44	0.79
2018-19	5385	386	7.17	52	0.97

***Source**: Sampled AWCs record*

The percentage of malnourished (moderately) children ranged between 5.30 to 7.34 *per cent* and those of severely malnourished children in the selected AWCs was

between 0.57 to 0.97 *per cent*. The number of malnourished children in the test checked AWCs, implied that proper monitoring of their health status was not done. Audit scrutiny of Food Distribution Register (Register No. 02) Growth and Referral register (Register No. 09) revealed that AWWs did not capture data properly on additional food, health check-up and referral services provided to the malnourished children. Thus, the possibility of all malnourished children getting additional food under SNP, health check-up and referral to the health centres could not be ascertained. Due to non-maintenance of proper records, detecting of severely malnourished at an early stage through the intervention of health services remained unaccomplished.

The Department stated (December 2020) that the severely underweight (malnourished) children are identified by AWW by weighing of children and providing additional supplementary nutrition and referring to the nearest PHC/ CHC/ Sub-centres in case of serious occasions.

The reply is not acceptable as we noticed that 48 *per cent* of the sampled AWCs partially maintained and 25 *per cent* of the sampled AWCs did not maintain Register No.11-Weight Records of Children/ Growth chart as mentioned in **Paragraph 2.2.7**.

2.2.11.4.3 Poor Care and Nutrition Counselling

The programme failed in achieving its primary objective of development of nutritional and health status of children in the age-group 0-6 years and pregnant women as shown in **Table 2.2.8**.

Table 2.2.8: Impact of service delivery under ICDS programmes

Year	No. of Newborns weighed at birth	Nos. of Newborns having weight less than 2.5 kg	Percentage	No. of pregnant women receiving the prescribed ANC	No. having Hb level<11 (tested cases)	Percentage	No. having severe anaemia (Hb<7)	Percentage
2014-15	48,810	5,154	11	55,291	19,701	36	525	1
2015-16	49,159	5,460	11	51,688	27,138	53	470	1
2016-17	48,077	5,738	12	48,736	31,702	65	1,063	2
2017-18	50,214	6,802	14	39,861	30,720	77	745	2
2018-19	49,363	6,913	14	40,717	31,183	77	938	2

Source: *HMIS*

From **Table 2.2.8**, it appears that the trend of low birth weight of new born babies and number of anaemic pregnant women had increased during 2014-19.

The Department while accepting fact (December 2020) stated that initiative would be taken for preparing strategies and interventions on reducing the low birth weight of new born babies in the State as well as reduction of severe anaemia in pregnant women.

2.2.11.4.4 Absence of testing of food for quality provided in AWC

The scheme prescribed mandatory laboratory checks of the food materials being used for providing Supplementary Nutrition in order to ensure that the food material contain the required nutrition component. The State with the support of Food and Nutrition Board (FNB) should ensure the quality of supplementary food safety as well as nutrient composition. FNB in collaboration with the State Government was to carry out periodic checks and get it tested through the Government Food Research Laboratories accredited for that to ensure that prescribed standards are adhered to and quality and nutritive value of the supplementary nutrition is maintained.

In the AWCs the *Muya* made of *Muri/ Chira*, one egg (only on Wednesday) as morning snacks and *Khichuri* with seasonal vegetables and Soyabean as meal were being distributed for all categories of beneficiaries.

It was noticed in audit that the FNB had never carried out any periodic checks since inception of the scheme to ensure quality and nutritive value of the food provided under supplementary nutrition and the observance of standards prescribed Food Safety and Standard Act, 2006.

As a result, the Department could not ensure that standard quality of food enriched with good nutritive valued had been provided in AWCs under the scheme. Apart, record relating to testing of water used for cooking in the AWCs was also not found.

In reply, the Department stated (May 2020) that it had started testing of sample food from September 2019 through GoI's Regional Food Testing Laboratory at Kolkata but they have not furnished any reasons for not testing the sample all these years either from Government or private laboratory, which was their responsibility under the Scheme. The Department's reply confirms supply of unverified quality food to the beneficiaries during the audit period.

2.2.11.5 Health Service Delivery

2.2.11.5.1 Village Health and Nutrition Day

Village Health and Nutrition Day (VHND) under the ICDS and NHM was to serve as an important platform for providing three major health services- immunisation and micronutrient supplementation, health check-up and referral services to the targeted beneficiaries. The functionaries of two departments, *viz.* Health and Social Welfare planned and executed VHND. In order to make the programme more effective the Department directed (February 2015) to organise Health and Nutrition Day on 1st and 7th of every month respectively.

Test check of records maintained at 189 sample AWCs revealed the shortfall, as detailed in **Table 2.2.9**.

Table 2.2.9: Shortfall in organising Health Day and Nutrition Day in sampled AWCs
(*in number, percentage of shortfall in parenthesis*)

Service/Year	2014-15	2015-16	2016-17	2017-18	2018-19
Health day target[17]	2268	2268	2268	2268	2268
Shortfall in Health day	1654 (73)	1613 (71)	1475 (65)	1457 (64)	1485 (65)
Nutrition day target[18]	2268	2268	2268	2268	2268
Shortfall in Nutrition day	2167 (96)	2168 (96)	2158 (95)	1960 (86)	1971 (87)

***Source**: Sampled AWCs record*

During the period covered in Audit, it was seen that the shortfall in conducting health day and nutrition day ranged between 64 to 96 *per cent* during 2014-19. Therefore, the objectives of imparting awareness on nutrition and regular health check up of mother and child on health day and nutrition day were not fulfilled.

The Department stated (May 2020) that shortfall was due to organising these two activities /events on same day in cluster mode instead of organising them separately in each AWC.

The Department's reply is not acceptable as no documentary evidence was made available as mandated in the scheme guidelines supporting of its claim of conducting health day and nutrition day in cluster mode.

2.2.11.5.2 Immunisation

Sub Health Centre is responsible for carrying out immunisation of infants and two doses of Tetanus to pregnant women as per the National Immunisation Schedule (NIS) and Vitamin A and booster doses to the children would also be given on "Village Health Nutrition Days (VHND)" organised at the AWC.

Children between the age group of 0-1 year administered with different doses of vaccines started from BCG to first dose of Vitamin-A as per NIS are considered as fully immunised.

During scrutiny it is noticed that the Department could not ensure full immunisation of children of the age group 0-1 year. The shortfall of immunisation ranged between 16 and 22 *per cent* during the year 2014-19 as shown in **Table 2.2.10**.

Table 2.2.10: Status of Immunisation in the State (0-1 year)

Year	Total no. of children (0-1 year old)	No of fully immunised children	Number of children partially immunised	Percentage of shortfall
2014-15	65910	54046	11864	18
2015-16	64561	54231	10330	16
2016-17	76307	62572	13735	18
2017-18	96877	75390	21487	22
2018-19	78202	61537	16665	21

***Source:** Departmental records*

[17] Target=2,268 (i.e., 189 AWCs x12 months)
[18] Target=2,268 (i.e., 189 AWCs x12 months)

Thus, the programme achieved moderately in providing full immunisation to children.

The Department stated (December 2020) in some remotest areas, there are some social stigmas in regard to non-immunisation/partial immunisation. The Information Education, communication (IEC) campaigns are being conducted in those areas.

2.2.11.5.3 Health Check up

Health check-up of children, pregnant and lactating mothers were to be provided by ANM and PHC staff at the AWCs. AWW would record this in Register Number-05 (Pregnancy and Delivery Register). However, as mentioned in the **Paragraph 2.2.7**, out of 189 test checked AWCs, 154 AWCs (81.48 *per cent*) either did not maintain (31AWCs) or partially maintained (123AWCs) the Pregnancy and Delivery Register. Therefore, audit could not ascertain the delivery of health services to children, pregnant women and lactating mothers from the AWCs record.

However, from the HMIS data it was noticed that the programme failed in providing in antenatal care to pregnant women and post-natal care to lactating mothers as detailed in **Table 2.2.11**.

Table 2.2.11: Status of Ante-Natal Care and Post-natal Care during 2014-19

Year	No. of pregnant women Registered for ANC	No of pregnant woman receiving the prescribed ANC	Percentage of pregnant women receiving ANC	Total No. of reported deliveries	No.of women getting post partum check up	Percentage of women getting post partum check up
2014-15	77,290	55,291	72	51514	36,731	71
2015-16	75,760	51,688	68	50953	38,141	75
2016-17	76,813	48,736	63	49477	36,909	75
2017-18	75,540	39,861	53	51833	36,961	71
2018-19	72,307	40,717	56	50343	32,747	65

***Source:** HMIS*

It can be seen from **Table 2.2.11** that providing antenatal care to pregnant mothers ranged from 53 *per cent* to 72 *per cent* and post-natal care to lactating mothers ranges between 65 *per cent* and 75 *per cent*.

The Department accepted (December 2020) the audit observation and stated that data sharing and cross validation between ICDS and NHM shall be done as suggested.

2.2.11.5.4 Referral Services

During health check-ups and growth monitoring sessions, sick and malnourished children as well as pregnant and lactating (P&L) mothers in need of prompt medical attention, would be referred to health facilities. Each AWC is provided a Referral Register (Register Number-09) for recording various services provided to the beneficiaries.

As mentioned in the **Paragraph 2.2.7**, out of 189 test checked AWCs, 178 AWCs (94.18 *per cent*) either did not maintain (133 AWCs) or partially maintained (45 AWCs) the Referral Register. As a result, audit could not ascertain the delivery of referral services to the sick and malnourished children as well as pregnant and lactating (P&L) mothers.

The Department accepted (December 2020) the audit observation and stated that it would look into the matter with due importance.

2.2.12 Poor infrastructure at AWC

As per data furnished by the Department as on March 2019, there were 9,911 operational AWCs in the State, out of those, 9,334 AWCs are running in their own building, 273 AWCs are running in rented house and 304 AWCs are running in other places like school, club house, community centres, *etc*. Further, out of 191 physically verified AWCs, three AWCs[19] were running in rented buildings.

The scheme envisaged certain level of physical infrastructure like toilets, safe drinking water facilities, electricity, well-built kitchen with LPG facilities, separate space for indoor and outdoor activities, weighing machine, *etc.* in each AWC. During physical verification of AWCs, Audit observed that the Department failed to provide these infrastructures in the sampled AWCs;

a) Physical condition of Anganwadi Centre (AWC) building:

During physical verification of the sampled 191 AWCs in four Districts, Audit observed that the following infrastructural facilities were poorly available in the sampled AWCs:

- Floor was incomplete or broken or dilapidated in 29 sampled AWCs;
- Roof was broken/leakage in 50 sampled AWCs;



Photograph 2.2.1: Broken floor in Taraban colony AWC under Dumburnagar ICDS Project



Photograph 2.2.2:Broken Roof in Das garia AWC under Hezamara ICDS project

b) Adequacy of space and furniture in Anganwadi Centre (AWC) building:

The Ministry prescribed norms (2011), for construction of AWC building. As per the norms AWC must have a separate sitting room for children/women, separate kitchen, store for storing food items, child friendly toilets, separate space for children to play (indoor and outdoor activities) and safe drinking water facilities. However, during

[19] Bagania Mura AWC, Word No. 4 AWC under Bishalgarh ICDS project and Suradhar Para AWC under Mohonpur ICDS Project

physical verification of the sampled 191 AWCs audit observed the following shortfalls;

- Separate spaces for cooking (kitchen) were not available in 36 AWCs
- Kitchens were in dilapidated condition in 11 AWCs;
- AWCs were functioning with *Kuchha* kitchen in 47 AWCs;
- Separate spaces for indoor activities of children were not present in 11 AWCs;
- Space for outdoor activities was not present in 37 AWCs;
- Cooking Stove was not available in 189 AWCs;
- Black boards were not available at 26 AWCs;
- Baby weighing machines were not-available/non-functional in 82 AWCs;
- Adult weighing machines were not-available/non-functional in 65 AWCs;
- Electricity was not available in 185 AWCs; and
- Medicine kit for controlling common ailments like fever, cold, cough, worm infestation, *etc*. including medicines and basic equipment for first aid was not available in all the sampled AWCs.



Photograph 2.2.3: Broken kitchen in Lungapar AWC under Dukli ICDS Project



Photograph 2.2.4: Das para AWC, under Mohonpur ICDS Project) having inadequate space for 23 students enrolled in the AWCs

Audit observed on Physical verification that the AWCs were using firewood for cooking of meal despite direction of the GoI to provide LPG connection to all AWCs under 'Umbrella ICDS' Schemes. Thus, the required infrastructural facilities were not available in the AWCs even after three decades of implementation of the scheme.

c) Hygiene and sanitation at Anganwadi Centres (AWCs)

Operational Guidelines for Food Safety and Hygiene for Supplementary Nutrition under ICDS envisaged that an AWC;

- preferably should have baby friendly toilets and there should be water supply facilities;

- should have an adequate supply of potable water with appropriate facilities for its storage, distribution for processing and cooking food;
- should have adequate drainage and waste disposal systems and facilities;

During physical verification of the sampled 191 AWCs it was noticed that all of the sampled AWCs did not have the essential infrastructure for maintenance of hygiene and sanitation as detailed below:

- In 58 AWCs (30.37 *per cent*) have no toilets facilities and in 39 AWCs the toilets were in dilapidated condition;
- Drinking water facilities within the range of 200 mtr as per guideline was not available in 47 AWCs (24.60 *per cent*) of the sampled AWCs;
- Despite the fact that hand pump/tube well were the most prominent source of drinking water in AWCs, Audit found that water was generally not tested;
- The Sanitary block required for waste disposal, was absent in 185 AWCs (96.85 *per cent*).



Photograph 2.2.5: Tuimairang AWC (under Jampuijala ICDS Project) having no sources of drinking water, collecting water from '*Cherra*' (Spring)



Photograph 2.2.6: Broken toilet in Haripur 12 Card-under Dumburnagar ICDS Project

Inadequate infrastructural support to AWCs and absence of toilets and drinking water in the AWCs put the young children and pregnant and lactating mothers in unhygienic condition and fraught with risk of being contaminated with various diseases. The infrastructural deficiencies at the AWCs were adversely affecting the quality of services rendered by them. As a result, the Department could not achieve the goal of repositioning the AWC as a "vibrant ECD centre" under ICDS mission mode to become the first village outpost for health, nutrition and early learning.

The Department stated (May 2020) that they had taken initiatives from 2019-20 for construction of AWC in convergence with MGNREGS fund and providing basic amenities like toilets, drinking water facilities, electricity, LPG connection in kitchen and development of infrastructure.

The Department's reply is not acceptable as it failed to provide toilets, safe drinking water facilities, electricity, well-built kitchen with LPG facilities, separate space for indoor and outdoor activities, weighing machine, *etc*. in each AWC despite availability of fund as pointed out at **Paragraph 2.2.10.2.** Further, the Department could not provide sufficient evidence to show effective convergence with MGNREGS in future.

2.2.13 Human Resource and Management

The Broad Framework (2012) of ICDS noted constraints of qualified and adequate number of human resources for meeting diverse needs for service provision. Further, it suggested that all States must have a comprehensive Human Resource (HR) Policy with focus on development of effective and transparent appointment and selection policies, strengthening the human resources, capacity development to ensure professional and child development services, welfare of the ICDS functionaries, *etc*. Further, Audit review of Internal Control System in Education (Social Welfare and Social Education) Department for the year 2005-06 and Integrated Audit of Education (Social Welfare and Social Education) Department for the year 2011-12 raised HR issues like vacancies in Supervisor and CDPO cadre, use of non ICDS staff (social education educator, junior social educator, school mother) for ICDS work, *etc*. On review of the HR related documentation, Audit observed constraints and challenges during the audit period which are discussed in subsequent paragraphs.

2.2.13.1 Non-rationalisation of Staff

GoI directed (March 2010) all the States to rationalise the existing staff pattern and revise it as per the prescribed norms[20] to ensure proper implementation, monitoring and coordination of the ICDS programme.

We found that the Department had not deployed manpower as per the prescribed sanctioned strength which are stated below:

- The Department had never engaged any Programme Officer/ Jt. Director, Statistical Assistant in the State cell during 2014-15 to 2018-19 as directed by the Ministry of Women and Child Development (MoWCD);
- Similarly, the Department had never engaged any Statistical Assistant at the district cell as directed by the MoWCD;

However, analysis of overall manpower deployment at various cells against the prescribed sanction strength, audit observed that the Department engaged excess number of staff in the State cell at Agartala for most part of the period covered in

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Level	No of post as per norms
State	11
District	6
Project	CDPO-1, Supervisors- one post per 25 operational AWCs, others-3

audit. On the other hand, there was consistent shortfall in staff engaged in the projects as details are given in **Table 2.2.12**.

Table 2.2.12: Details of deployment of staff at different level

Year	Suggested staff pattern by GoI (Nos.)	Men in position	Excess (+)/ less (-)	Percentage of excess or shortfall (-)/excess (+)
State Cell				
2014-15	11	16	5	45.45
2015-16	11	6	-5	-45.45
2016-17	11	21	10	90.91
2017-18	11	23	12	109.09
2018-19	11	6	-5	-45.45
District Cell				
2014-15	48[21]	28	-20	-41.67
2015-16	48	40	-8	-16.67
2016-17	48	23	-25	-52.08
2017-18	48	27	-21	-43.75
2018-19	48	30	-18	-37.50
Project Cell				
2014-15	620[22]	492	-128	-20.65
2015-16	620	482	-138	-22.26
2016-17	620	453	-167	-26.94
2017-18	620	446	-174	-28.06
2018-19	620	359	-261	-42.10

***Source**: Departmental records*

Persistent shortfalls in man power at the district and projects adversely affected monitoring and supervision of the AWCs as discussed in **Paragraph 2.2.14**.

On being pointed out, the Department replied (May 2020) that it deployed the staff in different levels (State level, District Level & Project Level) for better implementation of the scheme. The reply of the Department is not acceptable as field units were deprived of key staffs while State level office at Agartala engaged excess staff.

2.2.13.2 Vacancies in field cadres

It was observed that there were substantial vacancies in field cadres during Audit review of the Internal Control System in Education (Social Welfare and Social Education) Department for the year 2005-06 and Integrated Audit of Education (Social Welfare and Social Education) Department for the year 2011-12. On reviewing the situation again during 2014-19, it is observed that 49 to 61 *per cent* vacancies persisted in different field cadres as detailed in **Table 2.2.13**.

[21] Total eight districts x 6= 48

[22] Super visors=396, CDPO=56, others=168 (56x3)

Table 2.2.13: Comparative analysis on vacancies in various cadre during 2007-19

(in number, percentage of vacancies in parenthesis)

Sl. No.	Cadre	Total Sanction post	Vacancies as on March 2012	Vacancies as on March 2019	Remarks /Reasons for vacancies
1	CDPO	56	8 (14)	34 (61)	• Inability to frame recruitment Rules: (i.e. for the post of Statistical Assistant, *etc*. where there were 100 *per cent* vacancies); • Inability to recruit and promote staff in CDPO and Supervisor cadre due pending court cases; • Absence of dedicated ICDS cadres (Supervisors to DPO) • Non-rationalisation of appointment of AWWs as Supervisors, AWH as AWW
2	Supervisor	436	161 (37)	213 (49)	

***Source**: Departmental Records*

In reply, the Department stated (May 2020) that vacancies in CDPO cadre was held up due to a pending court case. Further, Department stated that they have floated e-tender for filling up of vacancies in Supervisor cadre through outsourcing.

Since vacancies in both CDPO and Supervisors cadres have persisted for long time the Department had obviously not taken any action for a long term solution to the issue.

2.2.13.3 Overburdened Anganwadi Workers (AWW)

Under ICDS Framework (2012) and NHM framework (2005 and 2012) an AWW is supposed to prepare Annual Village Child Health Plan, assist in Village Health Action Plan, has to provide health services/ counselling to beneficiaries, impart pre-school education and finally maintain accounting and store related records. The AWW had to procure necessary supplies from market to ensure preparation of Hot Cooked Meal. The AWW provides all ICDS/ Anganwadi services to the beneficiaries. Accordingly, an AWW performed more than 20 types of diverse duties like carrying out door to door survey, immunisation, weighing of the children for tracking the health and growth of mother and child, organisation of various community meetings and events, book keeping of entire accounts of expenditure, preparation and submission of Monthly Progress Reports (MPRs), *etc*. apart from providing supplementary nutrition and pre-school education. The Department assigned additional works related to social pension and other duties besides the normal course of duties to AWW, they had to perform these duties beyond the normal duty hours. The Department stated that there were 9,911 numbers of Anganwadi workers (AWW) posted in 9,911 Anganwadi Centres. The engagement of the AWWs were on temporary and no work no pay basis. It was seen in Audit that the Department had not done any scientific study to find number of working hours per week for an AWW. This was necessary to assess whether AWW had been assigned with reasonable workload and in the context of

large number of research studies/ papers[23] pointing out overburdening of AWWs. Besides though, the AWW was not a regular Government employee but only a social worker usually with matriculate qualification, she was expected to be a planner, health worker, educationist and an accountant.

The role of the AWW in ICDS and the numerous expectations from them needed a serious review, since they are a crucial arm of the ICDS programme.

The Department accepted (December 2020) the audit observation.

2.2.13.4 Capacity Building

Capacity building is necessary for effectiveness of employees and workers at all levels. Accordingly, ICDS guidelines[24] envisage different types of trainings[25] for ICDS functionaries and trainers. These trainings were to be imparted at NIPCCD, AWTC and MLTC. Audit scrutiny in this regard revealed that there were serious shortages in training to AWH (upto 73 *per cent*) during 2014-19. CDPO or Supervisor were not provided refresher training nor was any NIPCCD training conducted during the last five years.

The Department had not established any Middle Level Training Centres (MLTCs) for imparting training to Supervisors and Instructors of AWTCs at the district level and neither had they worked out any arrangement with other North Eastern States for training purpose. Further, institutionalised online courses for Job Training Courses (JTC) for Instructors of MLTCs/AWTCs had not been operationalised in accordance with scheme guidelines.

The Department accepted (December 2020) the audit observation.

2.2.14 Monitoring and Ownership of the programme

ICDS Scheme envisaged multiple tier monitoring system at the National, State, District, Project/ Block and Anganwadi levels through monitoring committees called State Level Monitoring and Review Committee (SLMRC), District Level Monitoring and Review Committee(DLMRC), Block Level Monitoring Committee (BLMC) and Anganwadi Level Monitoring and Support Committee (ALMSC). On review of monitoring related documents and on the basis of joint physical verification of

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[23] Operational Assessment of ICDS Scheme at Grass Root Level in a Rural Area of Eastern India: Time to Introspect**https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5296463/**
J ClinDiagn Res. 2016 Dec; 10(12): LC28–LC32.PMCID: PMC5296463Published online 2016 Dec 1. doi: 10.7860/JCDR/2016/23059.9041 PMID: 28208890

[24] Refresher training is given to the ICDS functionaries and Instructors of AWTCs / MLTCs every two years to equip them with knowledge, skills and capabilities to implement the ICDS Scheme

[25] **Induction training**- Induction training is conducted for supervisors in ICDS programme for five working days; **Job Training**- Job training is conducted for Anganwadi workers, supervisors and CDPOs is organised for a longer duration of 26 working days; **Refresher Training**- Refresher training is conducted with a shorter duration of five working days with a gap of two years of service; **Theme-Based Skill Specific Training**- it is essentially a institutional based and conducted to impart key experiences to trainees with proper skill practice to gain competency for enhancing their performances on specific component of ICDS programme followed by the vertical training for the block functionaries at the district level

Anganwadi centres, Audit observed that the monitoring process was largely ineffective for following reasons:

a. Issues related to performance and constraints of the scheme; preparation and circulation of agenda for meeting of the monitoring committee; recording of minutes, follow up of decisions taken in the previous meetings were not found on record;

b. There was nothing on record to demonstrate review of the Monthly Progress Reports (MPR) at Directorate level and consequently communication of positive or negative feedback to the lower implementing units (districts and projects);

c. Scheme guidelines envisaged that officials at all levels (State to Project) would physically visit Blocks/AWCs at prescribed frequency to assess functioning of AWCs on following key parameters, delivery of services, quality of services, infrastructural issues, and community participation (PRIs, SHG, women group). Audit noticed that during 2014-19 there was always a shortfall in visits of senior functionaries in physical visits to Projects and AWCs as envisaged[26]. The details are given in **Table 2.2.14**.

Table 2.2.14: Shortfall in physical visits in AWC and Blocks

(in number, percentage in parenthesis)

Year		2014-15	2015-16	2016-17	2017-18	2018-19
AWC visits by DISE/DPO [27]	Target	566	566	566	566	510
	Achieved	197	211	359	311	311
	Shortfall	369 (65)	355 (63)	207 (37)	255 (45)	199 (39)
Block visits by DISE/DPO [28]	Target	112	112	112	112	102
	Achieved	68	63	96	113	114
	Shortfall	44 (39)	49 (44)	16 (14)	0	0
AWC visits by CDPO[29]	Target	3196	3179	3178	3178	3480
	Achieved	1870	1955	1920	1973	1760
	Shortfall	1326 (41)	1224 (39)	1258 (40)	1205 (38)	1720 (49)
AWC visits by Supervisor[30]	Target	38352	38148	38136	38136	11600
	Achieved	19817	19287	18813	17298	13168
	Shortfall	18535 (48)	18861 (49)	19323 (51)	20838 (55)	0

***Source**: Departmental record*

[26] Norms for visit of AWCs and Projects by senior ICDS functionaries are fixed as per departments order (Nov 2014 and March 2018)

[27] DISE will cover 10 *per cent* of AWC in a year from 2014-18 i.e, 566=10 *per cent* of 5,663 AWCs under 4 sample districts. During 2018-19 all blocks to be covered within 100 days (28 blocks in 4 sample dist x 3.65 =102) and atleast 5 AWCs during each block i.e 510= 102 block visits x 5AWCs

[28] DISE will cover all 28 blocks per quarter during 2014-18 i.e, 112=28 block x 4. During 2018-19 all blocks to be covered within 100 days i.e, 28 blocks in 4 sample dist x 3.65 =102

[29] Sampled CDPOs (i.e 14 CDPO) will visit all AWCs in their jurisdiction during 2014-18. And during 2018-19 CDPO will visit 30 *per cent* of AWCs under their jurisdiction in 100 days

[30] Supervisors in Sampled CDPOs (i.e 14 CDPO) will visit all AWCs in their jurisdiction every month during 2014-18 and during 2018-19 supervisors will visit 100 per cent of AWCs under their jurisdiction in 100 days

The ICDS Broad Framework (2012) proposed to involve PRIs for monitoring of the day-to-day functioning [31] of the AWCs, especially regarding the regularity and quality of delivery services. On review, Audit observed that involvement of PRIs was limited only to selection of AWW/ AWHs and monitoring and supervision of services delivered under AWCs. The PRIs were not involved in construction and maintenance of AWCs, supervision of SNP, *etc.* and ALMSC failed to meet at prescribed frequency and there was a shortfall of 57 to 61 *per cent* during the audit period.

d. Broad Frame work suggested that all the official upto DPO/DISE level should prepare a brief report (maximum 2 pages) critically analysing the programme implementation reflecting the findings of their field visits in their respective monthly/quarterly progress reports. Findings from the field visits would be discussed at the sector/block/district/State level review meetings. State Directorate will have the overall responsibility to compile the district-wise key findings of the field visits at the end of every quarter and submit the same to the GoI. On review, Audit observed that above process was not followed.

The Department stated (December 2020) that meeting at all level monitoring committee have been conducted at district/Block/AWC level periodically. The reply is not acceptable as the claim of the Department could not be verified in audit in absence of records.

The weak monitoring system resulted in not only poor outcomes and service delivery but also non-compliance with financial rules. The involvement of PRIs in the ICDS was limited.

2.2.14.1 Maintenance of records

An AWW needs to maintain records and registers for the services provided by the AWC. Accordingly, AWW is required to maintain 12 registers for recording the service provided per day per beneficiary. The records and registers help to assess and evaluate the activities and performance of the AWCs. Audit scrutiny of 189 test checked AWCs revealed that the AWCs either did not maintain the records or the maintenance was improper/partial. Details are given in **Appendix 2.2.1**.

The Department accepted (December 2020) the audit observations and stated that the deficiencies in maintenance of records would be rectified with personal intervention and proper training.

[31] Observance of monthly Village Health and Nutrition Days (VHNDs), availability of prescribed records and registers at AWC, monitoring of regular payment of honoraria to AWWs & AWHs, Construction of AWCs and its maintenance

Case Study of selected Village Committees (VCs) under Mandwai Block

A Case Study was conducted in two VCs[32] under the Mandwai Block of west Tripura district during February 2020 by interviewing 50 beneficiaries (Pregnant women and Lactating mothers) and physical verification of records maintained at CDPO, Block and Concerned PHCs to assess community ownership, client satisfaction and coordination/ convergence between Social Welfare and Health Departments at the cutting edge level.

Community Ownership

The VCs received fund from many sources like Panchayat Development Fund (PDF), Thirteen Finance Commission (TFC), North East Rural Livelihood Project (NERLP) and MGNREGS for development of the villages. On review, Audit noticed the failure of the Department to utilise the fund available to VCs for development of AWCs under their jurisdiction as it could utilise only 0.6 *per cent* of the total available fund during 2014-19 despite so many AWCs having either dilapidated infrastructure facilities[33] or having unusable or no toilets[34] or having no source of drinking water[35]. **Table 2.2.15** shows the utilisation of fund from various sources for development of AWCs.

Table 2.2.15: Utilisation of various fund for development of AWCs

(₹ in lakh)

Name of the VCs	Year	Fund received	Source of fund	Total expenditure (expenditure on AWC development in bracket)
Ashigarh	2014-15	5.90	MGNREGS,PDF,TFC , NERLP, *etc.*	2.03 (0)
	2015-16	7.34		5.20 (0.44)
	2016-17	4.49		3.27(0.23)
	2017-18	3.71		1.07 (0)
	2018-19	4.96		4.37 (0)
Total Ashigarh		**26.4**		**15.94 (0.67)**
Mandai	2014-15	42.69		31.88 (0)
	2015-16	19.26		14.94 (0)
	2016-17	7.20		2.15 (0)
	2017-18	8.18		1.85 (0)
	2018-19	9.13		2.80 (0)
Total Mandai		**86.46**		**53.62**(0)
Total		**112.87**		**69.56 (0.67)**

***Source**: Records of two Village Councils*

[32] Mandwai Nagar VC and Ashigarh VC
[33] Balucdhum para AWC & Gasia para
[34] Gasia para AWC & Nepal Mura AWC
[35] Gasia para AWC

Client satisfaction

Audit conducted interview of 50 beneficiaries to assess their satisfaction level with the services provided by the AWCs. The results of the survey were as follows:

a. 98 *per cent* beneficiaries were not satisfied with the involvement of community in remedial of problem or participation for betterment of AWCs.

b. Morning snacks were not provided to 86 *per cent* Pregnant and Nursing Mother.

c. 78 *per cent* beneficiaries were not satisfied with the quality of Hot Cooked Meal provided at AWC.

d. 70 *per cent* beneficiaries replied that egg, vegetables were not provided regularly in the diet.

e. 50 *per cent* pregnant mother were not satisfied with the knowledge sharing level of AWW or ASHA worker for infant feeding practice and child care, *etc*.

f. 66 *per cent* beneficiaries were not satisfied with the quantity of THR received.

Coordination and convergence between Social Welfare and Health Departments

Both AWW under Social Welfare Department and ASHA/ANM under Health Department render services to the same set of beneficiaries (pregnant and lactating mother, infant and young children). Both the cutting-edge functionaries keep records of services provided to the same set of beneficiaries. Audit cross –checked services provided to 50 beneficiaries with respect to records available with the beneficiary (Mother and Child Protection card), Primary Health Centre and AWC. This exercise revealed wide discrepancies in data maintained at AWCs, Health Sub centres and Mother and Child Protection (MCP) cards as shown in **Table 2.2.16**.

Table 2.2.16: Cross-Verification of services provided to 50 beneficiaries[36]

(in number)

MOTHER			
Nature of service provided	**Sub centre**	**MCP card**	**AWC record**
No. of Pregnant/Lactating (PL) completing the prescribed number of ANC	**3**	**8**	**0**
No. of pregnant mothers receiving IFA tablets	1	14	2
No of Post Natal Care done	2	0	no data
No of pregnant mother Hb level tested	0	18	no data
No. of moderately anaemic mother	0	1	no data
CHILDREN			
No. of Low birth weight(2.5kg)	2	3	2
No. of Full immunisation(up to 11 months)	3	4	no data

***Source**: Records of health sub centre, Register No.5 &No.6 of AWC and MCP card*

[36] Survey was conducted on 34 pregnant mother and 16 lactating mother in Ashigarh Village Council and Mandainagar Village Council

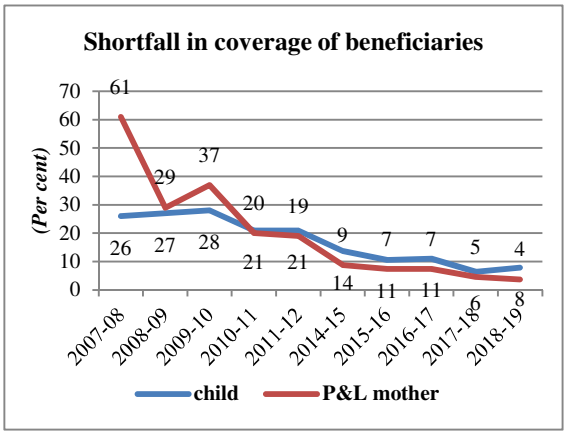
From the **Table 2.2.16,** it was noticed that records of health check-up to pregnant and Lactating mother, immunisation of children and weight record of newborn maintained at AWCs did not tally with those maintained at Health Sub Centres and MCP card available with the beneficiaries. Therefore, there was little assurance about quantum and quality of services provided to the beneficiaries at AWCs. This exercise also showed lack of convergence in sharing data and knowledge between Health Department and Social Welfare Department.

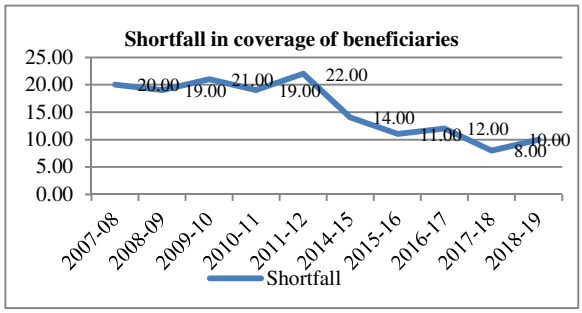
2.2.14.2 Follow-up Audit

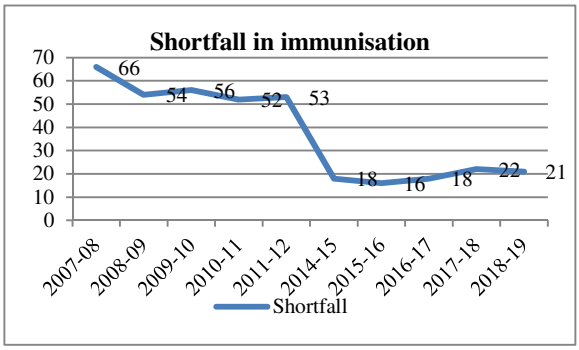
An "Integrated Audit (IA) of the Education (Social Welfare and Social Education) Department was carried out in 2012 covering the period from 2007-08 to 2011-12 and featured in the Audit Report for the year ended 31 March 2012 (Report No. 1 of 2013). It highlighted significant lapses in construction of Anganwadi Centres (AWC), Non-availability of drinking water facilities, toilets and kitchen sheds in AWCs, non-provision of supplementary nutrition to enroll beneficiaries, absence of linkages, *etc*. During the current audit, a follow-up on the action taken by the Department on the audit observations made in the previous report was done. Some of the major audit observations featured in the Report and status of the action taken by Department are given in **Table 2.2.17**.

Table 2.2.17: Status of the action taken by the Department on audit observations

Summary of audit observations of previous Audit Report	Reply of the Department on the Audit observations	Status of the action taken by the Department noticed during current audit
As on 31 March 2012, 3,094 AWCs (31 *per cent*) of the total 9,906 AWCs reported non-availability of drinking water-facilities, while the existing water sources in 808 AWCs were non-functional.	In the Exit Conference, the Principal Secretary stated (April 2013) that efforts had been taken to augment the basic facilities in the AWCs in convergence with other scheme/ Departments which had resulted in increase in the facilities in the AWCs.	Audit carried out physical verification of 191 sampled AWCs in four Districts to assess ground reality of the facilities available in AWCs and observed that:
4,097 AWCs (49 *per cent*) do not have toilet facilities at all, while the		47 AWCs (24.60 *per cent*) had no drinking water facilities within the range of 200 mtr. in contravention of scheme guidelines. In 58 AWCs (30.37 *per cent*) no toilet facilities were available and in 39 AWCs (20.42 *per*

Summary of audit observations of previous Audit Report	Reply of the Department on the Audit observations	Status of the action taken by the Department noticed during current audit
available facilities in 911 AWCs were not usable. 5,309 AWCs (54 *per cent*) do not have kitchen shed despite the fact that cooking of meal in AWCs for providing hot cooked meal to the children and mothers is one of the key activities under ICDS programme.		*cent*), the toilets were found in dilapidated condition; In 36 AWCs (18.85 *per cent*), separate spaces for cooking (kitchen shed) were not found available; In 11 AWCs (5.75 *per cent*), kitchen sheds were found in dilapidated condition; In 47 AWCs (24.60 *per cent*), AWCs were functioning with Kuchha kitchen.
There was significant shortfall in providing SN to the enrolled beneficiaries which ranged from 21 to 28 *per cent* in respect of children between the age group of three to six years and 19 to 61 *per cent* i.r.o Pregnant & Lactating (P&L) mothers.	The Department stated (March 2013) that steps were being taken to extend nutritional coverage with the introduction of "Take Home Ration" for infants and P&L mothers.	Audit observed that the Department reduced the shortfall in coverage of the beneficiaries from 61 *per cent* in 2007-08 to four *per cent* during 2018-19 in providing SN to the P&L mothers and from 26 *per cent* in 2007-08 to eight *per cent* during 2018-19 in providing SN to children in the age group of three to six years as can be seen from the following chart:  However, the Department did not implement the THR throughout the State (except in Gomati District out of eight districts in the State) in contravention of the provisions envisaged in scheme guidelines which have been described in **Paragraph 2.2.11.4.1**.

Summary of audit observations of previous Audit Report	Reply of the Department on the Audit observations	Status of the action taken by the Department noticed during current audit
There was shortfall which ranged from 19 to 22 *per cent* in providing Pre-school Education (PSE) to the enrolled children between the age group of three to six years in the State. Further, physical verification of 116 AWCs in 10 ICDS Projects revealed that 34 *per cent* children enrolled in AWCs were found present and provided PSE.	The Department accepted the audit observation and stated that most of the children attended private nursery school which resulted in shortfall in attendance for PSE in the AWCs. In the Exit Conference, the Principal Secretary stated (April 2013) that steps were being taken to streamline the AWCs to attract children for PSE.	During current audit (2014-2019), shortfall in coverage of PSE had been reduced to eight *per cent* in 2018-19 from 22 *per cent* in 2011-12 as can be seen from the following chart:  Further, physical verification of 191 AWCs in 14 ICDS projects revealed that on average 84 *per cent* children were provided PSE during 2014-19.
The Department did not prepare any convergent arrangement with the Health Department to extend the pre-natal and post-natal check up to P&L mothers and children upto the age of six years. As a result, health check-ups for the enrolled children and mothers had never been done in the AWCs and consequently facilities for referral services	Department stated that Medical Officer in-charge of the respective areas were made responsible for ensuring regular visit of ASHA and other health workers in AWCs for providing services at the AWCs. In the Exit Conference, the Principal Secretary added that Government also planned to set up one Health Sub-centre in each area with one Supervisor stationed there to monitor health related issues in AWCs.	Physical verification of records of 191 test checked AWC, revealed that the AWCs organised Village Health and Nutrition Day in convergence with the Health Department for providing immunisation, health check-up and referral services to the targeted beneficiaries though there was acute shortfall which ranged between 64 to 73 *per cent* in organising Health Day and 86 to 96 *per cent* in organising Nutrition Day as described in **Paragraph 2.2.11.5.1**. However, the AWCs either not maintained or partially maintained the Pregnancy and Delivery register (Register number 05). Therefore, audit could not ascertain the delivery of health check-up to the children and P&L mothers. However, from HMIS data it was noticed that 53 to 72 *per cent* pregnant mothers were provided antenatal care and 65 to 75 *per cent* lactating mothers were provided post-natal care during 2014-19.

Summary of audit observations of previous Audit Report	Reply of the Department on the Audit observations	Status of the action taken by the Department noticed during current audit
from the AWCs were also absent.		On review, we noticed that there was no institutional mechanism of data sharing and cross validation of data amongst the functionaries of ICDS (AWW) and NHM (ASHA, ANM). Further, CDPOs and MOs did not undertake joint inspection of AWCs as described in **Paragraph 2.2.9.1**.
The Department did not prioritise the immunisation of the children in age group 0-1 years as only 34-48 *per cent* children could be provided with full vaccinations. Further, the Department did not organise immunisation activities in the AWCs.		In respect of providing immunisation to the children in age group of 0-1 year, the Department reduced the shortfall from 66 *per cent* during 2007-08 to 21 *per cent* during 2018-19 as can be seen from the following chart. 

It can be seen from the above, with respect to the findings enumerated in the previous Audit Report, that there has been a slight improvement in creation of infrastructure facilities in AWCs, significant improvement in coverage of beneficiaries under SNP and PSE as well as in immunisation of new born babies. However, there was significant shortage in organising Health Day and Nutrition Day.

2.2.15 Conclusion

The Performance Audit of Integrated Child Development Services (ICDS) revealed that the Department's achievement of enrolment of beneficiaries under the ICDS, during the period 2014-19, was encouraging being 86 to 98 *per cent* during the period. However, the several deficiencies noticed during the Performance Audit of the Programme, in planning, management, execution as well as monitoring in implementation of the Programme, clearly indicated tremendous scope for improvement in programme implementation.

The Department of Social Welfare and Social Education, which was responsible for the programme implementation, did not do Programme planning as per GoI guidelines. The Planning process was deficient in absence of decentralised planning

with involvement of local bodies, trained professional experts and convergence with other State Programmes relating to health and sanitation. There was little involvement of the Village Health Sanitation and Nutrition Committees in the planning process. On review, we noticed that there was no institutional mechanism of data sharing and cross validation of data amongst the functionaries of ICDS (AWW) and NHM (ASHA, ANM).

The Department of Social Welfare and Social Education received total funds of ₹ 816.64 crore (Central and State), during 2014-19, against which expenditure incurred under the ICDS was ₹ 836.29 crore. Though the State Appropriation accounts showed an overall excess expenditure of ₹ 19.65 crore for the period, it was seen that there were savings of ₹ 62.84 crore also during the same period. Specific instances of non-utilisation of GoI funds for construction, repair and provision of basic facilities like toilets and safe drinking water, *etc.* in AWCs were noticed, which have been mentioned in detail in the Report. As a result, the AWCs had poor infrastructure facilities. Physical verification of AWCs revealed that all the 191 AWCs did not have basic infrastructure facilities like toilets, safe drinking water facilities, electricity, kitchen with LPG facility, *etc*. The Department had not released their share of funds to the projects as per the allotted budget.

Available funds meant for organising training programmes for the ICDS projects, IEC activities, supply of kits to preschool children were also not utilised. The Department clearly needed better monitoring for better implementation of all components of the programme and increasing the spending of allotted funds.

As on 31 March 2019, the State had 9,911 operational Anganwadi Centres (AWCs) of which 9,334 AWCs are running in their own building, 273 AWCs were in rented houses and 304 AWCs were operating from other places like school, club house, community centres, *etc*. All 9,911 Anganwadi workers (AWW) engaged were on temporary and no work no pay basis. The AWWs were expected to perform multiple roles and duties, which were never reviewed despite several studies conducted by the Department.

Under Early Childhood Education and Development Component of the Scheme, there were shortfalls in enrolment of children in the State, for pre-school education. The shortfall in coverage of enrolled children for pre-school education ranged between eight to 14 *per cent* in the State whereas in the sampled AWCs the shortage was between 14 to 17 *per cent*. The reasons for such decline was due to poor infrastructure facilities, non-availability of pre-school kit, monthly ECCE days not organised to address the various issues.

There were serious shortfalls noticed in home visits by Anganwadi Worker (AWW) to educate the beneficiaries under 'Care and Nutrition Service' and in organising meetings with mothers.

Under Supplementary Nutrition Programme (SNP) component, the Department achieved 86 to 98 *per cent* coverage of the targeted beneficiaries during 2014-19. However under (SNP) the Take Home Ration (THR) was implemented in only one out of the eight districts(Gomati) of the State and the Department had not provided the district wise supply details of the food grains costing ₹ 24.96 crore lifted by them. The percentage of severely malnourished children in 0-5 years of age was 0.15 to 0.25 *per cent* during 2014-19. Low weight of new born babies and number of anaemic pregnant women increased during 2014-19, which was a pointer to the Department to address the malnutrition in children and mothers seriously. The Department had not carried out the prescribed mandatory laboratory checks of food materials distributed under the Supplementary Nutrition since inception of the scheme, though this was the State's responsibility. As a result, the Department could not ensure that standard quality of food enriched with good nutritive valued had been provided in AWCs under the scheme. Record relating to testing of water used for cooking in the AWCs was also not found.

Audit also noticed that the Department could not ensure full immunisation of children of the age group 0-1 year, the shortfall ranged between 16 and 22 *per cent* during 2014-19. There was shortfall in providing antenatal care to pregnant women and post-natal care to lactating mothers during 2014-19.

The Department engaged excess number of staff in the State Cell situate at Agartala whereas there was consistent shortfall of staff engaged in the projects. Capacity Building of staff suffered due to inadequate/nil and basic/ refresher training programmes not organised/ arranged for by the Department. They had also not established any middle level training centre for imparting training to the Supervisor and the Instructors of Anganwadi Training Centres (AWTCs).

Monitoring mechanism was defective with shortfalls in supervision of AWC. There was no evidence of monitoring by the CDPOs and the Supervisors in absence of any records maintained. The poor infrastructure facilities in AWCs, inadequate programme outcomes and services delivery clearly indicated that the Programme was not monitored effectively.

2.2.16 Recommendations

The State Government may consider the following recommendations:

i. Decentralise the planning process so that role of Village Health Sanitation and Nutrition Committee (VHSNC) and civil society organisation is ensured in implementation of Integrated Child Development Services (ICDS);

ii. Increase the beneficiary coverage of both mothers and children in collaboration with the Health Department, considering the present gaps in data of the two Departments.

iii. Timely utilisation of allotted funds on infrastructure development as well as training and capacity building activities of the programme;

iv. Improve the infrastructure facilities in the Anganwadi Centres;

v. Implement the Take Home Ration under Supplementary Nutrition programme in the entire State for pregnant and lactating women and infants (6 month-3 years);

vi. Conduct periodical test of quality of food served in AWCs to ensure that food material contain the required nutrition component for children and to ensure cent percent immunisation of newborn children;

vii. Strengthen monitoring mechanism as per prescribed structure and to ensure all records are kept upto date in compliance with the scheme guidelines.

CHAPTER III: ECONOMIC SECTOR

CHAPTER III: ECONOMIC SECTOR

3.1 Introduction

This Chapter deals with the findings of audit on the State Government units under Economic Sector.

The details of the total budget allocation and expenditure of the Departments under Economic Sector during the year 2018-19 are given in **Table 3.1.1**.

Table 3.1.1: Details of allocation and expenditure under Economic Sector (Non-PSUs)

(₹in crore)

Name of the Department	Total budget allocation	Expenditure
Co-operation	42.30	31.20
Public Works (Roads & Buildings)	1,036.45	816.80
Power	94.85	74.55
Public Works (Water Resource)	166.20	96.02
Information and Cultural Affairs	37.64	35.39
Industries & Commerce	141.78	115.86
Industries & Commerce (Handloom, Handicrafts & Sericulture)	39.41	39.40
Fisheries	75.63	68.19
Agriculture	487.86	377.27
Horticulture	152.40	80.48
Animal Resources Development	123.66	98.47
Forest	118.09	104.58
Science, Technology and Environment	12.42	11.38
Factories and Boilers Organisation	2.95	2.65
Information Technology	19.22	1.86
Tourism	3.93	3.79
Total number of Departments = 16	**2,554.79**	**1,957.89**

Source: *Appropriation Accounts – 2018-19.*

We audited 38 units under the Sector, covering expenditure of ₹ 1,312.63 crore (including expenditure of the previous year) and raised seven paragraphs of money value of ₹ 24.99 crore.

Out of these, six paragraphs are under Public Works Department and one is under Animal Resources Development Department.

PUBLIC WORKS (Roads & Buildings) DEPARTMENT

3.2 Unproductive expenditure

There was unproductive expenditure of ₹ 9.15 crore on work relating to Construction of Kailashahar District Jail which remained incomplete due to poor contract management and negligence of the Home Department in not supervising the work closely.

The Government of Tripura have adopted the Central Public Works Department Manual for its State PWD with certain modifications. As per para 15.1 of CPWD Works Manual, a tender for civil work should be invited only after technical sanction and after detailed design and drawings are prepared. After the work is awarded, no major modifications should be made in the scope of the work.

Audit scrutiny (February-March 2019) of records of the Executive Engineer (EE), Kailashahar Division, PWD (R&B), Unakoti District showed that the Division was entrusted (November 2013) with a work of the Home Department namely **"Construction of Kailashahar District Jail"**. After the administrative approval and technical sanction for ₹ 11.28 crore, the Division awarded the work (June 2014) to the lowest tenderer at a negotiated cost of ₹ 11.71 crore with a stipulation that the work be completed within 24 months i.e., by June 2016.

Our scrutiny (February- March 2019) revealed that the work was not only incomplete but was abandoned due to delays on part of the Division in handing over the structural drawings to the contractor, modification of scope and design of the work, inadequate testing of the subsoil of the project site, *etc*. The last drawing was handed over to the contractor only on 28 October 2016. Owing to the additional items/modification of work, the contractor demanded (July 2016) either an enhancement in the rate up to 30 *per cent* of the estimated cost of the work or foreclosure of the contract. The Department could not resolve the dispute with the contractor and rescinded the contract (January 2019) i.e., about 30 months after the scheduled date of completion of the work. The expenditure incurred till then was only on construction of the wall at the site.

Thus due to inept project management by the PWD and frequent changes made in the scope of the work by them and the user Department, the work remained incomplete (December 2019) even after lapse of three and a half years from the scheduled date of completion resulting in unproductive expenditure of ₹ 9.15 crore on the incomplete work.

Government stated (August 2019) that tender for the balance work, after finalisation of measurement, had been prepared and would be called soon.

The reply only confirms the audit conclusions and the fact that the Home Department which required the Jail did not supervise it closely to ensure its timely completion.

Recommendation: The Home Department may ensure that the Public Works (R&B) Department completes the jail work expeditiously and hands it over to them.

3.3 Blocking of public funds

The Executive Engineer, Belonia Division, PWD (R & B), had irregularly drawn funds of ₹ 8.70 crore for procurement of material without actual requirement, resulting in blocking of public funds for more than four to eight years.

The State has adopted the CPWD Manual for the State PWD and works carried out by them. Clause 36.2 of CPWD Works Manual 2012 provides that;

In order to facilitate control over the purchase of stores for works in the Division, particularly Maintenance Divisions, all estimates for a year should be sanctioned well in advance of commencement of that year. Before the commencement of the year, the requirement of materials of all the works in a Sub-Division and the Division should be consolidated and estimate prepared on the basis of these figures. Ordinarily, the materials should be purchased only for the works in progress and no reserve stock should be kept, except with the specific sanction of and up to a monetary limit to be prescribed by the competent authority. Due consideration of the anticipated requirements of the stores according to the nature and quantum of work to be executed in each Division during a year should be taken.

Test check (January 2019) of records of the Executive Engineer (EE), Belonia Division, PWD (R&B) revealed that the Division, in violation of the above manual provision, obtained (23 March and 25 March 2015) four Proforma bills for ₹ 15 crore from the PWD Stores Division, Agartala for procurement of tor steel (20 mm dia and above: 407.46 MT) and bitumen (2043.20 MT) and made (26 March 2015) an advance payment of ₹ 14.03 crore.

Stores Division issued four Sale Orders (1 June 2015) with a request to take delivery of the material within 30 days. The Division lifted (between 13 October 2015 and 15 September 2018) 20.17 MT steel (out of 407.46 MT) and 1,228.63 MT bitumen (out of 2,043.20 MT) value at ₹ 6.13 crore leaving an unadjusted balance of ₹ 7.90 crore as detailed in **Table 3.3.1**.

Table 3.3.1: Statement showing details of material procured and lifted

(₹in crore)

Sl. No.	Pro forma bill No. & date	Sale order No & date	Description of material	Amount paid to Stores Division	Material for which payment made (MT)	Value of material lifted by the Division	Material lifted (MT)	Balance amount remaining unadjusted	Material yet to be lifted (MT)
1	05 23.03.15	05 01-06-15	Steel	2.00	407.46	0.10	20.17	1.90	387.29
2	06 23.03.15	06 01.06.15	Bitumen	2.99	471.51	2.96	565.47	0.03	-93.96
3	08 25.03.15	07 01.06.15	Bitumen	7.00	1,100.18	3.07	663.15	3.93	437.03
4	11 25.03.15	08 01.06.15	Bitumen	2.04	471.51	Nil	Nil	2.04	471.51
Total				**14.03**		**6.13**		**7.90**	

Scrutiny revealed that the Division had booked (March 2015) 407.46 MT steel with value amounting to ₹ 2.00 crore (Pro-forma bill No. 5 dated 23 March 2015) against a work *viz.* "Construction of 10 bedded PHC including quarter at Maicherra" when the work was near about in completion stage and when there was no provision in the agreement of the work for issue of store material. Thus, steel was booked against the said work without actual requirement, presumably to avoid lapse of budgeted funds. Further, the EE has had made an advance payment (March 2010) of ₹ 80 lakh which remained unadjusted due to non-lifting of the material (bitumen)

It was seen that while furnishing yearly requirement of material for the year 2015-16, as per instructions (April 2015) of the Superintending Engineer, 3rd Circle, PWD(R&B), Udaipur, the EE Belonia Division had placed (May 2015) a requirement of only 50 MT steel (20 mm dia) and 1,300 MT bitumen, in the meantime, the EE, had booked (March 2015) 407.46 MT steel and 2,043.20 MT bitumen against the Proforma bills mentioned above.

Thus, in violation of the manual provision, the EE, Belonia Division withdrew funds from the treasury and transferred to the Stores Division for procurement of steel and bitumen in advance without actual requirement. This resulted in blocking of funds of ₹ 8.70 crore[1] for more than four to eight years.

While accepting the facts, the Government assured (February 2020) that the balance fund of ₹ 5.83 crore (including unadjusted amount of ₹ 0.80 crore paid in March 2010) would be adjusted by procuring bitumen for other works of the Division in the ensuing year 2020-21.

Recommendation: Government may take action against the concerned officials who had violated the manual provision and irregularly drew funds for procurement of material without actual requirement, ostensibly to exhaust their budget.

3.4 Incomplete work of Vigyan Gram

The Department delayed construction of Vigyan Gram (Phase-I) at Agartala, a DoNER project funded by GoI, resulting in the facility remaining incomplete even after the lapse of four years from the stipulated date of completion and expenditure of ₹ 58.82 lakh.

Ministry of Development of North Eastern Region (DoNER) , GoI sanctioned (March 2015) ₹ 27.45 crore for construction of Vigyan Gram (Phase-I) at Agartala. The Tripura State Council for Science and Technology[2] (TSCST) engaged (August 2010) a consultant to provide consultancy services[3]relating to this work. Based on the estimate prepared (15 July 2011) by the Consultant, the Department accorded

[1] ₹ 80,00,000 (from March 2010) + ₹ 7,89,59,327 (from March 2015)

[2] A constituent organisation of the Science, Technology and Environment Department, Government of Tripura

[3] Preparation of detailed estimates, tender documents, drawings and detailed engineering of related essential services, *etc*.

administrative approval and expenditure sanction for ₹ 31.79 crore (December 2012). The Chief Engineer (CE), PWD (R&B) technically sanctioned the work for ₹ 20.08 crore (including three *per cent* contingencies)[4].

The work, after inviting Expression of Interest from reputed construction agencies/ organisations, was awarded (July 2013) to the lowest tenderer (Agency)[5], with the approval (5 July 2013) of the Works Advisory Board, at a negotiated tendered value of ₹ 25.20 crore[6] with a stipulation to complete the work by June 2015. The work which commenced in August 2013 and was still in progress as of date of audit (May 2019).

Test check (December 2018 and May 2019) of records of the Executive Engineer (EE), Agartala Division No. V, PWD (R&B) revealed that architectural drawing for the work (prepared by the Consultant and approved by the Sr. Architect, PWD) was handed over to the Agency in October 2013 *i.e.* after a lapse of three months from the date of issue of work order. The project work could not progress for want of specific proposals from the Consultant regarding (i) designed ground level, (ii) plinth level and (iii) structural design for foundation works. PWD finalised the design of foundation works only in January 2014 *i.e.* after a lapse of six months from the date of issue of work order.

To recoup the time already lost, the Superintending Engineer (SE), 2nd Circle, PWD, Agartala decided (10 January 2014) to execute the concreting works for the foundation bases of all the above three components with Ready Mix Concrete (RMC) (fully automatic batching reinforced cement concrete) in place of weigh machine batching at site as per the agreement, for which necessary payment would be considered in addition to the agreement items. Accordingly, upto the 24th RA bill the agency executed 455.01 cum of RMC and used 6,53,418.15 kg of Portland cement extra for which they were also paid (January 2020) ₹ 2.04 lakh for providing RMC (@ ₹ 447.90 per cum[7]) and ₹ 56.78 lakh for extra use of Portland cement (@ ₹ 8.69 per kg[8]).

Although RMC was allowed to recoup the time lost in the initial stage due to delay in finalisation of design of foundation works, it was observed that the work of the Vigyan Gram was also hindered (during August 2013 to June 2017) due to delay in availability of drawings and designs for (i) boundary line (ii) roof truss, (iii) gate complex and (iv) constellation pool. Due to these delays, physical achievement of the work was only 75 *per cent* as of date of audit (May 2019).

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4 Administrative Approval and Expenditure Sanction of ₹ 31.79 crore was accorded (27 December 2012) by the Joint Member Secretary, (Director), Science, Technology and Environment Department.

5 M/s REACON Engineer (IND) Pvt. Ltd., Kolkata

6 28.54 *per cent* above the estimated cost of ₹ 19.49 crore put to tender

7 Approved by the Additional Chief Engineer, Project Unit, PWD (Buildings) in (February 2018)

8 Approved by the Chief Engineer, PWD (R&B)

The status of physical achievement (July 2019) of the project is shown in **Photographs 3.4.1** and **3.4.2**.



Photograph 3.4.1



Photograph 3.4.2

Incomplete work of Vigyan Gram

Thus, failure of the Department to ensure availability of drawings and designs on time led to the work remaining incomplete even after a lapse of four years from the stipulated date of completion, resulting in blockage of funds of ₹ 58.82 lakh[9] (January 2020). The expenditure incurred towards use of RMC to overcome the loss of time also proved futile.

Government, while accepting the facts, stated (October 2019) that site development, fixation of foundation level, designed ground level and plinth level had taken some time for finalisation and added that the remaining portion as per scope of agreement would be completed as early as possible.

Thus a prestigious Science and Technology Project funded by DoNER , GoI , was not completed in time by the State Government due to sheer negligence depriving the intended beneficiaries of the benefits of the project in the State capital.

Recommendation: The Department may ensure that the project is completed expeditiously.

3.5 Suspected misappropriation

Non-compliance with codal provisions by the Executive Engineer, Mohanpur, PWD (R&B), regarding issue of stores, led to suspected misappropriation of materials valued at ₹ 35.15 lakh issued in works.

Para 43.1 of the CPWD Works Manual 2012 provides that; (1) Materials should be issued on receipt of indent on specific form. (2) A register to keep a watch on the issue of materials for works with reference to quantities specified in the agreements should be maintained by the Assistant Engineer in the form prescribed in CPWA 35 to avoid excessive issue of materials to contractors and to keep a watch over the issues.

[9] ₹ 2.04 lakh + ₹ 56.78 lakh

(3) The Executive Engineer should arrange to get the indent examined to see that the indented quantities are roughly correct.

Test check (January–February 2018 and June 2019) of records of the Executive Engineer (EE), Mohanpur Division, PWD (R&B) revealed that the above codal provisions regarding issue of stores were not complied with, which led to suspected misappropriation of Government money as detailed below:

The work "Maintenance of road from Daoikhola (Radhanagar) to Paschim Chandpur ADC Village Office[10] (L-2.450 KM), which was awarded (28 March 2015) to a contractor at a tendered value of ₹ 58.44 lakh with completion time of six months, was actually completed only in January 2017 after a delay of almost 13 months.

Scrutiny of records (January–February 2018) revealed that the Division had issued (between March 2015 and January 2017) total 64.25 MT[11] bitumen to the work-through indent and Transfer Entry Orders (TEOs). As per the Measurement Book (MB), it was seen in audit, that only 20.06 MT of bitumen was issued to the work, of which, the contractor utilised 9.00 MT and ₹ 5.73 lakh was recovered. The work was shown as completed (January 2017) and full payment of ₹ 58.38 lakh was made to the contractor. There was no evidence of the balance 44.18 MT (64.25 MT - 20.06 MT) bitumen in the MBs.

After the matter of excess material issued was raised in audit (January–February 2018), the Sub-Division inserted transfer entries of 55.25 MT bitumen to other works through five[12] TEOs. However, despite a specific request from audit, neither the TEOs nor the name of the works to which the bitumen was transferred were produced and hence there was no proof about the actual transfer of the bitumen. In view of the failure of the Division to produce proof of transfer, the possibility of misappropriation of 55.25 MT of bitumen valued ₹ 35.15 lakh[13] cannot be ruled out.

Recommendation: The Department may strengthen the internal control mechanism to ensure that only actually required materials are issued to the works. They may also take stringent action against officials indulging in such violations of codal provisions.

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10 Metalling, Carpeting and Construction of Box Cell (clear span 6.00 metres) portion from 0 to 1 KM"

11 (i) 24.15591 MT (TEO No. 12/SDO/PWD/HZM/2014-15 dated 30-03-2015), (ii) 4.992 MT (TEO No. 16/SDO/PWD/HZM/2014-15 dated 25-06-2015), (iii) 5.008 MT (TEO No. 23/SDO/PWD/HZM/2014-15 dated 14-09-2015), (iv) 10.0316 MT(TEO No. 01/SDO/PWD/HZM/2016-17 dated 02-01-2017), (v) 10.0316 MT(TEO No. 02/SDO/PWD/HZM/2016-17 dated 02-01-2017) and (vi) 10.0316 MT through Indent on 21-12-2016

12 (i) 10.0316 MT on 25 January 2017, (ii) 5.50 MT on 28 February 2018, (iii) 8.06011 MT on 25 March 2018 (iv) 7.50 MT on 28 March 2018 and (v) 24.1591 MT on 29 March 2018

13 ₹ 63,626 per MT (issue rate) x 55.25 MT=₹ 35.15 lakh

PUBLIC WORKS DEPARTMENT

Tripura Housing and Construction Board

3.6 Unfruitful expenditure

Unfruitful expenditure of ₹ 4.07 crore was incurred due to delay of four years in construction of the District Sports Complex at Ambassa, Dhalai District due to unrealistic preparation of DPR and non-inclusion of penal clause in the agreement with the contractors.

The Youth and Sports Affairs Department, Government of Tripura obtained (**May 2012) administrative approval and financial approval of ₹ 4.91 crore from the Ministry of Development of North Eastern Region (MoDONER), Government of India (GoI) for construction of District Sports Complex at Ambassa in Dhalai District**. The Department entrusted (May 2012) the execution of work to the Tripura Housing and Construction Board (THCB)[14]. The main objective of the project was to provide adequate and right infrastructure for scientific sports acceleration for action and result orientation by regular exercise. The project contained six components namely, (i) development of site by earth filling, (ii) construction of boundary wall, (iii) construction of athletic track, (iv)construction of grand stand, (v) construction of surface drain and (vi) construction of internal road.

The THCB prepared (November 2014 and April 2016) two technically sanctioned detailed estimates for (i) development of playground with earth work and turfing, surface drain, hard drawn fencing and approach road of sports complex fencing (₹ 0.74 crore) and (ii) construction of grand stand (₹ 2.88 crore).

Scrutiny of the records (June-July 2019) revealed the following:

a. The work of grand stand was awarded (May 2015) by the THCB to a contractor at the tendered value of ₹ 3.06 crore with the stipulated completion time of 18 months. The work commenced in August 2015 and was completed in March 2018 at a cost of ₹ 3.66 crore[15] upto 7th Running Account (RA) & final bill with a time overrun of one year due to slow progress of work by the contractor. However, based on the request of the client department some additional works were executed and finally the grand stand was handed over to the Youth and Sports Affairs Department in July 2019. During joint physical verification of the worksite in June 2019, the construction of grand stand was found in complete shape with good condition.

b. The work 'Development of playground with earth work and turfing, surface drain, hard drawn fencing and approach road of sports complex' was awarded (15 September 2016) by the THCB to another contractor at tendered value of ₹ 0.64 crore with the stipulated completion time of six months. The work

[14] An autonomous body of the Government of Tripura THCB (one wing of State Public Works Department) which undertook various deposit works on behalf of State Government

[15] Against that, ₹ 3.39 crore was paid (November 2018) to the contractor

commenced in September 2016 and was suspended[16] since June 2017 after execution of work valued ₹ 0.41 crore[17] (upto 1st RA bill), which was paid to the contractor in September 2017. The THCB issued several letters to the contractor requesting him to resume the work but it could not take any action against the contractor due to non-inclusion of penal clauses in the agreement.

c. The THCB did not consider the provision for construction of the retaining wall around the playground in the DPR of the work. However, a technically sanctioned detailed estimate for RCC box drain and retaining wall around the playground was prepared (January and April 2018) by the THCB to protect the filled up soil from rain cut and it was sent to Director, Youth and Sports Affairs Department in June 2018 for obtaining approval, which was not given by the Department (July 2019).

During the Joint physical verification (June 2019) earth filling done was found damaged due to landslide and the playground of the sports complex was not found in good shape as evident from the **Photographs 3.6.1, 3.6.2, 3.6.3** and **3.6.4**.

<table>
<tr><td>  </td><td>  </td></tr>
<tr><td>Photograph: 3.6.1</td><td>Photograph: 3.6.2</td></tr>
<tr><td>  </td><td>  </td></tr>
<tr><td>Photograph: 3.6.3</td><td>Photograph: 3.6.4</td></tr>
<tr><td colspan="2">Photographs 3.6.1, 3.6.2, 3.6.3 and 3.6.4: Construction of District Sports Complex at Ambassa, Dhalai District, /SH:-Construction of Boundary wall, Athletic track, Surface Drain, Internal Road</td></tr>
</table>

Therefore, it was evident that the DPR was not prepared taking into account site conditions by including the retaining wall around the playground. Further, failure to

[16] wilful suspension of work by the Contractor
[17] 64 *per cent* financial achievement was made

include mandatory penal clauses in the agreement with the contractor enabled him to rescind the same without any known liability. As a result, the intended benefit i.e. providing adequate and right infrastructure for scientific sports acceleration and also result orientation by regular exercise, remained unachieved for almost four years despite the expenditure of ₹ 4.07[18] crore which turned unfruitful.

The THCB stated (December 2019) that the proposed project site in the DPR was located at Kachucherra, the terrain of which was plain and therefore, provision of retaining wall around the playground had not been kept in the DPR. Subsequently, the location of site was changed by the client department to Kekmacherra, where topography of the ground was undulated which necessitated huge quantity of earth cutting as well as earth filling and construction of retaining wall to protect the field from erosion/landslide. For retaining wall, an estimate was framed and sent to the client department for approval, however the construction of retaining wall could not be taken up by the THCB for want of approvals.

The reply is not acceptable since the codal provisions mandate that no work should normally be commenced or any liability thereon incurred until an administrative approvals are obtained, a properly prepared detailed estimate is technically sanctioned.

The THCB awarded the work without fulfilling these requirements which not only deteriorated the work site but the work also remained incomplete for want of decision of the client department.

Recommendation: The Tripura Housing Construction Board should prepare Detailed Project Report of work after taking into consideration site condition before awarding the work to the contractor to avoid delay in completion of work.

3.7 Loss due to non-utilisation of funds

Failure to utilise the set apart funds towards charitable purposes within the stipulated time frame in order to avail of income tax exemption, led to loss towards payment of income tax of ₹ 5.28 crore and loss of interest of ₹ 99.84 lakh.

The THCB is registered as a Society for charitable purposes for advancement of objects of general public utility under Section 12 AA (1) (b) (i) of Income Tax (IT) Act, 1961.

As per Section 11(2) of the IT Act, 1961 the assesse[19] could set apart any amount after falling short of the allowed 85 *per cent* accumulation, for further five years immediately after the year of set apart for specific purposes[20] through Form 10. If the assesse fails to spend the set apart amount within the next six assessment years, then

[18] Grand stand: ₹ 3.66 crore *plus* earth filling: ₹ 0.41 crore
[19] A charitable/religious trust
[20] Including charitable purposes

the same amount will be regarded as 'deemed income' of the assesse as per section 11(3) of the IT Act.

Scrutiny of records (June- July 2019) revealed that the THCB had set apart ₹ 6.60 crore and ₹ 7.37 crore for future utilisation towards charitable purposes[21] during the assessment years 2008-09 and 2009-10 respectively. The Board had failed to utilise the set aside funds during the subsequent five years due to absence of master plan towards development of social infrastructure activity. The IT Department later treated ₹ 13.97 crore (₹ 6.60 crore plus ₹ 7.37 crore) as 'deemed income' for the assessment years 2014-15 and 2015-16 under Section 11(3) of the IT Act. The THCB was directed to pay ₹ 5.28 crore on the above as income tax during the assessment years 2014-15 and 2015-16 including penal interest of ₹ 99.84 lakh.

Therefore, failure on the part of the THCB to utilise the set apart funds towards charitable purposes and to avail of the income tax exemptions granted as a charitable entity, led to loss of funds of ₹ 5.28 crore paid towards income tax and ₹ 99.84 lakh being penal interest towards income tax paid during that period which could have been avoided and utilised for improvement of social infrastructure development[22] in the State by the THCB.

In reply, THCB stated (December 2019) that THCB applied for registration under section 12 AA of IT Act in March 2016. The THCB also stated that if THCB had offered tax during the year 2007-08 to 2012-13, penal interest would be much higher than the actual income tax paid and so actually it could not be termed as loss.

The reply is not convincing since they were aware of the terms and conditions of the IT exemption and failure to spend the funds appropriately resulted in the THCB having to pay the tax of ₹ 5.28 crore, besides ₹ 99.84 lakh as avoidable penal interest for delayed payment of income tax due to non-utilisation of funds of set apart, resulting in loss to the THCB.

ANIMAL RESOURCES DEVELOPMENT DEPARTMENT

3.8 Ill-conceived project

A Public Private Partnership project in Unakoti District for meeting requirement of milk was taken up by the Animal Resources Development Department without ensuring availability of funds, creation of proper infrastructure and without selecting bonafide beneficiaries. An infructuous expenditure of ₹ 1.13 crore was incurred on the failed project.

To meet the requirement of milk in the Unakoti District "Unakoti Dugdha Prakalpa" project was taken up in Public Private Partnership (PPP) mode. The project was

[21] The THCB had kept provision for to utilise the set apart funds towards development of social infrastructure i.e. construction of educational institutions, *etc.*

[22] Including charitable purpose for which exemption was granted by the Income Tax

conceived in a meeting (October 2013) held by the Minister of Industries, Rural Development & Commerce with public representatives and Government Officials.

As Animal Resources Development (ARD) Department neither proposed any plan scheme named "Unakoti Dugdha Prakalpa" nor made any budgetary provision in this regard, the District Magistrate & Collector (DM&C), Unakoti District, sanctioned funds to Deputy Director of ARD, Unakoti District, Kailashahar, which were dovetailed from various sources like MGNREGA, Tribal Welfare Funds, Thirteenth Finance Commission Grants for Zilla Parishad, *etc*.

Test check (April 2018) of records of the Deputy Director, ARD, Unakoti District, Kailashahar revealed the following:

Based on the proposal submitted (6 November 2013) by the Deputy Director, the DM & C, Unakoti District, gave Administrative approval for ₹ 60 lakh[23] (23 December 2013) and ₹ 10 lakh[24] (2 April 2014) for procurement of milch cows from outside the State for distribution to the selected dairy farmers (to be selected by the Panchayati Raj Institutions) as per prescribed criteria. The funds of ₹ 70 lakh, received[25] by the Deputy Director, were placed with[26] the Assistant Director, Kumarghat, the Implementing Officer of the project, for procurement and distribution of cows.

Deputy Director, ARD also received (March 2014) ₹ 28 lakh from the Block Development Officer, Chandipur RD Block, Unakoti District under MGNREGA for construction of 80 cattle sheds (@ ₹ 35,000 each) for this project, which were also placed with the Assistant Director, Kumarghat.

The following irregularities in the implementation of the project are described below:

(i) ***Selection of beneficiaries not found on record*****:** It was seen that sixty cows were purchased (March-May 2014) before selecting the bonafide beneficiaries and 59 of these were distributed (between March and May 2014) among 50 beneficiaries; one cow each to 49 beneficiaries' and 10 cows to one beneficiary (who had not approached the Department and the bank for sanction of loan). One cow was kept in the Demonstration Unit at DM's Residence. The criteria for selection of the beneficiaries were not available on records. The reasons for distributing 10 cows to a single person (who remained out of the ambit of the project) were also not found on record

(ii) ***Non-sanction of bank loan to beneficiaries:*** As per the project proposal, cows were to be distributed among the beneficiaries who were eligible for bank loan. The expenditure was to be met initially from the corpus fund and the beneficiaries who received the cows, were to return back the cost of the cows to the corpus fund on receiving the bank loan. Forty beneficiaries applied for loan to different Banks through the Department under Dairy Entrepreneurship

[23] From the Thirteenth Finance Commission grant ,Zilla Parishad share
[24] From the Panchayat Development Fund, Zilla Parishad share
[25] ₹ 60 lakh on 26 December 2013 and ₹ 10 lakh on 4 April 2014
[26] ₹ 60 lakh on 29 January 2014 and ₹ 10 lakh on 8 April 2014

Development Scheme and Swabalamban Scheme and deposited (April and June 2014) Rupees four lakh as margin money (@ ₹ 10,000 each) to the corpus fund. Out of these 40, only 11 beneficiaries were sanctioned loan of ₹ 9.90 lakh by UBI[27], Kailashahar (@ ₹ 90,000 each), which was deposited (April 2014) in the corpus fund. Loan was not sanctioned to the remaining beneficiaries. Neither the cost of the cows was returned nor were the cows recovered from them by the Department.

As of August 2015, out of the 60 cows distributed, 15 died and 15 were sold by the beneficiaries. There were no records about the survivability and availability of the cows under the control of the Department as on the date of audit (April 2018). However, as per information furnished (April 2019) by the Deputy Director, ARDD, Kailashahar, only 11 cows out of 60, could be traced out and were stated to be under proper care and in sound health. No other activities were undertaken as envisaged in the objectives of the project as the project did not continue beyond the year 2015-16. There was no evidence of any milk production even from these 11 beneficiaries who had been sanctioned bank loans.

The details of funds of ₹ 1.13 crore received under the project and item-wise expenditure of the said amount incurred during 2013-14 to 2015-16 are shown in **Appendix 3.8.1**. The savings bank account (No.1307010201896) at UBI, Gournagar Branch (the corpus fund for the project) was closed in September 2015. The Asst. Director had not maintained a proper Cash Book of the expenses incurred on the project.

Thus, the DM & Collector of the Unnakoti district forced an ill-conceived project on the Department, without creating proper infrastructure, not selecting bonafide beneficiaries and non-monitoring of further activities related to the project. This not only defeated the objective of the project of increasing milk production by private entrepreneurs, but had also rendered the expenditure of ₹ 1.13 crore infructuous.

In the exit meeting (20 April 2018), the Deputy Director stated that the project was withdrawn by the Government. However, relevant orders of the Government were not produced to audit. The Deputy Director further informed (30 March 2019) that since funding from Government has stopped[28], the project could not continue beyond 2015-16.

The matter was reported to the Government (October 2019); reply had not been received (May 2020).

Recommendation: The Government may conduct enquiry on the failed project to fix responsibility as an exemplary measure for such future projects.

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[27] United Bank of India

[28] ₹ 1.40 crore released were withdrawn during June 2014 and ₹ 40.50 lakh, sanctioned in May 2014, was not released

CHAPTER IV: ECONOMIC SECTOR
(State Public Sector Undertakings)

CHAPTER IV: ECONOMIC SECTOR
(STATE PUBLIC SECTOR UNDERTAKINGs)

4.1 Functioning of State Public Sector Undertakings

4.1.1 Introduction

The State Public Sector Undertakings (PSUs) consist of State Government Companies and Statutory Corporations. The PSUs are established to carry out activities of commercial nature and occupy an important place in the State economy. As on 31 March 2019, there were 15 PSUs in Tripura. The details of the PSUs in Tripura as on 31 March 2019 are given in **Table 4.1.1**.

Table 4.1.1: Total number of PSUs as on 31 March 2019

Type of PSUs	Working PSUs	Non-working PSUs[1]	Total
Government Companies[2]	13	1	14
Statutory Corporations	1	-	1
Total	**14**	**1**	**15**

***Source**: Finance Accounts 2018-19, Statement -19.*

None of these PSUs were listed on the Stock Exchange. During the year 2018-19, no new PSU was incorporated and no existing PSU was closed down.

4.1.2 Investment in PSUs

4.1.2.1 State Government's investment in PSUs

The State's investment in its PSUs was by way of share capital/loans and special financial support by way of revenue grants.

As on 31 March 2019, the investment of the State Government (capital and long-term loans) in 15 PSUs was ₹ 1,675.55 crore[3] as per details given in **Table 4.1.2**.

Table 4.1.2: Details of State's investment in PSUs

(₹in crore)

Year	Equity Capital	Long term Loans	Total
2018-19	1,469.25	206.30	**1,675.55**
2014-15	1,233.33	129.19	**1,362.52**

The State Government investment as on 31 March 2019 consisted of 87.69 *per cent* towards capital, 12.31 *per cent* in long-term loans as against 90.52 *per cent* (capital) and 9.48 *per cent* (long-term loans) as on 31 March 2015. A graphical presentation of State Government investment in PSUs during last five years (2014-15 to 2018-19) has been given in **Chart 4.1.1**.

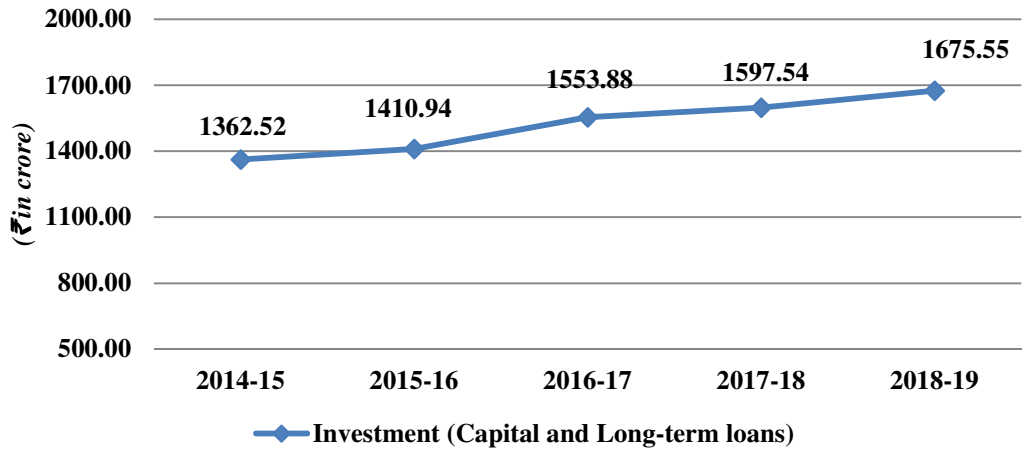
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1 Non-working PSUs are those which have ceased to carry on their operations

2 Government companies include Other Companies referred to in Section 139(5) and 139(7) of the Companies Act, 2013

3 Investment figures are provisional and as provided by the PSUs excepting two PSUs (Sl. No. A.12 and A.13 of ***Appendix 4.1.1***) investment figures for which have been adopted from their finalised accounts for 2018-19

Chart 4.1.1: State's total investment in PSUs



As can be noticed from **Chart 4.1.1**, the State Government's investment in PSUs during last five years shows an increasing trend. The State's investment grew by 22.97 *per cent* from ₹ 1,362.52 crore in 2014-15 to ₹ 1,675.55 crore in 2018-19.

During 2018-19, out of 13[4] working PSUs where State Government had made direct investment, 10 PSUs incurred loss and only three PSUs earned profit (₹ 2.58 crore) as per their latest finalised accounts (**Appendix 4.1.1**). None of the three profit making PSUs had declared any dividend. There was no recorded information about the existence of any specific policy of the State Government regarding payment of minimum dividend by the PSUs.

The State Government's investment (historical value) in PSUs had eroded by 10.82 *per cent* in 2018-19, and the losses of two PSUs (accumulated losses of ₹ 406.23 crore) had completely eroded the State's investment in their paid-up capital (₹ 270.04 crore), as per their latest finalised accounts.

4.1.2.2 Total Sector-wise investment in PSUs

Total investment of State Government and Other Stakeholders (Central Government, Holding companies, Banks, Financial Institutions, *etc.*) in PSUs under various important sectors at the end of 31 March 2015 and 31 March 2019 has been given in **Table 4.1.3**.

Table 4.1.3: Sector-wise details of total investments in PSUs

Name of Sector	Government/Other Companies		Statutory Corporations		Total Investment	
	2014-15	2018-19	2014-15	2018-19	2014-15	2018-19
Power	763.28	742.35	0	0	**763.28**	**742.35**
Manufacturing	269.40	404.96	0	0	**269.40**	**404.96**
Financing	144.06	144.62	0	0	**144.06**	**144.62**
Service	76.93	148.94	159.03	163.03	**235.96**	**311.97**

[4] Excluding Tripura Natural Gas Company Limited, which had no direct investment from the State Government

Agriculture & Allied	57.29	72.95	0	0	**57.29**	**72.95**
Miscellaneous	17.66	8.86	0	0	**17.66**	**8.86**
Total	**1,328.62**	**1,522.68**	**159.03**	**163.03**	**1487.65**	**1685.71**

***Source**: PSUs data*

It can be noticed from **Table 4.1.3** that as compared to 2014-15, the combined investment of State Government and Other Stakeholders increased significantly during 2018-19 in the Manufacturing sector (₹ 135.56 crore) and Service sector (₹ 76.01 crore).

The increase in investment under the Service sector was mainly due to equity contribution (₹ 58.58 crore[5]) provided by the State Government to Tripura Handloom and Handicrafts Development Corporation Limited. In Manufacturing sector, the increase in investment was mainly due to equity contribution of ₹ 135.56 crore provided by the State Government to Tripura Jute Mills Limited (₹ 103.32 crore) and Tripura Small Industries Corporation Limited (₹ 32.24 crore) over the period of four years (2015-19).

4.1.3 Reconciliation with Finance Accounts

The figures in respect of equity and loans provided by the State Government as per the records of PSUs should agree with the corresponding figures appearing in the Finance Accounts of the State. In case of differences in the figures, the PSUs concerned and the Finance Department should carry out reconciliation of differences. The position in this regard as on 31 March 2019 is given in **Table 4.1.4**.

Table 4.1.4: Equity, loans, guarantees outstanding as per the Finance Accounts *vis-à-vis* records of PSUs

(₹in crore)

Outstanding in respect of	Amount as per Finance Accounts	Amount as per records of PSUs	Difference
Equity	1375.22[6]	1469.25	94.03
Loans	56.75	206.30	149.55
Guarantee	317.82[7]	200.00	117.82

***Source**: Finance Accounts2018-19 and PSUs records*

As on 31 March 2019, there were unreconciled differences in the figures of equity (₹ 94.03 crore), loan (₹ 149.55 crore) and guarantee (₹ 117.82 crore) as per two sets of records. The differences in equity occurred in respect of 12 PSUs[8] (three PSUs under the Agriculture and Allied sector, five PSUs under the Service sector, two PSUs under the Manufacturing sector and one PSU each under the Finance and Power sector respectively). The difference in guarantee figures related to Tripura State Electricity Corporation Limited.

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5 Equity contribution of ₹ 10 crore (2015-16), ₹ 11 crore (2016-17), ₹ 10 crore (2017-18) and ₹ 27.58 crore (2018-19)

6 This includes equity investment (₹ 0.54 crore) made (1963-64 to 1991-92) by the State Government in Assam Financial Corporation, Shillong, which no longer exists in the State

7 This represented the Guarantees outstanding against the Loans availed by Tripura State Electricity Corporation Limited (₹ 117.82 crore) and Agartala Smart City Limited (₹ 200.00 crore)

8 PSUs at Sl. Nos. A.1, A.2 and A.4 to A.12 and B.1 of **Appendix 4.1.1**

As regards Loan figures, the Finance Department disburses the loans to various Departments of the State Government for different sectoral activities and booked the amount sector-wise in the Finance Accounts. In turn, the Departments disburse these loans to respective PSUs functioning under their administrative control. Hence, PSU-wise figures of State Government loans provided to various PSUs not available in the State Finance Accounts. The State Government loan figure (₹ 56.75 crore) booked in the Finance Accounts pertained to the power sector PSU[9].

Though the Principal Secretary, Finance Department, Government of Tripura as well as the Management of the PSUs concerned were appraised regularly about the differences impressing upon the need for early reconciliation, no significant progress was noticed in this regard.

The State Government and the PSUs concerned may take concrete steps to reconcile the differences in a time-bound manner. The Government should correct the system of financing the PSUs and the Finance Accounts be updated.

4.1.4 Special support and guarantees to PSUs during the year

The State Government provides financial support to PSUs in various forms through annual budgetary allocations. The summarised details of budgetary outgo towards equity, loans and grants/subsidies in respect of PSUs for the three years ended 2018-19 are given in **Table 4.1.5**.

Table 4.1.5: Details regarding budgetary support to PSUs

(₹ in crore)

Particulars	2016-17		2017-18		2018-19	
	No. of PSUs	Amount	No. of PSUs	Amount	No. of PSUs	Amount
Equity capital outgo from budget	7	60.74	5	30.53	4	34.81
Loans given from budget	1	13.25	-	-	-	-
Grants/subsidy from budget	5	87.28	5	77.35	3	70.77
Total Outgo (1+2+3)[10]	**9**	**161.27**	**9**	**107.88**	**7**	**105.58**
Guarantees issued	-	-	-	-	1	200.00
Guarantee commitment	-	-	-	-	-	-

***Source**: PSUs records*

As can be noticed from **Table 4.1.5**, the budgetary support provided by State Government to PSUs decreased from ₹ 161.27 crore in 2016-17 to ₹ 105.58 crore in 2018-19. The major beneficiaries of budgetary outgo during 2018-19 were Tripura State Electricity Corporation Limited (grant/subsidy: ₹ 50.43 crore) and Tripura Jute Mills Limited (equity: ₹ 30.65 crore). The guarantee (₹ 200.00 crore) issued during 2018-19 pertained to one PSU (Agartala Smart City Limited).

4.1.5 Accountability framework

The audit of the financial statements of a Company in respect of financial years commencing on or after 1 April 2014 is governed by the provisions of the Companies

[9] The State of Tripura had only one power sector PSU (Tripura State Electricity Corporation Limited)
[10] Actual number of PSUs, which received equity, loans, grants/subsidies from the State Government

Act, 2013 (Act) and audit of the financial statements in respect of financial years that commenced earlier than 1 April 2014 continued to be governed by the Companies Act, 1956.The new Act has brought about increased Regulatory Framework, wider Management responsibility and higher Professional Accountability.

4.1.5.1 Statutory Audit/Supplementary Audit

Statutory Auditors appointed by the Comptroller and Auditor General of India (C&AG) audit the financial statements of a Government Company. In addition, C&AG conducts the Supplementary Audit of these financial statements under the provisions of Section 143 (6) of the Act.

Audit of Statutory Corporations is governed by their respective Legislations. The State of Tripura had only one Statutory Corporation (Tripura Road Transport Corporation), which was working. The C&AG is the sole auditor for this Corporation.

4.1.5.2 Role of the Government and the Legislature

The State Government exercises control over the affairs of these PSUs through its administrative departments. The Government appoints the Chief Executive and Directors in the Board of these PSUs.

The State Legislature also monitors the accounting and utilisation of the State Government investments in the PSUs. For this purpose, the Annual Reports of the State Government Companies together with the Statutory Auditors' Reports and comments of the C&AG thereon are to be placed before the Legislature under Section 394 of the Act. Similarly, the Annual Reports of the Statutory Corporations along with the Separate Audit Reports of C&AG are required to be placed before the Legislature as per the stipulations made under their respective governing Acts. The Audit Reports of C&AG are submitted to the Government under Section 19A of the C&AG's (Duties, Powers and Conditions of Service) Act, 1971.

4.1.6 Arrears in finalisation of accounts

Financial statements of the Companies are required to be finalised within six months from the end of the relevant financial year *i.e.* by end of September in accordance with the provisions of Section 96 (1) of the Companies Act. Failure to do so may attract penal provisions under Section 99 of the Act. Similarly, the accounts of Statutory Corporations, are to be finalised, audited and presented to the Legislature as per the provisions of their respective Acts.

Timely finalisation of accounts is important for the State Government to assess the financial health of the PSUs and to avoid financial misappropriation and mismanagement. Persistent delay in finalisation of accounts is fraught with the risk of fraud and leakage of public money going undetected apart from violation of the provision of the Companies Act, 2013.

Table 4.1.6 provides the details relating to finalisation of accounts by working PSUs as of 30 September 2019.

Table 4.1.6: Position relating to finalisation of Accounts of working PSUs

Sl. No.	Particulars	2014-15	2015-16	2016-17	2017-18	2018-19
1.	Number of working PSUs	13	13	13	14[11]	14
2.	Number of Accounts finalised during the year	11	16	13	12	16
3.	Number of Accounts in arrears	23	20	20	23[12]	21
4.	Number of Working PSUs with arrears in Accounts	12	12	11	13	12
5.	Extent of arrears (number in years)	1 to 6 years	1 to 2 years	1 to 3 years	1 to 4 years	1 to 4 years

As can be seen from **Table 4.1.6**, the accounts of only two[13] out of 14 working PSUs were up-to-date as on 30 September 2019. Remaining 12 working PSUs had a backlog of 21 accounts for periods ranging from one to four years. The earliest Accounts in arrears was since 2015-16 (four Accounts), which related to 'Tripura Horticulture Corporation Limited' as detailed in **Appendix 4.1.1**.

The administrative departments concerned have the responsibility to oversee the activities of these entities and to ensure that the accounts are finalised and adopted by the PSUs within the stipulated period.

The Accountant General (Audit), Tripura had been regularly pursuing with the Chief Secretary of Tripura and the administrative departments concerned for liquidating the arrears of accounts of PSUs. However, the State Government and the PSUs concerned could not address the issue to clear pendency of accounts of the PSUs in a time bound manner.

4.1.7 Placement of Separate Audit Reports

The position depicted in **Table 4.1.7** shows the status of placement of Separate Audit Reports (SARs) issued by the C&AG (up to 30 September 2019) on the accounts of the lone Statutory Corporation in the State Legislature.

Table 4.1.7: Status of placement of SARs in the Legislature

Name of Statutory Corporation	Year up to which SARs placed in the Legislature	Year for which SARs not placed in the Legislature	
		Year of SAR	Date of issue
Tripura Road Transport Corporation (TRTC)	2013-14	2014-15	17-02-2017
		2015-16	09-01-2018

Timely placement of SARs in the State Legislature is important to ensure timely reporting on the functioning of the Corporation to the stakeholders and fix accountability of the Management for its performance.

However, it can be seen from **Table 4.1.7** that the SARs for the years 2014-15 and 2015-16 were pending for placement in the State Legislature for more than two to three years since issued to the State Government. The delay in placement of the SARs

[11] Includes Agartala Smart City Limited which was incorporated on 18 November 2016
[12] Includes two accounts of Agartala Smart City Limited (2016-17 and 2017-18)
[13] Tripura Natural Gas Company Limited and Agartala Smart City Limited

in the State Legislature was attributable to delay in relaying the notice for placement of SARs, by the Transport Department, to the State Legislative Assembly.

Recommendations:

a. *The State Government may set up a special cell to oversee the clearance of arrears of accounts and set the targets for individual PSUs, which may be monitored by the cell;*

b. *The State Government may ensure that existing vacancies in the accounts department of PSUs are timely filled up with persons having domain expertise and experience; and*

c. *The PSUs may get the figures of equity and loans reconciled with the State Government Departments and arrear of accounts are cleared.*

4.1.8 Investments made by the State Government in PSUs whose accounts are in arrears

The State Government had invested ₹ 55.94 crore in six PSUs (equity: ₹ 42.69 crore and loans: ₹ 13.25 crore) during the years for which these PSUs had not finalised their accounts as detailed in **Table 4.1.8**.

Table 4.1.8: Investment by the State Government in PSUs having accounts in arrears

(₹in crore)

Sl. No.	Name of PSU	Accounts finalised upto	Accounts pending finalisation	Investment by the State Government during the period of arrears	
				Equity	Loans
1	Tripura Horticulture Corporation Limited	2014-15	2015-16 to 2018-19	3.93	0.00
2	Tripura Tea Development Corporation Limited	2017-18	2018-19	2.89	0.00
3	Tripura Jute Mills Limited	2017-18	2018-19	30.65	0.00
4	Tripura Small Industries Corporation Limited	2016-17	2017-18 to 2018-19	4.06	0.00
5	Tripura State Electricity Corporation Limited	2015-16	2016-17 to 2018-19	0.01	13.25
6	Tripura Tourism Development Corporation Limited	2016-17	2017-18 to 2018-19	1.15	0.00
	Total			**42.69**	**13.25**

In the absence of accounts and their subsequent audit, it could not be verified if the investments made and the expenditure incurred have been properly accounted for and the purpose for which the amount was invested was achieved or not.

The Government may consider setting up a special cell under the Finance Department to oversee the expeditious clearance of arrears of accounts of PSUs. Where there is lack of staff expertise, Government may consider outsourcing the work relating to preparation of accounts and take punitive action against the Company Management responsible for arrears of accounts. Until the accounts are made as current as possible, Government may consider not giving further financial assistance to such companies.

4.1.9 Performance of PSUs as per their latest finalised accounts

The financial position and working results of working PSUs as per their latest finalised accounts as on 30 September 2019 are detailed in **Appendix 4.1.1**. **Table 4.1.9** provides the comparative details of working PSUs turnover and State GSDP for a period of five-year ending 2018-19.

Table 4.1.9: Details of working PSUs-turnover *vis-à-vis* GSDP

(₹ in crore)

Particulars	2014-15	2015-16	2016-17	2017-18	2018-19
Turnover[14]	548.84	706.39	869.27	1011.51	1,024.88
GSDP[15]	29,533.46	35,937.73	39,514.28	44,161.08	50,544.52(A)
Percentage of Turnover to GSDP	1.86	1.97	2.20	2.29	2.03

As can be seen from **Table 4.1.9** that the turnover of the working PSUs showed a continuous growth during 2014-15 to 2018-19. The year-wise percentage of State PSU-turnover to GSDP had also appreciated in all years during 2014-18. The contribution of PSU-turnover to GSDP during 2018-19 had decreased as the growth in the PSU-turnover was not commensurate with the increase in the GSDP. The increase in State PSU-turnover during 2015-16 (₹ 157.55 crore), 2016-17 (₹ 162.88 crore) and 2017-18 (₹ 142.24 crore) was mainly driven by the growth in the turnover of the power sector company (TSECL) in the respective year, which was to the extent of ₹ 160.68 crore (2015-16), ₹ 167.85 crore (2016-17) and ₹ 110.43 crore (2017-18).

4.1.9.1 Key parameters

Some other key parameters of PSUs performance as per their latest finalised accounts as on 30 September of the respective year are given in **Table 4.1.10**.

Table 4.1.10: Key Parameters of PSUs

(₹ in crore)

Particulars	2014-15	2015-16	2016-17	2017-18	2018-19
Debt	341.28	350.86	296.73	298.96	299.50
Turnover[16]	548.84	706.39	869.27	1011.51	1,024.88
Debt/Turnover Ratio	0.62:1	0.50:1	0.34:1	0.30:1	0.29:1
Interest Payments	0.58	0.69	1.62	1.43	1.21
Accumulated losses	634.48	762.48	773.39	969.73	1,028.84

Debt-Turnover Ratio

A low debt-to-turnover ratio (DTR) demonstrates a good balance between debt and income. Conversely, a high DTR can signal of having too much of debt against the income of PSUs from core activities. Thus, the PSUs having lower DTR are more likely to comfortably manage their debt servicing and repayments.

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[14] Turnover of working PSUs as per the latest finalised accounts as on 30 September of respective year

[15] GSDP (Base year 2011-12) figures have been arrived at on current market prices as per information furnished by the Directorate of Economic & Statistics, Government of Tripura.(A)=Advance Estimates

[16] Turnover of working PSUs as per their latest finalised accounts as of 30 September of the respective year

PSU Debt

During the period of five years, the PSUs debt had registered an overall decrease of ₹ 41.78 crore (12.24 *per cent*) from ₹ 341.28 crore (2014-15) to ₹ 299.50 crore (2018-19). Major portion of PSU debts during 2018-19 (96 *per cent*) pertained to Tripura State Electricity Corporation Limited (₹ 160.28 crore) and Tripura Industrial Development Corporation Limited (₹ 128.41 crore).

From **Table 4.1.10**, it can be seen that during 2014-19, the PSU Turnover had shown growth of ₹ 476.04 crore (87 *per cent*) from ₹ 548.84 crore (2014-15) to ₹ 1,024.88 crore (2018-19). As a result, the DTR had shown a decreasing trend during the period of five years under reference. During 2018-19, the DTR was at 0.29:1, which indicated that the PSUs were in a position to service their long-term debts as compared to previous years.

The accumulated losses of PSUs had registered an overall increase of 62.15 *per cent* (₹ 394.36 crore) from ₹ 634.48 crore (2014-15) to ₹ 1,028.84 crore (2018-19) mainly due to increase of ₹ 307.52 crore in the accumulated losses of two PSUs[17] during the same period.

4.1.9.2 Erosion of capital due to losses

The aggregate paid-up capital and accumulated losses of 14 working PSUs as per their latest finalised accounts as on 30 September 2019 were ₹ 1,388.28 crore and (-) ₹ 1,028.84 crore respectively **(Appendix 4.1.1)**.

Analysis of investment and accumulated losses of these PSUs revealed that the accumulated losses of two working PSUs (₹ 406.23 crore) had completely eroded their paid-up capital (₹ 270.04 crore) as detailed in **Table 4.1.11.**

Table 4.1.11: PSUs with erosion of paid up capital

(₹in crore)

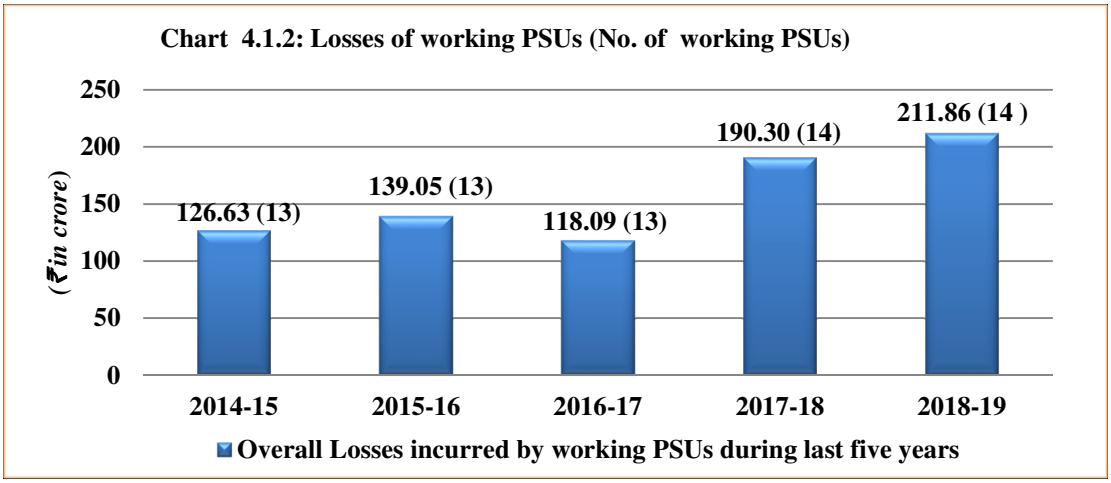
Name of PSU	Latest finalised accounts	Paid up capital	Accumulated losses
Tripura Handloom and Handicrafts Development Corporation Limited	2016-17	107.09	121.59
Tripura Road Transport Corporation	2016-17	162.95	284.64
Total		**270.04**	**406.23**

Accumulation of huge losses by these PSUs had eroded public wealth, which is a cause of serious concern and the State Government needs to review the working of these PSUs to either improve their profitability or close their operations.

The overall position of losses[18] incurred by working PSUs during 2014-15 to 2018-19 is depicted in **Chart 4.1.2**.

[17] Tripura State Electricity Corporation Limited (₹ 215.01 crore) and Tripura Jute Mills Limited (₹ 92.51 crore)

[18] As per the latest finalised accounts of working PSUs as on 30 September of the respective year



(Figures in brackets show the number of working PSUs in respective years)

From **Chart 4.1.2**, it can be seen that the working PSUs incurred losses during all the five years under reference. These losses of working PSUs during five years were mainly attributable to heavy losses incurred by the power sector PSU during these years, which ranged between ₹ 79.96 crore (2016-17) and ₹ 156.96 crore (2018-19).

During the year 2018-19, out of 14 working PSUs, four PSUs earned an aggregate profit of ₹ 8.87 crore, while 10 PSUs incurred loss of ₹ 220.73 crore. The details of major contributors to overall profits and losses of working PSUs are given in **Table 4.1.12**.

Table 4.1.12: Major contributors to profits and losses of working PSUs

(₹in crore)

Name of PSU	Latest finalised accounts	Profit (+)/ loss (-)
Tripura Natural Gas Company Limited	2018-19	(+) 6.29
Tripura State Electricity Corporation Limited	2015-16	(-)156.96
Tripura Jute Mills Limited	2017-18	(-)28.15
Tripura Handloom and Handicrafts Development Corporation Limited	2016-17	(-) 12.17

4.1.9.3 Return on Capital Employed

Return on Capital Employed (ROCE) is a profitability metric that measures the long term profitability and efficiency of the total capital employed by a company. Companies create value when they generate returns on the capital employed. ROCE is an important decision metric for long term lenders. ROCE is calculated by dividing a company's earnings before interest and taxes (EBIT) by the capital employed[19].

During 2018-19, the overall Capital Employed in 14 working PSUs as per their latest accounts was ₹ 732.78 crore while the ROCE of the PSUs ranged from (-) 385.09 *per cent* (Tripura Jute Mills Limited) to (+) 21.66 *per cent* (Tripura Urban

[19] Capital employed = Paid up share capital + free reserves and surplus + long term loans – accumulated losses - deferred revenue expenditure

Transport Company Limited). Further, out of 14 working PSUs, only three PSUs[20] had positive ROCE **(Appendix 4.1.1)**.

4.1.10 Return on Investment on the basis of Present Value of Investment

The Rate of Real Return (RORR) measures the profitability and efficiency with which equity and similar non-interest bearing capital have been employed, after adjusting them for the time value. To determine the RORR on Government Investment, the investment of State Government[21] in the form of equity, interest free loans and grants/subsidies given by the State Government for operational and management expenses *less* disinvestments (if any) has been considered, and indexed to their Present Value (PV) and summated. The RORR is then calculated by dividing the 'Profit After Tax' (PAT) by the sum of the PV of the Government investment.

During 2018-19, out of 14 working PSUs, 10 PSUs incurred loss and only four PSUs earned profits[22] **(Appendix 4.1.1)**. On the basis of return on historical value, the State Government investment eroded by 10.82 *per cent* during 2018-19. On the other hand, the Rate of Real Return where the present value of investment is considered, the State Government investment eroded by 4.62 *per cent* as shown in **Appendix 4.1.2**. This difference in the percentage of investment erosion was on account of adjustments made in the investment amount for the time value of money.

4.1.11 Winding up of non-working PSUs

As on 31 March 2019, there was only one non-working PSU (*viz.* Tripura State Bank Limited), which had been non-functional since 1971. The said PSU was in the process of liquidation under Section 560 of the Companies Act, 1956. Since the non-working PSU was neither contributing to the State economy nor meeting the intended objectives, the liquidation process to wind up this PSU needs to be expedited.

Recommendations

In view of the facts above on accumulated losses, erosion of capital and negative return on capital employed, the State Government needs to either revamp the working of these PSUs or wind them up in public interest.

4.1.12 Corporate Governance

The Companies Act, 2013 was enacted on 29 August 2013 replacing the Companies Act, 1956. With a view to improve effectiveness of the 'Corporate Governance' of the companies, the Companies Act, 2013 provides a robust framework for holding of meetings of Board of Directors (Board), Annual General Meetings (AGM) in addition

[20] Tripura Urban Transport Company Limited, Tripura Natural Gas Company Limited and Tripura Industrial Development Corporation Limited

[21] As per the records of PSUs

[22] As per the latest finalised accounts of working PSUs as on 30 September 2019

to any other meeting and filing of Annual Return[23] with the Registrar of Companies (ROC) containing particulars of the Company as they stood at the close of the financial year. The requirements of the Companies Act, 2013 for a company *inter alia* provide for:

(i) *Holding of a minimum of four meetings of Board of Directors every year in such a manner that not more than 120 days shall intervene between two consecutive meetings of the Board {Section 173 (1)}.*

Consequences for non-compliance: A company or any other person contravening the above provision shall be punishable with fine which may extend to ₹10,000, and where the contravention is continuing one, with a further fine which may extend to ₹1,000 for every day after the first during which the contravention continues (Section 450).

(ii) Holding of a general meeting by a Company (other than a 'one person company') as its Annual General Meeting (AGM) in addition to any other meetings every year. The first AGM shall be held within a period of nine months from the date of closing of the first financial year of the company {Section 96 (1)}.

Consequences of non-compliance: Failure to hold AGM in accordance with the above provision shall be punishable with fine which may extend to ₹1.00 lakh and in the case of a continuing default, with a further fine which may extend to ₹5,000 for every day during which such default continues (Section 99).

(iii) Filing of the Annual Return with the Registrar of Companies (ROC), within 60 days from the date on which the AGM is held or where no AGM is held in any year within 60 days from the date on which the AGM should have been held together with the statement specifying the reasons for not holding the AGM, with such fees or additional fees as may be prescribed, within the time as specified, under Section 403 of the Act {Section 92 (4)}.

Consequences of non-compliance: If a company fails to file its annual return in due time, the company shall be punishable with fine which shall not be less than ₹50,000 but which may extend to ₹5.00 lakh and every officer of the company who is in default shall be punishable with imprisonment for a term which may extend to six months or with fine which shall not be less than ₹50,000 but which may extend to ₹5.00 lakh, or with both {Section 92 (5)}.

4.1.12.1 Review of compliance by the State Government Companies

As on 31 March 2019, there were total 14 Government companies (13 working; one non-working) in the State of Tripura. Audit reviewed (March-July 2019) the compliance of the above provisions by 13 working Government companies during last five years (2014-15 to 2018-19) and following observations are made:

[23] Under Section 92 of the Companies Act, 2013, every company is required to prepare a return (referred to as the annual return) in the prescribed form containing particulars of the company as they stood on the close of the financial year

4.1.12.2 Meetings of the Board of Directors

Audit observed (March-July 2019) that during the last five years (2014-15 to 2018-19), seven out of 13 working companies had held Board's meetings less than the minimum requirement of four meetings in each year. In case of one company (Tripura Horticulture Corporation Limited), no Board meeting was held since 2018-19 till date. Further, 13 companies held as many as 50 meetings after more than 120 days prescribed under the Act with intervening period ranging from 122 to 408 days, as detailed in **Table 4.1.13**.

Table: 4.1.13: Details of holding Board's meetings by the State Government companies during five years (2014-15 to 2018-19)

Sl. No.	Name of the Company	No. of Meetings held (Minimum required: 20)	Meetings held after 120 days	Range of gap between two meetings
1	Tripura Forest Development & Plantation Corporation Ltd.	22	3	157 to 305
2	Tripura Rehabilitation Plantation Corporation Ltd.	19	3	126 to 181
3	Tripura Natural Gas Company Ltd.	25	2	139 to 162
4	Tripura Handloom & Handicrafts Development Corporation Ltd.	13	6	147 to 377
5	Tripura State Electricity Corporation Ltd.	23	6	122 to 147
6	Tripura Jute Mills Ltd.	18	4	122 to 192
7	Tripura Tourism Development Corporation Ltd.	12	8	133 to 253
8	Tripura Tea Development Corporation Ltd.	18	3	137 to 156
9	Tripura Urban Transport Company Ltd.	29	1	148
10	Agartala Smart City Ltd[24].	11	1	135
11	Tripura Industrial Development Corporation Ltd.	21	2	128 to 130
12	Tripura Horticulture Corporation Ltd.	6	4	170 to 408
13	Tripura Small Industries Corporation Ltd.	18	7	124 to 181
	Total		**50**	

4.1.12.3 Holding of AGMs

Audit observed that in five companies, AGMs were not conducted regularly during the last five years as detailed in **Table 4.1.14**. Further, in case of one[25] company, the

[24] Date of Incorporation: 18 November 2016

[25] (1) Tripura Urban Transport Company Limited was incorporated on 23-01-2010, its first financial year closed on 31 March 2010 and therefore the first AGM was due by 31 December 2010 whereas the AGM was held on 30 September 2015

first AGM, which was due after a period of nine months from the close of the first financial year, was held after a delay of 57 months.

Table 4.1.14: Details of holding the AGM by the State Government companies during five years (2014-15 to 2018-19)

Sl. No.	Name of the Company	No. of AGMs held (minimum required: 5)	Years in which AGM was not held
1	Tripura Tourism Development Corporation Ltd.	4	2018-19
2	Tripura Urban Transport Company Ltd.	4	2014-15
3	Tripura Industrial Development Corporation Ltd.	4	2018-19
4	Tripura Horticulture Corporation Ltd.	2	2014-15, 2015-16, 2016-17
5	Tripura Small Industries Corporation Ltd.	4	2018-19

4.1.12.4 Filing of Annual Return with ROC

Audit observed that there were delays ranging between one and 1,296 days in filing of Annual Returns with ROC as detailed in **Table 4.1.15**. In nine companies, returns were not filed for one to four financial years.

Table 4.1.15: Details of filing of Annual Return with the Registrar of Companies by the State Government companies during five years (2014-15 to 2018-19)

Sl. No.	Name of the Company	No. of Annual Returns filed with ROC	Delay in filing Return (Range in days)	Pending period of Annual Return
1	Tripura Forest Development & Plantation Corporation Ltd.	4	474 to 1296	2017-18
2	Tripura Rehabilitation Plantation Corporation Ltd.	5	21 to 683	-
3	Tripura Natural Gas Company Ltd.	5	16 to 42	-
4	Tripura Handloom & Handicrafts Development Corporation Ltd.	5	75 to 1259	-
5	Tripura State Electricity Corporation Ltd.	3	1	2016-17, 2017-18
6	Tripura Jute Mills Ltd.	3	404 to 477	2016-17, 2017-18
7	Tripura Tourism Development Corporation Ltd.	3	85 to 340	2016-17, 2017-18
8	Tripura Tea Development Corporation Ltd.	4	33 to 183	2017-18
9	Tripura Urban Transport Company Ltd.	1	702	2014-15 to 2017-18
10	Agartala Smart City Ltd[26]	2	306	-

[26] Date of Incorporation: 18 November 2016

Sl. No.	Name of the Company	No. of Annual Returns filed with ROC	Delay in filing Return (Range in days)	Pending period of Annual Return
11	Tripura Industrial Development Corporation Ltd.	4	73 to 368	2017-18
12	Tripura Horticulture Corporation Ltd.	1	774	2014-15 to 2017-18
13	Tripura Small Industries Corporation Ltd.	3	28 to 92	2016-17, 2017-18

Failure of the State Government companies to comply with the requirements of the Companies Act, 2013 had adversely impacted the effectiveness of their 'Corporate Governance' besides exposing these companies against the risk of punishment and penalties imposable under the provisions of the Act.

State Government may impress upon the respective companies and the administrative departments concerned to ensure compliance of the above provisions of the Companies Act, 2013 so as to achieve the objectives of corporate governance in these companies.

4.1.13 Impact of Audit Comments on Annual Accounts of PSUs

During October 2018 to September 2019, 10 working Companies had forwarded 15 accounts to the Accountant General (Audit), Tripura. Nine accounts of eight Companies were selected for Supplementary Audit during the year. The audit reports of Statutory Auditors appointed by the C&AG and the Supplementary Audit conducted by the C&AG indicated that the quality of maintenance of State PSU accounts needs to be improved substantially. The details of aggregate money value of comments of Statutory Auditors and the C&AG are given in **Table 4.1.16**.

Table 4.1.16: Impact of audit comments on working Companies

(₹ in crore)

Sl. No.	Particulars	2016-17		2017-18		2018-19	
		No. of accounts	Amount	No. of accounts	Amount	No. of accounts	Amount
1.	Decrease in profit	1	0.28	1	4.64	1	11.01
2.	Increase in loss	5	7.83	3	2.84	2	18.85
3.	Non-disclosure of material facts	1	1.08	3	32.85	0	0.00
4.	Errors of classification	2	37.65	1	0.29	2	41.72

During the year, the Statutory Auditors had given qualified certificates on all 15 accounts. The compliance of companies with the Accounting Standards (AS) remained poor as there were four instances of non-compliance with the Accounting Standards in four accounts during the year. The audit comments were based mainly on the non-compliance with AS-2 (Valuation of inventories), AS-5 (Net Profit or Loss

for the Period, Prior Period Items and Changes in Accounting Policies), AS-15 (Employee Benefits) and AS-18 (Related Party Disclosures).

Similarly, the only Statutory Corporation in the State (*viz.* Tripura Road Transport Corporation) for which the C&AG is the sole auditor, had forwarded one year accounts (2016-17) to Accountant General (Audit), Tripura. The audit of the accounts forwarded by the Corporation had been completed and Separate Audit Report (SAR) issued in February 2020.

4.1.13.1 Gist of some of the important comments of the statutory auditors and C&AG in respect of accounts of the PSUs are as under:

Tripura Industrial Development Corporation Limited (2017-18)

Incorrect accounting of completed works as Capital work in progress

The company incorrectly considered the completed works (August 2016) relating to (i) Infrastructure Development Project at IIDC Dewanpassa, Dharmanagar (₹ 2.28 crore) and (ii) establishment of Bamboo Park at Bodhjungnagar (₹ 27.17 crore) as 'Capital work in progress' instead of 'Tangible Assets' resulting in understatement of 'Depreciation' by ₹ 8.61 crore with corresponding overstatement of 'Profit for the year' to the same extent.

Non-compliance to RBI guidelines for asset classification and provisioning

The company had not been following the norms for asset classification and provisioning as prescribed in 'Income Recognition and Asset Classification Norms' 2015 issued by RBI contrary to its declared accounting policy. This resulted in understatement of provision for doubtful advances by ₹ 2.40 crore (net) with corresponding overstatement of 'profit for the year' by an equal amount.

Tripura Small Industries Corporation Limited (2016-17)

Non-provisioning for closed and non-existent cash and bank investments

Under the 'Current Assets' (Cash & Cash Equivalents), the Company had included cash and bank investments in different banks, which had been closed down and non-existent as on 31 March 2017 and thus, chance of realising these investments was remote. Non-provisioning against these doubtful assets resulted in overstatement of 'Current Assets' and understatement of 'loss for the year' by ₹ 18.79 lakh each.

Tripura Handloom and Handicrafts Development Corporation Limited (2016-17)

Wrong accounting of grant

The company received purpose specific capital grants of ₹ 14.44 crore from different authorities and wrongly accounted the same under 'Other long term liabilities' instead of accounting it under 'Capital reserve' under the broad heading 'Reserve & Surplus'.

Accounting without proper description/justification and/or records

The company has been carrying forward the 'Other current Liabilities' (Note No.10) of ₹ 6.77 crore (after adjusting debit balance of ₹ 0.55 crore) for years together without proper description/justification.

4.1.14 Follow up action on Audit Reports

4.1.14.1 Submission of Explanatory notes

The Reports of the C&AG represent the culmination of the process of audit scrutiny. It is, therefore, necessary that they elicit appropriate and timely response from the executive. The Finance Department, Government of Tripura issued (July 1993) instructions to all administrative departments to submit replies/explanatory notes to paragraphs/performance audits included in the Audit Reports of the C&AG within a period of three months of their presentation to the Legislature, in the prescribed format without waiting for any questionnaires from the Committee on Public Undertakings (COPU). The position of receipt of explanatory notes to paragraphs/ performance audits pending to be received from the State Government/ administrative departments concerned is given in **Table 4.1.17**.

Table 4.1.17: Explanatory notes not received (as on 30 September 2019)

Year of the Audit Report (Commercial/ PSUs)	Date of placement of Audit Report in the State Legislature	Total performance audits and paragraphs included in the Audit Report		Number of performance audits/paragraphs for which explanatory notes were not received	
		Performance audits	Paragraphs	Performance audits	Paragraphs
2011-12	27-09-2013	1	3	Nil	2
2014-15	23-03-2016	1	2	Nil	2
2015-16	15-03-2017	1	Nil	1	Nil
2016-17	23-11-2018	1	1	1	1
2017-18	30-08-2019	1	4	1	4
Total		**5**	**10**	**3**	**9**

From **Table 4.1.17**, it can be seen that out of 15 paragraphs/performance audits included in the Audit Reports for 2011-12 to 2017-18, explanatory notes to 12 paragraphs/performance audits relating to four departments were awaited (September 2019).

4.1.14.2 Discussion of Audit Reports by COPU

The status of the performance audits and paragraphs as on 30 September 2019 relating to PSUs that appeared in the State Audit Reports of C&AG and discussed by the COPU was as given in **Table 4.1.18**.

Table 4.1.18: Performance audits/paragraphs featured in State Audit Reports *vis-à-vis* discussed by COPU as on 30 September 2019

Period of Audit Report	Number of performance audits/paragraphs			
	Appeared in Audit Reports		Paragraphs discussed	
	Performance audits	Paragraphs	Performance audits	Paragraphs
2011-12	1	3	Nil	1
2012-13	1	3	1	2
2013-14	1	3	Nil	Nil
2014-15	1	2	Nil	Nil
2015-16	1	Nil	Nil	Nil
2016-17	1	1	Nil	Nil
2017-18	1	4	Nil	Nil
Total	**7**	**16**	**1**	**3**

4.1.14.3 Compliance to Reports of COPU

Action Taken Notes (ATNs) on 37 out of 50 recommendations contained in nine reports of COPU presented to the State Legislature between November 2010 and February 2015 have not been received (September 2019) as indicated in **Table 4.1.19**:

Table 4.1.19: Compliance to COPU reports

Year of the COPU report	Total number of COPU reports	Total no. of recommendations in COPU report	No. of recommendations where ATNs not received
2010-11	4	22	9
2011-12	3	14	14
2012-13	Nil	Nil	Nil
2013-14	1	10	10
2014-15	1	4	4
2015-16	Nil	Nil	Nil
2016-17	Nil	Nil	Nil
Total	**9**	**50**	**37**

The above reports of COPU contained recommendations in respect of audit paragraphs pertaining to five departments of the State Government, which appeared in the reports of the C&AG for the years 1989-90 to 2008-09.

Recommendations

State Government should review and revamp the mechanism of responding to audit observations. It may ensure that explanatory notes to audit paragraphs/performance audits and ATNs on the recommendations of COPU are provided as per the prescribed time schedule and the loss/outstanding advances/overpayments flagged in audit recovered within the prescribed period to enable accountability for public finances.

INDUSTRIES AND COMMERCE DEPARTMENT
(Tripura Industrial Development Corporation Limited)

4.2 Development of Industrial Infrastructure by Tripura Industrial Development Corporation Limited-a thematic audit

4.2.1 Introduction

Tripura is primarily an agrarian State and during 2018-19, the Industries Sector accounted for 14.20 *per cent* of the Gross State Domestic Product (GSDP). Industrialisation is low due to lack of infrastructures, communication bottlenecks and other geographical constraints, *etc.* but can be improved with better infrastructure facilities. Increased industrialisation improves employment generation in the State.

4.2.2 Modified Industrial Infrastructure Upgradation Scheme

Government of India (GoI) launched (2003) Industrial Infrastructure Upgradation Scheme (IIUS) to enhance competitiveness of Industry by providing quality infrastructure through public private partnership in selected functional clusters. The scheme was recast in February 2009 to make it more effective through increased focus on technological upgradation. The Scheme was continued in 12th Five Year Plan (2012-17) with suitable modifications. Under MIIUS[27], the role of the State was redefined to nominate a Scheme Implementing Agency (SIA) such as State Industrial Development Corporations for execution of project and sharing its costs. SIA was responsible to formulate project interventions as well as implement and monitor the scheme progress.

The Government of Tripura (GoT) took up (2014) Modified Industrial Infrastructure Upgradation Scheme (MIIUS) for up-gradation of infrastructure in the existing industrial areas of Bodhjungnagar Industrial Estate (IE) and R.K. Nagar IE in two phases, *viz.* MIIUS-I (Bodhjungnagar IE) and MIIUS-II (R.K. Nagar IE). The objective of the scheme was to enhance competitiveness of industry by providing quality infrastructure to catalyse and promote industrial growth, employment generation and technology up-gradation. The Government of India (GoI) approved the Bodhjungnagar industrial area (MIIUS-I) project on 5 March 2015 at a total project cost of ₹ 59.93 crore[28] and the R.K. Nagar industrial area (MIIUS-II) project on 1 March 2016 at a total cost of ₹ 52.25 crore[29]. The components of two projects involved creation of the following infrastructure within two-three years from the date of approval of the project (MIIUS-I and II):

(i) physical infrastructure such as roads, water supply, street lights, piped natural gas (PNG), optical fibre;

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[27] The project cost under MIIUS in North Eastern states was to be funded through GoI grant (80 *per cent*) subject to the ceiling of 50 crores and SIA contribution (minimum 10 *per cent* of the project cost) with an option to avail loans from financial institutions or contribution from beneficiary industries for the balance amount

[28] GoI: ₹ 43.51 crore and SIA: ₹ 16.42 crore as revised (20 September 2017)

[29] GoI: ₹ 38.76 crore and SIA: ₹ 13.49 crore

(ii) technical infrastructure such as convention centre and electrical sub-station; and

(iii) social infrastructure such as multi-purpose facility (housing activities related to skill development and common facilities for all industrial users), amenity centre and workers' hostel.

4.2.3 Role of Tripura Industrial Development Corporation Limited

The Department of Industries and Commerce, was the nodal Department for industrialisation in the State. The Department discharges its responsibility through Tripura Industrial Development Corporation Limited (TIDCL). TIDCL was also the State Implementing Agency (SIA) for implementation of MIIUS in the State.

TIDCL[30], being the SIA for MIIUS projects was responsible for creation of industrial infrastructure and to provide requisite infrastructure[31] and finance for promotion and development of industries in the State. As of November 2019, TIDCL had allotted land and sheds to 220 Industrial Units (IUs) in 15 Industrial Estates (IEs) across the State.

4.2.4 Audit Objectives, Scope and Methodology

The thematic audit of TIDCL was carried out during September-November 2019 with the objective of ascertaining the extent to which:

- the stated objective of industrial development in the State was achieved; and
- industrial infrastructure was developed and allotted to the Industrial Units as envisaged; and
- macro outcomes Infrastructure Development Scheme (MIIUS) were achieved.

As on 30 September 2019, TIDCL had allotted land and sheds to total 220 IUs in 15 IEs in the State. The present thematic audit covered the activities[32] of TIDCL in two IEs (Bodhjungnagar and R.K. Nagar) where two MIIUS projects (MIIUS I & II) were implemented. The land available[33] within these two sampled IEs (761.89 acre) constituted 50.65 *per cent* of the total land acquired by the Company across the State (1,502.69 acres) for all the 15 IEs up to 2018-19. The audit process further involved detailed scrutiny of the allotment process and fulfilment of conditions of the allotment of 56 randomly selected IUs out of total 111 IUs which were allotted land and sheds in two sampled IEs as of September 2019.

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30 A State owned Company incorporated in 1974 under Companies Act, 1956

31 Sheds, common effluent treatment plant, water supply system, *etc*.

32 The activities of TIDCL in selected IEs inter alia included development and allotment of land, monitoring of fulfilment of conditions attached to the allotment and implementation of MIIUS Phase I and II

33 Land available represents the land acquired by the State Government and handed over to the Company

4.2.5 Audit criteria

Audit findings were benchmarked against the criteria sourced from the following:

- Industrial and land allotment policies of Government of Tripura;
- Terms and conditions of Allotment /Lease Agreement between TIDCL and allottees;
- MIIUS Scheme/project guidelines and sanction orders;
- Central Vigilance Commission (CVC) guidelines, Pollution Control guidelines, *etc*.
- Civil works related provisions (CPWD manuals, Contract Agreements).

Audit findings

Audit findings are discussed in succeeding paragraphs.

4.2.6 Scheme funding

Based on GoT's proposals, GoI sanctioned (March 2015/March 2016) ₹ 112.18 crore (Central share: ₹ 82.27 crore and State share: ₹ 29.91 crore) for implementation of two MIIUS projects (MIIUS-I and II) in two IEs (*viz.* Bodhjungnagar and R.K. Nagar). The summarised detail of total funding provided by GoI and GoT and its utilisation by TIDCL on implementation of two projects as on 30 September 2019 are shown in **Table 4.2.1**.

Table 4.2.1: Scheme funding provided and utilised on implementation of MIIUS-I & II (Bodhjungnagar and R.K. Nagar IEs) as on 30 September 2019

(₹in crore)

Scheme	Project cost sanctioned			Funds released		Interest earned	Total funds available	Funds utilised[34]	Funds remained unspent
	GoI	GoT	Total	GoI	GoT				
MIIUS-I	43.51	16.42	59.93	42.99	16.45	4.29	63.73	46.09	17.64
MIIUS-II	38.76	13.49	52.25	38.31	13.49	2.98	54.78	50.60	4.18
Total	**82.27**	**29.91**	**112.18**	**81.30**	**29.94**	**7.27**	**118.51**	**96.69**	**21.82**

The MIIUS projects were to be completed within three years from the date of approval (March 2015/March 2016) and as such, both the projects (MIIUS I & II) were scheduled for completion latest by 31 March 2019. However, TIDCL could not complete the two projects as of October 2019[35].

It can be noticed from **Table 4.2.1**, GoI and GoT had provided almost 100 *per cent* of the committed funding for implementation of MIIUS projects. However, TIDCL could not utilise around 18 *per* cent (₹ 21.82 crore) of the funds available for project

[34] Including the Implementing Charges of ₹ 3.58 crore (MIIUS-I: ₹ 1.71 crore and MIIUS-I: ₹ 1.87 crore) paid to TIDCL

[35] As per the progress report submitted by the Consultant as of October 2019, the physical progress of civil works achieved for MIIUS-I and II was 98.5 *per cent* and 98 *per cent* with total financial progress of ₹ 43.03 crore (MIIUS-I) and ₹ 40.31 crore (MIIUS-II) respectively

implementation as on 30 September 2019. This was mainly because of slow progress of works leading to pending execution of various work components behind the approved schedule. Availability of unspent scheme funds (₹ 21.82 crore) further indicated that there was no dearth of fund availability for timely completion of the project.

4.2.7 Allotment of Land and Sheds

The activities of TIDCL in the two selected IEs covered under the present audit inter alia included development and allotment of land, monitoring of fulfilment of conditions attached to the allotment, and implementation of MIIUS Phase I and II. As on 30 September 2019, TIDCL provided total 761.89 acres of land to the two sampled IEs; of which, 442.60 acres of land was available for allotment[36] as on 31 March 2019. As against this, the IEs allotted 288.66 acres of land to total 111 IUs. The year-wise position of land and sheds available vis-à-vis allotted by two IEs to various IUs during last five years (2014-15 to 2018-19) is given in **Table 4.2.2**.

Table 4.2.2: Details of land and sheds available for allotment vis-à-vis allotted during 2014-15 to 2018-19 in Bodhjungnagar (B Nagar) and R.K Nagar IEs

Year	Available for allotment				Allotted				Total number of Industrial Units (IUs)	
	Land (Acre)		Sheds (No.)		Land (Acre)		Sheds (No.)			
	B Nagar	RK Nagar	B Nagar	RK Nagar	B Nagar	RK Nagar	B Nagar	RK Nagar	B Nagar	RK Nagar
O/B	266.60	37	23	0	153.95	14.38	10	0	50	2
2014-15	266.60	37	23	0	2.41	0	0	0	4	0
2015-16	266.60	108.16	23	14	12.92	3.00	0	2	14	4
2016-17	266.60	108.16	23	14	11.25	46.00	1	2	5	5
2017-18	266.60	131.16	23	16	17.70	3.10	2	2	9	3
2018-19	295.65	146.95	23	18	22.95	1.00	3	2	13	2
Total	-		-		**221.18**	**67.48**	**16**	**8**	**95**	**16**
G. Total	-		-		**288.66**		**24**		**111**	

***Source**: Records of TIDCL*

It can be noticed from **Table 4.2.2**, out of total land measuring 442.60 acre available for allotment (Bodhjungnagar IE: 295.65 acre; R. K Nagar: 146.95 acre) as on 31 March 2019, the two IEs could allot 288.66 acres of land (65 *per cent*) to 111 IUs. This included the land allotted under Budhjungnagar IE (221.18 acre) and R. K Nagar IE (67.48 acre), which was 75 *per cent* and 46 *per cent* of the land available under the respective IEs.

It can also be seen that during the five years (2014-15 to 2018-19) covered in audit, the two IEs could allot only 27 *per cent* (120.33 acre) of the total land (442.60 acre) available for allotment. Further, during 2014-15 to 2018-19 (excepting 2016-17), R. K Nagar IE could allot merely 7.10 acre of land, which indicated comparatively low industrial activities under this IE.

[36] The difference between the Land available (761.89 acre) and Land allottable (442.60 acre) in two IEs pertained to the Land left for common facilities (i.e. roads, electrical installations, common facilities, *etc*.) as well as Land under development and undeveloped forest or valley (lunga) Land

Similarly, out of total 41 sheds available in two IEs (Bodhjungnagar: 23 sheds; R. K. Nagar: 18 sheds) as on 31 March 2019, TIDCL could allot only 24 sheds (59 *per cent*). It can also be seen that as of March 2019, R. K. Nagar IE could allot 44 *per cent* (8 sheds) of sheds available for allotment as compared to 70 *per cent* (16 sheds) allotted by Bodhjungnagar IE.

Thus, the position above indicated that activities of TIDCL towards development and allotment of land and sheds to industrial units were not encouraging.

4.2.8 Process management

4.2.8.1 Delays in allotment

As per Land Allotment Policy of TIDCL (January 2016), TIDCL was required to allot the land to the IUs within six working days after receipt of the application from the IU concerned. The details of time taken by TIDCL for processing and allotment of land to 56 sampled IUs under Bodhjungnagar and R. K. Nagar IEs at different stages is shown in **Table 4.2.3**.

Table 4.2.3: Stage-wise delay in allotment process

Steps	Activity flow	Average working days		Extent of delay (days)	Number of cases
		Prescribed	Actual		
1	Receipt of application through single window	1	1	0	-
2	Scrutiny of application, earmarking of land and sending proposal to Managing Director (MD), TIDCL	2	NA	NA	-
3	Proposal approval by MD and issuance of consent letter for payment of premium	1	27	6 to 90	32
4	Deposit of premium	1	62	2 to 693	29
5	Issue of Allotment Order	1	34	3 to 141	43
Total time		**6**	**105**	**8 to 794**	**46**

***Source**: Records of TIDCL*

It can be seen from **Table 4.2.3** that there were delays at each stage of activity taking an average 105 working days for issue of allotment order to the IUs. Stage-wise analysis of delay in allotment process relating to 56 sampled IUs revealed that there were considerable delays at each stage of land allotment process, which had correspondingly delayed the final allotment of land at an average by 99 days[37] after receipt of applications in 46 out of total 56 cases test checked. The delays were mainly attributable to change of allotted units (four units), delay in measurement of land (two units), non-readiness or renovation of sheds (two units), delay in movement of files (two units) and delayed deposit of premium by the allottees (29 cases). One illustrative case study on the reasons for delays has been presented below:

[37] Difference between average working days as prescribed (6 days) and as actually taken (105 days)

Case study: Application for setting up a CNG Cylinder Testing Unit

TIDCL received application (11 August 2015) to set up an oxygen gas manufacturing plant (Agartala Air Products). TIDCL placed (31 October 2015) the proposal before the MD for approval after more than two months of receipt of application and MD approved it on the same day. Subsequently, the Applicant deposited the premium (18 November 2015) and TIDCL issued allotment order on 26 November 2015.

As could be seen from the above, the delay in allotment was mainly due to abnormal period of more than two months taken by TIDCL in processing the application. No specific reasons for this delay were, however, found on record.

Audit further observed that, TIDCL failed to execute formal lease deeds/agreements with the land allottees (IUs) clearly defining the obligations of the lessees (IUs) as well as the enabling provision for imposing penalty or cancellation of lease in case of delays/default in payment of lease premium by the land allottees (IUs) as discussed under **Paragraph 4.2.8.2**.

In reply, the Government accepted the audit observation and assured (February 2020) that it would take appropriate steps to arrest the delays in allotment of land.

4.2.8.2 Failure to execute lease deeds

Lease deed is a legal document which lays out all important terms and conditions essential to safeguard and protect the leased out asset and the financial interests of the Lessor. Since the lease deed sets out obligations of the lessee, it is imperative that a formal lease deed is executed by TIDCL and the IUs to avoid any disputes in the future.

As per the allotment orders, the TIDCL and the Industrial Units were to execute a registered deed of lease agreement within three months from the date of issue of allotment order. Audit, however, observed that out of 56 sampled IUs, TIDCL had not executed lease deeds with 16 IUs during the period covered by Audit. In the absence of formal lease deeds/agreements, TIDCL was exposed to possible financial risks and damage to the leased out property.

In reply, the Government accepted the facts and stated (February 2020) that TIDCL had started issuing letters to the units for execution of lease deeds.

4.2.8.3 Delays in realisation of lease rent

One of the prime sources of fund for maintenance of IEs was monthly lease rent collected from the IUs. Thus, timely recovery of lease rental (along with water charges) was imperative to ensure proper maintenance of IEs without impacting the financial health of TIDCL. As per allotment orders, in case of default in payment of rent for three consecutive months, TIDCL should cancel the lease and take back the possession of the land and sheds. As per the latest accounts finalised (2018-19), TIDCL had total 'trade receivables' of ₹ 4.96 crore as on 31 March 2019, which

included the doubtful lease rent of ₹ 4.58 crore[38] (92.35 *per cent*) due against 66 IUs in respect of whom no lease rent was claimed during 2018-19 due to reasons like cancellation/closure of agreement, IUs left the premise, *etc*.

Audit scrutiny further revealed that 51 out of 56 sampled IUs had defaulted in making lease rent payments for periods ranging from 3 to more than 24 months. As a result, an amount of ₹ 3.84 crore was pending for recovery (30 September 2019) on account of monthly lease rent including water charges. TIDCL, however, did not take necessary steps to cancel or take possession of the leased land and sheds from the defaulting units except issuing show cause notices to 21 IUs.

Audit reviewed the cases of 51 defaulting units (out of 56 sampled units) mentioned above to analyse effectiveness of the action taken by TIDCL against the defaulters and following was observed:

In one case[39], based on the proposal of the Management, the Board resolved (2 May 2015) to take action against the defaulting unit by filing a certificate case under Tripura Public Demand Recovery Act, 2000 for recovery of outstanding lease rent (₹ 23.75 lakh). Audit, however, observed that TIDCL could not recover the outstanding dues from both the above mentioned defaulting units so far (February 2020).

Audit further observed that the Board in its 176th meeting resolved (May 2015) to take steps to incorporate the additional conditions in the lease deeds for obtaining the necessary collateral security from the IUs at the time of execution of lease deeds to safeguard its financial interests and ensure recovery of unpaid lease rental. TIDCL, however, failed to comply with the above decision of the Board (February 2020). The inaction on part of Management of TIDCL in the matter was detrimental to the financial interests of TIDCL.

In reply, the Government assured (February 2020) that steps towards cancellation of allotment would be initiated as per terms and conditions of lease deed.

4.2.9 Project management under MIIUS

As per MIIUS guidelines, the project proposal was to be conceptualised and formulated meticulously after conducting detailed survey and study of the identified industrial estates/areas and generating credible data for laying the foundation of the project proposal. The critical gaps in the infrastructure impinging upon the competitiveness of the industry should clearly be brought out in the proposal. Measurable outcomes such as expected enhancement in productivity and employment should be incorporated into the project proposal. The project proposal must also spell out outcomes envisaged and the indicators that would be positively impacted by the project. It should suggest the mechanism for operation and maintenance of the infrastructure proposed to be created on sustainable basis by levying user charges, fees, *etc*.

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[38] Refer comments of C&AG (No. C1) on the accounts of TIDCL for the year 2018-19 read with Statutory Auditors' qualification vide para 2 (h) (A) & (B) of their Audit Report dated 22.2.2020

[39] M/s Icore Super Cement Pvt. Ltd.

A Detailed Feasibility Report (DFR) for the project was to be prepared which should include realistic cost estimates of construction, technical specifications, master plan along with drawings and buildings plan, financial assumption, *etc*. The DFR so prepared should clearly establish the expected outcome of each of the interventions, which should be measurable along with a firm implementation schedule in the form of a PERT chart[40] showing activity/component wise timelines.

4.2.9.1 Quality of Detailed Project Report /Detailed Feasibility Report

Audit reviewed two Detailed Project Reports (DPRs)[41] relating to the Scheme projects approved during the period of five years (2014-19) to assess the quality of the DPRs. Audit noticed that both the DPRs were prepared on the basis of inaccurate data/ ground facts, unrealistic assumptions and expectations about need and utilisation of proposed interventions (project assets) as discussed below:

Unrealistic projections on utilisation of project assets and collection of revenue: The DPRs of Bodhjungnagar and R. K Nagar had considered certain assumptions regarding the extent of utilisation of project assets and revenue/ users' charges collectable there against. Audit observed that the projections made in the DPRs for utilisation of the project assets and collection of revenue/ user charges from the users of these assets were not based on any scientific study or market survey of the demand and availability of similar facilities, prevailing market rates of similar facilities, *etc*. as detailed in **Table 4.2.4.**

Table 4.2.4: Utilisation of project assets as per the DPRs

Sl. No.	Nature of asset	Extent of utilisation as per DPR	Rate as per DPR (in ₹)	Remarks
1	CETP	1000 Cubic Meter per day	20 per cubic meter	DPR projected the annual revenue collection at ₹ 60 lakh[42] based on the prevailing industries which proved to be highly inflated considering the fact that the actual revenue from the existing CETP was only ₹ 6.28 lakh per year during 2014-19.
2	Conference Hall (Business and Convention Centre)	500 persons per month	1,000	DPRs projected the annual revenue generation of ₹ 72 lakh [43] without considering the availability of alternate conference facilities in and around the Agartala City.

[40] Programme Evaluation and Review Technique Chart (PERT Chart) is a graphic representation of the timeline of a project, which gives the Project Manager the tools needed to break down each of the projects' tasks for analysis

[41] The DPRs were prepared by the Consultants (M/s IL&FS Clusters Development Initiative) appointed October 2014/December 2015) by TIDCL for MIIUS I & II

[42] 1000 Cubic Meter per day × ₹ 20 per Cubic Meter x 300 working days

[43] As per para 11.2 (Revenue Assumptions) of the DPR

Sl. No.	Nature of asset	Extent of utilisation as per DPR	Rate as per DPR (in ₹)	Remarks
3	Meeting Rooms (Business and Convention Centre)	30 persons per week in Four rooms	1,000 per person	DPRs projected the annual revenue generation of ₹ 87.36 lakh[44] without considering the availability of alternative facility in and around Agartala City.
4	Restaurant (Business and Convention Centre)	50 persons per day	500 per person	DPRs projected the annual revenue generation of ₹ 91.25 lakh[45] without any basis and demand analysis.
5	Skill Development Centre (Common Facilities)	monthly	10,00,000 per month	DPRs projected the annual revenue generation of ₹ 120.00 lakh without any basis and specific details on the training to be imparted.
6	Design Centre (Common Facilities)	10,760 Square Feet	15 per square feet	DPRs projected the annual revenue of ₹ 19.37 lakh [46] from Design Centre without any basis and specific details on the facilities to be created.

4.2.9.2 Delay in establishment of Optical Fibre Network

To provide high speed band connectivity, TIDCL established (June 2018) a dedicated Optical Fibre Cable Network (OFC) at Bodhjungnagar and R.K. Nagar IEs through Bharat Sanchar Nigam Limited (BSNL) at a cost of ₹ 1.26 crore[47].

Audit observed that as of March 2020, only three out of 111 IUs in two IEs were actually availing the services of high speed band connectivity. This indicated that TIDCL had not encouraged industries to avail the facility provided in the IEs.

In reply, the Government stated (February 2020) that the work of OFC Network had been completed in June 2018 and it had informed all the IUs to avail the facility.

The fact remained that the high speed band connectivity created under two IEs largely remained underutilised due to inadequate efforts on part of TIDCL to persuade and encourage the intended users to avail the facility.

4.2.9.3 Monitoring of project work

Monitoring is essential for achieving timely completion of project in a systematic and cost effective manner. Audit, however observed that TIDCL did not fix the physical and financial milestones for successful completion of the projects and to facilitate monitoring of work progress as per the fixed time line.

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44 Four rooms× 70 *per cent*× 30 persons × two events *per* week × 52 weeks ×₹ 1000

45 50 person× ₹ 500 per day per person for 365 days

46 ₹ 15 per Sq. Ft. × 10760 nos. × 12 months

47 Out of total sanctioned cost of ₹ 1.26 crore (MIIUS-I: ₹ 0.45 crore and MIIUS-II: ₹ 0.81 crore), TIDCL released ₹ 1.04 crore to BSNL in August 2015 (₹ 0.45 crore) and ₹ 0.59 crore in May 2017

As per MIIIUS guidelines, the State Implementing Agency (TIDCL) was to submit quarterly progress reports (QPRs) to Department of Industrial Policy and Promotion (DIPP). Examination of records of TIDCL, however, revealed that the TIDCL was not regular in submitting the QPRs to DIPP causing adverse impact on the monitoring and progress of project works.

TIDCL awarded (December 2015/April 2016) the civil works relating to MIIUS-I and MIIUS-II to two construction agencies[48] at a contract value of ₹ 39.73 crore (MIIUS-I) and ₹ 46.25 crore (MIIUS-II). As per work agreements executed by TIDCL, the construction agencies were required to complete the project works for MIIUS-I and II by 22 January 2018 and 09 May 2018 respectively. In case of delay in completion of works, TIDCL was entitled to levy the liquidated damages on the construction agencies at 0.5 *per cent* of the contract value per week for the period of delay subject to a maximum of five *per cent* of final contract price. It was observed that:

- The work of MIIUS-I was delayed due to slow progress of work by the construction agency such as approach road, water supply system, effluent pipelines, *etc*. As on October 2019, the physical progress of work as submitted by the Consultant was 98.5 *per cent* with a total financial progress of ₹ 43.03 crore including extra items of work.
- In the case of MIIUS-II works, the construction agency delayed submission of layout drawings for more than one year and also delayed in procurement of building materials leading to corresponding delay in completion of project work. As on October 2019, the physical progress of work submitted by Consultant was 98 *per cent* with a total financial progress of ₹ 40.31 crore including extra works.

Audit observed that TIDCL did not maintain the hindrance registers to identify reasons for the delays to fix responsibility. Despite avoidable delays on part of the construction agencies, TIDCL failed to levy liquidated damages amounting to ₹ 4.33 crore[49] for delay and non-completion of the work within the scheduled time.

The Government stated (February 2020) that delays occurred due to non-availability of labour and construction materials in the local market, monsoon season, *etc*.

The reply is not acceptable as the above hindrances were foreseeable at planning stage and TIDCL should have properly addressed these issues while issuing the work orders and fixing the time frame for the project works. Further, TIDCL could not establish its assertion regarding the stated hindrances due to non-maintenance of necessary records to document the reasons for delays.

[48] **MIIUS-I**: M/s Swapan Chandra Dey (Date of Agreement: 22 January 2016); **MIIUS-II**: M/s Mackintosh Burn Limited (Date of Agreement: 9 May 2016)

[49] (₹ 40.33 crore + ₹ 46.25 crore) × 5/100 = ₹ 4.33 crore

4.2.10 Macro outcomes of the MIIUS Scheme

As stated earlier, MIIUS aimed at providing quality infrastructure to catalyse and promote industrial growth, employment generation and technology up-gradation. Audit, however, observed that there was low and inconsistent demand for industrial plots in the sampled IEs during 2014-19. This was evident from the fact that during period covered in audit, TIDCL could allot land only one to eight units per year in the two sampled IEs. The fact that there were few takers for industrial plots even in the two most developed IEs in the vicinity of the State capital despite a large number of Central and State Government incentives, points towards inadequacy/ insufficiency of the policy environment to attract industrial investment in Tripura.

Table 4.2.5 depicts the actual achievements against the envisaged outcomes of MIIUS as per the Detailed Project Reports (DPRs) as of September 2019.

Table 4.2.5: Achievement against the envisaged outcomes of MIIUS

Outcome as per DPR	Audit Observations
a) **Status on functioning of Industrial Units:** As per the land allotment conditions, the IUs should start production within 12 months/ 18 months/ 24 months of land allotment for a projected investment of ₹ 5 crore, ₹ 10 crore and ₹ 15 crore respectively**.**	As per the specified construction period mentioned in the land allotment order, 50 out of the 56 sampled IUs were supposed to be functional as of September 2019. However, as per the joint physical verification of the IEs carried out (8 August 2019) by Audit with the representatives of TIDCL: • only 29 IUs were found functional; • Ten IUs had 'nil' or negligible development of allotted land/sheds for no reasons on record; • Remaining 11 IUs were non-functional mainly due to financial problems, low productivity, logistics, *etc*.
b) **Integrated Complex**: The project proposes to provide facilities that would integrate critical industrial infrastructure with basic physical and support infrastructure.	There was no evidence to evaluate the facilities that would integrate critical industrial infrastructure. The components of both the projects included infrastructure of common nature that could be converged into one integrated complex, as the two IEs were located close to each other. TIDCL, however, had not taken any measures to integrate the critical infrastructure of common nature under two IEs.
c) **Employment generation**: The project shall generate regular employment opportunities for almost 5,000 to 8,000 workers directly. It shall also generate	The DPR projected generation of direct and regular employment opportunities for almost 5,000 to 8,000 workers without providing the supporting details and credible data on the employment

Outcome as per DPR	Audit Observations
significant number of employment opportunities in other supporting activities.	structure. The DPR projections proved to be unrealistic as only 804 workers[50] could be directly employed during 2015-16 to 2019-20 under MIIUS-I and II projects. Further, as of September 2019, TIDCL could generate only 2,336 jobs under two sampled IEs. Due to generation of low employment opportunities than projected, the infrastructure facilities (workers' hostels, *etc*.) created to accommodate the working staff under two IEs remained underutilised.
d) **Ease of Information (Fibre Optics)**: The project shall enable the enterprises and other stakeholders of the cluster to access critical information on market trends through its Information and Communication Technology (ICT) platform. This would help in proper information flow and address another critical weakness of the cluster.	Optical Fibre Cable (OFC) network was proposed to be laid in the internal roads of the IEs. Though TIDCL had laid down (June 2018) through Bharat Sanchar Nigam Limited (BSNL), the broadband connectivity was utilised by only three out of 111 IUs in two IEs till March 2020. This indicated that there was lack of demand for high speed network services in two IEs. Further, in absence of formal work order and proper documentation by TIDCL regarding OFC work executed by BSNL, the actual delay in completion of work by BSNL could not be ascertained.
e) **Training and skill building** as part of Multi-Purpose Building: The project shall also create infrastructure for imparting training and upgrading existing skills of the industrial workers engaged in rubber processing, food processing and light engineering. This is necessary to address skill gaps found in the industrial workers.	There was no evidence of any inputs from the industries to identify the skill gaps. Further, training and upgrading the skills of industrial workers had lost its relevance as no significant increase in the employment generation was noticed in the two sampled IEs over the last five years as mentioned under para (c) above.
f) Positive indicators for investment appeal (Bodhjungnagar IE): Quality of human resources and infrastructure, conducive business environment, *etc*.	There was no source of evidence to support the existence of the claimed positive indicators in the State. On the contrary, Tripura was ranked 25th in the ranking[51] for 'Ease of Doing Business' (2017) in the Country.
g) Environmental Impact: Creation of the Common Effluent Treatment Plant (CETP) will have significant positive impact	Actual utilisation of the CETP[52] during 2014-19 ranged from 4.41 to 12.59 *per cent*. Despite the available treatment capacity, effluents of three[53]

50 Data furnished by TIDCL to DIPP
51 Source: Department of Industrial Policy and Promotion, Government of India.
52 CETP was set up in August 2014
53 Brite Rubber, Agartala Rubber and Virgin Rubber

Outcome as per DPR	Audit Observations
on the environmental condition of the area.	out of five rubber industries[54] presently functional in Bodhjungnagar IE were disposed of without proper treatment during 2018-19 defeating the basic objective of the Scheme. This indicated that TIDCL had not taken necessary measure to make utilisation of CEPT mandatory on the IUs under two IEs.

4.2.11 Conclusion

Implementation of the Modified Industrial Infrastructure Upgradation Scheme (MIIUS) for promotion of industrialisation in the State was far from satisfactory. As against the total land measuring 442.60 acre available for allotment, TIDCL could allot only 288.66 acres of land (65 *per cent*) to 111 IUs as on 31 March 2019. This indicated lack of demand for industrial land in the State and also lapse on part of the State Government in taking adequate efforts for attracting the industries to Tripura.

The process management of TIDCL was inefficient considering average delays of 99 days noticed in final allotment of land after receipt of application. TIDCL has not ensure execution of formal lease agreements with the industrial units thereby exposing it against possible financial risks and damage to the leased property. There were unreasonable delays in realisation of lease rent amounting to ₹ 3.84 crore from 51 out of 56 test checked industrial units for periods ranging from 3 to more than 24 months.

The Detailed Project Reports prepared for implementation of MIIUS were deficient and unrealistic due to lack of detailed survey and need based analysis of the actual requirement resulting in redundancy of projects. The overall achievements against those envisaged in MIIUS showed 29 functional units out of 50; non integration of critical industrial infrastructure; low employment opportunities; weak demand for optical fibre network facility and the State stood at 25 rank in Ease of Doing Business.

4.2.12 Recommendations

The Government/TIDCL may ensure:

- *formulating project DPRs based on detailed survey/feasibility study and realistic assumptions;*
- *timely creation of infrastructure and allotment of industrial land/sheds to industrial units to achieve the scheme objectives; and*
- *formalising lease arrangements with the industrial units to ensure appropriate legal action against defaulting units.*

[54] Excluding Abhishar Buildwell Private Limited, which was non-functional

TRIPURA HANDLOOM AND HANDICRAFTS DEVELOPMENT CORPORATION LIMITED

4.3 Non-recovery of rental and user charges

The Company could not recover the rental and user charges of ₹ 45.11 lakh from the two operating Agencies due to non-execution of formal lease agreements with these Agencies

Union Ministry of Textiles accorded in-principle approval (31 December 2014) for setting up a Centre for Apparel and Garment Manufacturing at Bodhjungnagar Industrial Growth Centre, under North East Textile Promotion Scheme. The objective of the scheme was to generate productive employment and mark the beginning of organised textile industry in North Eastern Region. For this purpose, Tripura Industrial Development Corporation Limited [55] (TIDCL) allotted (April and June 2015) 2.16 acres of land to the Project Implementing Agency (PIA), Tripura Handloom & Handicrafts Development Corporation Limited (Company) on a monthly lease rent of ₹ 6,000 per acre of land and water charges of ₹ 10 per Kilo litre. GoI entrusted the work of construction of building including supply, installation and commissioning of machinery on 'turnkey basis' to the National Buildings Construction Corporation Limited (NBCC)[56] along with an inbuilt annual maintenance contract for a period of three years. The construction work was completed and the building was handed over to the Company on 31 January 2016.

Three units of modern apparel and garment making were to be operated on a 'Plug and Play' mode for provision of quality skill [57] (one unit) and production on commercial scale [58] (two units) in apparel and garment making, through private entrepreneurs having necessary expertise.

The Company entered into three Memoranda of Agreement (MoA) with M/s Technopak Advisors Private Limited on 22 February 2016 for Unit– I (for provision of quality skill) on highest bid basis and M/s Su-Sneha Textiles (single bidder) on 11 March 2016 and 19 April 2016 for Unit–II and Unit–III (for production on commercial scale) respectively. The tenure of the lease was initially for three years, which could be renewed provided the agencies fulfilled the scope of work and achieved the desired objectives of the project as stipulated in the scheme guidelines. The operating Agencies were required to pay the rental and user charges to the Company in advance on or before 15th day of preceding month.

Audit observed that while entering in MoA with the operating Agencies, Company failed to incorporate appropriate provisions to protect its financial interests in case of default in payment of lease and other dues by the operating Agencies. Audit observed

[55] A State owned Public Sector Undertaking
[56] A Government of India Enterprise
[57] Skill development training in textile sector
[58] Commercial scale production was to be taken up as per the local requirements like uniforms for police and students, *etc*.

that the MoA entered into with the operating Agencies did not have clear provisions regarding recovery of unpaid rental and other dues from the defaulting Agencies. The stipulations in the MoA in this regard were merely restricted to referring the issue of any dispute between the operating Agencies and the Company to the Secretary, Ministry of Textile, Government of India for final decision.

Audit further observed that the Company did not formalise the lease arrangements with the operating Agencies by executing a formal lease agreements despite the requirements of the MoA entered into with these Agencies. As a result, the Company compromised its legal rights against the operating Agencies for recovery of unpaid lease and other dues, in case of default in payment of lease rental by these Agencies.

Examination of the records of the Company revealed that though the Agencies (M/s Technopak Advisors Private Limited and M/s Su-Sneha Textiles) had taken over the units on 22 April 2016, the Company did not realise monthly rental and user charges amounting to ₹ 45.11 lakh due from them, till date of audit (March 2019) as detailed in **Table 4.3.1**.

Table 4.3.1: Outstanding monthly rental and user charges

Unit No.	Operating Agency	Date of MoA	Monthly rental and user charges (in ₹)	Outstanding dues (₹ in lakh)	Period of outstanding dues
I	M/s Technopak Advisors Pvt. Ltd.	22-02-2016	85,111	5.96	July 2016 to January 2017[59]
II	M/s Su-Sneha Textiles	11-03-2016	51,979	18.19	May 2016 to March 2019
III		19-04-2016	59,880	20.96	May 2016 to March 2019
Total outstanding dues to be realised				**45.11**	

Audit noticed that the Company cancelled the allotment of Unit-I in April 2017[60] due to failure of the Agency (M/s Technopak Advisors Pvt. Ltd.) to provide the required trained manpower to the production units, but they could not realise the lease rent of ₹ 5.96 lakh due from the Agency for the period from July 2016 to January 2017. To continue the operation of Unit-I, though the Company accepted the bid submitted[61] by IL&FS Development Corporation Limited (IL&FS) and also entered into (November 2017) an MoA, the Agency (IL&FS) did not continue and had surrendered the possession of the unit from 1st November 2018. The unit remained idle thereafter (February 2020).

As regards the other unit, M/s Su-Sneha Textiles, since they also could not carry out business, the Government decided (8 May 2018) to withdraw one unit (Unit II) from the Agency and call for fresh proposals for 'Expression of Interest' for managing the

[59] Allotment was cancelled in April 2017 and payment for two months (February-March 2017) was made

[60] Decided to cancel MoA by GoI in February 2017 and accordingly MoA was cancelled in April 2017

[61] Bid submitted by IL&FS Development Corporation Ltd in response to the advertisement (August 2017) of the Company

said unit. The Company instructed (May and July 2018) the Agency to hand over the second unit (Unit-III) also and clear the outstanding dues. The Board of Directors (Board) of the Company further resolved (28 September 2018) to take legal action against the defaulting Agencies for realisation of the outstanding dues. There was however, no further progress on this issue.

Audit observed that the Company is a loss incurring[62] entity and as per its latest finalised accounts (2016-17), the Company had negative net worth due to complete erosion of shareholders' equity (₹ 107.09 crore) by the accumulated losses (₹ 121.59 crore). However, despite poor financial health, the Company failed to be alert and vigilant to safeguard its financial interest by formally executing lease agreements with the above mentioned Agencies.

Thus, despite a clear provision in the Memoranda of Agreement to pay the rental and user charges in advance, the Company could not take any legal action against the two operating Agencies for recovery of dues of ₹ 45.11 lakh in absence of formal lease agreements with these Agencies and enabling provisions in the lease agreement/MoA for recovery of said dues in case of default by the Agencies. The Company was also exposed to the risk of payment of penalty of ₹ 1,000 per day to TIDCL after 20 January 2019 due to non-payment of dues of ₹ 6.56 lakh (lease rent: ₹ 6.51 lakh; water charges: ₹ 0.05 lakh) claimed (11 January 2019) by TIDCL.

As a result, the objective of the Scheme remained unachieved due to non-operation of the units. The failure of the Scheme also indicates that the selection of the units and their capacity to provide employment in the garment industry was not properly assessed.

In reply, the Government/Company (February/January 2020) accepted the facts and stated that the recovery of outstanding rental and user charges in respect of M/s Technopak Advisor Ltd. had been taken up with the Ministry of Textiles, Government of India and legal steps had been initiated for recovery of outstanding dues from M/s Su-Sneha Textiles. Regarding non-payment of rental dues (₹ 6.56 lakh) of TIDCL Government stated that the same would be cleared after receipt of pending user charges from the operating Agencies.

Recommendation: The Company may take steps to do a thorough check on capability of units to generate business/employment in industrial parks. They may take steps to protect their financial interests by executing formal lease agreements with appropriate provisions for recovery of rental and other dues in time in case of default in payment of outstanding dues by the operating agencies.

[62] As per its latest finalised accounts (2016-17), the Company incurred loss of ₹ 12.17 crore

CHAPTER V: REVENUE SECTOR

CHAPTER V: REVENUE SECTOR

5.1 GENERAL

5.1.1 Trend of Revenue Receipts

The Tax and Non-tax Revenue raised by Government of Tripura during the year 2018-19, the net proceeds of State's share of Union Taxes and Duties assigned to the State and Grants-in-aid received from the Government of India (GoI) during the year and the corresponding figures for the preceding four years are given in **Table 5.1.1**.

Table 5.1.1: Trend of revenue receipts

(₹ in crore)

Sl. No.	Particulars	2014-15	2015-16	2016-17	2017-18	2018-19
I.	**Revenue raised by the State Government**					
	Tax Revenue	1,174.26	1,332.25	1,422.01	1,422.02	1,765.91
	Non-tax Revenue	195.64	262.60	218.85	493.48	372.20
	Total	**1,369.90**	**1,594.85**	**1,640.86**	**1,915.50**	**2,138.11**
	Increase over previous year (%)	***3.75***	***16.42***	***2.88***	***16.74***	***11.62***
II.	**Receipts from the GoI**					
	Net proceeds of State Share of Union Taxes and Duties	1,730.13	3,266.02	3,909.12	4,322.08	4,888.95
	Grants-in-aid	6,139.70	4,565.87	4,095.48	3,830.37	5,003.83
	Total	**7,869.83**	**7,831.89**	**8,004.60**	**8,152.45**	**9,892.78**
III.	**Total Revenue Receipts of the State Government (I and II)**	**9,239.73**	**9,426.74**	**9,645.46**	**10,067.95**	**12,030.89**
IV.	**Percentage of I to III**	**14.83**	**16.92**	**17.01**	**19.03**	**17.77**

***Source**: Finance Accounts*

Chart 5.1.1: State and Central share in total revenue

(₹ in crore with percentage)

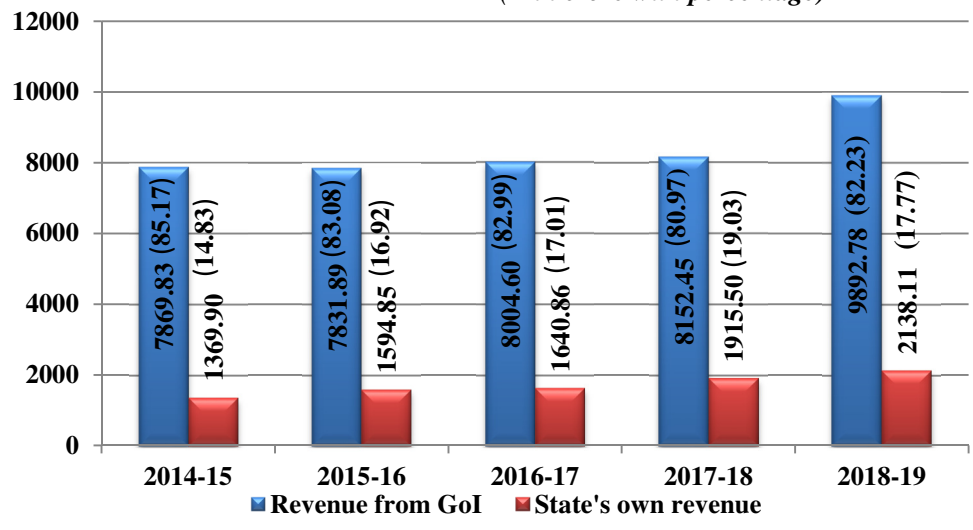


Table 5.1.1 and **Chart 5.1.1** indicated that during the year 2018-19, the revenue raised by the State Government was ₹ 2,138.11 crore which was 17.77 *per cent* of the total Revenue Receipts. The balance receipts of ₹ 9,892.78 crore, constituted 82.23 *per cent* of the revenue receipts, were received from the GoI in the form of

State share of Union Taxes and Duties and Grants-in-Aid. The rate of growth of own revenue of the State declined during 2018-19 to 11.62 *per cent* (₹ 222.61 crore) compared from 16.74 *per cent* of the previous year. Revenue Receipts of the State increased by 19.50 *per cent* from ₹ 10,067.95 crore in 2017-18 to ₹ 12,030.89 crore in 2018-19.

5.1.1(a) Tax Revenue: During 2018-19 collection of Tax revenue is increased by ₹ 343.89 crore over the previous year. The details of the Tax Revenue raised during the period 2014-15 to 2018-19 are given in **Table 5.1.2**.

Table 5.1.2: Components of Own Tax Revenue during 2014-19

(₹in crore)

Sl. No.	Head of revenue	2014-15	2015-16	2016-17	2017-18	2018-19	Increase (+) or decrease (-) of actual in 2018-19 over 2017-18 (%)
1	Sales Tax/ Value Added Tax (VAT)	909.81	1,058.48	1,112.89	611.88	361.95	(-) 40.85
2	GST	--	--	--	479.71	977.44	(+) 103.76
3	State Excise	138.96	143.57	163.19	186.96	214.35	(+) 14.65
4	Stamps and Registration Fees	37.56	42.49	41.83	40.16	51.32	(+) 27.79
5	Taxes on Vehicles	36.09	37.62	43.6	54.38	83.50	(+) 53.55
6	Other Taxes on Income and Expenditure[1]	38.93	39.67	41.96	42.20	43.87	(+) 3.96
7	Land Revenue	10.76	5.97	13.32	4.46	5.29	(+) 18.61
8	Other Taxes and Duties on Commodities and Services	1.87	4.29	3.32	2.17	27.93	(+) 1,187.10
9	Others [2]	0.28	0.16	1.90	0.10	0.26	(+) 160.00
Total		**1,174.26**	**1,332.25**	**1,422.01**	**1,422.02**	**1,765.91**	**(+) 24.18**

***Source**: Annual Financial Statement and Finance Accounts*

Taxes on sales, trade, etc.: The reason attributed by the Finance (Excise & Taxation) Department for decrease in collection of Sales Tax/Value Added Tax (VAT) (40.85 *per cent*) over the previous year was due to abolishment of all the Check-posts after introduction of Goods and Service Tax (GST). The GST collections increased by 103.76 percent over the previous year.

State Excise: The increase in State Excise collections (14.65 *per cent)* over the previous year was due to increase in sale of liquor as well as implementation of first point taxation w.e.f from 1 January 2019.

Stamps and Registration Fees: The increase in collection of Stamps and Registration Fees (27.79 *per cent*) over the previous year was on account of increased collections due to enhancement of land valuation.

[1] Includes taxes on profession, trades, calling and employment

[2] Tax on Agriculture Income (₹ 0.15 crore), Taxes & Duties on Electricity (₹ 0.01 crore), Taxes on Immovable properly other than Agricultural land (₹ 0.10 crore)

The other departments (indicated in **Table 5.1.2**), despite being requested (September 2019), did not furnish (May 2020) the reasons for variations in Tax Receipts with respect to the previous year.

5.1.1 (b) Non-tax Revenue: During 2018-19 collection of Non-tax revenue is decreased by ₹ 121.28 crore over the previous year. The details of the Non-Tax Revenue raised during the period 2014-15 to 2018-19 are indicated in **Table 5.1.3**.

Table 5.1.3: Components of Non-tax Revenue during 2014-19

(₹ in crore)

Sl. No.	Head of revenue	2014-15	2015-16	2016-17	2017-18	2018-19	Increase (+) or decrease (-) of actual in 2018-19 over 2017-18 (%)
1	Interest Receipts	46.02	55.24	37.07	276.99	146.11	(-) 47.25
2	Industries	65.01	96.41	80.36	87.36	92.81	(+) 6.24
3	Police	34.34	40.50	48.07	60.11	71.77	(+) 19.40
4	Public Works	8.92	8.15	8.08	8.51	5.06	(-) 40.54
5	Forestry and Wildlife	9.83	11.86	11.01	9.76	11.96	(+) 22.54
6	Water Supply and Sanitation	1.92	1.76	2.45	2.36	1.88	(-) 20.34
7	Misc. General Services	5.27	6.48	7.25	8.88	6.18	(-) 30.41
8	Other Administrative Services	6.28	6.84	6.12	5.60	4.71	(-) 15.89
9	Medical and Public Health	3.00	6.01	2.42	1.51	3.97	(+) 162.91
10	Crop Husbandry	2.79	3.61	2.60	2.71	3.56	(+) 31.37
11	Animal Husbandry	2.47	2.42	1.84	1.79	2.07	(+) 15.64
12	Housing	1.84	1.82	1.85	2.08	2.07	(-) 0.48
13	Education, Sports, Art and Culture	1.45	2.30	2.29	1.48	1.78	(+) 20.27
14	Stationery and Printing	1.83	1.16	1.10	0.81	2.00	(+) 146.91
15	Others [3]	4.67	18.04	6.34	23.53	16.27	(-) 30.85
Total		**195.64**	**262.60**	**218.85**	**493.48**	**372.20**	**(-) 24.58**

***Source**: Annual Financial Statement and Finance Accounts.*

Crop Husbandry: The Agriculture Department attributed the increase (31.37 *per cent*) in collection of taxes over the previous to increased revenue from cold storages, sale proceeds from agri-farms, selling of tender forms, licence fee of plant protection chemicals and fertilisers, *etc*.

Stationery and Printing: The General Administration (Printing & Stationery) Department attributed increase (146.91 *per cent*) in collection of taxes over the previous year to requisition of Government departments/PSU and collection of previous years outstanding dues.

The other departments (indicated in **Table 5.1.3**), despite being requested (September 2019), did not furnish (May 2020) the reasons for variations in Non-tax Revenue Receipts with respect to the previous year.

[3] Comprising 19 Major Heads including dividends and profits

5.1.2 Analysis of arrears of revenue

The arrears of revenue as on 31 March 2019 on account of Taxes/VAT and Other Taxes on Income & Expenditure (Tax on profession, Trades, Callings & Employment) stood at ₹ 18.51 crore, of which, ₹ 15.51 crore was outstanding for more than five years, as detailed in **Table 5.1.4**.

Table 5.1.4: Arrears of revenue

(₹ in crore)

Sl. No.	Head of revenue	Total amount outstanding as on 31st March		Amount outstanding for more than five years as on 31st March	
		2018	2019	2018	2019
1	Taxes/ VAT	63.40	18.51	17.39	15.51
2	Other Taxes on Income & Expenditure (Tax on profession, Trades, Callings & Employment)	0.41	NIL	0.02	NIL
3	Other Taxes & Duties on Commodities & Services	NIL	NIL	NIL	NIL
Total		**63.81**	**18.51**	**17.41**	**15.51**

***Source**: Finance (Excise & Taxation) Department.*

It would be seen from **Table 5.1.4** that arrear of revenue decreased from ₹ 63.81 crore at the end of March 2018 to ₹ 18.51 crore at the end of March 2019. The arrear of revenue outstanding for more than five years also decreased from ₹ 17.41 crore to ₹ 15.51 crore during the same period.

5.1.3 Evasion of tax detected by the Department

The details of cases of evasion of tax detected by the Finance (Excise & Taxation) Department, cases finalised and the demands for additional tax raised as reported by the Department are given in **Table 5.1.5**.

Table 5.1.5: Evasion of tax

Head of revenue	Cases pending as on 31 March 2018	Cases detected during 2018-19	Total	Number of cases in which assessment/ investigation completed and additional demand with penalty, *etc*. raised		Number of cases pending for finalisation as on 31 March 2019
				No. of cases	(₹ *in crore*)	
Tax/ VAT	1,001	162	1,163	163	0.37	1,000

***Source**: Finance (Excise & Taxation) Department*

As on 31 March 2018, 1,001 cases of evasion of tax were outstanding. During 2018-19, 162 cases of evasion of tax had been detected under Section (Detection and Prevention of Tax Evasion) 67 & 68 of TVAT Act 2004, taking the total pending cases to 1,163. Of these, assessments/ investigation of 163 (14.02 *per cent*) cases were completed and additional demand including penalty, *etc*. amounting to ₹ 0.37 crore was raised during the year 2018-19. Consequently, 1,000 cases were pending as on 31 March 2019.

Government should put in place a mechanism to expedite the disposal of cases pending for finalisation and also review the reasons for low recoveries.

5.1.4 Pendency of refund cases

The number of refund cases pending at the beginning of the year 2018-19, claims received during the year, refunds allowed during the year and the cases pending at the close of the year 2018-19 as reported by the Department is given in **Table 5.1.6**.

Table 5.1.6: Details of pendency of refund cases

(₹ in crore)

Sl. No.	Particulars	Sales tax / VAT	
		No. of cases	Amount
1	Claims outstanding at the beginning of the year	15	6.93
2	Claims received during the year	14	3.23
3	Refunds made during the year	23	4.74
4	Balance outstanding at the end of year	06	5.42

***Source**: Finance (Excise & Taxation) Department*

In addition to refund, Section 45 (1) of Tripura Value Added Tax (TVAT) Act, 2004 provides for payment of simple interest at the rate of five *per cent* per annum for the period commencing after 90 days of the application claiming refund, till the date on which the refund is granted.

The Department needs to put in place a mechanism to monitor pendency of refund cases and ensure that there is no delay in refund dues to avoid payment of interest.

5.1.5 Analysis of the mechanism for dealing with the issues raised by Audit

In order to analyse the effectiveness of the departments/Government in addressing the issues highlighted in the IRs/Audit Reports, the action taken on the paragraphs and performance audits featured in the Audit Reports of the last ten years by the Finance (Excise & Taxation) Department has been evaluated. The results are included in this Audit Report.

The succeeding **Paragraphs 5.1.5.1** & **5.1.5.2** explain the performance of the Finance (Excise & Taxation) Department with reference to cases detected in the course of local audit during the last ten years and the cases included in the Audit Reports for the years 2008-09 to 2017-18.

5.1.5.1 Position of Inspection Reports issued to Finance (Excise & Taxation) Department

The summarised position of the outstanding Inspection Reports (IRs) during the last ten years, paragraphs included in those reports and their status as on 30th June 2019 in respect of Finance (Excise & Taxation) Department are tabulated in **Table 5.1.7**.

Table 5.1.7: Position of IRs

Year	IR	Para	Money Value *(₹ in crore)*
2009-10	3	9	0.96
2010-11	6	17	0.85
2011-12	9	15	3.94
2012-13	5	13	0.48
2013-14	14	46	3.57
2014-15	13	64	12.58

Year	IR	Para	Money Value (₹ *in crore*)
2015-16	17	50	8.50
2016-17	14	79	6.94
2017-18	11	63	7.16
2018-19	13	54	8.39
Total	**105**	**410**	**53.37**

The age-wise break up of outstanding IRs and Paras for the last nine years 2009-10 to 2018-19 as on 30 June 2019 is shown in **Table 5.1.8.**

Table 5.1.8: Age wise break up of outstanding IRs

(₹in crore)

Years	IR	Para	Money value
0-3	38	196	24.49
4-6	44	160	24.65
7-9	23	54	6.23

This indicates that the efforts taken by the departments for settlement of the outstanding IRs are rather slow and inadequate. Necessary steps may be taken to increase the pace of settlement in this regard in interest of their own revenues.

5.1.5.2 Recovery in accepted cases

The position of paragraphs included in the Audit Reports of the last ten years, those accepted by the Department and the amount recovered are shown in **Table 5.1.9**.

Table 5.1.9: Position of recovery of accepted Audit paragraphs of Audit Reports

(₹in crore)

Year of Audit Report	Number of paras included	Money value of the paras	Number of paras accepted including money value	Money value of accepted paras	Amount recovered during the year	Position of recovery of accepted cases as of October 2018
2008-09	3[4]	6.76	3	6.76	0.00[5]	0.11
2009-10	3	1.74	2	1.16	Nil	0.60
2010-11	3[6]	3.12	3	3.12	0.05	0.44
2011-12	1	0.87	1	0.87	0.02	0.07
2012-13	1	1.51	1	1.51	Nil	0.22
2013-14	3[7]	11.17	3	6.06	Nil	0.24
2014-15	2	0.39	2	0.39	0.23	0.28
2015-16	2	0.46	2	0.46	-	-
2016-17	4[8]	31.87	3	31.73	0.01	0.01
2017-18	3	1.77	3	1.77	0.01	0.01
Total	**25**	**59.66**	**23**	**53.83**	**0.32**	**1.98**

It is evident from **Table 5.1.9** that the progress of recovery even in accepted cases was very slow. During the last ten years, 25 paragraphs involving ₹ 59.66 crore

[4] Including one Performance Audit
[5] Negligible figure amounting to ₹ 3,280 only
[6] Including one Performance Audit
[7] Including one Performance Audit
[8] Including one Performance Audit

featured in the Audit Reports, of which 23 paragraphs involving ₹ 53.83 crore had been accepted by the State Government. Out of this, only ₹ 1.98 crore (3.32 *per cent*) were recovered.

The Department should pursue and monitor prompt recovery of the dues involved in accepted cases within a specified timeframe, since it would not only enable better compliance with relevant rules, but would also augment Government revenues.

5.1.6 Action taken on the recommendations accepted by the Departments/ Government

The draft Performance Audits (PAs) conducted by the Accountant General (Audit) are forwarded to the concerned departments with a request to furnish replies. These performance audits are also discussed in Exit Conference and the departments' views are incorporated/ considered while finalising the Audit Report.

Six performance audits on the Finance (Excise & Taxation) Department and Transport Department were featured in the Audit Reports during 2011-12 to 2016-17. The number of recommendations and their status is given in **Table 5.1.10.**

Table 5.1.10: Details of recommendations of PAs and their status

Year of Report	Name of the performance audit	No. of recommendations	Status (as on January 2018)
2011-12	Computerisation of Transport Department in Tripura.	7	Reply had not been received. The PA had not been discussed by PAC.
2013-14	Computerisation of Value Added Tax (VAT) Systems in Tripura.	4	The PA had not been discussed by PAC.
2014-15	IT Audit on Computerisation of Land Records.	3	Reply had not been received. The PA had not been discussed by PAC.
2015-16	Collection of Revenue from outsourced Activities in Motor Vehicle Tax.	4	Reply had not been received. The PA had not been discussed by PAC.
2016-17	System and Procedures in force in the Taxes and Excise Organisation regarding Excise Duty	3	Reply had not been received. The PA had not been discussed by PAC.
	Border Area Development Programme (BADP)	3	Reply had not been received. The PA had not been discussed by PAC.

5.1.7 Results of audit

Position of local audit conducted during the year

Test-check of the records of 18 units[9] of Sales Tax/VAT, State Excise, Registration, Professional Tax, Land Revenue, Forest, Motor Vehicles and other departmental offices conducted during the year 2018-19 revealed under-assessment/ short levy/ loss

[9] Though a total of 20 units were audited by 31 March 2019, two IRs could not be issued by 31 March 2019 as they are audited at the fag end of March 2019

of revenue/ non-realisation of outstanding revenue aggregating ₹ 8.57 crore in 56 cases. Of these, the departments recovered ₹ 1.45 crore involving 11 cases. During the year 2018-19, the departments concerned accepted under-assessment and other deficiencies of ₹ 8.07 crore involved in 53 cases which were pointed out in audit.

FINANCE (EXCISE & TAXATION) DEPARTMENT

5.2 Under-assessment of tax

Assessing Authority allowed inadmissible Input Tax Credit (ITC) claim and failed to notice the incorrect closing stock of a dealer resulted in under-assessment of tax of ₹ 26.20 lakh.

The Tripura Value Added Tax Act, 2004 (TVAT Act, 2004) allows Input Tax Credit (ITC) to a registered dealer in respect of the taxable goods purchased from another registered dealer, for resale in the State. ITC is to be given only after the sale of taxable goods (Section 10).

There were 1,323 VAT dealers under the jurisdiction of Superintendent of Taxes {Assessing Authority (AA)}, Belonia as of June 2017[10] (date of transition to GST). Audit test checked the records[11] (March 2019) relating to assessment of 101 out of 202 dealers assessed by the AA during October 2017 to February 2019.

Test checked of records revealed that the AA had allowed ITC of ₹ 18.72 lakh to one dealer[12] for the years 2013-14 as per the assessment order. The AA levied ₹ 1.59 lakh (short payment of tax ₹ 0.74 lakh, interest of ₹ 0.54 lakh and penalty of ₹ 0.31 lakh[13]) on the dealer after assessment. Cross verification of the Trading accounts of this dealer revealed that the dealer had sold goods worth ₹ 41.50 lakh during the year 2013-14 and there was a closing stock of goods worth ₹ 1.32 crore at the end of the year. The ITC admissible as per the Trading accounts of the dealer was ₹ 5.70 lakh[14], i.e on the cost of goods sold during the year. However, while assessing the dealer's returns, the AA incorrectly permitted ITC of ₹ 18.72 lakh[15] in respect of closing stock instead of cost of goods sold during the year 2013-14. This has resulted in undue financial benefit of ₹ 13.02 lakh to the dealer (**Appendix 5.2.1**).

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10 VAT dealers were migrated to GST dealers from 1 July 2017

11 Assessment order sheets, Returns, Challans, Purchase & sales records, Permits, Audited Accounts, tax invoices of ITC claims

12 M/s SS Motors, Belonia (TIN-16081071036), a reseller of Motor Cycles and parts taxable @ 13.5 *per cent* upto 19.11.2013 and @ 14.5 *per cent* thereafter

13 Penalty ₹ 10,000 u/s 25(4)(d), ₹ 7,415 u/s 25(3) and ₹ 13,375 u/s 53(3)

14 13.5 *per cent* (rate of tax) of ₹ 22.30 lakh (₹ 3.01 lakh) *plus* 14.5 *per cent* of ₹ 18.58 lakh (₹ 2.69 lakh)

15 13.5 *per cent* (rate of tax) of ₹ 41.10 lakh (₹ 5.55 lakh) *plus* 14.5 *per cent* of ₹ 90.87 akh (₹ 13.18 lakh)

Further, it is noticed that as per assessment order, the dealer purchased goods worth ₹ 82.60 lakh and the dealer sold goods worth ₹ 92.16 lakh during the quarter ended June 2017. There was no closing stock at the end of the quarter. Thus, the dealer was liable to pay tax of ₹ 0.40 lakh after adjustment of ITC of ₹ 12.97 lakh as determined by the AA. The dealer however, paid tax of ₹ 0.26 lakh The AA completed the assessment and issued demand notice for ₹ 0.31 lakh along with interest and penalty. Further examination of assessment orders of the dealer revealed that at the end of the 2016-17 the closing stock was shown as ₹ 97.70 lakh taxable at 14.5 *per cent*. However, while assessing the dealer's return for the quarter ended June 2017 the ST incorrectly assessed the opening stock as ₹ 6.83 lakh instead of ₹ 97.70 lakh. This has resulted underassessment of tax of ₹ 13.18 lakh[16].

Due to failure to perform the basic checks in the returns along with the books of accounts of the dealer, the AA allowed inadmissible ITC claim of ₹ 13.02 lakh during 2013-14 and under assessed the opening stock for the quarter ended June 2017 leading to under-assessment of tax of ₹ 13.18 lakh. Thus, due to failure of the AA to scrutinise the relevant records of the dealer there was total underassessment of ₹ 26.20 lakh.

Government while accepting the facts stated (September 2019) that notice had been issued (August 2019) to the dealer to appear before the Revisional Authority for fresh assessment. Further development was awaited (September 2020).

5.3 Short levy of tax

The Assessing Authorities short determined turnover of a dealer due to under assessment of purchases made, which resulted in short levy of tax of ₹ 18.08 lakh.

Section 31 of Tripura Value Added Tax (TVAT) Act, 2004 and rules framed thereunder, provide that where the Commissioner is not satisfied with the correctness of any return filed by a dealer, after giving reasonable opportunity to the dealer of being heard, he shall assess to the best of his judgment, the amount of tax due from such dealer. Under Section 85 of the TVAT Act, the Commissioner delegated (April 2006) the power of such assessment to the Superintendents of Taxes. Further, the dealer is liable to pay interest and penalty at applicable rates for delay and non-compliance with TVAT Act and rules framed thereunder[17].

There were 7,647 VAT dealers up to June 2017[18] under six[19] Superintendent of Taxes (Assessing Authority (AA)), During audit (between April 2018 and March 2019), records relating to assessment of 328 out of 596 dealers were test checked.

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16 ₹ 97.70 lakh *minus* ₹ 6.83 lakh = ₹ 90.87x14.5 *per cent* = ₹ 13.18 lakh

17 Under section 25 (1) and 45 (4) of the TVAT Act, interest is payable at the rate of one and half *per cent* per month from the date when the tax becomes due. Similarly, penalty, not exceeding one and half times of the tax due (not less than 10 *per cent* of that amount),is also payable under Section 25 (3) and 31 (5) of the Act

18 VAT dealers migrated to GST dealers from 1 July 2017

Test check of records[20] of 16 assessment cases for the years 2011-12 to 2016-17 pertaining to eight dealers revealed that the total turnover for the year 2011-12 to 2016-17 of the eight dealers assessed by the AAs amounting to ₹ 22.76 crore as against the actual total turnover of ₹ 24.62 crore, due to underassessment of purchase as detailed in **Appendix 5.3.1**.

Audit observed that the AAs, at the time of assessments, made short determination of turnover of ₹ 1.86 crore (₹ 24.62 crore *minus* ₹ 22.76 crore*)* due to underassessment of purchase. This resulted in short levy of tax of ₹ 18.08 lakh (VAT). Thus, the dealer concealed the turnover and evaded payment of tax of ₹ 18.08 lakh. For short payment of tax the dealer is liable to pay penalty of ₹ 2.34 lakh along with interest of ₹ 13.63 lakh[21] (**Appendix 5.3.1**).

In reply, out of six Superintendent of Taxes (STs), four[22] STs had informed (September-October 2019) that the cases had been examined and sent to the Revisional Authority for re-opening the cases.

TRANSPORT DEPARTMENT

5.4 Non-renewal of permits of commercial vehicles

District Transport Authorities failed to renew lapsed permits resulting in non-realisation of permit fee of ₹ 12.51 lakh and fine of ₹ 48.80 lakh from the 2,440 commercial vehicles owners.

Permit is an instrument issued by a State or Regional Transport Authority authorising the use of a motor vehicle as a transport vehicle in specified manner as per the relevant provisions of Motor Vehicle Act and rules framed their under. Section 66 (1) of the Motor Vehicle Act (the MV Act), 1988 mandates the necessity of permit to transport vehicles. No owner of a vehicle shall use it as transport vehicle in any public place without a valid permit, whether or not such vehicle is actually carrying a passenger or not.

As per provisions contained in Section 81 of the MV Act read with Rule 87 of the Tripura Motor Vehicle Rules 1991, a permit is granted to a transport vehicle for a period of five years and is subject to renewal for further period of five years, based on an application not less than 14 days before expiry date, and permit fee prescribed based on type of the vehicle.

Further, as per Section 192A of the MV Act, whoever drives a motor vehicle or causes or allowed a motor vehicle to be used in contravention of the provision of

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19 (1) Superintendent of Taxes, Charge-I, Agartala, (2) Superintendent of Taxes, Charge-VII, Agartala, (3) Superintendent of Taxes, Charge-VIII, Agartala, (4) Superintendent of Taxes, Belonia, (5) Superintendent of Taxes, Kailashahar and (6) Superintendent of Taxes, Dharmanagar

20 Assessment order sheets, Returns, Challans, Purchase and sales records, Permits, Audited Accounts

21 Calculated up to March 2019

22 (1) Superintendent of Taxes, Charge-I, Agartala, (2) Superintendent of Taxes, Charge-VII, Agartala, (3) Superintendent of Taxes, Belonia and (4) Superintendent of Taxes, Kailashahar

Section 66(1) shall be punishable for first offence with a fine which may be extended to five thousand rupees, but shall not be less than two thousand rupees.

Audit of VAHAN database (December 2020) done by us of District Transport Authorities (DTAs) of two[23] districts, out of DTAs of eight districts of the State, revealed that during 2014-19, 5,054 commercial vehicles permits were due for renewal. Out of 5,054 commercial vehicles 2,440 permits were not found to be renewed by the vehicle owners. This resulted in non-realisation of permit fee of ₹ 12.51 lakh. Moreover, fine for ₹ 48.80 lakh was leviable under Section 192A of the MV Act for non-renewal of permits after expiry of validity period by the defaulting vehicle owners at the rate of minimum ₹ 2,000 as shown in **Table 5.4.1**.

Table 5.4.1: Permit fee due and leviable fine

District authority	Permit type	Number of vehicles	Rate of renewal fee (in ₹)	Total fee due (in ₹)	Fine leviable @ ₹ 2,000 (in ₹)
JTC, West Tripura	Contract Carriage Permit	1,334	450	6,00,300	26,68,000
	Goods Permit	894	600	5,36,400	17,88,000
	Stage Carriage Permit	102	600	61,200	2,04,000
DTO, Sipahijala	Contract Carriage Permit	87	450	39,150	1,74,000
	Goods Permit	20	600	12,000	40,000
	Stage Carriage Permit	3	600	1,800	6,000
Total		**2,440**	**--**	**12,50,850**	**48,80,000**

Though the details of the defaulters could be identified from the VAHAN software maintained by the DTAs, they did not take action to get the same renewed by issuing demand notices. Moreover, neither any proof of the vehicles lying off-road nor declarations of surrender of registration of such vehicles could be ascertained from records.

While admitting the facts, the DTAs stated (December 2020) that necessary action would be taken from their end for regular checking during enforcement and action would be taken as per MV Act and Rules.

Thus, failure on the part of the DTAs had resulted in non-realisation of permit fee of ₹ 12.51 lakh and fine of ₹ 48.80 lakh leviable.

Recommendations: The Department may issue instructions to all District Transport Authorities (DTAs) to identify the vehicles owners from VAHAN database who failed to renew their permit on time and collect permit fees from the defaulters by issuing demand notices.

[23] Joint Transport Commissioner (JTC), West Tripura District and District Transport Officer (DTO), Sepahijala District

CHAPTER VI: GENERAL SECTOR

CHAPTER VI: GENERAL SECTOR

6.1 Introduction

This Chapter discusses significant audit findings relating to Government units under General Sector.

Table 6.1.1 gives the total budget allocation and expenditure of departments under General Sector during the year 2018-19.

Table 6.1.1: Details of allocation and expenditure under General Sector

(₹in crore)

Name of the Department	Total Budget Allocation	Expenditure
Chief Minister's Secretariat	0.24	0.15
Civil Defense	0.30	0.17
Parliamentary Affairs	21.71	20.11
Election	62.97	48.07
Employment	7.34	5.71
Finance	3,554.99	3,307.83
Fire Service Organisation	95.45	76.43
General Administration (P & T)	6.75	5.37
General Administration (Political)	3.81	3.22
General Administration (AR)	4.14	3.94
General Administration, Printing and Stationery	13.33	12.13
General Administration (SA)	76.23	68.99
Governors Secretariat	6.76	6.16
High Court	28.00	26.69
Home (FSL, PAC and Prosecution and Coordination (Cell)	6.00	5.06
Home (Jail)	35.61	29.09
Home (Police)	1,483.18	1,321.32
Institutional Finance	4.24	4.09
Law	185.90	105.94
Planning and Coordination	25.37	18.97
Statistical	8.93	8.04
Treasuries	11.14	8.78
Total number of Departments = 22	**5,642.39**	**5,086.26**

Source: Appropriation Accounts – 2018-19

We audited 10 auditee units under the Sector covering expenditure of ₹ 1,174.30 crore (including expenditure incurred during the previous year). This Chapter contains a Performance Audit on "Development of Infrastructure Facilities for the Judiciary".

LAW DEPARTMENT

6.2 Performance Audit of Development of Infrastructure Facilities for the Judiciary

6.2.1 Introduction

Development of infrastructure for judiciary is primarily the responsibility of the State Governments. However, the Central Government has been augmenting the efforts and resources of states for construction of court buildings and residential accommodation for Judicial Officers/Judges covering district and subordinate courts since 1993-94 through **Development of Infrastructure facilities for the Judiciary,** a Centrally Sponsored Scheme (CSS). During the five-year period 2012-17, the scope of the scheme encompassed construction of new court buildings, upgradation or renovation of existing court buildings and provision of residential quarters for judicial officers. GoI extended (November 2017) the Scheme up to March 2020; further including provisions of barrier free access to senior citizens and persons with disability (PwD) and for safety measures in courts.

Further, as part of *judicial reforms,* it was decided to upgrade Information and Communication Technology (ICT) infrastructure in the courts, through implementation of e-Courts, as part of the National e-Governance Plan (NeGP). It was initiated (2007) as a Mission Mode Project (MMP) with the objective of helping judicial administration in streamlining their day-to-day activities, providing information to the litigants in a transparent manner and providing judges with easy access to legal and judicial databases.

Authorities responsible for implementation of the two schemes in the State are:

CSS for Development of Infrastructure facilities for the Judiciary	e-Court MMP
The Law Department, headed by the Legal Remembrancer (LR) & Secretary to the Government of Tripura, provides facilities in terms of buildings, manpower and other infrastructure to the courts. The State Public Works Department (PWD) is responsible for construction and maintenance of court buildings and residential quarters for Judicial Officers.	The High Court of Tripura was the implementing agency for the project and the State Government is responsible for undertaking all the activities for sustainability of the project.

The funding pattern for 'Development of Infrastructure Facilities for the Judiciary' in respect of the North Eastern Region (NER) States is 90:10 between the Central and State Governments. The 'e-Courts MMP' is fully funded by Central Government.

6.2.2 Accountability Framework

The High Court of Tripura is the highest court of justice in the State with jurisdiction over eight districts. There are eight district and sessions judge courts and other

subordinate courts located at 16 court complexes[1].

The Law Department, headed by the LR & Secretary to the Government of Tripura, provides facilities in terms of buildings, manpower and other infrastructure to the courts.

The Law Department, Government of Tripura was responsible for preparation of plans, defining scope of works, providing clear site and funds and monitoring of works at district and State level.

In respect of the implementation of e-Courts MMP, the e-Committee at Supreme Court of India was involved in policy planning and providing strategic direction and guidance for the effective implementation of the project. The High Court of Tripura was the implementing agency for the project and the State Government was responsible for undertaking all the activities for sustainability of the project.

The High Court of Tripura is to be assisted by the High Court Computer Committee (HCCC) headed by Chief Justice, Central Project Coordinator (CPC) at High Court, District Court Computer Committees (DCCC) headed by District Judge and a nodal officer for each district and sub divisional court complexes. The CPC was to coordinate with the e-Committee and the vendors, Connectivity Providers, State Data Centre, *etc*. for implementation of all the tasks entrusted by the e-Committee.

Audit Framework

6.2.3 Audit objectives

The objective of GoI for development of judicial infrastructure as well as e-Courts was to liquidate the pendency in cases and improve the efficiency in performance of the judicial system. A performance audit of implementation of both these schemes *viz*., 'Development of Infrastructure Facilities for Judiciary' and 'e-Courts Mission Mode Project' was carried out to assess whether:

a. the envisaged infrastructure was created for judiciary and judicial officers at the district and subordinate courts level;

b. e-Courts Mission Mode Project was implemented effectively to enable ease of access of legal and judicial databases to the judges and provide information to the litigants in a transparent manner; and

c. creation of additional infrastructure and transition to functioning in an electronic mode resulted in an improved services to litigants.

6.2.4 Audit criteria

Audit findings were benchmarked against the following sources of criteria:

a. Guidelines of the Scheme 'Development of infrastructure facilities for the Judiciary';

[1] Agartala, Ambassa, Dharmanagar, Kanchanpur, Chowmanu, Gandacherra, Kamalpur, Khowai, Bishalgarh,Sonamura, Amarpur, Belonia ,Sabroom, Kailashahar (two), Udaipur

b. National Court Management System Plan (NCMS), May 2012;

c. General Financial Rules (GFR) 2005 and 2017;

d. Central Public Works Department(CPWD) Works Manual;

e. Standard Schedule of Rates of the State;

f. Orders and instructions of the Central and the State Governments relevant to the scheme; and

g. Policy and Action Plan document of Phase II of the e-Court project.

6.2.5 Audit scope and methodology

Performance Audit (PA) of implementation of 'Development of Infrastructure facilities for the Judiciary' and e-Court MMP was carried out between July 2019 and December 2019 and covered the implementation of both these schemes during the five-year period 2014-19.

Audit methodology involved examination of relevant records in the office of the Legal Remembrancer (LR) & Secretary to the Government of Tripura. All nine new projects (construction of six court buildings/three residential quarters[2] (including one inadmissible project under the Scheme) taken up during 2014-19 and other related physical infrastructure[3]in 34 out of 72 district and subordinate courts in three[4]out of eight districts of Tripura were verified.

For selection of district/ subordinate courts, a minimum of 30 *per cent* of the total number of the districts of the State were selected on the basis of 'Probability Proportionate to Size Without Replacement' with size measure as amount of expenditure incurred under e-Courts and the sampled units were synchronised for both the schemes (i) e-Courts and (ii) Development of Infrastructure Facilities for the Judiciary.

Details of selected units covered under this PA are given in **Table 6.2.1**. Relevant records in the office of the Registrar General, High Court of Tripura were also examined.

Table 6.2.1: District and subordinate courts, DLSA and TLSC selected for Performance Audit on 'Implementation of Government Initiatives in Judicial System'

(in number)

State wide		In the three selected districts	Audit Sample in the three selected districts	Particulars/ Remarks
No. of districts in the State	08	03	03	Gomati, Sepahijala and West Tripura Districts

[2] Court Buildings at Khowai, Sabroom, Agartala, Amarpur, Ambassa, Kamalpur and residential quarters at Udaipur, Agartala, Ambassa

[3] CCTV cameras, Fire extinguishers, Ramp and toilets for PwD, Waiting hall for public/litigants, Crèche facility for children, Kiosk, Help Desk for litigants, *etc*.

[4] Gomati District, Sepahijala District and West Tripura District

State wide		In the three selected districts	Audit Sample in the three selected districts	Particulars/ Remarks
District Legal Services Authority	08	03	03	Gomati, Sepahijala and West Tripura Districts
Taluka Legal Services Committee (TLSC)	14	05	05	All TLSCs of selected three districts
District and subordinate courts	72	34	34	All the district courts and subordinate courts of selected three districts.

Apart from scrutiny of records of the sampled offices, joint physical inspection of the projects along with the departmental representatives was also conducted.

The PA commenced with an Entry Conference (12 July 2019) with the LR & Principal Secretary, Law Department and the Registrar General of High Court of Tripura, wherein the audit objectives, audit criteria and methodology were discussed. The draft report relating to implementation of CSS, was issued to the LR & Secretary, Law Department, Government of Tripura in January 2020. The audit findings, conclusion and recommendations were discussed with the LR & Secretary in an Exit Conference held on 12 June 2020. Views and responses of the Law Department were duly incorporated in the report, at appropriate places.

Audit Findings

6.2.6 Planning

A Planning for Infrastructure

State Government has been planning for augmentation of infrastructure for judiciary over several years. It had prepared a five-year Perspective Plan (PP) for this purpose thrice - 2007-12, 2012-17 and 2017-22. The details of progress from plan to plan are shown in **Table 6.2.2**.

Table 6.2.2: Details of progress from five years' Perspective (PP) Plan-to-Plan

Particulars		Five Year's Perspective Plan (PP)					
		PP 2007-12		PP 2012-17		PP 2017-22	
		No. of Court buildings	No. of Quarter complexes	No. of Court buildings	No. of Quarter complexes	No. of Court buildings	No. of Quarter complexes
Proposed	New	8	2	4	5	2	5
	carried over from last PP	0	0	6	1	6	5
Completed		0	0	1	0	0	0
In-progress		1	0	2	1	5	2
Preparatory phase		1	0	3	1	0	0

As per the Perspective Plans for 2012-17 and 2017-22 the target of construction of 12[5]

[5] PP of 2012-17:Ambassa (Extension of D&SJ), Kamalpur (SDJM Court), Sonamura (AD&SJ Court), Kailashahar (CJM Court), Kailashahar (D&JS Court), Amarpur (SDJM Court), Dharmanagar (SDJM Court), Khowai (SDJM Court), Agartala (all courts), Teliamura (SDJM Court), PP of 2017-22: Sabroom (SDJM Court), Bishramganj (D&SJ Court)

new court buildings and 11[6] quarter complexes for Judicial Officers were proposed. Out of these constructions of only one court building at Sonamura was completed in 2013. The construction work of five court buildings[7] and nine quarter complexes[8] are not yet taken up. Thus, construction of six court buildings and two quarter complexes[9] were taken up which were proposed in the Perspective plans of 2012-17 and 2017-22.

The High Court of Tripura also prepared (September 2013) a Vision document for High Court and sub-ordinate Courts in the State for 25 years (2013-38) and further in May 2016 for the five-year period 2016-20.

Further, in terms of the scheme guidelines, Government of Tripura had been preparing and submitting an Annual Action Plan (AAP) to the GoI every year.

During the audit coverage period 2014-19 construction of six new court buildings and three Quarter Complexes (including one inadmissible work) were initiated. The status of the projects is discussed at **Paragraph 6.2.9.1.**

B. Planning for e Courts and Progress

In respect of the implementation of e-Courts MMP, the duration of Phase II of MMP was four years i.e. by August 2019 or until the project completed, whichever was later.

The phase wise details of requirement of Information Communication and Technology (ICT) infrastructure in subordinate courts and the status of its implementation as of October 2019 (i.e. date of audit) are shown in **Table 6.2.3**.

Table 6.2.3: Requirement and availability of facilities in district and subordinate courts

Particulars	Planned	Status at the end of FY 2018-19 (updated till October 2019)
PHASE-I approved by GoI In February 2007		
Site preparation, LAN implementation, hardware installation and installation of software	To be completed at all the courts of 13 court complexes[10]	Completed at all courts of 12 court complexes except Kanchanpur court complex.
PHASE-II approved by GoI in August 2015		
Implementation of Case Information System(CIS)	At all the courts of 4 court[11] complexes	CIS was implemented at three court complexes except Ambassa court complex. Implementation of CIS at Ambassa court complex was in progress
Delivery of Services	At all the courts of 16 court complexes	Delivery of 13 services (out of 30) were either fully or partly implemented (as detailed in **Appendix 6.2.1**).
Digitisation of case records		Not yet implemented due to inadequate fund released by State Government
Providing hardware at all court complex		Installation of hardware completed at all courts of 16 court complexes

6 Ambassa, Dharmanagar, Khowai, Udaipur, Agartala, Teliamura, Kailashahar, Amarpur, Sabroom, Kamalpur, Bishramganj

7 Kailashahar (D&JS Court), Kailashahar (CJM Court), Dharmanagar (SDJM Court), Bishramganj (D&SJ Court), Teliamura (SDJM Court)

8 Sonamura, Agartala, Kailashahar, Amarpur, Sabroom, Kamalpur, Bishalgarh, Dharmanagar & Teliamura.

9 Udaipur & Ambassa

10 Agartala, Dharmanagar, Kamalpur, Khowai, Bishalgarh, Sonamura, Amarpur, Belonia,Sabroom, Kailashahar (two), Udaipur and Kanchanpur

11 Ambassa, Chowmanu, Gandacherra and Kanchanpur

Particulars	Planned	Status at the end of FY 2018-19 (updated till October 2019)
Video Conference (VC) connectivity between Courts and Jails		VC was installed at 15 court complexes except Ambassa court complex and jails, but could not be utilised due to poor connectivity at jail end.
Wide Area Network (WAN) for providing stable internet connectivity		Installed at all courts of 16 court complexes
Providing hardware at all DLSAs and TLSCs	22 DLSAs/ TLSCs	Computers, Printers and UPS installed but Local Area Network (LAN) was not installed at 15 DLSAs/TLSCs [12] (out of 22) due to insufficient space
Setting up of Computer Lab	At State Judicial Academy	Hardware was procured, but was lying idle due to inadequate space.
Installation of Solar system power backup at Court complexes	At all 16 court complexes	Advance payment made (March-July 2018) to TREDA for seven court complexes, but not yet installed. Fund received in March 2019 for remaining nine court complexes and taken up with TREDA for submitting estimate.

From **Table 6.2.3,** it appears that all facilities required for implementation under Phase-II of e-court projects were partially implemented by August 2019. The issues have been discussed in details at **Paragraphs 6.2.11** to **6.2.13**.

6.2.7 Financial Performance of Scheme for development of infrastructure facilities

6.2.7.1 Fund Management

GoI released funds under CSS for development of infrastructure facilities to judiciary to the State based on the Action Plans submitted by the State Government. The State was required to submit Utilisation Certificates (UC) for previous grants released to the State under the scheme along with details of State share released.

Following are details of the funds received and expended under the CSS:

Under this scheme, the State received ₹ 70.54 crore from GoI upto 2014-15. The matching State share of ₹ 7.83 crore was due and the State Government released ₹ 17.12 crore up to 2018-19.

During Audit coverage period 2014-19, GoI released ₹ 15.50 crore to the State (2014-15) and no grant was received thereafter. The reason for non-release of fund from 2015-16 onwards by GoI was not found on records except non utilisation of previous years' fund due to slow progress of works. During 2014-19 the State Government released GoI grants of ₹ 44.61 crore (including previous years grant of ₹ 29.11 crore in 2014-15 and 2015-16) and the State share of ₹ 5.45 crore to the Law Department. Out of the total available fund of ₹ 50.06 crore, the Department incurred total expenditure of ₹ 34.75 crore (₹ 27.39 crore on eight approved projects i.e six court building and two quarter complexes and ₹ 7.36 crore on one unapproved

[12] DLSA: Gomati, South Tripura, Unakoti and North Tripura; SDLSA: Sadar, Dharmanagar, Sonamura, Udaipur, Amarpur, Belonia, Sabroom, Kailashahar, Kamalpur, Gandacherra and Longtharai Valley

project[13] and other works related to upgradation of existing court buildings).

Total expenditure incurred under the CSS upto 2018-19 from Central share was ₹ 50.73 crore and ₹ 12.83 crore from State share.

The project wise details are given in **Table 6.2.4**.

Table 6.2.4: Project wise details of Sanctioned cost, expenditure incurred during 2014-19, scheduled completion date and their status as of October 2019

Sl. No.	Type of construction	Name of Court complex/ Location	Project cost (₹ in crore)	Expendi-ture (₹ in crore)	Scheduled completion date	Status as of October 2019
1	Court building	Agartala	13.03	10.94	June 2016	Not fully completed
2		Khowai	15.86	7.48	February 2018	
3		Ambassa	2.97	0.73	October 2018	
4		Sabroom	6.80	1.70	November 2018	
5		Amarpur	6.94	0.68	December 2019	
6		Kamalpur	6.38	3.20	January 2020	
7	Residence	Udaipur (6 Nos)	4.13	2.17	June 2016	
8		Ambassa (7 Nos)	5.70	0.49	August 2020	
	Total:		**61.81**	**27.39**		

***Source**: Information collected from the Department.*

It was seen in audit that the Law Department furnished (May-June 2019) an UC of ₹ 16.97 crore based on mere allocation of funds to the executing PWD divisions

The Law Department did not offer its comments on the issue.

6.2.7.2 Diversion of funds

The Law Department diverted ₹ 1.11 crore during 2017-18 and 2018-19 sanctioned for construction of judicial infrastructure in subordinate courts to construct the staff quarters of the High Court. Besides, Executive Engineer, PWD (Roads &Buildings), Khowai Division diverted (2017-18) ₹ 25.50 lakh to other work[14].

During Exit Conference, Law Department assured (June 2020) that no diversion would be made from the CSS fund in future and also cautioned the State PWD against such diversion. Further, the Secretary, Law assured (June 2020) that in future UCs would be submitted only after actual utilisation of funds.

6.2.8 Funding for e-Court Mission Mode Project

As per Policy & Action Plan of e-Courts Project Phase II, e-Committee of the Supreme Court of India undertook overall management of the project to ensure that the project was heading in the right direction and at optimal speed. Department of Justice (DoJ), GoI obtained the necessary financial approval from the competent

[13] Construction of eight nos. of Type-II Staff quarters for class-II and Class-IV employees of High Court

[14] Bridge work executed under National Bank for Agriculture and Rural Development assisted Rural Infrastructure Development Fund

authority for funds to be disbursed under the project to High Courts for the project components as per the recommendations of the e-Committee and released funds directly to the High Court of Tripura for implementation of the scheme. The High Court of Tripura utilised ₹ 7.19 crore against ₹ 10.22 crore released by the GoI during 2015-19 as shown in **Table 6.2.5**.

Table 6.2.5: Year wise funds released by the GoI and utilised by the High Court of Tripura

(₹ in crore)

Year	Funds released by GoI	Funds utilised by the High Court
2015-16	1.20	0.00
2016-17	4.38	1.13
2017-18	2.87	3.45
2018-19	1.77	2.61
Total:	**10.22**	**7.19**

During Exit Conference, the Registrar General, High Court stated (June 2020) that the unspent money was fully utilised by January 2020 for above purposes for which it was sanctioned. On the contrary, audit observed that unutilised amount of ₹ 0.10 crore (pertaining to site preparation) was still lying with the High Court Authority as of June 2020.

6.2.9 Project Planning and Achievements

A status report on court complex wise availability and requirement of court buildings and residential accommodation was prepared by the Law Department in 2010. Based on the requirement indicated in the Vision document 2013 and Five-year plans (2012-17), the State Government has been preparing Annual Action Plans for construction of court buildings and residential accommodation every year. Audit scrutiny of the requirement/demand[15] of physical infrastructure and the extent of its achievement revealed that required projects had either not been taken up or were delayed due to several reasons. An abstract of the requirements as indicated in Five Years Plan for 2007-12 and Annual Action Plans for 2010-19 and progress there against are given in **Table 6.2.6**.

Table 6.2.6: Requirement of physical infrastructure in districts and subordinate courts and extent of achievement during 2014-19

Particulars	Requirement (in number)		Total require-ment	Complete	In progress
	at the beginning of 2014-15	additional requirement during 2014-19			
Court buildings	8	6	14	Nil	Six works taken up during 2012-17 are yet to be completed /fully completed.
Residential quarters	6	3	9	Nil	Construction works at two locations (Ambassa & Udaipur were in progress)

***Source**: Five Years Plan for 2007-12 and Annual Action Plans for 2010-19*

[15] in the light of needs expressed through different plans (Status Report of 2010, Vision Document 2013, Five Years Plans and Annual Action Plans)

It can be seen that against 14 projects of Court Buildings and nine projects of Residential Quarters for Judicial Officers, all were incomplete and stated to be in progress. Audit also observed that despite assurance given by the State Government (twice in February 2019 and May 2019) before the Hon'ble Supreme Court to complete the ongoing construction works by stipulated dates (ranging from March 2019 to December 2019 in 1st affidavit and May 2019 to August 2020 during filing 2nd affidavit), they had not been able to fulfil the assurance.

The partial or low achievement under the scheme were *inter alia* due to failure of the administrative and executing departments (Law and PWD) to manage known risks in construction projects and monitoring of the projects as discussed in **Paragraph 6.2.9.1**.

Since the scheme will come to an end in March 2020 and there is a huge shortfall in physical infrastructure *vis-à-vis* needs as on 31 March 2019, an element of uncertainty regarding provision of adequate physical infrastructure and availability of future fund remains.

6.2.9.1 Project management in Administrative and Executing Departments

Any works/construction project in Government *inter alia* involves administrative approvals, preparation of cost estimates, technical sanctions, tendering, execution and monitoring for a successful execution and completion of projects in stipulated time.

All projects carry risks and public works are no exception. Different Audit Reports of the Comptroller and Auditor General of India and dissemination reports of the Central Vigilance Commission have highlighted prominent risks in construction projects for long. Further, the Government of India (GoI) and Hon'ble Supreme Court of India have advised States to constitute State as well as District Level Monitoring Committees to oversee construction projects under the said scheme, *i.e.* Development of Infrastructure facilities for the Judiciary.

Notwithstanding above, both Law Department and Executing Department (PWD) failed to effectively manage the projects being executed and consequently six out of nine projects (six court buildings, quarters for Judicial Officers at two locations and one quarter complex for High Court staff which was not admissible under this scheme) taken up throughout the State suffered from time overruns as summarised in **Table 6.2.7**.

Table 6.2.7: Abstract of project-wise progress against scheduled date of completion

Sl. No.	Name of the project and project cost	Work order issued	Scheduled date of completion (as per Contract)	Status (as on Oct. 2019)	Time over-run (Upto Oct. 2019)	Expenditure incurred (₹ in crore)	Remarks
1	Construction of (G+2) storied Court Building, Khowai-	January 2016	February 2018	Building portion (G+2) completed excluding additional works like acoustic treatment, approach road, boundary wall, internal	20 months	7.48	Delayed mainly due to handing over of clear site after issuance of Work Order, providing site drawing/design, modification/

Sl. No.	Name of the project and project cost	Work order issued	Scheduled date of completion (as per Contract)	Status (as on Oct. 2019)	Time over-run (Upto Oct. 2019)	Expenditure incurred (₹ in crore)	Remarks
	₹ 15.86 crore			electrification, LAN connectivity, lift, AC, drinking water source *etc*., which were incomplete			rearrangement of court rooms as desired by High Court, change in scope of work from (G+2) to (G+3) during August – October 2018.
2	Construction of Court Building at Sabroom, / Phase-I work (Ground floor only)- ₹ 6.80 crore	Novem ber 2016	November 2018	40 *per cent* work was physically completed (Block-I: completed upto roof beam level, Block-II: roof slab casted, Block-III: column footing completed.)	11 months	1.70	Delay in finalisation of tender, shifting of existing courts and handing over of clear site to executing agency. Sub soil investigation was not done before issue of work order to contractor.
3	Construction of (G+5) storied Court Building Agartala- ₹ 13.03 crore	June 2014	June 2016	(G+5) building was completed and inaugurated in September 2019 except completion of some components like Lift, CC camera, generator, water purifier system, *etc*.	40 months	10.94	Delay in shifting of existing courts and handing over of clear site. Delays on part of contractor from time to time without valid reason.
4	Construction of 2 nos. Grade-I and 4 nos. Grade-III Officers' quarters at Udaipur- ₹ 4.13 crore	June 2014	June 2016	Out of six nos. quarters, five were completed and one was in progress.	40 months	2.17	Delay in handing over of clear site due to demolition of existing structures. Delay caused by contractor from time to time without valid reason.
5	Construction of (G+2) storied Court Building at Amarpur ₹6.94 crore	Novem ber 2017	December 2019	Approx. 30 *per cent* (upto centering shuttering for ground floor roof casting)	Nil	0.68	Delay in handing over of clear site due to shifting of courts and demolition of existing structures. Five months' delay in approving drawing/ design.
6	Vertical extension of court building at Ambasa, Dhalai- ₹ 2.97 crore	October 2017	October 2018	Approx. 95 *per cent*, work at finishing stage	12 months	0.74	Delay in handing over of clear site due to shifting of offices from existing building, providing drawing/ design.
7	Construction of seven (07) quarters for Judicial Officers at	August 2018	August 2020	Approx. 10 *per cent*	Nil	0.49	Work was in progress.

Sl. No.	Name of the project and project cost	Work order issued	Scheduled date of completion (as per Contract)	Status (as on Oct. 2019)	Time over-run (Upto Oct. 2019)	Expenditure incurred (₹ in crore)	Remarks
	Ambassa ₹ 5.70 crore						
8	Construction of Court Building at Kamalpur, Dhalai ₹ 6.38 crore	December 2017	January 2020	Approx. 30 *per cent*, up to plinth	Nil	3.20	Drawing/ design was modified due to change in scope from open foundation to pile foundation. Sub soil investigation was not done before issue of work order to contractor.
9	Construction of staff quarters for employees of High Court (inadmissible work under the scheme)	September 2016	December 2017	Completed in February 2019	15 months	1.11	Delay in providing working drawings to contractor and delay caused by contractor from time to time without valid reason.

These nine projects suffered time over-run due to failure on the part of the Department in management of risks (*viz*. preparation of estimates, changes in scope of work by the user, tendering process, handing over of clear site and drawing-design to contractors, slow progress by the contractors, *etc*.) before as well as after awarding of works by both the Administrative and Executing Department.

Both Law Department and the State PWD jointly failed to avoid risks in projects execution because of following systemic deficiencies:

(i) The Law Department did not ensure that the detailed estimates prepared by the PWD were comprehensive and incorporated the basic information like availability of clear site and findings of proper survey and geo-technical soil investigation.

(ii) While according Administrative Approval, the Law Department neither fixed any target dates for completion of work or nor did they effectively monitor the PWD.

(iii) The State PWD had not fixed any time frame for preparatory works of construction projects such as preparation of drawing/design, estimates and tender processing, *etc*.

(iv) Absence of risk mitigation plan: Risks such as frequent changes in scope of work, delay in finalisation of detailed estimates, delay in tendering and its acceptance, delay in handing over of clear site to the contractor were common. There were no risk mitigation strategy at Government level nor at the level of Law Department and it was left to the PWD officials to execute as they desired.

(v) The Department failed to overcome constraints (shifting of existing court, demolishing of existing old structures, *etc*.) in handing over site: In five cases, the court complexes /halls were to be constructed at places where courts were already working though in dilapidated condition. The shifting of the existing court to alternate accommodation was not managed with proper planning and before work orders were issued to the contractor.

During the Exit Conference, the Secretary, Law informed (June 2020) that changes to scope of the court building construction works were due to decision taken by the High Court from time to time to accommodate additional courts/facilities (like Family Courts) in the ongoing building works. The Department, however, admitted that the building infrastructure projects should be planned not by considering the immediate requirements but for a considerable long period to avoid frequent changes in works after they had been approved.

6.2.9.2 Additional outcomes

The revised scheme guidelines (April 2017) and National Court Management System Plan (NCMS) guidelines (May 2012) envisaged additional/desirable outcomes which were different from mere creation of physical infrastructure. The achievements in the State, on these additional /desirable outcomes are given in the **Table 6.2.8**.

Table: 6.2.8: Status of additional /desirable outcomes

Sl. No.	Issues as per Scheme guidelines	Status
1	Reduction in pendency of more than five years' old cases.	Court cases reduced from 6,465 at the end of December 2015 to 3,737 cases at the end of August 2019.
2	Percentage of reduction of gap between availability of residential quarters and sanctioned strength of Judicial officers.	Increased from 54 *per cent* (2014-15) to 60 *per cent* (October 2019)
3	Percentage of reduction in vacant posts of Judges and Judicial officers	Reduced from 25 *per cent* (2014-15) to 20 *per cent* (October 2019)
4	Safety and reducing vulnerability in courts/court complex	CCTV cameras were not available in 28 out of 34 courts. Fire extinguishers were not available in 25 out of 34 courts. Fire alarm and fire detector were not available in any of the 34 courts.
5	Barrier free courts for Persons with Disabilities (PwD)	Ramp and toilets were not available for PwD in 29 out of 34 courts.
6	Basic amenities like adequate seating space, proper lighting, clean drinking water, hygienic washrooms, *etc*. for litigants, public and lawyers	Waiting hall for public/litigant was available only at one (Sonamura) court complex out of selected five court complexes.
7	Vulnerable Witness Deposition Centre (VWDC)	Available only at one court complex (at Udaipur) out of selected five court complexes.

Sl. No.	Issues as per Scheme guidelines	Status
8	Crèche facility for children (upto six years' age) and dispensary, Floor maps at the entry and exit point and direction arrows though out the court complex, Sufficient parking facilities for judges, court staff, lawyers and litigants, Installation of solar system, Appointment of Court Manager	These facilities were not available in any of the selected five court complexes.
9	Sufficient number of electronic case display system, Kiosk, Help Desk for litigants and lawyers; VC equipment and connectivity between court and jails.	Available in all courts/court complexes. However, Video Conference (VC) could not be effectively utilised due to poor connectivity at jail end. This issue has been discussed separately at **Paragraph 6.2.10.1**.
10	Adequate security measures	Police personnel available in all court complexes.

The amenities and safety measures as mentioned above were not provided since they were either not planned for in the Annual Action Plans *ab initio* or added later on, though the requirements were known.

Moreover, the Law Department did not offer its comments on the issue.

6.2.10 Procurement and installation of hardware

Procurement and installation of hardware was done by the High Court of Tripura as per specification and quantity prescribed by the e-Committee of the Supreme Court. The High Court of Tripura selected the firm through e-tender and all the items were procured (2016-19) with a warranty period of five years from the date of purchase. Seventy *per cent* payment was made on receipt of materials and 30 *per cent* was made after completion of installation of hardware and equipment except hardware procured for setting up of computer lab at State Judicial Academy (SJA) and installation of Local Area Network (LAN) at District Legal Services Authorities (DLSAs) due to non-availability of adequate space as discussed in **Paragraphs 6.2.10.4** and **6.2.10.5**.

In the absence of Asset Register and annual physical verification of assets, Audit could not gain assurance about the existence and location of the assets.

The Registrar General, High Court stated (June 2020) that the delivery and installation report of all hardware was available with the High Court and could be cross checked for physical availability. During the Exit Conference, the Registrar General assured (June 2020) that all the assets would be physically verified on an annual basis.

6.2.10.1 Installation of video conferencing equipment in courts and jails

Phase-II of e-Court project envisaged that Video Conferencing (VC) facility would be utilised in courts for routine remand of under trial prisoners and for recording the evidence of doctors (and other professionals) in criminal cases, legal aid matters and sensitive matters pertaining to child abuse, domestic violence, sexual abuse and other areas as and when the need arises.

VC facility with connectivity between jails and each court as envisaged in Phase-II of e-Court project was provided to all districts and subordinate courts at a cost of ₹ 1.33 crore. An open source software 'vidyo' App was utilised for video conferencing.

However, the courts failed to utilise the VC facilities with the jail authorities for routine remand of under trial prisoners due to poor internet connectivity at the jail premises. Despite the Additional Chief Judicial Magistrate (Addl. CJM), West Tripura, Agartala taking up (June 2019) the matter with the Superintendent of Central Jail (*Kendriya Sansodhanagar*, Bishalgarh), there was no improvement in the connectivity between the courts and jails. (October 2019).

During the Exit Conference, the Registrar General stated (June 2020) that the matter would be pursued with the Home Department, Government of Tripura.

Further, no records about using of VC for recording the evidence of doctors in criminal cases, sensitive matters pertaining to child abuse, domestic violence, sexual abuse, *etc*. could be shown to audit by any court in the three sampled districts.

While accepting the audit observation, the Registrar General, High Court stated (June 2020) that instructions would be given to the district courts for maintaining such records.

6.2.10.2 Power Backup

To maximise the utility of infrastructure provided and to deliver litigant centric services, an alternate uninterrupted source of power back-up is needed at each court complex.

(a) Diesel Generator Sets

To facilitate alternative uninterrupted source of power back-up, Diesel Generator (DG) Sets were provided to all court complexes under Phase-I & II of the project. Under Phase-II, eight DG sets were procured at a cost of ₹ 33.77 lakh and installed (March 2018) at seven court complexes[16] and one at SJA.

Audit observed that DG set of one court complex [17](provided directly by the e-committee of the Supreme Court of India under Phase-I) was lying out of order since May 2019. The District & Session Judge, West Tripura District had sought funds for its maintenance (May 2019) from the Law Department; but no fund was released by the State Government who is responsible for undertaking all the activities for sustainability of the project and the DG set remained out of order (October 2019). This resulted in disruption in availability of computerised facilities to citizens through Judicial Service Centres, Kiosk, Information Display boards in the court complex at Agartala and also hampered data entry of court cases at all the courts of court complex during power-cuts.

[16] Ambassa, Sonamura, Dharmanagar, Kamalpur, Longtharai valley, Gandacherra and Kanchanpur
[17] 5 KVA DG set was provided to court complex at Agartala under Phase-I of the project

(b) Use of solar energy- Non-installation of solar systems in Court complexes

In addition to DG set, environment friendly solar system power backup was also envisaged to be installed at all 16 court complexes in Phase-I and Phase-II of the e-Courts project.

Audit observed that the High Court of Tripura took up the matter with the Director, Tripura Renewable Energy Development Agency (TREDA), Agartala and made an advance payment of ₹ 45 lakh (out of the estimated cost of ₹ 60 lakh) (March 2018) and ₹ 60 lakh (out of the estimated cost of ₹ 84.70 lakh) (July 2018) to the TREDA for installation of Solar Photo Voltaic (SPV) power plant at seven court complexes[18]. While releasing the advance payment (July 2018), High Court instructed TREDA to complete the installation of SPV power plant within the following 120 days. Audit noticed that installation of Solar system was not completed in any of the court complexes (October 2019). However, it did not execute a formal contract agreement/ Memorandum of Understanding (MoU) with TREDA for timely completion of the project.

The Registrar General, High Court stated (June 2020) that as an executing agency, the TREDA had invited bids and taken up execution of the project by engaging a private agency and therefore, the question of signing a contract or MoU with TREDA was not necessary. During the Exit Conference, Registrar General stated (June 2020) that the High Court could not execute any formal agreement with the TREDA as it was a constituent organisation of Power Department.

The reply is not acceptable, as the Registrar should have spelt out the terms and conditions to the implementing agency (TREDA) for timely completion of the project.

6.2.10.3 Wide Area Network connectivity

With a view to reduce the cost of server infrastructure, centralised application management, efficient server and resources management, automated scalability of application/web/ database servers, technical manpower cost saving, *etc*. Phase-II of the project envisaged establishing cloud computing environment for access by each court complex.

Under the Cloud Computing Environment, applications and databases used by the Courts would be hosted in Cloud Environment facilitated at State Data Centres (SDCs). The server infrastructure would not be required at court complexes coming up on Cloud Computing Environment.

Audit observed that;

- the BSNL Multiprotocol Level Switching (MPLS) Optical Fibre Connectivity (OFC) was established (September 2018) at a cost of ₹ 1.43 crore at all court complexes.
- Data entry, cause list generation, order uploading and other associated activities of the district and subordinate courts were being carried out though the e-courts

[18] Gandacherra, Chawmanu, Kanchanpur, Bishalgarh, Sonamura, Kailashahar and Khowai

database maintained at the local servers of respective court complexes, as the e-courts database server of Tripura was not maintained centrally at the State level.

- Data backup was taken on daily basis and maintained at respective court complexes in a separate hard disk or server.

The Registrar General, High Court stated (June 2020) that cloud computing could not be implemented until a robust and uninterrupted connectivity was established by the BSNL. However, the e-committee of the Supreme Court of India decided (January 2020) for implementation of a hybrid model of cloud computing at court complexes until robust connectivity was established. Accordingly, the High Court of Tripura took up (January 2020) the matter with the NIC to submit modalities of hybrid model of cloud computing and guide the High Court. The same was under implementation and the ultimate goal of cloud computing remained unachieved in the State.

6.2.10.4 Computerisation of DLSA and TLSC

Phase-II of the project envisaged integration of DLSAs with the courts' ICT infrastructure to facilitate preparation of list of cases for conducting Lok Adalats.

Audit observed that the hardware procured (September 2017) for installation of LAN at DLSAs and TLSCs at a cost of ₹ 6.29 lakh was lying idle in 15 out of 22 DLSAs/TLSCs due to inadequate infrastructure facilities. Therefore, the DLSAs and TLSCs were not getting the benefits of e-courts.

The Registrar General, High Court stated (June 2020) that prior to the procurement the High Court was assured by the State Legal Services Authority that proper infrastructure would be made available.

6.2.10.5 Computer training labs at State Judicial Academy (SJA)

Phase-II of the e-Court project envisaged establishing a full-fledged computer lab at SJA for providing ICT training for Judicial Officers and Court Officials.

Audit observed that the SJA of Tripura was established in March 2014 and housed in a Government residential quarter provided by the State Government. The fund for construction of infrastructure for SJA was to be made by the State Government from the additional fiscal space provided by the Fourteenth Finance Commission (FFC). However, no fund was released by the State Government (October 2019).

As a result, the Department could not construct the SJA building and the SJA is functioning in the existing residential quarter.

The High Court of Tripura procured (May 2017 to September 2018) computer and networking hardware (Network switch, IO box, Cat 6 cable, patch cords) including VC set at a cost of ₹ 30.23 lakh which were all lying idle due to non-availability of adequate space at SJA.

The Registrar General, High Court informed (June 2020), during the Exit Conference, that there was no action plan to utilise the computer hardware. He, however, assured

that High Court would explore the possibility of their utilisation considering their limited shelf life and warranty period.

6.2.11 Scanning and digitisation of case records of High Court and district courts

Phase-II of e-Court project envisaged digital preservation of case records, converting the existing case records to a digitised format in district courts and High Courts.

The State Government released ₹ 77.03 lakh (March 2018) against the total requirement of ₹ nine crore for digitisation of records. The fund released by the State Government were placed (March 2018) with the State PWD[19] for construction of a room for digitisation at High Court of Tripura. The work was not completed despite passage of more than a year (October 2019).

During the Exit Conference, the Registrar General, High Court stated (June 2020) that the State Government had not provided fund to High Court from the additional fiscal space provided by the FFC. Nevertheless, it can be seen that even the funds released were not utilised and nothing was done to even start upon the digitisation of judicial records in the Courts.

6.2.12 Service delivery

A large number of improved and innovative services were planned to be implemented in Phase-II of the e-Courts project. An 'e-courts' App was implemented in June 2018 developed to enable the citizens to check the status of their case; another App 'JustIs' was released to facilitate the Judicial Officers in monitoring of 'Board and Case Flow Management'.

Audit scrutiny revealed that the following services **were not implemented** as of date of audit (October 2019) even after lapse of more than four years from inception of the Phase-II Project.

(i) e-filing portal to facilitate filing of cases online for High Courts and Subordinate courts,

(ii) providing certified copies online with bar-coding to facilitate authenticated copy of judgments when required to produce in a hardcopy format before any court,

(iii) payment of court fees online,

(iv) Portfolio Management System to facilitate the Advocates/ Government departments to access the case information portal with a user and password authentication whereby all the cases represented by the particular advocate or against the particular department,

(v) ensuring smooth interoperability with Police, Jail, *etc*. so that the communication between these stakeholders and courts is expedited in order to curb the delays involved,

[19] Executive Engineer (Roads &Buildings), Capital Complex Division.

(vi) Digital library modules which include High Court Rules, Civil and Criminal Court Manuals, *etc*. intended for HC, DCs, State Legislature and State Government were not implemented.

However, out of 30 charter of litigant services (as detailed in **Appendix 6.2.1**) the delivery of 13 services were either fully or partly implemented (October 2019) and remaining 17 services were under implementation (October 2019).

During the Exit Conference, the Registrar General, High Court admitted the audit observations and informed (June 2020) that implementation of e-filing and e-payment would be started after amendment of the relevant Act and Rules and matter had been taken-up with the Law Department.

6.2.13 Monitoring

6.2.13.1 Infrastructure Development Monitoring Mechanism

Monitoring is an essential management tool to watch progress against plan/targets and to trigger remedial action, whenever required. Accordingly, Financial Rules [20] stipulate that the Secretary of a Department shall *inter alia* review and monitor regularly the performance of the programmes and projects assigned to his Ministry/Department to determine whether stated objectives are achieved.

Scheme guidelines envisage that the implementation of the scheme would be monitored by the State Level and District Level Monitoring Committees.

Audit noticed the following deficiencies in the monitoring system:

a. System of periodical reports and returns, agenda for meetings of the monitoring committee and minutes of the meetings of the monitoring committee were not available to assess the effectiveness of the monitoring system;

b. In pursuance of directions by the Hon'ble Supreme Court in Malik Mazhar case, the Government of Tripura committed completion of projects by certain time. However, none of these projects was completed by the dates promised to the Hon'ble Court as discussed in **Paragraph 6.2.9.1** of this report. This was so because during and after filing the State's affidavit, the Law Department had only issued a general advisory to Executing Department to expedite the work instead of analysing root cause for slow progress and finding some solution;

c. High Court of Tripura started online reporting of status of construction of various projects to the Hon'ble Supreme Court of India from January 2018. This reporting, however, failed to expedite the progress of the works as pointed out at **Paragraph 6.2.9.1**.

As a result of ineffective planning, the State Government could not take up the construction of five new court buildings and nine quarter complexes as per the target of Perspective Plans of 2012-17 and 2017-22.

[20] Rule 64 of General Financial Rules, 2005 and Rule 70 of General Financial Rules, 2017

In connection with monitoring issues, the LR & Secretary, Law informed (June 2020), during the Exit Conference, a system of obtaining monthly progress report (including reasons for delay/ bottlenecks) from the implementing department (PWD) for all construction works of Law Department, had recently been adopted.

During a tripartite meeting held (15 June 2020) among Law Department, PWD and Audit, the PWD assured that all the loopholes pointed out in the PA would be looked into and addressed on priority basis.

6.2.13.2 e-Courts Monitoring Mechanism

There was no prescribed norm to submit any periodical progress report, conducting periodical meetings. However, the Central Project Committee monitored the implementation of the e-Courts at State level and Nodal Officers at each court complex level as seen by audit from the records of High Court of Tripura and select district courts. The monitoring was ineffective in as much as the authorities did not take necessary/ timely action on the installation of VC connectivity between courts and jails, procurement of hardware without ensuring availability of adequate space and failure in ensuring installation of solar system in courts.

6.2.14 Conclusion

The Performance Audit of **'Development of Infrastructure facilities for the Judiciary'** under the Centrally Sponsored Scheme, revealed several deficiencies in planning, project execution and management as well as monitoring of the projects and its outcomes for improved delivery of judicial services to litigants and stakeholders. As against 12 court buildings and 11 quarter complexes as per the perspective Plans, five new court buildings and nine quarter complexes were not taken up. All the nine projects (six court buildings and three quarter complexes[21]) taken up during 2014-19 suffered time overruns. One project of residential complex for High Court staff which was not approved under the Scheme was irregularly taken up by diverting funds of other projects. The partial or low achievement was due to administrative and executive failure (Law & PWD) to manage known risks. As the Scheme was to come to an end in March 2020 the State Government did not show any urgency in getting the funds and completing all the planned projects by target dates.

During the period 2014-19 the State released funds of ₹ 44.61 crore (including ₹ 29.11 crore of previous years) to the Law Department, against which expenditure incurred was ₹ 27.39 crore on eight approved projects and ₹ 7.36 crore on one unapproved project and other works related to upgradation of existing court buildings.

Under e-court project Phase-II the High Court of Tripura utilised ₹ 7.19 crore against ₹ 10.22 crore from the GoI during 2015-19. In the absence of Assets Register and Physical Verification Report of assets there was no assurance of actual availability of computer hardware in the test checked courts. The courts could not utilise the Video Conferencing (VC) facility between courts and jails for routine remand of under trial of prisoners, due to poor internet connectivity at the other end (Jails). High Court of

[21] Including one inadmissible project under the Scheme

Tripura made an advance payment of ₹ 1.05 crore to Tripura Renewable Energy Development Agency (TREDA), Agartala, for installation of Solar Photo Voltaic (SPV) power plant at seven court complexes without entering into an agreement with the Agency. They could neither ensure completion and installation of SPV power plant in any of the court complexes. The computer hardware and VC equipment procured for setting up of Computer Lab at State Judicial Academy, Tripura at a cost of ₹ 30.23 lakh, remained idle for want of adequate space for the training facilities.

As regards service deliveries under the e-Courts project though large number of improved and innovative services were planned for implementation in Phase-II of the project, only 'e-courts' App was implemented in June 2018 enabling the citizens to check the status of their case. Another App 'JustIs' was released to facilitate the Judicial Officers in monitoring of 'Board and Case Flow Management'. e-filing portal was to be implemented to facilitate filing of cases online for High Courts and Subordinate courts.

Even after four years of implementation of the project important services to litigants such as e-filing of cases, e payment of court fees, providing certified copies online with bar-coding to facilitate authenticated copy of judgments when required to produce in a hardcopy format before any court, and Portfolio Management System supposed to assist Advocates and Government Departments in case management, were not introduced.

The monitoring mechanism to watch the progress of implementation of projects and services as per plans was weak and ineffective.

6.2.15 Recommendations

The State Government may consider the following recommendations:

- Ensure proper co-ordination between Administrative Department and Executive Department for timely completion of the projects;
- Monitor execution of projects through use of modern project management techniques, use of web based project management IT tool;
- Maintain Assets Register and physical verification of the assets created under e-courts project, by each court;
- Improve the internet connectivity at jail end to ensure the utilisation of Video Conferencing device;
- Provide building infrastructure to make Computer Lab functioning under State Judiciary Academy; and
- Introduce service deliveries under the e-Court Project as planned for the benefit of litigants/advocates/Government departments and all other stake holders.

CHAPTER VII:
FOLLOW UP OF AUDIT OBSERVATIONS

CHAPTER VII
FOLLOW UP OF AUDIT OBSERVATIONS

7.1 Follow-up Action on earlier Audit Reports

7.1.1 Explanatory notes not submitted

Finance Department of the Government of Tripura issued instructions (July 1993), to the Administrative Departments to initiate, *suo motu,* positive and concrete action in all audit paragraphs and reviews featuring in the Audit Reports of C&AG of India regardless of whether the cases are taken up for examination by Public Accounts Committee (PAC)/ Committee on Public Undertakings (COPU) or not and to furnish detailed notes indicating the corrective/remedial action taken or proposed to be taken by them within a period of three months of the presentation of Audit Reports to the Legislature.

Serious irregularities noticed in audit are included in the Report of the Comptroller and Auditor General of India (C&AG) and presented to the State Legislature.

(a) Public Accounts Committee

As of November 2019, 15 out of 18 departments did not submit explanatory notes on 68 Paragraphs (46 paragraphs and 22 performance audit) out of 93 paragraphs (64 paragraphs and 29 performance audits) of Audit Reports awaiting discussion by Public Accounts Committee (PAC) relating to the Audit Reports from the years 2001-02, 2004-05 to 2017-18. The position of pendency of receipt of *suo motu* replies on paragraphs/ performance audits awaiting discussion by PAC during the last five years is shown in **Table 7.1.1**.

Table 7.1.1: Position of pending *suo motu* replies on paragraphs/ performance audits of Audit Reports awaiting discussion by PAC

Years	Total paragraphs/performance audits awaiting discussion	*Suo-motu* reply received	*Suo-motu* reply not received
2013-14	4	2	2
2014-15	13	3	10
2015-16	9	1	8
2016-17	10	0	10
2017-18	13	0	13

Table 7.1.1 presents the position of *suo motu* replies received/ not received pertaining to paragraphs/ performance audits of Audit Reports pending discussion by PAC for the period from 2013-14 to 2017-18. The departments largely responsible for not submitting explanatory notes were Public Works (Roads & Buildings) Department (21), Agriculture Department (5), Finance Department (11), Public Works (Water Resource) Department (3), Rural Development Department (4) and Transport Department (8) amongst others.

The issue of pendency of furnishing of *suo motu* replies to audit paras was taken up (June 2018) with the Chairman, PAC, Tripura Legislative Assembly and Finance Department, Government of Tripura with the request to take steps so that the departments concerned furnish the *suo motu* replies and pendency can be reduced.

(b) Committee on Public Undertakings

As of November 2019, two departments did not submit explanatory notes on 12 paragraphs (nine paragraphs and three performance audits) out of 20 paragraphs (14 paragraphs and six performance audits) of Audit Reports awaiting discussion by Committee on Public Undertakings (COPU) relating to the Audit Reports from the years 2011-12 to 2017-18. The departments largely responsible for not submitting explanatory notes on paragraphs were Power Department (5), Industries and Commerce Department (4) and Performance Audits were Industries & Commerce Department (2) and Power Department (1).

The issue of pendency of furnishing of *suo motu* replies to audit paras was taken up (June 2018) with the Chairman, Committee on Public Undertakings (COPU), Tripura Legislative Assembly and Finance Department, Government of Tripura with the request to take steps so that the departments concerned furnish the *suo motu* replies and the pendency can be reduced.

7.1.2 Action taken on the recommendations of the Public Accounts Committee (PAC)/ Committee on Public Undertakings (COPU)

The Administrative Departments were required to take suitable action on the recommendations made in the Report of the PAC/COPU presented to the State Legislature. Following the circulation of the Reports of the PAC/COPU, Heads of Departments were to prepare comments on action taken or proposed to be taken on the recommendations of the PAC/COPU and submit the same to the State Assembly Secretariat.

(a) Public Accounts Committee

As of October 2019, Action Taken Notes (ATNs) on 147 recommendations of the PAC made between 2010-11 and 2018-19 were awaited from the administrative departments concerned, of which, 55 pertained to Finance (Excise & Taxation) Department, 19 to Public Works (Roads & Building) Department, 11 to Social Welfare and Social Education Department, nine to Urban Development Department, six each to Education (Higher) Department, Industries & Commerce Department and Public Works (Drinking Water & Sanitation) Department, five to Health & Family Welfare Department, four to Fisheries Department and 26 ATNs to other departments. All these departments are required to expedite submission of ATNs to the PAC without further delays.

(b) Committee on Public Undertakings

As of November 2019, ATNs on 28 recommendations of the COPU made between 2011-12 and 2015-16 were awaited from the administrative departments concerned, of which, 13 pertained to Power Department (Tripura State Electricity Corporation Limited), 10 to Industries and Commerce Department (Tripura Jute Mills Limited: six, Tripura Small Industries Corporation Limited: four), three to Forest Department (Tripura Forest Development & Plantation Corporation Limited), and one each to Transport Department (Tripura Road Transport Corporation) and Tribal Welfare (Tribal Rehabilitation in Plantation & Particularly Vulnerable Tribal Group) Department. There is need for all these departments/ companies to submit ATNs without further delays to take the things to their logical end.

7.2 Monitoring

The following committees had been formed at the Government level to monitor the follow up action on Audit Reports and PAC/ COPU recommendations.

7.2.1 Departmental Monitoring Committee

Departmental Monitoring Committees (DMCs) had been formed (April 2002) by all departments of the Government under the chairmanship of the departmental Secretaries to monitor the follow-up action on Audit Reports and PAC/ COPU recommendations. The DMCs were to hold monthly meetings and to send progress reports on the issue every month to the Finance Department.

Details about meetings of the DMCs during 2018-19, though called for (September 2019), had not been furnished (September 2020) by the Finance Department.

7.2.2 Apex Committee

An Apex Committee had been formed (April 2002) at the State level under the chairmanship of the Chief Secretary to monitor the follow-up action on Audit Reports and PAC/COPU recommendations.

Details about meetings of the Apex Committee during 2018-19, though called for (September 2019), had not been furnished (September 2020) by the Finance Department.

7.3 Outstanding Inspection Reports

The Accountant General (Audit), Tripura conducts periodical inspections of Government Departments to test-check transactions and verify the maintenance of accounts and other records according to prescribed rules and procedures. Audit observations on financial irregularities and deficiencies in maintenance of initial accounts noticed during local audit and not settled on the spot are communicated to the audited entities and to the higher authorities through Inspection Reports (IRs). The more serious irregularities are reported to the Government. The Government had instructed (July 1993) that the first reply to the IRs should be furnished within one month from the date of receipt.

Analysis of the position of outstanding IRs showed that 3,446 paragraphs included in 552 IRs issued during the last five years up to 2018-19 were pending for settlement as of September 2019. Of these, even the first reply had not been received in respect of 131 IRs in spite of repeated reminders. The year-wise break-up of the outstanding IRs and the position of response thereto is given in **Table 7.3.1**.

Table 7.3.1: Position of Outstanding IRs where 1st reply have not been received

Years	No. of outstanding IRs	No. of IRs for which even 1st reply had not been received
2014-15	110	15
2015-16	135	26
2016-17	123	20
2017-18	100	26
2018-19	84	44
Total	**552**	**131**

As a result, the following important irregularities commented upon in those IRs had not been addressed as of September 2019.

Table 7.3.2: Irregularities not addressed

Nature of irregularities	Number of cases	Amount involved (₹*in crore*)
Excess/ Irregular/ Avoidable/ Unfruitful/ Wasteful/ Unauthorised/ Idle expenditure	608	457.11
Blocking of funds	128	174.21
Non-recovery of excess payments/ overpayments	41	5.13
Under assessment	139	29.85
Loss of Revenue	65	77.72
Misappropriation	11	0.84
Others	1,884	1,055.15
Total	**2,876**	**1,800.01**

It is evident from **Table 7.3.2** that 2,876 cases for ₹ 1,800.01 crore involving audit observations on loss of revenue, overpayments, excess payments, under assessment, *etc*. remained unaddressed by the departments concerned, which is a matter of serious concern.

7.4 Departmental Audit Committee Meetings

As per the Office Memorandum dated 14 July 1993 issued by the Government of Tripura, the Departmental Audit Committees (DACs) are required to be constituted by each Department with the Secretary of the Department as Chairman, Head of the Department as Member and one Officer of the rank of Deputy Secretary from the Finance Department as Member and Deputy Accountant General, Tripura as Convenor. The DACs were to monitor the progress in disposal of the outstanding audit paras and Inspection Reports issued by the Accountant General (Audit), Tripura. Seven Audit Committee Meetings were held during 2018-19 wherein two IRs and 11 paragraphs were discussed, but no paragraph has been settled.

7.5 Response of the Government/ departments towards audit

The Accountant General (Audit), Tripura conducts periodical inspection of the government departments to test-check the transactions and verify the maintenance of important accounts and other records as prescribed in the rules and procedures. These inspections are followed up with Inspection Reports (IRs) incorporating irregularities detected during the inspection and not settled on the spot, which are issued to the heads of the offices inspected, with copies to the next higher authorities for taking prompt corrective action. The heads of the offices/ Government are required to promptly comply with the observations contained in the IRs, rectify the defects and omissions and report compliance through initial reply to the Accountant General (Audit) within one month from the date of issue of the IRs. Serious financial irregularities are reported to the heads of the departments and the Government.

There are 3,446 paragraphs involving ₹ 71,529.26 crore relating to 552 IRs issued during the last five years 2014-15 to 2018-19 which remained outstanding at the end of 30 September 2019 under Social, Economic, Revenue and General Sectors. Year-wise position of outstanding IRs, paragraphs and money value involved for the last five years as on 30 September 2019 are given in **Table 7.5.1**.

Table 7.5.1: Details of pending IRs

Position of IRs	Sectors	Outstanding as of September 2019					
		2014-15	2015-16	2016-17	2017-18	2018-19	Total
Number of IRs pending for settlement	Social	39	48	49	54	25	215
	Economic	43	62	52	19	31	207
	Revenue	21	21	17	11	18	88
	General	7	4	5	16	10	42
Total		**110**	**135**	**123**	**100**	**84**	**552**
Number of outstanding audit observations	Social	273	315	332	420	222	1,562
	Economic	196	358	342	133	229	1,258
	Revenue	89	64	84	63	66	366
	General	30	14	20	98	98	260
Total		**588**	**751**	**778**	**714**	**615**	**3,446**
Money value involved (₹ in crore)	Social	197.31	223.15	366.57	157.21	76.47	1,020.71
	Economic	13,273.70	25,865.99	13,890.46	6,623.04	5,877.54	65,530.73
	Revenue	26.05	14.66	7.30	0.17	10.50	58.68
	General	875.57	583.51	65.59	2,986.10	408.37	4,919.14
Total		**14,372.63**	**26,687.31**	**14,329.92**	**9,766.52**	**6,372.88**	**71,529.26**

The details in **Table 7.5.1** indicated that the departments were not serious in taking necessary action for final settlement of such cases.

It is recommended that the Government may review the matter and ensure that an effective system exists for sending replies to Audit within the prescribed time frame.

Agartala
The 05 March 2021

(BIVASH RANJAN MONDAL)
Principal Accountant General (Audit), Tripura

Countersigned

New Delhi
The 12 March 2021

(GIRISH CHANDRA MURMU)
Comptroller & Auditor General of India

APPENDICES

Appendix - 2.2.1

Detailed status of maintenance of Registers at AWC level in the selected 14 Projects

(Reference: Paragraph No. 2.2.14.1)

(in number)

Sl. No.	Name of Register	Not maintained	Partially maintained	Properly maintained
1	Survey/family register/ Household survey register for PSE	02	87	100
2	Supplementary Food Stock Register	06	22	161
3	Supplementary Food Distribution Register	09	37	143
4	Pre school education register	18	108	63
5	Pregnancy and Delivery Register	31	123	35
6	Immunisation and Village Health and Nutrition Day (VHND)	19	134	36
7	Vitamin A Biannual Rounds Register	63	93	33
8	Home Visits Planner /Home visit register	33	128	28
9	Health check-up /referral register	133	45	11
10	Summaries (Monthly & Annual)	90	90	09
11	Weight Records of Children /Growth chart	25	90	74
12	Calendar &Age Birth EDD calculation tables	154	22	13

***Source**: Sampled AWCs Record*

Appendix - 3.8.1

Statement showing details of funds received and expenditure incurred during 2013-14 to 2015-16 under Unakoti Dugdha Prakalpa

(Reference: Paragraph No. 3.8)

(A) Details of funds received during 2013-14 to 2015-16

(in ₹)

Sl. No.	From whom received	2013-14	2014-15	2015-16	Total
1	Sr. DM&C, Unakoti District	60,00,000[1]	10,00,000[2]	-	70,00,000
2	BDO, Chandipur	28,00,000[3]	-	-	28,00,000
3	UBI, Kailashahar	-	9,90,000	-	9,90,000
4	40 Nos. Dairy Entrepreneurs (Margin money)	-	4,00,000	-	4,00,000
5	UBI, Gournagar (Bank Interest)	-	-	60,237[4]	60,237
Total		**88,00,000**	**23,90,000**	**60,237**	**1,12,50,237**

(B) Summary of funds received and payment made during 2013-14 to 2015-16

(in ₹)

Year	Opening Balance	Funds received during the year	Total funds	Expenditure incurred	Closing Balance
2013-14	Nil	88,09,888[5]	88,09,888	54,82,401	33,27,487
2014-15	33,27,487	41,67,644[6]	74,95,131	74,95,131	Nil
2015-16	Nil	11,593	11,593	11,593	Nil
Total		**1,29,89,125***		**1,29,89,125***	

(C) Item-wise details of expenditure incurred during 2013-14 to 2015-16

(in ₹)

Sl. No.	Item	2013-14	2014-15	2015-16	Total
1	Cattle cost	22,00,000	43,71,057	-	65,71,057
2	Cattle ration	20,000	4,10,750	-	4,30,750
3	Cattle insurance	1,23,596 (-) 9,888	2,27,616	-	3,41,324
4	Transit truck hiring, truck fare	1,13,805	1,41,000	-	2,54,805
5	Cattle transit cost	-	1,18,250	-	1,18,250
6	Cattle shed construction	28,00,000	(-) 15,96, 000	-	12,04,000
7	Cattle feed	-	24,000	6,36,407	24,000
	Salary	-	79,000	-	79,000
8	Wages	-	64,300	-	64,300
9	Honorarium		37,500	87,585	37,500
10	Payment for chaffing machine	2,25,000	(-) 1,33,000	-	92,000
11	Transportation cost of fodder cutting machines	-	4,500	-	4,500
12	Fodder cutting cost	-	7,600	-	7,600
13	Refund of Margin money	-	60,000	-	60,000

1 Thirteenth Finance Commission grant, Zilla Parishad share
2 Panchayat Development Fund, Zilla Parishad share
3 MGNREGA
4 Includes Bank Interest from 1 June 2014 to 18 September 2015
5 Includes refund of ₹ 9,888 from National Insurance Co. Ltd., Agartala
6 Includes refund of ₹ 17,29,000 from M/s Sreema Engineering Works, Kailashahar as unspent amount of cattle shed construction (₹ 15,96,000) and Chaffing machine (₹ 1,33,000)

Appendix - 3.8.1 (concld.)

Statement showing details of funds received and expenditure incurred during 2013-14 to 2015-16 under Unakoti Dugdha Prakalpa

(Reference: Paragraph No. 3.8)

(C) Item-wise details of expenditure incurred during 2013-14 to 2015-16

(in ₹)

Sl. No.	Item	2013-14	2014-15	2015-16	Total
14	Transfer of Margin money	-	50,000	-	50,000
15	Hiring of vehicle	-	3,000	-	3,000
16	Medicine	-	2,08,988	-	2,08,988
17	Contingency	-	5,332	-	5,332
18	Rubber mat consumables, etc.	-	6,54,255	-	6,54,255
19	Incentive to farmers, etc.		2,52,625	-	2,52,625
20	Videography	-	2,000	-	2,000
21	Nutritional support to project cattle	-	-	11,593	11,593
22	Tour programme	-	49,366	-	49,366
Total		**54,72,513**	**50,42,139**	**7.35,585**	**1,12,50,237**

Source: Compiled from the information furnished in March 2019 and May 2019 by the Dy. Director, ARDD, Unakoti District, Kailashahar

Appendix - 4.1.1

Summarised financial position and working results of Government companies and Statutory Corporations as per their latest finalised financial statements/accounts

(Reference: Paragraph Nos. 4.1.2.1, 4.1.6, 4.1.9, 4.1.9.2, 4.1.9.3 & 4.1.10)

(Figures in columns (5) to (12) are ₹ in crore)

Sl. No.	Sector / name of the Company	Period of Accounts	Year in which accounts finalised	Paid-up Capital @	Loans outstanding at the end of year	Accumulated Profit (+) / Loss (-)	Free Reserves & Surplus	Turnover	Net profit (+)/ loss (-)	Net impact of Audit Comments	Capital Employed[7]	Return on capital employed[8]	Percentage return on capital employed	Manpower
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
A. Working Government Companies														
AGRICULTURE & ALLIED														
1	Tripura Forest Development & Plantation Corporation Limited	2017-18	2019-20	9.20	0.09	112.09	0.00	33.13	-10.22	0.00	121.38	-9.91	-8.16	186
2	Tripura Horticulture Corporation Limited	2014-15	2017-18	7.94	0.00	-3.77	0.00	25.62	-0.33	-0.16	4.17	-0.33	-7.91	81
3	Tripura Tea Development Corporation Limited	2017-18	2019-20	44.42	0.00	-24.80	0.00	3.65	-2.31	0.00	19.62	-2.31	-11.77	659
4	Tripura Rehabilitation Plantation Corporation Limited	2017-18	2019-20	4.58	0.00	-2.86	0.00	29.09	-3.64	0.08	1.72	-3.64	-211.63	157
Sector wise total				**66.14**	**0.09**	**80.66**	**0.00**	**91.49**	**-16.50**	**-0.08**	**146.89**	**-16.19**	-11.02	**1083**
FINANCING														
5	Tripura Industrial Development Corporation Limited	2017-18	2019-20	16.17	128.41	-10.47	0.00	5.91	1.90	11.01	134.11	3.87	2.89	43
Sector wise total				**16.17**	**128.41**	**-10.47**	**0.00**	**5.91**	**1.90**	**11.01**	**134.11**	**3.87**	**0.00**	**43**

[7] Capital employed = Paid up share capital + free reserves and surplus + long term loans – accumulated losses - deferred revenue expenditure.

[8] ROCE =Earnings before interest and taxes (EBIT) / Capital Employed.

Appendix - 4.1.1 (Contd.)

Summarised financial position and working results of Government companies and Statutory Corporations as per their latest finalised financial statements/accounts

(Reference: Paragraph Nos. 4.1.2.1, 4.1.6, 4.1.9, 4.1.9.2, 4.1.9.3 & 4.1.10)

(Figures in columns (5) to (12) are ₹ in crore)

Sl. No.	Sector / name of the Company	Period of Accounts	Year in which accounts finalised	Paid-up Capital @	Loans outstanding at the end of year	Accumulated Profit (+) / Loss (-)	Free Reserves & Surplus	Turnover	Net profit (+)/ loss (-)	Net impact of Audit Comments	Capital Employed	Return on capital employed	Percentage return on capital employed	Manpower
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
MANUFACTURING														
6	Tripura Jute Mills Limited	2017-18	2019-20	293.58	1.05	-287.32	0.00	4.15	-28.15	0.00	7.31	-28.15	-385.09	448
7	Tripura Small Industries Corporation Limited	2016-17	2019-20	59.56	0.21	-46.53	0.00	17.97	-6.60	-11.62	13.24	-6.58	-49.70	128
Sector wise total				**353.14**	**1.26**	**-333.85**	**0.00**	**22.12**	**-34.75**	**-11.62**	**20.55**	**-34.73**	-169.00	**576**
POWER														
8	Tripura State Electricity Corporation Limited	2015-16	2018-19	665.75	160.28	-445.13	61.08	798.74	-156.96	0.00	441.98	-156.96	-35.51	3695
Sector wise total				**665.75**	**160.28**	**-445.13**	**61.08**	**798.74**	**-156.96**	**0.00**	**441.98**	**-156.96**	-35.51	**3695**

Appendix - 4.1.1 (Contd.)

Summarised financial position and working results of Government companies and Statutory Corporations as per their latest finalised financial statements/accounts

(Reference: Paragraph Nos. 4.1.2.1, 4.1.6, 4.1.9, 4.1.9.2, 4.1.9.3 & 4.1.10)

(Figures in columns (5) to (12) are ₹ in crore)

Sl. No.	Sector / name of the Company	Period of Accounts	Year in which accounts finalised	Paid-up Capital @	Loans outstanding at the end of year	Accumulated Profit (+) / Loss (-)	Free Reserves & Surplus	Turnover	Net profit (+)/ loss (-)	Net impact of Audit Comments	Capital Employed	Return on capital employed	Percentage return on capital employed	Manpower
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
SERVICES														
9	Tripura Handloom and Handicrafts Development Corporation Limited	2016-17	2019-20	107.09	4.27	-121.59	1.57	4.72	-12.17	-10.14	-8.66	-12.17	Not workable	252
10	Tripura Urban Transport Company Limited	2017-18	2019-20	0.90	0.00	1.27	0.00	1.36	0.32	0.00	2.17	0.47	21.66	7
11	Tripura Tourism Development Corporation Limited	2016-17	2017-18	12.12	0.00	-1.21	0.00	2.69	-0.32	0.06	10.91	-0.32	-2.93	11
12	Agartala Smart City Limited	2018-19	2019-20	0.10	0.00	-0.03	0.00	0.00	-0.03	0.00	0.07	-0.03	-42.86	9
Sector wise total				**120.21**	**4.27**	**-121.56**	**1.57**	**8.77**	**-12.20**	**-10.08**	**4.49**	**-12.05**	-268.37	**279**
MISCELLANEOUS														
13	Tripura Natural Gas Company Limited	2018-19	2019-20	3.92	4.94	86.15	0.00	95.59	6.29	0.00	95.01	14.31	15.06	19
Sector wise total				**3.92**	**4.94**	**86.15**	**0.00**	**95.59**	**6.29**	**0.00**	**95.01**	**14.31**	**15.06**	**19**
Total A (All sector wise working Government companies)				**1225.33**	**299.25**	**-744.20**	**62.65**	**1022.62**	**-212.22**	**-10.77**	**843.03**	**-201.75**	**-23.93**	**5695**

Appendix - 4.1.1 (Concld.)

Summarised financial position and working results of Government companies and Statutory Corporations as per their latest finalised financial statements/accounts

(Reference: Paragraph Nos. 4.1.2.1, 4.1.6, 4.1.9, 4.1.9.2, 4.1.9.3 & 4.1.10)

(Figures in columns (5) to (12) are ₹ in crore)

Sl. No.	Sector / name of the Company	Period of Accounts	Year in which accounts finalised	Paid-up Capital @	Loans outstanding at the end of year	Accumulated Profit (+) / Loss (-)	Free Reserves & Surplus	Turnover	Net profit (+)/ loss (-)	Net impact of Audit Comments	Capital Employed	Return on capital employed	Percentage return on capital employed	Manpower
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
B. Working Statutory corporation														
SERVICES														
1	Tripura Road Transport Corporation	2016-17	2019-20	162.95	0.25	-284.64	11.19	2.26	0.36	0.00	-110.25	0.36	Not workable	**248**
Sector wise total				**162.95**	**0.25**	**-284.64**	**11.19**	**2.26**	**0.36**	**0.00**	**-110.25**	**0.36**	Not workable	**248**
Total B (All sector wise working Statutory Corporation)				**162.95**	**0.25**	**-284.64**	**11.19**	**2.26**	**0.36**	**0.00**	**-110.25**	**0.36**	Not workable	**248**
Grand Total (A+B)				**1388.28**	**299.50**	**-1028.84**	**73.84**	**1024.88**	**-211.86**	**-10.77**	**732.78**	**-201.39**	-27.48	**5943**
C. Non working Government companies														
FINANCING														
1	Tripura State Bank Limited	Non functional and in the process of liquidation												
Sector wise total				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0
Total C (All sector wise non working Government company)				**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0**
Grand Total (A+B+C)				**1388.28**	**299.50**	**-1028.84**	**73.84**	**1024.88**	**-211.86**	**-10.77**	**732.78**	**-201.39**	-27.48	**5943**

@ Paid up capital includes share application money

Appendix - 4.1.2
Statement showing Rate of Real Return on Government Investment
(*Reference: Paragraph No. 4.1.10*)

(₹ in crore)

Financial Year	Present value of total investment at the beginning of the year	Equity infused by the State government during the year	Net interest free loan given by the State Government during the year	Interest free loan converted into equity during the year	Grants/ subsidies given by the State government for operational and administrative expenditure	Disinvestment by the State Government during the year at face value	Total investment during the year	Total investment at the end of the year	Average rate of interest	Present value of total investment at the end of the year	Minimum expected return to recover cost of funds for the year	Total earnings/ profit after tax (PAT) for the year
A	B	C	D	E	F	G	H	I	J	K= I x (1+J/100)	L= I xJ/100	M
Upto 1999-2000	0.00	156.02	2.58	0.00	0.00	0.00	158.60	158.60	12.25	178.03	19.43	-10.90
2000-01	178.03	20.44	0.00	0.00	0.00	0.00	20.44	198.47	10.82	219.95	21.47	-11.00
2001-02	219.95	25.33	0.00	0.00	0.00	0.00	25.33	245.28	10.35	270.66	25.39	-25.62
2002-03	270.66	15.53	9.13	0.00	0.00	0.00	24.66	295.32	7.08	316.22	20.91	-8.52
2003-04	316.22	18.35	0.00	0.00	0.00	0.00	18.35	334.57	9.92	367.76	33.19	-8.45
2004-05	367.76	22.99	0.00	0.00	0.00	0.00	22.99	390.75	9.17	426.58	35.83	-18.99
2005-06	426.58	23.40	0.00	0.00	0.00	0.00	23.40	449.98	8.56	488.50	38.52	-19.11
2006-07	488.50	36.22	11.04	0.00	45.00	0.00	92.26	580.76	8.46	629.90	49.13	-16.33
2007-08	629.90	29.07	4.78	0.00	50.00	0.00	83.85	713.75	8.27	772.78	59.03	-9.50
2008-09	772.78	31.13	30.50	0.00	28.06	0.00	89.69	862.47	8.00	931.47	69.00	-19.84
2009-10	931.47	25.79	16.50	0.00	139.56	0.00	181.85	1113.32	7.98	1202.16	88.84	-1.97
2010-11	1202.16	13.27	0.00	0.00	108.94	0.00	122.21	1324.37	8.88	1441.97	117.60	-4.36
2011-12	1441.97	27.29	75.85	0.00	64.05	0.00	167.19	1609.16	8.41	1744.49	135.33	-104.98
2012-13	1744.49	30.94	0.00	0.00	63.43	0.00	94.37	1838.86	8.44	1994.06	155.20	-98.74
2013-14	1994.06	41.27	0.00	0.00	110.09	0.00	151.36	2145.42	8.53	2328.43	183.00	-137.51
2014-15	2328.43	38.88	12.00	0.00	128.31	0.00	179.19	2507.62	13.18	2838.12	330.50	-126.63
2015-16	2838.12	38.48	0.00	0.00	88.79	0.00	127.27	2965.39	12.95	3349.41	384.02	-139.05
2016-17	3349.41	60.74	13.25	0.00	87.28	0.00	161.27	3510.68	7.50	3773.98	263.30	-118.09
2017-18	3773.98	30.53	0.00	0.00	77.35	0.00	107.88	3881.86	7.50	4173.00	291.14	-190.30
2018-19	4173.00	34.81	0.00	0.00	70.77	0.00	105.58	4278.58	7.16	4584.93	306.35	-211.86
TOTAL							**1957.74**					

Year	Total earnings/ loss in 2018-19	Investment by the State Government as per total of the column H above	Return on State Government investment on the basis of historical value	Present value of State Government investment at the end of 2018-19	Real return on State Government investment considering the present value of investments
	A	B	C	D	E
2018-19	-211.86	1957.74	-10.82	4584.93	-4.62

Appendix - 5.2.1

Statement showing excess ITC allowed to the dealer as per the Trading accounts for 2013-14

(Reference: Paragraph No. 5.2)

(in ₹)

Year	**2013-14**		**Total 2013-14**
Rate of Tax (per cent)	***Taxable @ 13.5***	***Taxable @ 14.5***	
Opening stock	116243	4109968	4226211
Purchase with freight	6223326	6835363	13058689
Total	6339569	10945331	17284900
Closing stock	4109968	9087286	13197254
Cost of goods sold	2229601	1858045	4087646
Sale	2263491	1886287	4149778
Profit margin ***(per cent)***	1.52	1.52	
ITC allowed on closing stock	554846	1317656	1872502
ITC admissible on cost of goods sold	300996	269417	570413
Inadmissible ITC	1872502 *minus* 570413		1302089

Appendix - 5.3.1

Statement showing short levy of VAT, interest and penalty due to underassessment of purchase by the AAs

(Reference: Paragraph No. 5.3)

(in ₹)

Sl. No.	Name of the dealer and TIN/ Registration No. (in bracket)	Period of assess-ment	Date of assessment	Turnover assessed by Audit	Turnover determined by AAs	Turnover short determined by AAs (7=5-6)	Taxable Items	Rate of tax (*per cent*)	Short levy				Reasons for underassessment
									VAT	Interest	Penalty[#]	Total	
1	*2*	*3*	*4*	*5*	*6*	*7*	*8*	*9*	*10*	*11*	*12*	*13*	*14*
Superintendent of Taxes, Charge I, Agartala													
1.	M/s S. Das & Company, Central Rd, Agartala (16010056023)	2014-15	*29-03-2018*	8611853	8176036	435817	Motor Parts and Accessories, Audio System, Lubricant, etc.	14.5	63193	44551	6319	102688	Underassessment of purchase
Sub total				**8611853**	**8176036**	**435817**			**63193**	**44551**	**6319**	**102688**	
Superintendent of Taxes, Charge VII, Agartala													
2.	M/s Info Solution System, Agartala (16040939005)	2015-16	*31-01-2018*	46697403	44943156	1754247	Computer and its spare parts	5	87712	46049	17543	132884	Underassessment of purchase
		2016-17		45042347	41331667	3710680			185534	64009	37107	247688	
Sub total				**91739750**	**86274823**	**5464927**			**273246**	**110058**	**54650**	**380572**	
Superintendent of Taxes, Charge VIII, Agartala													
3.	M/s Raj Incorporation, Agartala (16180582124)	2013-14	*26-12-2017*	4487850	1933372	2554478	Stone boulder, Stone chips	14.5	370399	327803	55560	670422	Underassessment of purchase as well as excess determination of closing stock.
		2014-15		3663485	2606903	1056582			153204	108009	22981	249723	
Sub total				**8151335**	**4540275**	**3611060**			**523603**	**435812**	**78541**	**920145**	
Superintendent of Taxes, Belonia													
4.	M/s Sen Rubber Traders, Belonia (16081084170)	2013-14	*23-03-2018*	495713	351700	144013	Raw rubber sheet, rubber scrap, latex collection cap, rubber tapping knife, anti-fungal rubber coat, aluminium dish		19442	91422	1944	35093	Underassessment of purchase
				180092	127773	52319			7586		759	13693	
				5250896	3725423	1525473			76274		7627	137674	
Sub total				**5926701**	**4204896**	**1721805**			**103302**	**91422**	**10330**	**18646460**	

[#]Penalty calculated on the VAT amount @ 10 *per cent* (Sl.No.1 and 4), @15 *per cent* (Sl.No.3) and @ 20 *per cent* (Sl. No.2)

Appendix - 5.3.1 (contd.)

Statement showing short levy of VAT, interest and penalty due to underassessment of purchase by the AAs

(Reference: Paragraph No.5.3)

(in ₹)

Sl. No.	Name of the dealer and TIN/ Registration No. (in bracket)	Period of assess-ment	Date of assessment	Turnover assessed by Audit	Turnover determined by AAs	Turnover short determined by AAs (7=5-6)	Taxable Items	Rate of tax (*per cent*)	Short levy				Reasons for underassessment
									VAT	Interest	Penalty[#]	Total	
1	*2*	*3*	*4*	*5*	*6*	*7*	*8*	*9*	*10*	*11*	*12*	*13*	*14*
Superintendent of Taxes, Kailashahar													
5	M/s Aruna Enterprises, Kailashahar (16100029078)	2012-13	*31-05-2017*	467413	445155	22258	Medicine, pickles, food products, soft drinks, soap, detergent, Horlicks, phenol, brush, paste etc.	5	1113	39984	111	2042	Underassessment of purchase
				2268880	1999021	269859		13.5	36431		3643	66850	
		2013-14		511665	487300	24365		5	1218	160597	122	2016	
				2349805	1066352	1283453		13.5	173267		17327	286757	
				380138	331998	48140		14.5	6980		698	11552	
		2014-15		426780	406457	20323		5	1016	146163	101	1498	
				2397789	974977	1422812		14.5	206307		20631	304303	
		2015-16		1175001	553855	621146		5 (Domestic purchase)	31057	39993	3106	40219	
				843719	803542	40177		5 (Inter State purchase	2009		201	2602	
				2347798	2050478	297320		14.5 (Inter State purchase)	43112		4311	55830	
6.	M/s Podder & Podder Equipment & Project Pvt. Ltd., Kumarghat (16100674029)	2011-12	*29-09-2016*	20446065	19554589	891476	Lubricants, JCB, spare	13.5	120349	135393	12035	228061	Underassessment of purchase
Sub total				**33615053**	**28673724**	**4941329**			**622859**	**522130**	**62286**	**1001730**	

[#]Penalty calculated on the VAT amount @ 10 *per cent* (Sl.No.5, 6, 7 and 8

Appendix - 5.3.1 (concld.)

Statement showing short levy of VAT, interest and penalty due to underassessment of purchase by the AAs

(Reference: Paragraph No.5.3)

(in ₹)

Sl. No.	Name of the dealer and TIN/ Registration No. (in bracket)	Period of assess-ment	Date of assessment	Turnover assessed by Audit	Turnover determined by AAs	Turnover short determined by AAs (7=5-6)	Taxable Items	Rate of tax (*per cent*)	Short levy				Reasons for underassessment
									VAT	Interest	Penalty#	Total	
1	*2*	*3*	*4*	*5*	*6*	*7*	*8*	*9*	*10*	*11*	*12*	*13*	*14*
Superintendent of Taxes, Dharmanagar													
7.	M/s Maya Electrical, Dharmanagar (16090107089)	2012-13	*26-08-2017*	2616634	2561123	55511	Electrical goods	13.5	7494	7981	750	14089	Underassessment of purchase
		2013-14		1970138	1881568	88570		14.5	12843	11366	1284	21833	
		2014-15		2278844	2016159	262685		14.5	38089	26853	3809	57895	
		2015-16		2506090	1836939	669151		14.5	97027	50939	9703	130016	
8.	M/s Shree Rathi Brothers, Dharmanagar (16091393149)	2013-14	*27-12-2017*	88751293	87426652	1324641	Edible oil, oil cake etc.	5	66232	62589	6623	116568	Underassessment of purchase
Sub total				**98122999**	**95722441**	**2400558**			**221685**	**159728**	**22169**	**340401**	
Grand Total				**246167691**	**227592195**	**18575496**			**1807888**	**1363701**	**234295**	**2931996**	

#Penalty calculated on the VAT amount @ 10 *per cent* (Sl.No.5, 6, 7 and 8

Appendix - 6.2.1

Status of the implementation of litigant charters

{Reference: Paragraph Nos. 6.2.6 and 6.2.12}

Sl. No.	Service to the litigant	Availability of Services under different Platforms							
		SMS Push	SMS Pull	Email	Web	Mobile App	JSC	Kiosk	Reason for non extension of services
1.	Case filing conformation	Yes	Not envi-saged in the action plan	Yes	Yes	Yes	Yes	Yes	
2.	Case registration confirmation	Yes		Yes	Yes	Yes	Yes	Yes	
3.	Case next date notification	Yes		Yes	Yes	Yes	Yes	Yes	
4.	Case scrutiny defects notification	No		No	Yes	No	Yes	No	Module had not been included in the CIS by the e-Committee of the Supreme court
5.	Case allocation notification	No		No	Yes	Yes	Yes	Yes	
6.	Process Issued notification	No		No	No	No	No	No	
7.	Case Listing notification	Yes		Yes	Yes	Yes	Yes	Yes	
8.	Case disposed notification	Yes		Yes	Yes	Yes	Yes	Yes	
9.	Cause list	No	No	Yes	Yes	Yes	Yes	Yes	Module had not been included in the CIS by the e-Committee of the Supreme court
10.	Case status information	Not envi-saged in the action plan	Yes	Yes	Yes	Yes	Yes	Yes	
11.	Daily orders/ proceedings		Not envi-saged in the action plan	No	Yes	Yes	Yes	Yes	Module had not been included in the CIS by the e-Committee of the Supreme court
12.	Judgements			No	Yes	Yes	Yes	Yes	
13.	Online certified copy with 2D Bar code authentication			No	Not envis aged in the action plan	No	No	No	Amendment of relevant Rules was in process.
14.	Certified copy application status	No	No	No		No	No	No	
15.	Certified copy ready notification	No	No	No		No	No	No	
16.	Certified copy delivered notification	No	No	No	No	Not envisage d in the action plan	No	No	

Appendix - 6.2.1 (Concld.)

Status of the implementation of litigant charters

{Reference: Paragraph Nos. 6.2.6 and 6.2.12}

Sl. No.	Service to the litigant	Availability of Services under different Platforms							
		SMS Push	SMS Pull	Email	Web	Mobile App	JSC	Kiosk	Reason for non extension of services
17.	Caveat filed information	No	No	No	No		Yes	Yes	Module had not been included in the CIS by the e-Committee of the Supreme court.
18.	Case filed against caveator	No	No	No	No		Yes	Yes	
19.	Appeal/Revision filed against order/judgements	No	No	No	No	No	No	No	
20.	Digitally signed orders	Not envi-saged in the action plan	Not envi-saged in the action plan	No	No	No	Not envisaged in the action plan	Not envi-saged in the action plan	Procurement of DSCs was in process.
21.	Digitally signed judgements			No	No	No			
22.	Digitally signed decrees			No	No	No			
23.	Digitally signed certified copies of case records			No	No	No			
24.	Process service through e-mail			No	Not envisaged in the action plan				
25.	e-Court fees				No	Not envi-saged in the action plan	No	No	Amendment of the Court Fees Act was in process.
26.	e-payment to courts				No		No	No	
27.	e-Filling of cases for SC/HC/DC				No		Not envi-saged in the action plan	No	
28.	Regional language DC website				No			No	The language of the Courts of Tripura is English
29.	Disabled friendly website				No			No	NIC, Tripura State Unit was requested to do the needful and it was in process.
30.	Court complex location				No	No			Module had not been included in the CIS by the e-Committee of the Supreme court.

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www.cag.gov.in

https://cag.gov.in/ag/tripura

F.No.85(133)-SW/DC/2017(Vol-III)/PART /2545
GOVERNMENT OF TRIPURA
DEPARTMENT OF SOCIAL WELFARE & SOCIAL EDUCATION

Dated, Agartala, the 07/09/2021

OFFICE MEMORANDUM

Subject:Modification of the Guidelines and Modalities for Effecting Reservation for the Persons with Benchmark Disabilities–reg.

Office Memorandum was issued vide F.No.85(133)-SW/DC/2017(Vol-III)/934 dated 9th January, 2019 wherein it has been mentioned *"In case of direct recruitment, four percent of total no. of vacancies to be filled up by direct recruitment, in the cadre strength in each group of posts i.e. Group A, B, C and D shall be reserved horizontally for persons with benchmark disabilities."*

In addition to the horizontal reservation for persons with benchmark disabilities for posts to be filled up by direct recruitment,4% reservation shall also apply to each post to be filled up by promotion in the cadre strength in each group of posts i.e. Group A, B, C & D horizontally for persons with benchmark disabilities.

Unless excluded under the provision of **4 (i)** hereunder, against the posts identified for each disabilities of which, one per cent each shall be reserved for persons with benchmark disabilities under clauses (a),(b) and (c) and one per cent for persons with benchmark disabilities, under clauses (d) and (e), namely:

(*a*) blindness and low vision;
(*b*) deaf and hard of hearing;
(*c*) locomotor disability including cerebral palsy, leprosy cured, dwarfism, acid attack victims and muscular dystrophy;
(*d*) autism, intellectual disability, specific learning disability and mental illness;
(*e*) multiple disabilities from amongst persons under clauses (*a*) to (*d*) including deaf-blindness.

1. Reservation in promotion in favour of employees withdisabilities (Divyangjans)is applicable to all services of State Government.

2. The existing 100-point roster already prescribed under Office Memorandum was issued vide F.No.85(133)-SW/DC/2017(Vol-III)/934 dated 9th January, 2019 shall be followed in case of promotions also.

3. Reservation in promotion in favour of employees with benchmarkdisabilities (Divyangjans)shall be applicable to those candidates who are otherwise fully qualified and eligible to hold the post.

Directorate of Social Welfare
RECEIVED
No. 07 Date 10.09.2021
SP.
O.S.

4. Reservation shall be implemented in favour of employees with benchmark disabilities (Divyangjans) in promotions to all the categories of posts in all State Government services except those exempted or may be exempted or as may be modified, asspecified.

   i. If any department considers that it is not possible to provide reservation in promotions for any category of Persons with Disabilities, keeping in view the nature of duties to be performed by the employees in that particular department, the department may seek exemption from such reservation in promotions, however such exemption or modification shall be decided by an Inter Departmental Committee asspecified in **point 7**.

   ii. Departments who wish to seek exemptions may do so within (90) days from the date of issue of these orders during which period Reservation shall not apply to such departments for the posts identified by them for exemption. The orders issued by the Committee thereafter shall be final and further action takenaccordingly.

5. While preparing the panels of eligible candidates for promotion, the names of eligible employees with disabilities (Divyangjans) from the feeder category have to be shown against the roster points earmarked for them irrespective of their seniority position in the feeder category. However, if a disabled employee gets higher place in the eligible candidates list by virtue of their seniority in the feeder category he/she need not be adjusted in a lower position, which is earmarked for a disabled employee as per the roster system. Such roster point has to be filled up by moving up an employees with disabilities (Divyangjans) who is below in the seniority list in the feeder category. Filling up the roster points shall continue until the required percentage of disabled candidates is obtained. Once the required percentage is obtained by taking into account the candidate who are found in the list of the candidates fit for promotion on account of their seniority in the feeder category and those who are moved up to fill up the required roster point, further adjustment of employees with disabilities (Divyangjans) against the roster points has to be stopped. Unutilized roster points after the required employee's with disabilities (Divyangjans) percentage is met, shall lapse.

6. Where in any recruitment year any vacancy cannot be filled up due to non-availabilityof a suitable person with benchmark disability or for any other sufficient reasons, such vacancy shall be carried forward in the succeeding recruitment year and if in the succeeding recruitment year also suitable person with benchmark disability is not available, it may first be filled by interchange among the five categories and only when there is no person with

disability available for the post in that year, the employer shall fill up the vacancy by appointment of a person, other than a person with disability:

Provided that if the nature of vacancies in an establishment is such that a given category of person cannot be employed, the vacancies may be interchanged among the five categories with the prior approval of the appropriate Government.

7. When any department considers that it is not possible to provide reservation for any category of Persons with Disabilities or that the extent of disability needs to be specified, keeping in view the nature of duties to be performed by the employees in that particular department, the department may seek exemption from such reservation. Such exemption shall however be decided by the following Inter DepartmentalCommittee:-

a. The Principal Secretary/SecretarytoGovernment : Chairman
Department for Social Welfare & Social Education.

b. The Principal Secretary/Secretary to Government : Member
General Administration(Personnel & Training)Department

c. Principal Secretary/Secretarytothe Government : Member
or his nominee of the departmentconcerned who sought exemption.

d. The Director, Family Welfare & Preventive Medicine : Member

e. TheDirector, Social Welfare & Social Education: Member
TripuraSecretary

8. All the Departments of Secretariat, Head of Departments, all the District Collectors and all the authorities concerned in the State, shall take further necessary action accordingly, to implement the aboveorders.

JITENDRA KUMAR SINHA

PRINCIPAL SECRETARY TO THE
GOVERNMENT OF TRIPURA

Copy to:

1. The Addl. Chief Secretary/Principal Secretary/ Secretary to the Hon'ble Governor, Tripura.

2. The Addl. Chief Secretary/Principal Secretary/ Secretary to the Chief Minister, Tripura.

3. The PS to the Chief Secretary of Tripura

4. All Departments of Govt. of Tripura. Director, Information Technology

5. Department of Finance, Govt. of Tripura, New Capital complex, Agartala, West Tripura.

6. Tripura Public Service Commission/High Court of Tripura/ State Election Commission, Tripura/ Tripura State Assembly Secretariat/ State Vigilance Commission/ Department of Planning/GA(P&T).

7. Teacher's Recruitment Board of Tripura, Agartala.

8. Office of the State Commissioner for Persons with Disabilities, Tripura, Agartala.

9. Office of the Auditor General, Tripura, Agartala.

10. **The Director, NIC Tripura – with the request to immediately place this OM on the website of this Department ("what's new" tab) for information n of all concerned.**

9/21

JITENDRA KUMAR SINHA

PRINCIPALSECRETARY TO THE
GOVERNMENT OF TRIPURA

GOVERNMENT OF TRIPURA
EDUCATION (SOCIAL WELFARE & SOCIAL EDUCATION) DEPARTMENT
AGARTALA : TRIPURA

No.F.3 (72)/DSWE/PEN.CELL/2011(L)/1783(231) Dated, Agartala, date 26/07/....2021

NOTIFICATION

The Government of Tripura introduces a new Scheme **"Honorarium for Pradhan Samajpatis of Indigenous Tribal Community"** w.e.f. 1st July'2021. The details of the scheme are as follows:-

A. Name of The Scheme :

"Honorarium for Pradhan Samajpatis of Indigenous Tribal Community".

B. Targeted Beneficiaries:

Pradhan Samajpatis of 49 (*forty-nine*) Tribal groups (including sub-tribes)

1. All the proposals from elected/ selected Pradhan Samajpatis recommended by the D.M & Collectors after completion of field level verification shall be accepted.
2. Any change in Pradhan Samajpatis (newly elected/ selected/nominated head) of the Tribal Community shall be communicated to the D.M & Collectors by Secretaries of concerned Community Body.
3. The rate of Honorarium to the Pradhan Samajpatis shall be monthly Rs. 2000/- (*Two Thousand*) per beneficiary. The payment shall start from the month of July'2021.
4. Government Employee and Government Pensioners are not entitled for this scheme.
5. No income ceiling is required for selection of beneficiaries' under this scheme.

C. Rate of Honorarium:

Rs. 2000/- per month per beneficiary

D. Proposed Date for Implementing the Scheme :

1st July 2021.

E. Method of selection of Beneficiaries :

The application would be invited in plain paper with necessary documents from indigenous tribal communities to be submitted to the District D.M & Collectors. After receiving the proposals District D.M & Collectors shall take up a field enquiry of their eligibility and sent to Director Social Welfare & Social Education, Government of Tripura as per Format-S.

Contd..

F. **Sanctioning Authority :**

The Director Social welfare & Social Education will Sanction the Honorarium of the **Pradhan Samajpatis** to the eligible only which shall be recommended by the D.M & Collectors.

G. **Evaluation and Monitoring :**

The Department would monitor the progress of payment to selected beneficiaries and submit a report to the government every month.

H. **Others :** The Government may make any changes in the scheme as and when required.

(Deepa D.Nair)
Secretary to the
Government of Tripura

Copy to:-

1. The Principal Secretary to the Chief Minister, Govt. of Tripura.
2. P.S.to all Ministers.....for information of the Hon'ble Ministers.
3. P.S. to Chief Secretary, Govt. of Tripura.
4. The Commissioner & Secretary/Secretary.....all Department.
5. The under Secretary, G.A.(C&C) Department, Govt. of Tripura.
6. The under Secretary Finance Department (Budget), Agartala.
7. All D.M & Collectors .....
8. All DISEs.....
9. The CDPOs .....ICDS Project for information and compliance. They are requested to receive the application forms from eligible applicants along with required documents and arrange for enquiry regarding eligibility of the benefit and send a consolidated proposal to the Directorate (Pension Cell) in the enclosed format along with their recommendations in hard & soft copy to dsweagt@yahoo.com.CDPOs shall continue to accept new applications round the year and inform the Directorate if any existing beneficiary becomes in eligible or expires.
10. The BDOs (all).....
11. All Nagar Panchayat /AMC.....
12. Zilla Parishad (all).....
13. Panchayat Samity (all).....
14. The Manager, Tripura Govt. Press Bardwali Agatala with request to arrange for publication of the Notification under reference in the next issue of Tripura Gazette and send 25(Twenty five) copies of the same to this Directorate.
15. All Department .....
16. All Branch Officer / Sections (in office) .....

Secretary to the
Government of Tripura

FORMAT- S

Details Information of " Pradhan Samajpatis "

sl	* Name of Beneficiariy	* Father Husband Name	Nominee Name	Name of Scheme	* Habitation Name (Name of the village)	Name of Nearest AWC	* Gram Panchayat Ward Name	* Name of the Block	* Name of the Project	* Name of the District	* Name of Assembly Constieuency	* RC number	Nature of RC	Member ID as per RC	Annual income in case of income criteria	* Gender	* Age	Date of birth	Disability Status, If Any (Locomotor/Mental/Blind/Others)	Disability Percent	* Bank_ Name	* Bank Branch Name	* Account Number	* IFSC Code	* Aadhar card No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26
1																									
2																									
3																									
4																									

Seal & SIGNATURE OF DISE

..... District

Note :- Asterics are mandatory

GOVERNMENT OF TRIPURA
EDUCATION(SOCIAL WELFARE & SOCIAL EDUCATION) DEPARTMENT
AGARTALA: TRIPURA

Ref No. 3(17) /DSWE/PEN.CELL/2011)/1113(97) Dated, Agartala, the 25/6../2021

MEMO

It is decided by the Department of Social Welfare & Social Education to allow another opportunity for submission of documents for those who had remained absent or were unable to submit the required documents etc during the re-verification process held from 15th Dec'2020 to 25th January'2021.

The terms & conditions shall remain same as reference vide Memo Ref No. 3(66) /DSWE/PEN.CELL/2011/(Vol-IV) dated 14-12-2020 .

The scheduled timeline for submission of application to avail the above opportunity is from **28th June 2021 to 05th July'2021** and such willing beneficiaries shall be allowed to submit a fresh application to the CDPOs with all requisite supporting documents.

After receiving the proposals from the beneficiaries, the CDPOs shall make a careful scrutiny regarding their eligibility as claimed and confirm whether the claims are only from those in the FDLs(Final Deletion List) and USL (Unsettled List) which were finalized earlier. After examination, the data will be prepared as per the attached format to submit to the DISEs of the respective District within **8th July'2021.**

The DISEs are requested to look into the matter so that on **12thJuly' 2021** the final list and other documents are received by this Directorate to restore the pensions of acceptable applicants after scrutiny and for further regularisation the beneficiaries from July' 2021 onwards.

Secretary
Social Welfare and Social Education
Tripura

Enclo -
1. Review data sheet in excel in annexure - I.

To.

1. The District Inspector of Social Education, West / Sepahijala / Khowai / South / Gomati / Unokoti / North / Dhalai Tripura & Addl. P.0, (SW&SE) TTAADC, Dhalai Tripura for information and necessary action. The Addl. P.0, (SW&SE) is further requested to look the Projects under his jurisdictions.
2. The Child Development Project Officer, ... ICDS Project for information and necessary action.

Copy to: -

1. The Principal Secretary, R.D.(Panchayat), Govt. of Tripura for kind information.
2. The DM and Collector West / Sepahijala / Khowai / South / Gomati / Unokoti / North / DhalaiTripurafor kind information.

3. The Director, Panchayat, Govt. of Tripura for kind information.
4. The C.E.O. TTAADCKhumlung, for kind information.
5. All S.D.M for information.
6 The Executive Officer .....Municipal Council /Nagar Panchayat.
7. The BDO (The Executive Officer PanchayatSamity/BAC)/ ZDO RD Block for information with request to apprise the Chairman of PanchayatSamity/BAC.

Copy Also forwarded to:

1. The P.S to the Principal Secretary to the Hon'ble Chief Minister for kind information.
2. The P.S. to the Minister, SW & SE for kind information of the Hon'ble Minister.
3. The P.A. to the Secretary (SW&SE) for kind information the Secretary.

Secretary
Social Welfare and Social Education
Tripura

Annexure-I

Sl No	District	List of benfs to be Review
1	2	3
1	**Gomati**	**1222**
2	**North**	**1824**
3	**Dhalai**	**2855**
4	**khowai**	**770**
5	**Unakoti**	**2333**
6	**Sepahijala**	**2106**
7	**South**	**3562**
8	**West**	**5087**
GRAND TOTAL		**19759**

GOVERNMENT OF TRIPURA
EDUCATION (SOCIAL WELFARE & SOCIAL EDUCATION) DEPARTMENT
AGARTALA : TRIPURA

No.F.3 (121)/DSWE/PEN.CELL/2011(L)/544 (225) Dated, Agartala, the 6/05/2021

NOTIFICATION

The Governor of Tripura is pleased to introduce new scheme namely "**MukhyamantriAntyodayaShradhanjaliYojana**" w.e.f. 1st April'2021 for providing financial assistance on the death of anAntoyadafamily member for performing funeral rites. The details of the scheme are as follows:-

1. **Name of The Scheme :**

   "**MukhyamantriAntyodayaShradhanjaliYojana.**

2. **Scope of Scheme:**

   One time financial grant would be provided on the death of family member of an Antyodaya family to perform the rites and rituals of the deceased person and to meet incidental expenses related to cremation/burial.

3. **Targeted Beneficiaries.**

   Financial assistance will be provided to the next of kin, or if not available, to the nearest family member of the deceased person ofAntyodaya family.

   (i) The applicant of all ages shall be eligible for getting the benefit under this scheme.
   (ii) The deceased person must be a resident of Tripura.

4. **Amount of grant:**

   Rs. 2000/- for performing last rites of one deceased person belonging to Antyodaya family asonetime Benefit

5. **Number of Beneficiaries to be covered under the scheme :**

   Every eligible member as informed by the AWC Worker/Helperwill be covered under the Scheme.

6. **Proposed Date for Implementing the Scheme :**

   1st April' 2021.

7. **Operational guidelines:**

Assistance under this scheme shall be sanctioned on the basis of written application in a plain paper, received from the next of kin, and if not available, from the nearest member of the family of the deceased person, along with a copy of Antyodaya Ration Card, showing name of the deceased person in the Antyodaya Ration Card. The application shall be made to the nearest Anganwadi centre and it shall be duly certified by the following:

Rural areas: Gaon Pradhan
Urban areas: respective Ward member
TTAADC areas: Chairperson, Village committee

The CDPOs of the respective areas will sanction the grant on the receipt of certified application along with AAY RC copy and direct the Anganwadi worker to provide one time ex gratia grant immediately in cash to the applicant from feeding contingency available with her. Since the financial assistance is to be provided at the time of cremation, the sending of application along with documents by AWW and its sanction by CDPO may be obtained through mobile apps also. The AWW shall keep a record of payment and will submit it to CDPOs office on the next working day. The amount shall be reimbursed by the CDPOs within next three working days to AWW and proper record shall be kept in CDPOs office of the original application and related documents.

8 .**Others :-**

The government may make any change in the scheme as and when required.

By order of the Governor

Secretary to the
Government of Tripura

Copy to:-

1. The Principal Secretary to the Chief Minister, Govt. of Tripura.
2. P.S.to all Ministers.....for information of the Hon'ble Ministers.
3. P.S. to Chief Secretary, Govt. of Tripura.
4. The Principal Secretary & Secretary/Secretary.....all Department.
5. The under Secretary, G.A.(C&C) Department, Govt. of Tripura.
6. The under Secretary Finance Department (Budget), Agartala.
7. The DM & Collector (All) .....
8. All DISEs.....
9. The CDPOs .....ICDS Project for information and compliance. They are requested to receive the application forms from eligible applicants along with required documents and arrange for enquiry regarding eligibility of the benefit and send a consolidated proposal to the Directorate (Pension Cell) in the enclosed format along with their recommendations in hard & soft copy to dsweagt@yahoo.com.CDPOs shall continue to accept new applications round the year and inform the Directorate if any existing beneficiary becomes in eligible or expires.
10. The BDOs (all).....
11. All Nagar Panchayat /AMC.....
12. ZillaParishad (all).....
13. PanchayatSamity (all).....
14. The Manager, Tripura Govt. Press BardwaliAgatala with request to arrange for publication of the Notification under reference in the next issue of Tripura Gazette and send 25(Twenty five) copies of the same to this Directorate.
15. All Department .....
16. All Branch Officer / Sections (in office) .....

Phone No : 0381-2326033
Fax : 0381-2323980
Email : dswe_agt@yahoo.com
cw.dswe@gmail.com

Government of Tripura
Directorate of Social Welfare & Social Education
Ujan Abhoynagar, Agartala, West Tripura, Pin - 799005

No.F.87(1-417)/CW/DSWE/2018 (V-1) /8157(27)/ Dated, Agartala, the 30/03/ 2020

MEMORANDUM

An administrative approval and expenditure sanction not exceeding to Rs.181.05 lakhs (Rupees one hundred eighty one lakh five thousand) only as grand-in-aid for the year 2019-20 as 2nd & final installment under "Child Protection Services (CPS) erstwhile ICPS" is hereby accorded in favour of different NGOs , as details given below -

Sl No	Purpose for which expenditure to be incurred.	Name of the NGO	Amount to be released (Rs in lakh)			Remarks
			Central Share	State Share	Total (4+5)	
1	*2*	*3*	*4*	*5*	*6*	*7*
1	ALOR DISHARI Children Home situated at Udaipur, Gomati District	**Ramkrishna Adarsha Yoga Sadhan Ashram**	10.95	0.00	10.95	(As per Annexure-A)
2	Observation Home situated at Udaipur, Gomati District	**Udaipur Bignan o Sanskriti Mancha**	9.80	0.00	9.80	(As per Annexure-B)
3	Swabalamban Rehabilitation Centre (Children Home for special needs) situated at Gokulnagar, Sepahijala District	**Abhoy Mission**	16.21	0.00	16.21	(As per Annexure-C)
4	Unmesh Children's Home for Boys (Sepahijala District)	**Voluntary Health Association of Tripura**	16.58	0.00	16.58	(As per Annexure-E)
5	Anwesha Children Home for Girls situated at Ushabazar (West Tripura)	**Voluntary Health Association of Tripura**	16.58	0.00	16.58	(As per Annexure-E-1)
6	Anwesha Open Shelter for girls situated at Ushabazar (West Tripura)	**Voluntary Health Association of Tripura**	9.21	0.00	9.21	(As per Annexure-E-2)

7	Anwesha Open Shelter for boys situated at Ushabazar (West Tripura)	**Voluntary Health Association of Tripura**	8.51	0.00	8.51	(As per Annexure-E-3)
8	1 (one) No Nutannagar Sishu Greha (Specialized Adoption Agency) situated at Nutannagar (West Tripura)	**Tripura Council for Child Welfare**	6.71	0.00	6.71	(As per Annexure-F)
9	1 (one) No Agartala Sishu Greha (Specialized Adoption Agency) situated at Agartala (West Tripura)	**Tripura Council for Child Welfare**	6.71	0.00	6.71	(As per Annexure-F-1)
10	1 (one) No Udaipur Sishu Greha (Specialized Adoption Agency) situated at Udaipur (Gomati District)	**Tripura Council for Child Welfare**	6.83	0.00	6.83	(As per Annexure-F-2)
11	Jawaharlal Nehru Balika Niwas (Children Home for Girls) situated at Sinaihani, West Tripura District	**Harijan Sevak Sangh**	14.12	0.00	14.12	(As per Annexure-G)
12	Nilajyoti Sevashram (a Children Home for Boys) situated at Durjoynagar, West Tripura District	**Tripura Rural Development Society**	10.70	0.00	10.70	(As per Annexure-H)
13	Santi Kali Children Home for Tribal Boys situated at Chachu Bazar, West Tripura District	**Sri Sri Santi Kali Seva Ashram**	13.50	0.00	13.50	(As per Annexure-I)
14	Ramakrishna Abhedananda Mission Children Home for Boys situated at Kumarghat, Unakoti District	**Ramakrishna Abhedananda Mission**	12.02	0.00	12.02	(As per Annexure-J)
15	Sanghadip Children Home situated at Dharmanagar, North Tripura District	**Sanghadip**	12.58	0.00	12.58	(As per Annexure-K)

16	Observation Home situated at Dharmanagar, North Tripura District	**Ananya Social Welfare & Advancement Society**	10.04	0.00	10.04	(As per Annexure-L)
		Total	**181.05**	**0.00**	**181.05**	

The concerned NGOs will incur the expenditure as per ANNEXURE, as specified against each, observing all formalities following terms & condition laid down in the Child Protection Services (CPS) erstwhile ICPS and statutory provision of Juvenile Justice Act.

The expenditure on this account shall be debitable from the fund sanctioned by Government of India as Central Share.

All the NGO is hereby asked to ensure the regular update on TrackChild Portal, police verification of CCI staff, improvement in sanitation and hygine in CCI under "Swacchata Action Plan", regularly updated in MIS & AADHAR registration of child beneficiaries should done in accordance with the UIDAI notification for the Scheme.

The concerned NGOs is hereby requested to incure expenditure of the Government grants through cheque/ draft or bank transaction of Rs.500/- or above and submit in original the Utilization Certificate for the grant alongwith detailed audited expenditure statement certified by any Chartered Accountant resistered by Comptroller and Auditor General of India to the Directorate of Social Welfare & Social Education and concerned office of the DISE/PO within two months of the sanction.

The concern NGO is hereby asked to add their own share with this allocated grant as per norms in force.

(Ghuncha Sanobar, IAS)
Member Secretary
State Child Protection Society, Tripura
(Director, Social Welfare & Social Education, Tripura)

Copy to-

1 The Chairperson (Hon'ble Minister, SW&SE, Tripura), Governing Body of State Child Protection Society - for kind information.
2 The Chairperson (Special Secretary, SW&SE, Tripura), Executive Committee of State Child Protection Society - for kind information.
3 The Under Secretary, Government of India, Ministry of Women and Child Development, Shastri Bhawan, New Delhi, Pin-110001 - for kind information.
4 The Accountant General (Audit), Tripura, Agartala - for kind information.
5 The Under Secretary, Finance Department (Budget Branch), Government of Tripura - for information.
6 The Secretary, Tripura State Commission for Protection of Child Rights (TCPCR), Gurkhabasti, Agartala - for information.

7 The DISE, Gomati District/ Sepahijala District/ West Tripura District/ Unakoti District/ North Tripura District - for information & necessary action.The DISE is also asked to strictly monitor Government fund flow utilization & to inform the concerned District Child Protection Unit, District Inspection Committee, Juvenile Justice Board & Child Welfare Committee.

8 The DDO, DSW & SE - for information & necessary action.

9 The Branch Officer, Planning & Budget/ Audit Section , Directorate of Social Welfare & Social Education - for information & necessary action.

10 The Cashier, DSW & SE - for necessary action. Cheque will be issued from SCPS, Tripura Account.

11 The President/ Secretary, Ramkrishna Adarsha Yoga Sadhan Ashram/ Udaipur Bignan o Sangscriti Manch/ Abhoy Mission/ Voluntary Health Association of Tripura/ Tripura Council for Child Welfare/ Hajan Sevak Sangh/ Nilajyoti Sevashram/ Sri Sri Santi Kali Seva Ashram/ Ramakrishna Abhedananda Mission/ Sanghadip/ Ananya Social Welfare & Advancement Society - for information & necessary action.

(Ghuncha Sanobar, IAS)
Member Secretary
State Child Protection Society, Tripura
(Director, Social Welfare & Social Education, Tripura)

ANNEXURE – A

Allotment of Child Protection Services (CPS) erstwhile ICPS grant Central Share for ALOR DISHARI Children Home at Udaipur, Gomati District run by Ramkrishna Adarsha Yoga Sadhan Ashram (NGO) for the year 2019-20 as 2nd & final installment

Sl. No.	Item	**Amount (Rs in lakh)**
	RECURRING	
1	Salary of staff [as per Child Protection Services (CPS) erstwhile ICPS guidelines] payment should be through cheque or bank account. Salary for one Superintendent, two House Mother, one Store-keeper cum Accountant, one Cook, one Helper, one House Keeper	**4.35**
2	Maintenance @Rs.2,160/- per child per month (for food Rs.1,480/- and Rs.680/- for clothing, medicine, soap, oil etc)	**4.66**
3	Bedding including mattress, bed sheets, pillow, blanket, dari/mats etc @Rs.800/- per child/ per year.	**0.14**
4	Water & Electricity @Rs.10,000/- per month (subject to actual)	**0.27**
5	Transportation (Transportation cost will cover travel expenses for children for the purpose of vocational training/ schools, field visits, enquiries and production of the child before CWCs, JJBs etc. Priority should be given to the special needs children for meeting their transportation requirements.)	**0.36**
6	Miscellaneous for outgoings, magazine/ books for library, sports equipments etc. maximum @Rs.5,000/- per month (subject to actuals)	**0.27**
7	Contingencies (including internet connection, services of watchman and/ or data entry operators)	**0.90**
	TOTAL	**10.95**

The concern NGO is hereby asked to add their own share with this allocated grant as per norms in force.

(Ghuncha Sanobar, IAS)
Member Secretary
State Child Protection Society, Tripura
(Director, Social Welfare & Social Education, Tripura)

ANNEXURE – B

Allotment of Child Protection Services (CPS) erstwhile ICPS grant Central Share for Observation Home at Udaipur, Gomati District run by Udaipur Bignan o Sangscriti Manch (NGO) for the year 2019-20 as 2nd & final installment

Sl. No.	Item	**Amount (Rs in lakh)**
	RECURRING	
1	Maintenance @Rs.2,160/- per child per month (for food Rs.1,480/- and Rs.680/- for clothing, medicine, soap, oil etc)	**0.23**
2	Bedding including mattress, bed sheets, pillow, blanket, dari/mats etc @Rs.800/- per child/ per year.	**0.02**
3	Transportation (Transportation cost will cover travel expenses for children for the purpose of vocational training/ schools, field visits, enquiries and production of the child before CWCs, JJBs etc. Priority should given to the special needs children for meeting their transportation requirements.)	**0.22**
4	Miscellaneous for outgoings, magazine/ books for library, sports equipments etc. maximum @Rs.5,000/- per month (subject to actuals)	**0.11**
5	Water and electricity charges maximum @Rs.10,000/- per month (subject to actuals)	**0.45**
6	Contingencies (including internet connection, services of watchman and/ or data entry operators)	**0.43**
7	Salary of staff [as per Child Protection Services (CPS) erstwhile ICPS guidelines] payment should be made through cheque or bank account. Salary for one Superintendent, one Counselor, one Probation Officer, two House Mother/ House Father, one paramedical staff, one Store-keeper cum Accountant, one Cook, one Helper and one Housekeeper is calculated.	**6.72**
8	Rent @ Rs. 30,000/- per month	**1.62**
	TOTAL	**9.80**

The concern NGO is hereby asked to add their own share with this allocated grant as per norms in force.

(Ghuncha Sanobar, IAS)
Member Secretary
State Child Protection Society, Tripura
(Director, Social Welfare & Social Education, Tripura)

ANNEXURE – C

Allotment of Child Protection Services (CPS) erstwhile ICPS grant Central Share for Swabalamban Rehabilitation Centre (Children Home for special needs) run by Abhoy Mission (NGO) for the year 2019-20 as 2nd & final installment

Sl. No.	Item	**Amount (Rs in lakh)**
	RECURRING	
1	Maintenance @Rs.2,160/- per child per month (for food Rs.1,480/- and Rs.680/- for clothing, medicine, soap, oil etc)	**5.48**
2	Bedding including mattress, bed sheets, pillow, blanket, dari/mats etc @Rs.800/- per child/ per year.	**0.18**
3	Transportation (Transportation cost will cover travel expenses for children for the purpose of vocational training/ schools, field visits, enquiries and production of the child before CWCs, JJBs etc. Priority should given to the special needs children for meeting their transportation requirements.)	**0.36**
4	Miscellaneous for outgoings, magazine/ books for library, sports equipments etc. maximum @Rs.5,000/- per month (subject to actuals)	**0.27**
5	Water and electricity charges maximum @Rs.10,000/- per month (subject to actuals)	**0.45**
6	Contingencies (including internet connection, services of watchman and/ or data entry operators)	**0.90**
7	Salary of staff [as per Child Protection Services (CPS) erstwhile ICPS guidelines] payment should be made through cheque or bank account. Salary for one Superintendent, one Counselor, one Child Welfare Officer, two House Mother, one paramedical staff, one Store-keeper cum Accountant, one Cook, one Helper, one Housekeeper, one Nurse (female), one no Care taker cum Vocational Instructor is calculated.	**7.67**
8	Additional grant @Rs.400/- per child per month to cover expenses on nutritious food	**0.90**
	TOTAL	**16.21**

The NGO is hereby asked to add their own share with this allocated grant as per norms in force.

(Ghuncha Sanobar, IAS)
Member Secretary
State Child Protection Society, Tripura
(Director, Social Welfare & Social Education, Tripura)

ANNEXURE – E

Allotment of Child Protection Services (CPS) erstwhile ICPS grant Central Share for Unmesh Children Home for Boys at Sepahijala District run by Voluntary Health Association of Tripura (NGO) for the year 2019-20 as 1st final installment

Sl. No.	Item	Amount (Rs in lakh)
	RECURRING	
1	Maintenance @Rs.2,160/- per child per month (for food Rs.1,480/- and Rs.680/- for clothing, medicine, soap, oil etc)	**5.72**
2	Bedding including mattress, bed sheets, pillow, blanket, dari/mats etc @Rs.800/- per child/ per year.	**0.18**
3	Rent @ Rs.35,000/- per month	**1.89**
4	Transportation (Transportation cost will cover travel expenses for children for the purpose of vocational training/ schools, field visits, enquiries and production of the child before CWCs, JJBs etc. Priority should be given to the special needs children for meeting their transportation requirements.)	**0.36**
5	Miscellaneous for outgoings, magazine/ books for library, sports equipments etc. maximum @Rs.5,000/- per month (subject to actuals)	**0.27**
6	Water and electricity charges maximum @Rs.10,000/- per month (subject to actuals)	**0.54**
7	Contingencies (including internet connection, services of watchman and/ or data entry operators)	**0.90**
8	Salary of staff [as per Child Protection Services (CPS) erstwhile ICPS guidelines] payment should be through cheque or bank account. Salary for one Superintendent, one Counselor, one Child Welfare Officer, two House Mother, one Paramedical Staff, one Store-keeper cum Accountant, one Cook, one Helper, one House Keeper is calculated.	**6.72**
	TOTAL	**16.58**

The concern NGO is hereby asked to add their own share with this allocated grant as per norms in force.

(Ghuncha Sanobar, IAS)
Member Secretary
State Child Protection Society, Tripura
(Director, Social Welfare & Social Education, Tripura)

ANNEXURE – E-1

Allotment of Child Protection Services (CPS) erstwhile ICPS grant Central Share for Anwesha Children Home for Girls at West Tripura District run by Voluntary Health Association of Tripura (NGO) for the year 2019-20 2nd & final installment

Sl. No.	Item	Amount (Rs in lakh)
	RECURRING	
1	Maintenance @Rs.2,160/- per child per month (for food Rs.1,480/- and Rs.680/- for clothing, medicine, soap, oil etc)	**5.72**
2	Bedding including mattress, bed sheets, pillow, blanket, dari/mats etc @Rs.800/- per child/ per year.	**0.18**
3	Rent @ Rs.35,000/- per month	**1.89**
4	Transportation (Transportation cost will cover travel expenses for children for the purpose of vocational training/ schools, field visits, enquiries and production of the child before CWCs, JJBs etc. Priority should be given to the special needs children for meeting their transportation requirements.)	**0.36**
5	Miscellaneous for outgoings, magazine/ books for library, sports equipments etc. maximum @Rs.5,000/- per month (subject to actuals)	**0.27**
6	Water and electricity charges maximum @Rs.10,000/- per month (subject to actuals)	**0.54**
7	Contingencies (including internet connection, services of watchman and/ or data entry operators)	**0.90**
8	Salary of staff [as per Child Protection Services (CPS) erstwhile ICPS guidelines] payment should be through cheque or bank account. Salary for one Superintendent, one Counselor, one Child Welfare Officer, two House Mother, one Paramedical Staff, one Store-keeper cum Accountant, one Cook, one Helper, one House Keeper is calculated.	**6.72**
	TOTAL	**16.58**

The concern NGO is hereby asked to add their own share with this allocated grant as per norms in force.

(Ghuncha Sanobar, IAS)
Member Secretary
State Child Protection Society, Tripura
(Director, Social Welfare & Social Education, Tripura)

ANNEXURE – E-2

Allotment of Child Protection Services (CPS) erstwhile ICPS grant Central Share for Anwesha Child Protection Centre for Girl's (Open Shelter) at West Tripura District run by Voluntary Health Association of Tripura (NGO) for the year 2019-20 as 2nd & final installment

Sl. No.	Item	Amount (Rs in lakh)
	RECURRING	
1	Salary of staff [as per Child Protection Services (CPS) erstwhile ICPS guidelines] payment should be through cheque or bank account. Salary for one Project Coordinator cum Counselor, One Social Worker, Two Care Givers cum Bridge Course Educators, Three Outreach Workers, One Helper for Cleaning and Cooking purposes is calculated.	**4.29**
2	Maintenance @Rs.2,160/- per child per month (for food Rs.1,480/- and Rs.680/- for clothing, medicine, soap, oil etc)	**2.92**
3	Water and Electricity charges Rs.2,600/- per month (subject to actuals)	**0.14**
4	Contingency (Postage, stationary, telephone, photocopy etc.) maximum @Rs.2,600/- per month (Subject to actuals)	**0.14**
5	Miscellaneous for outings, books for library, play materials, educational/ sports equipments etc. maximum @Rs.4,000/- per month (subject to actuals)	**0.22**
6	Transportation (Transportation cost will cover travel expenses for children for the purpose of vocational training/ schools, field visits, enquiries and production of the child before CWCs, JJBs etc. Priority should be given to the special needs children for meeting their transportation requirements.)	**0.14**
7	Rent for Open Shelters @Rs. 17,500/- per month (Subject to actuals)	**0.95**
8	Rent for three Contact Points @Rs. 2,600/- per month (Subject to actuals)	**0.41**
	TOTAL	**9.21**

The concern NGO is hereby asked to add their own share with this allocated grant as per norms in force.

(Ghuncha Sanobar, IAS)
Member Secretary
State Child Protection Society, Tripura
(Director, Social Welfare & Social Education, Tripura)

ANNEXURE – E-3

Allotment of Child Protection Services (CPS) erstwhile ICPS grant Central Share for Anwesha Child Protection Centre for Boys (Open Shelter) at West Tripura District run by Voluntary Health Association of Tripura (NGO) for the year 2019-20 as 2nd & final installment

Sl. No.	Item	Amount (Rs in lakh)
	RECURRING	
1	Salary of staff [as per Child Protection Services (CPS) erstwhile ICPS guidelines] payment should be through cheque or bank account. Salary for one no Project Coordinator cum Counselor, One Social Worker, Two Care Givers cum Bridge Course Educators, Three Outreach Workers, One Helper is calculated.	**4.29**
2	Maintenance @Rs.2,160/- per child per month (for food Rs.1,480/- and Rs.680/- for clothing, medicine, soap, oil etc)	**2.22**
3	Water and Electricity charges Rs.2,600/- per month (subject to actuals)	**0.14**
4	Contingency (Postage, stationary, telephone, photocopy etc.) maximum @Rs.2,600/- per month (Subject to actuals)	**0.14**
5	Miscellaneous for outings, books for library, play materials, educational/ sports equipments etc. maximum @Rs.4,000/- per month (subject to actuals)	**0.22**
6	Transportation (Transportation cost will cover travel expenses for children for the purpose of vocational training/ schools, field visits, enquiries and production of the child before CWCs, JJBs etc. Priority should be given to the special needs children for meeting their transportation requirements.)	**0.14**
7	Rent for Open Shelters @Rs. 17,500/- per month (Subject to actuals)	**0.95**
8	Rent for three Contact Points @Rs. 2,600/- per month (Subject to actuals)	**0.41**
	TOTAL	**8.51**

The concern NGO is hereby asked to add their own share with this allocated grant as per norms in force.

(Ghuncha Sanobar, IAS)
Member Secretary
State Child Protection Society, Tripura
(Director, Social Welfare & Social Education, Tripura)

ANNEXURE – F

Allotment of Child Protection Services (CPS) erstwhile ICPS grant Central Share for NUTANNAGAR Shishu Greha (Specialized Adoption Agency) run by Tripura Council for Child Welfare (NGO) for the year 2019-20 as 2nd & final installment

Sl. No.	Item	**Amount (Rs in lakh)**
	RECURRING	
1	Salary of staff [as per Child Protection Services (CPS) erstwhile ICPS guidelines] payment should be through cheque or bank account. Salary for one Manager/ Coordinator, one Social Worker cum Early Childhood Educator, one Nurse, one Doctor (Part time), six Ayas, one Chowkider is calculated.	**4.86**
2	Maintenance grant for @Rs.2,160/- per child per month to cover expenses on food, milk powder, feeding bottles, clothing, soap, oil, medicines, play materials etc.	**0.94**
3	Rent (Up to Rs.12, 000/- per month) Subject to actuals	**0.64**
4	Contingency (Water, electricity, telephone, stationary, photocopy, postage etc.) Maximum @Rs.5,000/- Per month (Subject to actuals)	**0.27**
	TOTAL	**6.71**

The concern NGO is hereby asked to add their own share with this allocated grant as per norms in force.

(Ghuncha Sanobar, IAS)
Member Secretary
State Child Protection Society, Tripura
(Director, Social Welfare & Social Education, Tripura)

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GOVERNMENT OF TRIPURA
SOCIAL WELFARE AND SOCIAL EDUCATION DEPARTMENT

Dated, Agartala, the 9th January, 2019

OFFICE MEMORANDUM

Subject: Guidelines and Modalities for Effecting Reservation for the Persons with Benchmark Disabilities – reg.

With enactment of 'THE RIGHTS OF PERSONS WITH DISABILITIES ACT, 2016' from 19th April, 2017 and notification of 'THE RIGHTS OF PERSONS WITH DISABILITIES RULES, 2017 on 15th June, 2017, the following instructions are issued in line with the provisions made therein regarding reservation for persons with Benchmark Disabilities, as defined under Section 2(r) of the Act against the posts and services of the State Government.

2. **QUANTUM OF RESERVATION**

2.1 In case of direct recruitment, four per cent of the total number of vacancies to be filled up by direct recruitment, in the cadre strength in each group of posts i.e. Groups A,B, C and D shall be reserved **horizontally** for persons with benchmark disabilities.

2.2 Against the posts identified[1] for each disabilities of which, one per cent each shall be reserved for persons with benchmark disabilities under clauses (a), (b) and (c) and one per cent, under clauses (d) and (e), unless excluded under the provisions of Para 3 hereunder.

(a) blindness and low vision;
(b) deaf and hard of hearing;
(c) locomotor disability including cerebral palsy, leprosy cured, dwarfism, acid attack victims and muscular dystrophy;
(d) autism, intellectual disability, specific learning disability and mental illness;
(e) multiple disabilities from amongst persons under clauses (a) to (d) including deaf- blindness.

3. **EXEMPTION FROM RESERVATION**

If any Department in the State Government considers it necessary to exempt any establishment or any cadre or cadres fully or partly from the provisions of reservation for persons with benchmark disabilities, it shall make a reference to the Department of Social Welfare & Social Education giving full justification for the proposal, who having regard to the type of work carried out in any Government establishment under the State of Tripura by notification and subject to such condition, if any, as may be specified in the notification, in consultation with the Commissioner for persons with Disabilities (CPD) may exempt any Establishment or any cadre(s) fully or partly from the provisions of reservation for persons with benchmark disabilities.

[1] State Government will use list of posts identified for such reservation. The revised list of identified posts as per the new Act is being notified by GA (P&T) Deptt.

4. ADJUSTMENT AGAINST UNRESERVED VACANCIES

4.1 In the category of posts which are identified suitable for persons with benchmark disabilities, a person with benchmark disability cannot be denied the right to compete for appointment by direct recruitment against an unreserved vacancy. Thus a person with benchmark disability can be appointed by direct recruitment against vacancy not specifically reserved for the persons with benchmark disability provided the post is identified suitable for persons with benchmark disability of the relevant category.

4.2 Persons with benchmark disabilities selected without relaxed standards along with other candidates will not be adjusted against the reserved share of vacancies. The reserved vacancies will be filled up separately from amongst the eligible candidates with benchmark disabilities which will thus comprise of candidates with benchmark disabilities who are lower in merit than the last candidate in merit list but otherwise found suitable for appointment, if necessary by relaxed standards.

5. CERTIFICATE OF DISABILITY

A person who wants to avail the benefit of reservation will have to submit a certificate of disability issued by a Competent Authority[2]. Such certificate in the event of selection of such person for any post, will be subject to such verification/re-verification as may be decided by the competent authority.

6. COMPUTATION OF NUMBER OF POSTS TO BE RESERVED

6.1 The number of posts to be reserved for persons with benchmark disabilities in case of Group C & D posts shall be computed on the basis of total number of vacancies in the cadre strength of Group C & D posts, in the establishment, although the recruitment of the persons with benchmark disabilities would only be against the category of posts identified suitable for them. The number of vacancies to be reserved for the persons with benchmark disabilities in case of direct recruitment to Group C posts in an establishment shall be computed by taking into account the total number of vacancies arising in Group C posts for being filled by direct recruitment in a recruitment year both in the identified and non-identified category of posts under the establishment. Since reservation, wherever applicable, for persons with Benchmark Disabilities is provided computing total number of vacancies in the cadre strength in identified category of posts as well as unidentified category of posts, it may be possible that number of persons appointed by reservation in an identified category of posts may exceed four per cent.

6.2 Reservation for persons with benchmark disabilities in Group A or Group B posts will be computed on the basis of total number of vacancies occurring in direct recruitment quota in the cadre in all the Group A posts or Group B posts respectively and the computation of total vacancies shall include vacancies arising in the identified and non-identified category of posts.

6.3 Thus the total number of posts to be reserved would be 4% of the total vacancies in any given year including both identified and non-identified posts plus backlog vacancies in the group if any. This should be clearly notified while bringing out the advertisement for recruitment. It the number of posts so computed comes to a fraction then it shall be rounded off to the next higher integer.

[2] Competent Authorities are those notified by the State Government for issue of disability certificate in the State like State Disability Board and District Disability boards.

7. **EFFECTING RESERVATION- MAINTENANCE OF ROSTERS:**

7.1 Every Government establishment shall maintain group-wise a separate 100 point vacancy based reservation roster register in the format given in Annexure I for determining / effecting reservation for the persons with Benchmark Disabilities – one each for Group A, Group B, Group C and Group D posts filled by direct recruitment. This roster would be separate and in-addition to the reservation roster to be maintained for reservation of SCs/STs as per the Tripura Scheduled Castes and Scheduled Tribes Reservation Act, 1991.

7.2 Each register shall have cycles of 100 points and each cycle of 100 points shall be divided into four blocks, comprising the following points.

1st Block – point No. 01 to point No. 25
2nd Block point No. 26 to point No. 50
3rd Block – point No. 51 to point No. 75
4th Block – point No. 76 to point No. 100

7.3 Points 1, 26, 51 and 76 of the roster shall be earmarked for persons with benchmark disabilities-one point each for four respective categories of disabilities. The Administrative department shall ensure that vacancies identified at Sl.No. 1, 26, 51 and 76 are earmarked for the respective categories of the persons with benchmark disabilities. However, the Administrative department shall decide the placement of the selected candidate in the roster register. The circumstances in which this shall be done in explained in the paragraphs 7.4 to 7.6 below.

7.4 All the vacancies arising irrespective of vacancies reserved for persons with Benchmark Disabilities shall be entered in the relevant roster. If the vacancy falling at point No.1 is not identified for the person with Benchmark Disability or the Administrative department considers it desirable not to fill it up by persons with benchmark disabilities[3] or it is not possible to fill up that post by the Persons with Benchmark Disabilities for any other reason, one of the vacancies falling at any of the points from 2 to 25 shall be treated as reserved for the persons with benchmark disability and filled as such.

7.5 Likewise, a vacancy falling at any of the points from 26 to 50 or from 51 to 75 or from 76 to 100 shall have to be filled by the persons with Benchmark Disabilities. The purpose of keeping points 1,26,51 and 76 as reserved is to fill up the first available suitable vacancy.

7.6 There is a possibility that none of the vacancies from 1 to 25 is suitable for any category of the persons with benchmark disability. In that case two vacancies from 26 to 50 shall be filled as reserved for persons with benchmark disabilities. If the vacancies from 26 to 50 are also not suitable for any category, three vacancies shall be filled as reserved from the third block containing points from 51 to 75. This means that if no vacancy can be reserved in a particular block, it shall be carried into the next block.

7.7 After all the 100 points of the roster are covered, a fresh cycle of 100 points shall start.

7.8 If the number of vacancies in a year is such as to cover only one block (say 25 vacancies) or two (say 50 vacancies), the category of the persons with benchmark disabilities should be accommodated as

[3] The only condition when this will be applicable will be when the post falling at point no. 1 is an exempted post for persons with disabilities, with requisite approval from the State Commissioner for Persons with Disabilities.

per the roster points. However, in case , the said vacancy is not identified for the respective category ,the Administrative department in consultation with the State Commissioner for Persons with Disabilities shall decide the category on the basis of the nature of the post, the level of representation of the specific disabled category in the concerned grade/post etc.

8. **INTER SE EXCHANGE AND CARRY FORWARD OF RESERVATION IN CASE OF DIRECT RECRUITMENT:**

8.1 Where in any recruitment year any vacancy cannot be filled up due to non availability of a suitable person with benchmark disability or for any other sufficient reason, such vacancy shall be carried forward in the succeeding recruitment year and if in the succeeding recruitment year also suitable person with benchmark disability is not available, it may first be filled by interchange among the following four categories of disabilities, at one percent each to each category.

A. Blindness and low vision
B. deaf and hard hearing
C. locomotor disability including cerebral palsy, leprosy cured, dwarfism, acid attack victims and muscular dystrophy.
D. autism, intellectual disability, specific learning disability and mental illness; &
multiple, disabilities from amongst persons under clauses (a) to (d) including deaf-blindness.

8.2 Only when there is no person with benchmark disability available for the post in that year, the employer shall fill up the vacancy by appointment of a person other than a person with benchmark disability.

8.3 If the nature of vacancies in an establishment is such that a given category of person cannot be employed, the vacancies may be interchanged with the prior approval of Department of Social Welfare & Social Education, among the above mentioned four categories.

8.4 If any vacancy reserved for any category of benchmark disability cannot be filled due to non-availability of a suitable person with that benchmark disability or for any other sufficient reason, such vacancy shall be carried forward as a backlog reserved vacancy to the subsequent recruitment year.

8.5 In the subsequent recruitment year the 'backlog reserved vacancy' shall be treated as reserved for the category of disability for which it was kept reserved in the initial year of recruitment. However, if a suitable person with that benchmark disability is not available, it may be filled by interchange among the categories of benchmark disabilities identified for reservation. In case no suitable person with benchmark disability is available for filling up the vacancy in the succeeding year also, the employer may fill up the vacancy by a person other than a person with benchmark disability. If the vacancy is filled by a person with benchmark disability of the category for which it was reserved or by a person of other category of benchmark disability by inter se exchange in the subsequent recruitment year, it will be treated to have been filled by reservation. But if the vacancy is filled by a person other than a person with benchmark disability in the subsequent recruitment year, reservation shall be carried forward for a further period upto two recruitment years whereafter the reservation shall lapse. In these two subsequent years, if situation so arises, the procedure for filling up the reserved vacancy shall be the same as followed in the first subsequent recruitment year.

8.6 The Government establishment shall interchange vacancies only if due process of recruitment viz. proper advertisement of vacancy to fill up the vacancies reserved for persons with benchmark disabilities has been complied with.[4]

8.7 In order to ensure that cases of lapse of reservation are kept to the minimum, any recruitment of the persons with benchmark disabilities candidates shall first be counted against the additional quota brought forward from previous years, if any, in their chronological order. If candidates are not available for all the vacancies, the older carried forward reservation would be filled first and the current vacancies would be carried forward if not filled up provided that in every recruitment, the number of vacancies reserved for Persons with Benchmark Disabilities including carried forward vacancies will be announced beforehand, for the information of all aspirants.

9. HORIZONTALITY OF RESERVATIONS FOR PERSONS WITH BENCHMARK DISABILITIES:

9.1 Reservation for backward classes of citizens (SCs and STs) is called vertical reservation and the reservation for categories such as persons with benchmark disabilities and ex-servicemen is called horizontal reservation. Horizontal reservation cuts across vertical reservation (in what is called interlocking reservation) and persons selected against the quota for persons with benchmark disabilities have to be placed in the appropriate category viz. SC/ST/Unreserved depending upon the category to which they belong in the roster meant for reservation of SCs/STs. To illustrate, if in a given year there are two vacancies reserved for the persons with benchmark disabilities and out of two persons with benchmark disabilities appointed, one belongs to Scheduled Caste and the other to Unreserved category, then the SC candidate with benchmark disability shall be adjusted against the SC point in the reservation roster and the Unreserved candidate with benchmark disability against unreserved point in the relevant reservation roster. In case none of the vacancies falls on point reserved for the SCs, the candidate under benchmark disability belonging to SC shall be adjusted in future against the next available vacancy reserved for SCs.

9.2 Since the persons with benchmark disabilities have to be placed in the appropriate category viz. SC/ST/Unreserved in the roster meant for reservation of SCs/STs , the application form for the post should require the candidates applying under the quota reserved for persons with benchmark disabilities to indicate whether they belong to SC/ST or unreserved. Thus, reservation for persons with benchmark disabilities is horizontal.[5]

10. CERTIFICATE BY REQUSITIONING AUTHORITY

10.1 In order to ensure proper implementation of the provisions of reservation for persons with benchmark disabilities, the requisitioning authority while sending the requisition to the recruiting agency or authority as the case may be for filling up of posts shall furnish the following certificate to the recruiting agency.

"It is certified that the requirements of the "THE RIGHTS OF PERSONS WITH DISABLIITIES ACT. 2016, which has become effective from 19th day of April 2017 and the policy relating to reservation for persons with benchmark disabilities has been taken care of while sending this requisition. The vacancies

[4] The interchange may be made only after the conditions in para 8.5 are fulfilled and the whole process i.e due advertisement; selection procedure i.e written examination and oral examination, if applicable; compilation of merit lists and preparation of recommendation list for issue of offer of appointment category-wise, are all complete.

[5] The prescribed application form for candidates, format of which should be indicated in the advertisement for recruitment, should clearly show *inter alia* columns seeking information viz. as to whether he wishes to avail reservation facility for PwDs and his caste category i.e whether he is SC, ST or General candidate.

reported in this requisition fall at points no.....of cycle no.....of 100 point reservation roster out of which.....number of vacancies are reserved for persons with benchmark disabilities."

10.2 At the time of initial appointment against a vacancy reserved for persons with benchmark disabilities, the appointing authority shall ensure that the candidate is eligible to get the benefit of reservation.

11. **RELAXATION OF STANDARD OF SUITABILITY**

11.1. If sufficient number of candidates with benchmark disabilities candidates is not available on the basis of the general standard to fill all the vacancies reserved for them, candidates belonging to this category may be selected on relaxed standard to fill up the remaining vacancies reserved for them provided they are not found unfit for such post or posts. However, this provision shall not be used to allow any relaxation in the eligibility criteria laid down for the issuance of certificate of disability. The quantum and nature of relaxation[6] should be decided in advance and notified while making advertisement for direct recruitment.

11.2 Same relaxed standard should be applied for all the candidates with Benchmark Disabilities whether they belong to Unreserved /SC/ST. No further relaxation of standards will be considered or admissible in favour of any candidate from any category whatsoever.

12. **PREPARATION OF MERIT LISTS FOR EFFECTING RESERVATION FOR PWDs.**

12.1 At the time of preparation of merit list, following types of merit lists should be prepared as follows:-

(a) Combined merit list including all categories i.e Gen., ST & SC
(b) Merit list for SC candidates
(c) Merit list for ST Candidates
(d) 4 Merit lists of Persons with Disabilities for each of the four categories as mentioned in para 2.2

12.2 From the combined merit list, the posts of unreserved category candidates as per their merit shall be filled up. In case a person with benchmark disability is selected without relaxed standards along with other candidates, he will not be adjusted against reserved share of PwD vacancies, provided that the post is identified suitable for PwD of relevant category. There after posts reserved for SC and ST candidates would be filled up.

12.3 The 1st candidate in order of merit, after accounting for those adjusted on the basis of merit, from the each of the four category of disability would be selected and the last candidate from the merit list of the concerned category i.e UR, SC or ST depending on the actual category of PwD candidate, replaced. This would be repeated till 4% reservation, 1% from each of the 4 categories, is fulfilled.

12.4 If the number of vacancies in an year are less than 100, say 25 or 50, the reservation for PwDs would be effected following the above procedure and category of persons with benchmark disabilities should be accommodated as per roster points. However, if the said vacancy is not identified for respective category, the Administrative department shall, in consultation with State Commissioner for

[6] The nature and quantum of relaxation would be applicable only to the criteria viz. upper limit of age and qualifying marks obtained in the selection examination (s).

Persons with Disabilities, decide the category on the basis of nature of posts, the level of representation of specific disabled category in the concerned grade/posts. Illustrations are given at **Annexure II.**

13. **MEDICAL EXAMINATION**

As per Rue 10 of the Fundamental Rules, every new entrant to Government Services on initial appointment is required to produce a medical certificate of fitness issued by a competent authority. In case of medical examination of a person with benchmark disabilities for appointment to a post identified as suitable to be held by a person suffering from a particular kind of disability, the concerned Medical Officer or Board shall be informed beforehand that the post is identified suitable to be held by persons with benchmark disabilities of the relevant category and the candidate shall then be examined medically keeping this fact in view.

14. **ANNUAL REPORTS REGARDING REPRESENTATION OF PERSONS WITH BENCHMARK DISABILITIES:**

The Department shall continue to upload data on representation of Persons with Benchmark Disabilities along with data on SCs, STs in respect of posts/services under the State Government on the URL i.e. https://socialwelfare.tripura.gov.in/ as on 1st January of every year. All Departments would provided respective usercode and password with guidelines for operating the URL.

15. **MAINTANANCE OF REGISTER OF COMPLAINTS BY THE GOVERNMENT ESTABLISHMENT:**

15.1 Every Government establishment shall appoint a senior officer of the Department as the Grievance Redressal Officer.

15.2 The Grievance Redressal Officer shall maintain a register of complaints of persons with disabilities with the following particulars, namely :-

(a) date of complaint
(b) name of complainant
© the name of the establishment or person against whom the complaint is made:
(d) gist of the complaint
(e) date of disposal by the Grievance Redressal Officer and
(f) any other information.

15.3 Any person aggrieved with any matter relating to discrimination in employment against any person with disability may file a complaint with the Grievance Redressal Officer of the respective Government establishment.

15.4 Every complaint filed as per para 14.3 above, shall be inquired into within two months of its registration and outcome thereof or action taken thereon shall be communicated to the complainant / person with Benchmark Disability.

16. All the Departments are requested to bring the above instructions to the notice of all appointing authorities under their control.

(Chaitanya Murti)
Spl.Secretary to the Govt. of Tripura

To,

(i) The Addl. Chief Secretary to the Hon'ble Governor,Tripura
(ii) Principal Secretary to the Chief Minister
(iii) PPS to the Chief Secretary, Tripura
(iv) All Departments of the Govt. of Tripura
(v) Department of Finance, Govt. of Tripura, New Capital Complex, Agartala, West Tripura. Tripura Public Service Commission/Registrar General High Court of Tripura/State Election Commission, Tripura/Tripura State Assembly Secretariat/ State Vigilance Commission/Department of Planning/GA (P&T)/GA(C&C)
(vi) Teacher's Recruitment Board of Tripura, Agartala
(vii) Office of the Commissioner for Disabilities, Tripura, Agartala
(viii) Office of the Auditor General, Tripura, Agartala.
(ix) **Director, NIC, Tripura– with the request to immediately place this OM on the website Of this Department ("what's new" tab) for information of all concerned.**

ANNEXURE I

RESERVATION ROSTER FOR PERSONS WITH BENCHMARK DISABILITIES

Year of recruitment	Cycle No	Point No	Name of Post	Identified suitable for persons with benchmark disabilities covered under the following respective categories				Unreserved Or reserved**	Name of the person Appointed And date of Appointment	Whether The person appointed is in a.b.c & (d &e) or None***	Remark, if any
				a	b	c	(d&e)				

Respective Categories

(a) blindness and low vision
(b) deaf and hard of hearing
(c) locomotor disability including cerebral palsy, leprosy cured, dwarfism, acid attack, victims and Muscular dystrophy
(d) autism, intellectual disability, specific learning disability and mental illness
(e) multiple disabilities from amongst persons under clauses (a) to (d) including deaf-blindness

** If identified reserved, write **a/b/c/(d&e)** as the case may be, otherwise write UR
*** Write a/b/c/(d&e) or None, as the case may be.

Annexure II

ILLUSTRATIONS FOR EFFECTING RESERVATION FOR PWDS.

A. Let us assume a case of recruitment of 110 vacant posts by direct recruitment (1st cycle) in any department. As per reservation policy of the State Government 31% ST, 17% SC candidates and 4% PwD (1% of each of four categories horizontally) are to be selected. It would mean that 34.1 ST (i.e 35 ST), 18.7 SC (i.e 19) SC and 56 UR candidates would have to be selected. Horizontally there would be 5 PwDs candidates in this recruitment, One each for categories b, c, d& e and two posts for category a (categories indicated in para 2.2 of the guidelines refers). In second and subsequent cycles the no. of posts, category-wise, would depend upon the vacant roster points for PwDs.

B. So first 56 posts for UR would be filled up purely on merit, this may include candidates from PwD who qualify without relaxed standards, provided that the posts are identified for being occupied by them.

C. Then SC and ST posts would be filled up from their respective merit lists, after accounting out those who have already filled up UR posts.

D. If 4% PwDs @ 1% each are already covered, without counting those who are covered in UR posts, after completing the above process, no further action needs to be taken.

E. But in case the number of candidates covered is less than 4% say, in above case, say less than 5 i.e 4, then the following needs to be done. 1st step is to identify the category of PwD which is unrepresented. Say if instead of desired 2 visual if only one in filled up, then the 1st unselected candidate (i.e 1st after discounting those already in UR list) from visual merit list would be picked up. Say his or her category is General, then the last candidate from UR list would be knocked off and the PwD candidate put in that place. Similarly if the PwD candidate is SC or ST, the last person from the SC or ST list, as the case may be would be replaced. If the representation is even less say 2 out of 5 after completing the process till para C above, 3 persons form PwD merit list of appropriate category would be adjusted after knocking off the last candidate from either UR, SC or ST lists, depending upon the caste category of the PwD candidates.

F. Suppose that the no. of vacancies in a year are say 22. So the number of posts reserved for PwDs would be only 1. If this is the 1st cycle of recruitment, then the post as per roster for PwD would be for visual category. However, if the vacant posts are not identified suitable for visual category, then the Administrative department shall, in consultation with State Commissioner for Persons with Disabilities, decide the category on the basis of nature of posts, the level of representation of specific disabled category in the concerned grade/posts. If the no. of vacancies is more than 25 and less than 50, then the no. of reserved posts for PwDs would be 2, one for visual and one for deaf and hard of hearing and so on. In the 2nd and subsequent cycles the category of posts would be as per vacant roster points for PwDs.

*****

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E-mail dswe_agt@yahoo.com
E-mail - icds.dswe@gmail.com

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Government of Tripura
Education (Social Welfare & Social Education) Department
Tripura, Agartala

No.F.1 (8 - 9) - ICDS/SWE/2013/ 4676 (158) Dated, Agartala, the 18/12/2018

M-E-M-O

Subject:- **Revised Nutritional and Feeding Norms for Supplementary Nutrition Programme in ICDS Scheme.**

The Ministry of Women & Child Development, Govt. of India has revised the following Nutritional and Feeding Norms for Supplementary Nutrition Programme in ICDS Scheme.

1. **Revision in cost and feeding norms of SNP (Per beneficiary per day)**

Category	Revised SNP Cost Norms	Nutritional Norms	
		Protein	Calorie
(i) Children (6-72 months)	Rs.8.00	12-15 Grams	500 K. Cal
(ii) Severely underweight children (6-72 months)	Rs.12.00	20-25 Grams	800 K. Cal
(iii) Pregnant women and Nursing mothers	Rs.9.50	18-20 Grams	600 K. Cal

To implement the revised feeding norms with nutritional norms for Supplementary Nutrition Programme, a committee has been formed to recommend the revised feeding norms for SNP in the State.

Accordingly, the Committee has reviewed & recommended a detail break up of cost and feeding provision of SNP for the State under ICDS.

After threadbare discussion & careful examination of the quantity of food items, Calorie, Protein & other food components, transportation, feeding contingencies of A. W. Workers & also the matter of locally availability of food items, variety of menu & the palatability of the food items, the Committee has recommended its proposal.

The Committee recommends 2 (Two) Eggs in a week on Wednesday & Saturday & Salty Sujir Haloa, Chirar Polao, Chola / Bengal Gram with Muri as morning snacks in place of Biscuits, Murir Muya / Chirar Muya to change the monotonous menu of daily Khichuri as food items.

After through discussion, said recommended SNP norms has been approved & decided to implement the revised recommended SNP norms (copy attached) in all Anganwadi Centers with immediate effect.

In the meeting, it is also decided that vegetables derived from the respective AWC's kitchen garden should be used in the preparation of Khichuri. Further, CDPOs, Supervisors & Anganwadi Workers are instructed to motivate the guardians, local peoples & PRI members to take active participation & co-operation in implementation of Supplementary Nutrition Programme in the AWCs.

Therefore, all the CDPOs in the State are directed to introduce the revised SNP norms in all Anganwadi Centres of their respective Projects with immediate effect & confirm action taken.

Enclo:- As stated above.

17.12.15

Deputy Secretary to the
Government of Tripura

To

1. The CDPO, Urban/Mohanpur/Hezamara/Mandai/Jirania/ Bishalgarh/ Dukli/ Jampuijala/ Melaghar/ Boxnagar/ Kathalia/ Khowai/ Padmabil/ Tulashikhar/ Teliamura/ Kalyanpur/ Mungiakami/Khowai NP/Teliamura NP/ Ranirbazar NP/ Sonamura NP/ Kamalpur NP/Agartala No.-2/ Killa/ South District/ Matabari/ Kakraban/ Amarpur/ Karbook/ Bagafa/ Ampi/ Rajnagar/Hrishyamukh/ Satchand/ Rupaichari/Santirbazar/Belonia NP/ Sabroom NP/ Amarpur NP/ Kadamtala/ Panisagar/ Damchara/ Gournagar/ Kumarghat/Pecharthal/ Kanchanpur/Jampui Hills/ Kailasahar Dist. H.Q./ Kumarghat NP/Kailasahar NP/ Dharmanagar NP/ Ambassa/Dumburnagar / Salema/Chawmanu / Manu ICDS Project for information and necessary action.

Copy to:-

1. The DISE/PO, West Tripura/Sepahijala/Khowai/Gomati/ South Tripura/ Dhalai/ Unakoti /North Tripura District for information & necessary action.
2. The P.O. (SW & SE), TTAADC, Khumulwng, West Tripura for favour of information & necessary action.
3. The Dy. P.O. (SW & SE), TTAADC, Manughat, Longtarai Valley for information & necessary action.

Copy also to:-

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1. The PS to the Hon'ble Minister (SW & SE) for kind information to the Minister.
2. The P.A. to the Special Secretary (SW & SE) for kind information of the Special Secretary.
3. The District Magistrates & Collector, West Tripura/ Sepahijala/ Khowai/ Gomati / South Tripura/ Dhalai/ Unakoti / North Tripura District for information.
4. The Chief Executive Officer, TTAADC, Khumlwng for information.
5. The Sub-Divisional Officer, Sadar/ Jirania/Mohanpur/Khowai/ Teliamura/ Bishalgarh/ Jampuijala/Sonamura/ Udaipur/Amarpur/ Karbook/Belonia/ Santirbazar/ Sabroom/ Kailasahar/Kumarghat/Dharmanagar/Kanchanpur/Panisagar/Ambassa/Gandachara/Kamalpur/Longtarai Vally for information.
6. The Block Development Officer, Dukli/ Jirania/ Mandai/ Mohanpur/ Lefunga/ Hezamara/Khowai/Padmabil/Tulashikhar/ Teliamura/ Kalyanpur/ Mungiakami/ Bishalgarh/ Melaghar/ Jampuijala/ Boxnagar/ Kathalia/ Matabari/ Kakraban/ Killa/ Amarpur/ Ampi/ Karbook/ Hrishyamukh/ Rajnagar/ Bagafa/Jolaibari/ Satchand/ Rupaichari/ Silachari/ Gournagar/Kumarghat/ Pecharthal/ Kadamtala/ Kanchanpur/ Damchara/ Jampui Hill/ Panisagar/Jubarajnagar/ Ambassa/ Dumburnagar / Salema/Durga Chowmohani/ Chawmanu / Manu R. D. Block for information.
7. The Executive Officer, Agartala Municipal Council/ Ranirbazar NP/ Khowai NP/Teliamura NP/ Sonamura NP/Udaipur NP/ Amarpur NP/ Belonia NP/ Sabroom NP/ Kailashahar NP/ Kumarghat NP/ Dharmanagar NP/ Kamalpur NP for information.

17.12.18

Deputy Secretary to the
Government of Tripura

Menu as per revised cost norms

Sl. NO.	CATEGORY	WEEKLY MENU OF SUPPLEMENTARY NUTRITION PROGRAMME IN ANGANWADI CENTERS						
		TYPE	MONDAY	TUESDAY	WEDNESDAY	THRUSDAY	FRIDAY	SATURDAY
1	CHILDREN (6M.TO 6YRS)	Morning Snacks	Salty Sujir Haloa	Chola / Bengal Gram with Muri	Egg-1	Chirar Polao	Chola / Bengal Gram with Muri	Egg-1
		HCM	**Khichuri** (90 gm Rice + 30 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (90 gm Rice + 30 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (90 gm Rice + 30 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (90 gm Rice + 30 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (90 gm Rice + 30 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (90 gm Rice + 30 Gm. Masor Dal) With seasonal vegetables & Soyabean
2	SEVERELY UNDER-WEIGHT CHILDREN (6M TO 6YRS.)	Morning Snacks	Salty Sujir Haloa	Chola / Bengal Gram with Muri	Egg-1	Chirar Polao	Chola / Bengal Gram with Muri	Egg-1
		HCM	**Khichuri** (150 gm Rice + 50 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (150 gm Rice + 50 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (150 gm Rice + 50 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (150 gm Rice + 50 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (150 gm Rice + 50 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (150 gm Rice + 50 Gm. Masor Dal) With seasonal vegetables & Soyabean
3	PREGNANT WOMEN & NURSING MOTHERS	Morning Snacks	Salty Sujir Haloa	Chola / Bengal Gram with Muri	Egg-1	Chirar Polao	Chola / Bengal Gram with Muri	Egg-1
		HCM	**Khichuri** (135 gm Rice + 45 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (135 gm Rice + 45 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (135 gm Rice + 45 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (135 gm Rice + 45 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (135 gm Rice + 45 Gm. Masor Dal) With seasonal vegetables & Soyabean	**Khichuri** (135 gm Rice + 45 Gm. Masor Dal) With seasonal vegetables & Soyabean

No. F.95(5-2)-SABLA/SWE/2013(A)/ /1526(37)

Government of Tripura

Education (Social Welfare and Social Education) Department

Tripura:Agartala

Dated, Agartala the 14/07/2014

MEMORANDUM

Subject : Treasury and Sub-Treasury wise Sub-allocation of fund for 2014-15 under CASP Schemes against Demand No 19, 20, 41 .

In persuance of the Release of the fund made by Finance Department (Budget Branch), Government of Tripura, a sum of Rs. 5212000 /-(Rupees fifty-two lakhs twelve thousand only) is hereby sub-allocated to the DDOs for utilization during 2014-15 against Major Head of Account, 2235-Social Security & Welfare under Demand No. 19, 20, 41 as per details given in the Annexure.

This sub-allocation is issued in pursuance of fund released from the Finance Department vide Memo No. F.41(04)-FIN(B)/2013(P-1)/2588-95 dated 06/06/2014 under Code No. 0171/14-15 with appropriation as follows:

Rupees

i. Fund released from Finance Deptt. Under Code No. 0171/14-15 (CASP)	5212000/-
ii. Fund Sub-allocated under instant memo against this code	5212000/-
iii.Cumulative fund sub-allocated against this code (CASP)	5212000/-

The Head of Office / DDOs concerned shall arrange to draw the funds from their respective Treasury/ Sub- Treasury subject to observance of codal formalities.

This Sub-allotment order shall remain valid upto 31-03-2015.

This fund so sub-allocated is for implementation of Non-Nutrition Component like Life Skill Education Sessions and Vocational Training under RGSEAG-SABLA during 2014-15.

Enclo: As stated above.

9/7/14

Principal Secretary to the Government of Tripura

Copy to :-

The Special Secretary to the Government of Tripura, Finance Department(Budget Branch) Agartala. This has a reference to his Memo No. F.41(04)-FIN(B)/2013(P-1)/2588-95 dated. 06/06/2014

1 Treasury Officer,Sonamura Sub-Treasury, for information and necessary action
2 Treasury Officer,Khowai Sub-Treasury, for information and necessary action
3 Treasury Officer,Kamalpur Sub-Treasury, for information and necessary action
4 Treasury Officer,Bishalgarh Sub-Treasury, for information and necessary action
5 Treasury Officer,Ambassa District-Treasury, for information and necessary action
6 Treasury Officer,Agartala Treasury No.-1, for information and necessary action
7 Programme Officer,Sepahijala District, for information and necessary action
8 Programme Officer,Khowai District, for information and necessary action
9 Head of Office, DSWE., for information and necessary action
10 District Inspector of Social Education, West, for information and necessary action
11 District Inspector of Social Education, Dhalai, for information and necessary action
12 CDPO, Urban, for information and necessary action
13 CDPO, Tulashikhar, for information and necessary action
14 CDPO, Teliamura NP.ICDS, for information and necessary action
15 CDPO, Teliamura, for information and necessary action
16 CDPO, Sonamura NP.ICDS, for information and necessary action
17 CDPO, Salema, for information and necessary action
18 CDPO, Ranirbazar NP.ICDS, for information and necessary action
19 CDPO, Padmabill, for information and necessary action
20 CDPO, Mungiakami, for information and necessary action
21 CDPO, Mohanpur, for information and necessary action
22 CDPO, Khowai NP, for information and necessary action
23 CDPO, Khowai ICDS, for information and necessary action
24 CDPO, Kathalia, for information and necessary action
25 CDPO, Kamalpur NP.ICDS, for information and necessary action
26 CDPO, Kalyanpur, for information and necessary action
27 CDPO, Jirania, for information and necessary action
28 CDPO, Jampuijala, for information and necessary action
29 CDPO, Hezamara, for information and necessary action
30 CDPO, Dukli, for information and necessary action
31 CDPO, Boxanagar, for information and necessary action
32 CDPO, Bishalgarh, for information and necessary action
33 CDPO, AMBASA ICDS, for information and necessary action
34 CDPO, Agartala-2, for information and necessary action
35 CDPO, Mandai, for information and necessary action
36 CDPO Melagarh, for information and necessary action

9/7/14

Principal Secretary to the Government of Tripura

NO.F.95(5-2)-SABLA/SWE/2013(A)/ dated 2014.07.08

Government of Tripura

Education (Social Welfare and Social Education) Department

Budget Control System

Letter of Credit details

Scheme Type: CASP
Head Description: 2235-02-102-91-73
Demand Description: 19-Tribal Welfare

(Amount in Rupees)

Object Of Expenditure	Details Of Expenditure	Current Allotment	Allotment till date	Total	Remarks
Head Description: 2235-02-102-91-73					
Demand Description: 19-Tribal Welfare					
Agartala Treasury No.-1					
08007-Head of Office, DSWE.					
21-Supplies & Materials	Pre-School Education	469894	0	469894	Procurement of training kits or other training materials etc. Details break up will be shown in the sanction memo.
47-Transfer of Fund to TTAADC, PRI & ULB		71394	0	71394	Detailed break up will be shown in the sanction memo.
47-Transfer of Fund to TTAADC, PRI & ULB		71394	0	71394	For conducting NHE etc. sessions as per the operational frame work issued earlier.Detail breakup will be shown in the sanctio memo.
47-Transfer of Fund to TTAADC, PRI & ULB		52174	0	52174	For Kishori Divas. Detailed break up will be shown in the sanction memo.
47-Transfer of Fund to TTAADC, PRI & ULB		118999	0	118999	Life Skill Education. Detailed break up will be shown in the sanction memo.
47-Transfer of Fund to TTAADC, PRI & ULB		80594	0	80594	Other Expances inluding Expenditure on conducting Survey. Detailed break up will be shown in the sanction memo.
47-Transfer of Fund to TTAADC, PRI & ULB		95196	0	95196	Training of Sakhi & Saheli.Rs.34153 for Manu Rs.29793 for Chhawmanu and Rs.31250 for for Dumburnagar.
	Total for 08007-Head of Office, DSWE.:	959645	0	959645	
08041-CDPO, Hezamara					
13-Office Expenses	Others (Sabla-Non Nutrition)	21630	0	21630	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	30890	0	30890	Life Skill Education.
20-Other Administrative Expenses	Training	24706	0	24706	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	18530	0	18530	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	14000	0	14000	For Kishori Divas.
	Total for 08041-CDPO, Hezamara:	109756	0	109756	
08043-CDPO, Mandai					
13-Office Expenses	Others (Sabla-Non Nutrition)	22570	0	22570	Other Expances inluding Expenditure on conducting Survey.

Dated: 8-07-14

Government of Tripura

Education (Social Welfare and Social Education) Department

Budget Control System

Letter of Credit details

Scheme Type: CASP
Head Description: 2235-02-102-91-73
Demand Description: 19-Tribal Welfare

(Amount in Rupees)

Object Of Expenditure	Details Of Expenditure	Current Allotment	Allotment till date	Total	Remarks
20-Other Administrative Expenses	Life Skill Education & IEC	17260	0	17260	Life Skill Education.
20-Other Administrative Expenses	Training	13807	0	13807	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	10355	0	10355	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	14610	0	14610	For Kishori Divas.
	Total for 08043-CDPO, Mandai:	78602	0	78602	
	Total for Agartala Treasury No.-1:	1148003	0	1148003	
Bishalgarh Sub-Treasury					
15011-CDPO, Jampuijala					
13-Office Expenses	Others (Sabla-Non Nutrition)	30960	0	30960	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	19990	0	19990	Life Skill Education.
20-Other Administrative Expenses	Training	15987	0	15987	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	11990	0	11990	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	20040	0	20040	For Kishori Divas.
	Total for 15011-CDPO, Jampuijala:	98967	0	98967	
	Total for Bishalgarh Sub-Treasury:	98967	0	98967	
Khowai Sub-Treasury					
07020-CDPO, Tulashikhar					
13-Office Expenses	Others (Sabla-Non Nutrition)	23050	0	23050	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	58140	0	58140	Life Skill Education.
20-Other Administrative Expenses	Training	46506	0	46506	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	34880	0	34880	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	14910	0	14910	For Kishori Divas.
	Total for 07020-CDPO, Tulashikhar:	177486	0	177486	
07079-CDPO, Padmabill					

Dated: 8-07-14

Government of Tripura

Education (Social Welfare and Social Education) Department

Budget Control System

Letter of Credit details

Scheme Type: CASP
Head Description: 2235-02-102-91-73
Demand Description: 19-Tribal Welfare

(Amount in Rupees)

Object Of Expenditure	Details Of Expenditure	Current Allotment	Allotment till date	Total	Remarks
13-Office Expenses	Others (Sabla-Non Nutrition)	19740	0	19740	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	36340	0	36340	Life Skill Education.
20-Other Administrative Expenses	Training	29066	0	29066	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	21800	0	21800	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	12770	0	12770	For Kishori Divas.
	Total for 07079-CDPO, Padmabill:	119716	0	119716	
07088-CDPO, Mungiakami					
13-Office Expenses	Others (Sabla-Non Nutrition)	13000	0	13000	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	20890	0	20890	Life Skill Education.
20-Other Administrative Expenses	Training	16713	0	16713	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	12535	0	12535	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	8410	0	8410	For Kishori Divas.
	Total for 07088-CDPO, Mungiakami:	71548	0	71548	
	Total for Khowai Sub-Treasury:	368750	0	368750	
Demand Description: 20-Welfare of SC, OBC & Minority					
Agartala Treasury No.-1					
08007-Head of Office, DSWE.					
21-Supplies & Materials	Pre-School Education	549276	0	549276	Procurement of training kits or other training materials etc. Details break up will be shown in the sanction memo.
	Total for 08007-Head of Office, DSWE.:	549276	0	549276	
	Total for Agartala Treasury No.-1:	549276	0	549276	
Bishalgarh Sub-Treasury					
15010-CDPO, Dukli					
13-Office Expenses	Others (Sabla-Non Nutrition)	26940	0	26940	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	3640	0	3640	Life Skill Education.

Dated: 8-07-14

NO.F.95(5-2)-SABLA/SWE/2013(A)/ dated 2014.07.08

Government of Tripura

Education (Social Welfare and Social Education) Department

Budget Control System

Letter of Credit details

Scheme Type: CASP

Head Description: 2235-02-102-91-73

Demand Description: 20-Welfare of SC, OBC & Minority

(Amount in Rupees)

Object Of Expenditure	Details Of Expenditure	Current Allotment	Allotment till date	Total	Remarks
20-Other Administrative Expenses	Training	2907	0	2907	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	2180	0	2180	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	17440	0	17440	For Kishori Divas.
	Total for 15010-CDPO, Dukli:	53107	0	53107	
	Total for Bishalgarh Sub-Treasury:	53107	0	53107	
Khowai Sub-Treasury					
07019-CDPO, Teliamura					
13-Office Expenses	Others (Sabla-Non Nutrition)	18550	0	18550	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	30890	0	30890	Life Skill Education.
20-Other Administrative Expenses	Training	24706	0	24706	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	18530	0	18530	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	12010	0	12010	For Kishori Divas.
	Total for 07019-CDPO, Teliamura:	104686	0	104686	
07077-CDPO, Kalyanpur					
13-Office Expenses	Others (Sabla-Non Nutrition)	16310	0	16310	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	30890	0	30890	Life Skill Education.
20-Other Administrative Expenses	Training	24706	0	24706	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	18530	0	18530	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	10550	0	10550	For Kishori Divas.
	Total for 07077-CDPO, Kalyanpur:	100986	0	100986	
07095-CDPO, Teliamura NP.ICDS					
13-Office Expenses	Others (Sabla-Non Nutrition)	4730	0	4730	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	1820	0	1820	Life Skill Education.

Dated: 8-07-14

Government of Tripura

Education (Social Welfare and Social Education) Department

Budget Control System

Letter of Credit details

Scheme Type: CASP
Head Description: 2235-02-102-91-73
Demand Description: 20-Welfare of SC, OBC & Minority

(Amount in Rupees)

Object Of Expenditure	Details Of Expenditure	Current Allotment	Allotment till date	Total	Remarks
20-Other Administrative Expenses	Training	1453	0	1453	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	1090	0	1090	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	3060	0	3060	For Kishori Divas.
	Total for 07095-CDPO, Teliamura NP.ICDS:	12153	0	12153	
	Total for Khowai Sub-Treasury:	217825	0	217825	
Sonamura Sub-Treasury					
10008-CDPO Melagarh					
13-Office Expenses	Others (Sabla-Non Nutrition)	36040	0	36040	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	MISC. Exp.	23330	0	23330	For Kishori Divas.
	Total for 10008-CDPO Melagarh:	59370	0	59370	
10054-CDPO, Sonamura NP.ICDS					
13-Office Expenses	Others (Sabla-Non Nutrition)	2600	0	2600	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	910	0	910	Life Skill Education.
20-Other Administrative Expenses	Training	727	0	727	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	545	0	545	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	1680	0	1680	For Kishori Divas.
	Total for 10054-CDPO, Sonamura NP.ICDS:	6462	0	6462	
	Total for Sonamura Sub-Treasury:	65832	0	65832	
Demand Description: 41-Social Welfare & Social Education					
Agartala Treasury No.-1					
08007-Head of Office, DSWE.					
13-Office Expenses	Others (Sabla-Non Nutrition)	50000	0	50000	For Office expances including IEC, Advertisement etc.
21-Supplies & Materials	Pre-School Education	1038198	0	1038198	Procurement of training kits or other training materials etc. Details break up will be shown in the sanction memo.
	Total for 08007-Head of Office, DSWE.:	1088198	0	1088198	
08042-CDPO, Jirania					

Dated: 8-07-14

NO.F.95(5-2)-SABLA/SWE/2013(A)/ dated 2014.07.08

Government of Tripura

Education (Social Welfare and Social Education) Department

Budget Control System

Letter of Credit details

Scheme Type: CASP

Head Description: 2235-02-102-91-73

Demand Description: 41-Social Welfare & Social Education

(Amount in Rupees)

Object Of Expenditure	Details Of Expenditure	Current Allotment	Allotment till date	Total	Remarks
13-Office Expenses	Others (Sabla-Non Nutrition)	39945	0	39945	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	17260	0	17260	Life Skill Education.
20-Other Administrative Expenses	Training	13807	0	13807	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	10355	0	10355	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	25850	0	25850	For Kishori Divas.
	Total for 08042-CDPO, Jirania:	107217	0	107217	
08044-CDPO, Mohanpur					
13-Office Expenses	Others (Sabla-Non Nutrition)	43370	0	43370	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	29070	0	29070	Life Skill Education.
20-Other Administrative Expenses	Training	23253	0	23253	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	17440	0	17440	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	28070	0	28070	For Kishori Divas.
	Total for 08044-CDPO, Mohanpur:	141203	0	141203	
08046-CDPO, Urban					
13-Office Expenses	Others (Sabla-Non Nutrition)	27180	0	27180	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	7270	0	7270	Life Skill Education.
20-Other Administrative Expenses	Training	5813	0	5813	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	4360	0	4360	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	17590	0	17590	For Kishori Divas.
	Total for 08046-CDPO, Urban:	62213	0	62213	
08080-District Inspector of Social Education, West					
20-Other Administrative Expenses	Vocational Training	69215	0	69215	

Dated: 8-07-14

NO.F.95(5-2)-SABLA/SWE/2013(A)/ dated 2014.07.08

Government of Tripura

Education (Social Welfare and Social Education) Department

Budget Control System

Letter of Credit details

Scheme Type: CASP

Head Description: 2235-02-102-91-73

Demand Description: 41-Social Welfare & Social Education

(Amount in Rupees)

Object Of Expenditure	Details Of Expenditure	Current Allotment	Allotment till date	Total	Remarks
	Total for 08080-District Inspector of Social Education, West:	69215	0	69215	
08317-CDPO, Ranirbazar NP.ICDS					
13-Office Expenses	Others (Sabla-Non Nutrition)	3780	0	3780	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	2730	0	2730	Life Skill Education.
20-Other Administrative Expenses	Training	2180	0	2180	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	1635	0	1635	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	2450	0	2450	For Kishori Divas.
	Total for 08317-CDPO, Ranirbazar NP.ICDS:	12775	0	12775	
08318-CDPO, Agartala-2					
13-Office Expenses	Others (Sabla-Non Nutrition)	24110	0	24110	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	7270	0	7270	Life Skill Education.
20-Other Administrative Expenses	Training	5813	0	5813	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	4360	0	4360	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	15600	0	15600	For Kishori Divas.
	Total for 08318-CDPO, Agartala-2:	57153	0	57153	
	Total for Agartala Treasury No.-1:	1537974	0	1537974	
Ambassa District-Treasury					
05018-District Inspector of Social Education, Dhalai					
20-Other Administrative Expenses	Vocational Training	93740	0	93740	
	Total for 05018-District Inspector of Social Education, Dhalai:	93740	0	93740	
05045-CDPO, AMBASA ICDS					
13-Office Expenses	Others (Sabla-Non Nutrition)	27300	0	27300	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	16350	0	16350	Life Skill Education.
20-Other Administrative Expenses	Training	13080	0	13080	Training of Sakhi & Saheli.

Dated: 8-07-14

NO.F.95(5-2)-SABLA/SWE/2013(A)/ dated 2014.07.08

Government of Tripura

Education (Social Welfare and Social Education) Department

Budget Control System

Letter of Credit details

Scheme Type: CASP

Head Description: 2235-02-102-91-73

Demand Description: 41-Social Welfare & Social Education

(Amount in Rupees)

Object Of Expenditure	Details Of Expenditure	Current Allotment	Allotment till date	Total	Remarks
20-Other Administrative Expenses	NHE & IEC	9810	0	9810	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	17670	0	17670	For Kishori Divas.
	Total for 05045-CDPO, AMBASA ICDS:	84210	0	84210	
	Total for Ambassa District-Treasury:	177950	0	177950	
Bishalgarh Sub-Treasury					
15009-CDPO, Bishalgarh					
13-Office Expenses	Others (Sabla-Non Nutrition)	44550	0	44550	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	55310	0	55310	Life Skill Education.
20-Other Administrative Expenses	Training	44326	0	44326	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	33245	0	33245	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	28830	0	28830	For Kishori Divas.
	Total for 15009-CDPO, Bishalgarh:	206261	0	206261	
15123-Programme Officer,Sepahijala District					
20-Other Administrative Expenses	Vocational Training	57770	0	57770	
	Total for 15123-Programme Officer,Sepahijala District:	57770	0	57770	
	Total for Bishalgarh Sub-Treasury:	264031	0	264031	
Kamalpur Sub-Treasury					
06007-CDPO, Salema					
13-Office Expenses	Others (Sabla-Non Nutrition)	40890	0	40890	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	138980	0	138980	Life Skill Education.
20-Other Administrative Expenses	Training	111180	0	111180	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	83385	0	83385	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	26460	0	26460	For Kishori Divas.
	Total for 06007-CDPO, Salema:	400895	0	400895	
06041-CDPO, Kamalpur NP.ICDS					

Dated: 8-07-14

NO.F.95(5-2)-SABLA/SWE/2013(A)/ dated 2014.07.08

Government of Tripura

Education (Social Welfare and Social Education) Department

Budget Control System

Letter of Credit details

Scheme Type: CASP

Head Description: 2235-02-102-91-73

Demand Description: 41-Social Welfare & Social Education

(Amount in Rupees)

Object Of Expenditure	Details Of Expenditure	Current Allotment	Allotment till date	Total	Remarks
13-Office Expenses	Others (Sabla-Non Nutrition)	2720	0	2720	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	910	0	910	Life Skill Education.
20-Other Administrative Expenses	Training	727	0	727	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	545	0	545	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	1760	0	1760	For Kishori Divas.
	Total for 06041-CDPO, Kamalpur NP.ICDS:	6662	0	6662	
	Total for Kamalpur Sub-Treasury:	407557	0	407557	
Khowai Sub-Treasury					
07018-CDPO, Khowai ICDS					
13-Office Expenses	Others (Sabla-Non Nutrition)	23750	0	23750	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	18170	0	18170	Life Skill Education.
20-Other Administrative Expenses	Training	14533	0	14533	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	10900	0	10900	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	15370	0	15370	For Kishori Divas.
	Total for 07018-CDPO, Khowai ICDS:	82723	0	82723	
07094-CDPO, Khowai NP					
13-Office Expenses	Others (Sabla-Non Nutrition)	4020	0	4020	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	1820	0	1820	Life Skill Education.
20-Other Administrative Expenses	Training	1453	0	1453	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	1090	0	1090	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	2600	0	2600	For Kishori Divas.
	Total for 07094-CDPO, Khowai NP:	10983	0	10983	
07119-Programme Officer,Khowai District					

Dated: 8-07-14

NO.F.95(5-2)-SABLA/SWE/2013(A)/ dated 2014.07.08

Government of Tripura

Education (Social Welfare and Social Education) Department

Budget Control System

Letter of Credit details

Scheme Type: CASP

Head Description: 2235-02-102-91-73

Demand Description: 41-Social Welfare & Social Education

(Amount in Rupees)

Object Of Expenditure	Details Of Expenditure	Current Allotment	Allotment till date	Total	Remarks
20-Other Administrative Expenses	Vocational Training	119355	0	119355	
	Total for 07119-Programme Officer,Khowai District:	119355	0	119355	
	Total for Khowai Sub-Treasury:	213061	0	213061	
Sonamura Sub-Treasury					
10044-CDPO, Boxanagar					
13-Office Expenses	Others (Sabla-Non Nutrition)	16780	0	16780	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	6360	0	6360	Life Skill Education.
20-Other Administrative Expenses	Training	5087	0	5087	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	3815	0	3815	For conducting NHE etc. sessions as per the operational frame work issued earlier
20-Other Administrative Expenses	MISC. Exp.	10860	0	10860	For Kishori Divas.
	Total for 10044-CDPO, Boxanagar:	42902	0	42902	
10045-CDPO, Kathalia					
13-Office Expenses	Others (Sabla-Non Nutrition)	20680	0	20680	Other Expances inluding Expenditure on conducting Survey.
20-Other Administrative Expenses	Life Skill Education & IEC	13630	0	13630	Life Skill Education.
20-Other Administrative Expenses	Training	10900	0	10900	Training of Sakhi & Saheli.
20-Other Administrative Expenses	NHE & IEC	8175	0	8175	For conducting NHE etc. sessions as per the operational frame work issued earlier.
20-Other Administrative Expenses	MISC. Exp.	13380	0	13380	For Kishori Divas.
	Total for 10045-CDPO, Kathalia:	66765	0	66765	
	Total for Sonamura Sub-Treasury:	109667	0	109667	
	Grand Total:	5212000	0	5212000	

Principal Secretary to the Government of Tripura

Dated: 8-07-14

Phone No. 0381-232-6033
Fax No.0381-232-3980
E-mail- dswe_agt@yahoo.com

Government of Tripura
Directorate of Social Welfare & Social Education
Ujan Abhoynagar, Agartala
Pin-799005.

No.F.95 (2-1)-Sabla/SWE/2013(L)/1237(7) Dated, Agartala, the 25/06/2014.

To
The District Inspector of Social Education,
Dhalai/ Khowai/Sepahijala/ West Tripura District.

The Dy. Principal Officer, TTAADC, Manu, Dhalai District.

Subject: - Sub-allocation of **922.470 MTs** of rice under Wheat Based Nutrition Programme (WBNP) for implementation of Rajiv Gandhi Scheme for Empowerment of Adolescent Girls **(RGSEAG) – SABLA** for 1st quarter of 2014-15.

Sir/Madam,

I am sending herewith a copy of Memorandum No.F.12-9(1)-OWS/DF/2014-15/8491-511 dated 17.06.14 of the Director, Food, Civil Supplies & Consumer Affairs, Government of Tripura regarding sub-allocation of **922.470 MTs** of rice under Wheat Based Nutrition Programme (WBNP) for implementation of **Rajiv Gandhi Scheme for Empowerment of Adolescent Girls (RGSEAG) - SABLA**.

You are requested to arrange distribution of the same among the CDPOs under your jurisdiction for lifting of rice as per sub-allocation (enclosed) for ensuring smooth running of Nutrition Programme under RGSEAG-SABLA.

You are further requested to instruct all the CDPOs for sending monthly report about the lifting and position of rice in the prescribed format within 7th of the following months positively.

The matter may please be treated as **EXTREMELY URGENT**.

Enclo :- As stated.

Yours faithfully,
25.6.14
Joint Director
(For Director)
Social Welfare & Social Education,
Tripura.

Copy to:

1. The Director, Food, Civil Supplies & Consumer Affairs, Agartala for kind information. This refers to his Memorandum No. F. 12-9(1)-OWS/DF/2014-15/8491-511 dated nil.
2. The Principal Officer (Social Education), TTAADC Khumulwng, West Tripura for kind information.

Sub-allocation of rice under sabla.doc

PL88

No.F.12-9(1)/OWS/DF/2014-15/ 8491-511

Government of Tripura

Directorate Food, Civil Supplies
and Consumer Affairs, Tripura, Agartala.

Khadya-O-Bhokta Bhavan, Gurkhabasti, P.N Complex
Dated the Agartala June'2014

DIRECTORATE OF SOCIAL WELFARE & SOCIAL EDUCATION
RECEIVED
NO. .....
DATE 23-6-14
GOVT. OF TRIPURA

B-1572

MEMORANDUM

Subject: - Sub-allocation of 922.47 MT Rice (BPL) under "RajibGandhi" Scheme for Empowerment of Adolescent Girls –Sabla (RGSEAG- SABLA) for 1st Quarter of 2014-15.

922.47 MTrice(BPL) is sub-allocated for **1st quarter of 2014-15** among the Implementing Officer as per schedule given in Annexure- A under "Rajib Gandhi Scheme for Empowerment of Adolescent Girls- Sabla" **(RGSEAG-SABLA)** in favour of the Child Development Officer, SW & SE Deptt. Govt. of Tripura as per requisition of Director, SW & SE Deptt. vide No.F.1 (2-37) SABLA /SWE/2013(L)/1062(3)Dt. 16.6.2014.

2 Accordingly, all concerned SDMs, and Delivery Order (D. O) Issuing Authorities are requested to issue Delivery Order (D. O.) of rice (BPL) as per sub-allocation to the concerned Child Development Project Officer (CDPO) on receipt of formal requisition from them on **FREE OF COST** .The Value of rice for Rs **66,69,459/-(Rupees Sixty six lac sixty nine thousand four hundred fifty nine)**only being the cost of rice @Rs.5650/-per MT and incidental Charges including TC& DC@Rs.1580/- per MT (Rs.**52,11,956/-+Rs.14,57,503**/-)

3. The Officer In-Charge, Central Stores, A.D Nagar, Agartala, the Deputy Director (Food), Dharmanagar/Udaipur are requested to arrange despatch of Rice to the concerned Government feeder godowns under their jurisdiction as per quantity mentioned in the Annexure -A

4. This is for information, guidance and strict compliance by all concerned

Director
Food,CS&CA,Tripura

To

The Sub-Divisional Magistrate ,
SDR/MNP/ JRN / TLM/KHW/ BLG/SNM/JMP/AMB/KMP/GNC/LTV for info and N/A please.
The Block Development Officer, Hezamara/Mandai, Kalyanpur for info and n/a please
The DCM Dukli for information and necessary action please.

Copy to :-

1. The Director, SW & SE Dept , GoT for info & n/a please. This has a reference to his letter **vide No.F.1(2-37)/-SABLA /SWE/2013/(L)/1062(3) Dt. 16.6.2014.**
2. The DM & Collector, West / Khowai/Sepahijal/Dhalai Tripura for information please.
3. The Officer –In-Charge Central Store-A.D Nagar/DDF, DMN & UDP for info & n/a please.
4. The Accounts Officer (OWS Section) , In-Charge, P.P Section (Cash Credit Cell), In-Charge, Statistical Section of this Directorate for information and n/ a.

Director,
Food,CS&CA, Tripura.

Annexure- A

Sub-allocation of 1024.000 MT Rice (BPL) under "Rajib Gandhi" Scheme for Empowerment of Adolescent Girls –Sabla (RGSEAG- SABLA) for 1st Quarter of 2014-15.

SL No	Name of District	Name of project	Implementing Officer of the project.	Quantity of Rice allotted (in Kg)	Name of Govt. Feeder Godown	Name of D.O Issuing Authority.
1	2	3	4	5	6	7
1	Sepahijala	Kathalia	CDPO , Kathalia	77300	Kathalia	SDM,SNM
2	Sepahijala	Melaghar	CDPO, Melaghar	125300	Melaghar	SDM,SNM
3	Sepahijala	Bishalgargh	CDPO,Bishalgargh	127300	Bishalgargh	SDM,BLG
4	Sepahijala	Boxanagar	CDPO, Boxanagar	30300	Boxanagar	SDM,SNM
5	Sepahijala	Jampuijala	CDPO,Jampuijala	20300	Jampuijala	SDM,JMP
6	Sepahijala	Sonamura NP	Sonamura NP	13300	Melaghar	SDM,SNM
		Sub - Total		**393800**kgs		
7	West	Dukli	CDPO,Dukli	35300	C/S,A.DNagar	DCM, Dukli,
8	West	Mohanpur	CDPO, Mohanpur	35300	Mohanpur	SDM,MNP
9	West	Jirania	CDPO, Jirania	13000	Jirania	SDM,JRN
10	West	Hezamara	CDPO, Hezamara	18300	Mohanpur	BDOHezamara
11	West	Mandawi	CDPO, Mandawi	73300	Mandawi	BDO,Mandawi
12	West	Agartala- II	CDPO, Agartala-II	15000	C/S A.DNagar	SDM,SDR
13	West	Urban	CDPO, Urban	52000	C/S A.DNagar	SDM,SDR
14	West	Ranirbazar NP	CDPO,Ranirbazar NP	5000	Jirania	SDM,JRN
			Sub- Total	**247200** kgs		
15	Khowai	Teliamura	CDPO, Teliamura	50200	Teliamura	SDM,TLM
16	Khowai	Mungiakmi	CDPO,Mungiakai	18000	Teliamura	SDM, TLM
17	Khowai	Kalyanpur	CDPO, Kalyanpur	47000	Kalyanpur	BDO,Kalyanpur
18	Khowai	Khowai	CDPO, Khowai	13000	Khowai	SDM, Khowai
19	Khowai	Tulashikar	CDPO, Tulashikhar	20000	Khowai	SDM,Khowai
20	Khowai	Padmabil	CDPO, Padmabil	10000	KHowai	,SDM Khowai.
21	Khowai	Teliamura NP	CDPO, Teliamura, NP	8000	Teliamura	SDM, TLM
22	Khowai	Khowai NP	CDPO, Khowai NP	3000	Khowai	SDM,KHW
			Sub- Total	**169200** kgs		
23	Dhalai	Ambassa	CDPO, Ambassa	28000	Ambassa	SDM, Ambassa
24	Dhalai	Salema	CDPO, Salema	56270	Kamalpur	SDM, KMP
25	Dhalai	KMP NP	CDPO, KMP, NP	3000	Kamalpur	SDM, KMP
			Sub- Total	**87270 kgs**		
26	TTAADC	Manu	CDPO, Manu	25000	Manu	SDM,LTV
27	TTAADC	Chawmanu	CDPO, Chawmanu	0	Chwmanu	SDM,LTV
28	TTAADC	Damburnagar	CDPO,Damburnagar	0	Gandachara	SDM,GNC
			Sub- Total	**25000** Kgs		
			Grant Total	**922470** kgs		

Director,
Food,CS&CA,Tripura

Phone No. 0381-2326033.
Fax: 0381-2323980
E-mail: dswe_agt@yahoo.com,
sabla.dswe@gmail.com

Government of Tripura
Directorate of Social Welfare & Social Education
Malancha, Ujan Abhoynagar, Agartala.
Pin-799005.

No. F. 95(1-1) - SABLA/SWE /2010/ 546 (36) Dated, Agartala, the 13/05/2014.

M E M O

Subject:- **Rolling out of Action Plan and target to achieve the goal under RGSEAG – Sabla and IGMSY for the year 2014-15 -reg.**

The Directorate of SW & SE has fixed the following targets with respect to State Cell of Sabla - IGMSY for the year 2014-15.

i) 100% enrolment of Sabla and IGMSY beneficiaries (adolescent girls in the age group of 11-18 years, PMs & NMs).
ii) 100% distribution of nutrition to the eligible beneficiaries under Sabla (11-18 years: all OOS AGs, 14-18 years: school going AGs).
iii) Completion of the process of implementation of DBT under IGMSY.
iv) Strengthening the monitoring and supervision of activities and over all implementation of the schemes.
v) To ensure the timely submission of MPR/QPR/UC and other reports as and when sought for.

Since the issues have already been discussed in the monthly review meeting held on 24.04.2014 in the Conference Hall of the Directorate, the DISEs/PO, TTAADC/Dy. PO, TTAADC in Sabla districts are requested to take immediate steps effectively for smooth running of the schemes and as well as for achieving the targets.

i) **Conducting a survey under Sabla:** A door to door survey shall be conducted under Sabla and not a single family/AG should be dropped, even the maid servants working in different families should be included. This survey should be completed immediately, by **25.05.2014** and the summary report should reach on or before **31.05.2014**. The AWWs shall follow the format of the Bengali Survey Register supplied from the Directorate and CDPOs/DISEs shall report as per the format enclosed in **Annexure-1.**

ii) **Reformation of Kishori Samooha and Peer Leaders:** After completion of the survey the existing Kishorisamooha groups shall be reconstituted and Sakhi & Sahelis shall be selected newly as per the provisions of the guideline. Report should reach to the Directorate on or before **05.06.2014**. A format for reporting is enclosed in **Annexure-2.**

iii) **Rolling Out of Action Plan:** CDPOs, with the guidance of the DISEs/Dy. PO, TTAADC shall roll out an action plan for the implementation of the schemes. Action Plan should include physical & financial targets, engaging of service providers and preparation of mapping exercise for conducting sessions under non-nutrition programmes, implementation of Vocational Training under Sabla etc. DISEs/Dy. PO, TTAADC shall submit a compiled report of Action Plan of his/her district 5.06.2014. A format is enclosed in **Annexure-3.**

iv) **DBT under IGMSY:** All the payments of incentives to the beneficiaries should be made under Direct Benefit Transfer (DBT). All the bank accounts of beneficiaries should be made new with 12 or 15 digits in the banks with core banking system and the correct AADHAR number (12 digits) should be seeded with the bank account and the data base of IGMSY should be updated with the new bank account number. This work shall be completed within a targeted period, by **25.06.2014**.

v) **Strengthening the monitoring and supervision:** Monitoring and supervision of activities of the schemes of Sabla and IGMSY is required to be strengthened at all level for effective implementation of the scheme. In this connection, regular periodical visits to the ICDS projects and to the field by the Branch Officers from the Directorate as well as by the DISEs/POs and visits by CDPOs and Supervisors and community leaders are important which is to be ensured. For submission of report/ returns in a specific time table, a memo issued from this Directorate vide No. F.1(2-41)-ICDS/SWE/2011/3835(32) dated, 30.11.2011 (copy enclosed) shall be followed strictly.

vi) **Convergence Mechanism:** For effective implementation of the schemes of Sabla and IGMSY convergence of the schemes with allied departments and setting up of linkage with allied departments and agencies including PRI Bodies is vital. DISEs/Dy. PO, TTAADC and CDPOs shall take effective steps at their own level to ensure this and in this regard the memo issued vide No. F.1(2-33)-ICD/Sabla/SWE/2011/3433(20) dated 12.11.2012 (copy enclosed) may be referred.

17.5.14

Director
Social Welfare & Social Education
Tripura.

To
All concern.
(i. The DISE, Khowai/West Tripura/Sepahijala/ Dhalai District.)
(ii. P.O,/Dy. P.O, TTAADC)
(iii. The CDPOs under Khowai/West Tripura/Sepahijala/Dhalai District)

Copy also to:-

i) PA to the Hon'ble Minister, SW & SE for kind Information.
ii) PS to the Principal Secretary, SW & SE for kind Information.

Encls:— As stated above.

Director
Social Welfare & Social Education
Tripura.

Government of Tripura
Education (Social Welfare & Social Education) Department
Agartala, West Tripura

No. F. 1 (2-33) – ICDS/SWE/2007/ 4251(39) Dated, Agartala, the 28/12/2012.

MEMORANDUM

An amount of Rs 42,51,894/- has been sub-allocated to all DM & Collectors/CDPOs under West and Dhalai Districts and DDO,DSWE vide No.F.1(2-36)-ICDS/SWE/2012/VOL-II(B)/4181(37) dated, 22-12-2012 in connection with implementation of Non-Nutrition components under RGSEAG-Sabla for the year 2012-13. Out of total fund of Rs. 42,51,894/- sub-allocated Rs. 34,28,946/- lakhs have been sub-allocated to the DM & Collector of Sepahijala, Khowai, West Tripura and Dhalai Districts for implementation of Life Skill Education and Vocational Training as per the following break up.

Sl. No.	Name of DM & Collectors	**Components wise fund allotted (Rs)**					Remarks
		Vocational Training			Life Skill Education	**Total Fund**	
		Vocational Training (Recurring)	Procurement and installation etc for Vocational Training (Non-recurring)	Total for Vocational Training			
1	**2**	**3**	**4**	**5**	**6**	**7**	**8**
1	DM & Collector, Sepahijala	61477	348377	409854	102466	512320	
2	DM & Collector, Khowai	118104	669250	787354	196842	984196	
3	DM & Collector, West Tripura	68492	388106	456598	114151	570749	
4	DM & Collector, Dhalai	163401	925950	1089351	272330	1361681	
	Total:	411474	2331683	2743157	685789	3428946	

2. The fund sub-allocated may be incurred as per the guide line and the operational frame work issued by the Government of Tripura isuued vide No.1(2-33)-ICDS/Sabla/SWE/2011/3433(20) dt. 12.11.12 using the platform of ICDS for Vocational Training.

3. Vocational Training shall be imparted to the identified adolescent girls belonging the age group of 16-18 years group. The trades already selected by the DISEs/PO. TTAADC may be imparted and also the training institutions/agencies already identified may be involved for the Vocational Training. However, the DM & Collectors may alternate or include any trade or institutions/training agencies with intimation to the

Directorate of Social Welfare & Social Education. The amount as mentioned in column No. 3 may be incurred for the purpose of course fee/ honorarium of faculty/resource persons and other charges for conducting vocational training and the amount mentioned in column number 4 may be incurred for procurement of machines, tools and apparatus, raw materials etc, installation of electricity and machines etc. PO and the CDPOs should actively involve themselves and cooperate to the DM & Collectors for implementation of the programmes.

4. The fund of Rs. 6,85,789/- earmarked for Life Skill Education (Col.6) may be incurred as contingency expenditures related to this components. Rs. 50/- per sessions of Life Skill Education to be held at AWC level (Kishori Samooha based) may be paid to the service providers/resource persons including AWWs as per the operational frame work issued vide No.1(2-33)-ICDS/Sabla/SWE/2011/3433(20) dt. 12.11.12. The CDPO wise break up of fund to be incurred as mentioned below may be followed:

Sl. No	District Name	Name of Project	Total No of AWC	Number of Kishori Samooha	Fund to be distributed (Rs.)
1	2	3	4	5	6
1	Sepahijala Dist	Kathalia	175	15	13482
2	Sepahijala Dist	Sonamura NP	21	1	899
3	Sepahijala Dist	Melaghar	305	8	7191
4	Sepahijala Dist	Boxanagar	142	7	6292
5	Sepahijala Dist	Bishalghar	427	61	54828
6	Sepahijala Dist	Jampuijala	189	22	19774
TOTAL_Sepahijala			**1259**	**114**	**102466**
7	West Tripura Dist	Dukli	228	4	3595
8	West Tripura Dist	Mohanpur	365	32	28762
9	West Tripura Dist	Agartala-2	205	8	7191
10	West Tripura Dist	Ranirbazar-NP	32	3	2696
11	West Tripura Dist	Urban	229	8	7191
12	West Tripura Dist	Mandai	191	19	17078
13	West Tripura Dist	Hezamara	182	34	30560
14	West Tripura Dist	Jirania	338	19	17078
TOTAL_West			**1770**	**127**	**114151**
15	Khowai Dist	Khowai-NP	34	2	1798
16	Khowai Dist	Khowai	200	20	17976
17	Khowai Dist	Padmabil	167	40	35953
18	Khowai Dist	Munghiakami	110	23	20673
19	Khowai Dist	Teliamura	157	34	30560
20	Khowai Dist	Teliamura-NP	40	2	1798
21	Khowai Dist	Tulasikhar	195	64	57524
22	Khowai Dist	Kalyanpur	138	34	30560
TOTAL_Khowai			**1041**	**219**	**196842**

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1	2	3	4	5	6
23	Dhalai Dist	Ambassa	231	18	16179
24	Dhalai Dist	Salema	347	153	137506
25	Dhalai Dist	Kamalpur-NP	22	1	899
26	Dhalai Dist (TTAADC)	Manu	290	47	42245
27	Dhalai Dist (TTAADC)	Chowmanu	152	41	36852
28	Dhalai Dist (TTAADC)	Dumburnagar	239	43	38649
	TOTAL_Dhalai Dist		**681**	**131**	**117746**
	Grand Total:		**5351**	**763**	**685789**

(N.C. Sinha) 27/12/12
Principal Secretary to the
Government of Tripura

To:
DM & Collector,
Sepahijala/Khowai/West Tripura/Dhalai District.

Copy also to:

1. The Principal Officer (Social Education), TTAADC, Khumlung, West Tripura for information and necessary action.
2. DISE, Dhalai & West Tripura District for information and necessary action.
3. The Head of Office/DDO in the Directorate for information and necessary action.
4. Dy. P.O. (Social Education), TTAADC, Manughat, Dhalai District for information and necessary action.
5. The DISE In-Charge, Sepahijala, Khowai District for information and necessary action.
6. The CDPO, Urban/ Mohanpur/ Hezamara / Mandai/ Jirania/ Bishalgarh/ Dukli / Jampuijala/ Melaghar/ Boxanagar/ Kathalia/ Khowai/ Padmabil/ Tulashikhar/ Teliamura/ Kalyanpur/ Mungiakami / Khowai NP/Teliamura NP/ Ranirbazar NP/ Sonamura NP /Agartala No-2/Ambassa/ Dumburnagar / Salema/ Chawmanu /Kamalpur N.P. / Manu ICDS Project for information and necessary action.

MEMO_Sabla_23_kc

Government of Tripura
Education (Social Welfare & Social Education) Department
Agartala, West Tripura.

No. F.1(2-33)–ICDS/Sabla/SWE/2011/ 3433 (20) Dated, Agartala, the 12/4/2012.

MEMORANDUM

Subject:- Operational Frame Work on Implementation of Non-Nutrition Components Under the Scheme RGSEAG-Sabla during the Year, 2012-13.

With a view to develop the health & nutritional status and self-esteem of the adolescent girls and to empower them socially by providing awareness-education on Life-skill, Nutrition Health-Education, Women Rights and Vocational Vraining a centrally sponsored scheme has already been launched in Dhalai and West Tripura (undivided) as pilot basis. The scheme has major two parts as services, like (i) Nutrition and (ii) Non-Nutrition components. The Nutrition programme of the scheme has been started w.e.f. 01.11.2011 and the Non-Nutrition components w.e.f. 04.01.2012. To implement the scheme successfully (Especially, the Non-Nutrition components) convergence of programmes of the various departments and organisations like SW & SE, SHFW, School Education, Sports & Youths Affairs Department, District Administration and the Nehru Yuba Kendra, ILFS, Industry Department and other NGOs is importantly necessary.

2. The implementation of the Non-Nutrition component under the scheme, RGSEAG-Sabla has been reviewed and the following decisions have been taken for implementation of the scheme in a fruitful manner.

i) **Implementation of Life Skill Education:**

(a) The fund earmarked for implementation of this component will be placed to the DM & Collectors. The concerned DISEs/DISE-in-charges will cooperate the DM & Collectors to run the programme at ICDS Project level.

(b) The fund, Rs.14, 00,000/- (Rupees fourteen lakhs) only as sanctioned by the GOI (per annum for 28 ICDS Project) for Life Skill Education which was

already drawn by the DDO, DSWE shall be utilized for the same purpose during the year 2012-13 as per the budget mentioned below (based on the schematic guideline).

Budget:

Sl. No.	**Particulars**	**Proposals**
1.	Specific purpose of expenditure.	Conducting training sessions at AWC level (Kishori Samooha wise) on Life Skill Education.
2.	Service Provider/Resource Person	NGO/CBO/NYK and Resource person from Legal Aid authority, Sports and Youth affairs etc.
3.	Total No. of Kishori Samooha.	763 nos.
4.	Duration of every session.	45 minutes.
5.	No. of session in a week.	2 (two) sessions.
6.	No. of session in a month.	8 (eight) sessions.
7.	Total No. of month for continuation of Life Skill Education.	4-5 months.
8.	Total session per Kishori Samooha per annum.	36 nos.
9.	Unit Cost per session.	**Rs. 50/-(Rupees fifty) only per session.**
10.	Specify the purpose of unit cost.	Contingency expenditure for imparting training or educating the AGs on Life Skill Education as per the module mentioned in the scheme guideline. Rs. 50/- per session may be paid to the resource person/service provider including AWW.
11.	Additional fund under Life Skill Education if any.	Rs.34.86/-(Rupees thirty four and eighty six paisa) only per Kishori Samooha per annum.
12.	If Sl. No.10 is yes, specify the purpose of expenditure.	Amount may be incurred for the purpose of IEC activity, exposer visit accessing of public services etc.
	Total Cost (State):	i) Contingency for training: 36 X 763 X Rs.50.00 = Rs.13,73,400/- ii) Contingency for exposer visit etc: 763X Rs.34.86 = Rs. 26,600/- iii) **Total:** **Rs. 14,00,000/-**

(c) The time table already issued for implementation RGSEAG-Sabla shall be followed (Copy enclosed in ANNEXURE-1).

The salient feature of the component as per guide line is:

- The AGs will acquire knowledge and develop attitudes and skills which support and promote the adoption of healthy and positive behaviour in them. Its ultimate aim is to enable AGs in self development.
- Broad topics to be covered in the training for development of life skills will include confidence building, self awareness and self esteem, decision making, critical thinking, communication skills, rights & entitlement, coping with stress and responding to peer pressure, functional literacy (wherever required) etc.
- One of the important components of being confident is knowledge about the existing public services and how to access these.
- Awareness talks and visits will be arranged in collaboration with PRI members, NGOs/CBOs, police personnel, bank officials, post officials, health functionaries etc.
- Information/guidance about entry/re-entry into formal schools and motivation to do the same will also be provided in coordination with Education Department.
- NGOs/CBOs and other Institutions may be involved for imparting and conducting short modules on life skill education.

ii) Implementation of Nutrition Health Education (NHE) etc:

(a) The fund earmarked for implementation of this component will be placed to the DISEs/DISE-in-charges who will in turn place to the ICDS Project for AWC level implementation under the guidance and supervision of the DM & Collectors and DISE/ DISE-in Charges.

Sl. No.	Particulars	Proposals
1.	Specific purpose of expenditure.	Conducting training sessions at AWC level (Kishori Samooha wise) on NHE components, Guidance on public services.
2.	Service Provider/ Resource Person	Field NGO/ CBO/ASHA/ARSH Councillor
3.	Total No. of Kishori Samooha.	763 nos.
4.	Duration of every session.	45 minutes.
5.	No. of session in a week.	1(one) session (as minimum).
6.	No. of session in a month.	5(five) sessions (as maximum).
7.	Total No. of month for continuation of NHE components etc.	4-5 months.

8.	Total session per Kishori Samooha per annum.	22+ sessions.
9.	Unit Cost per session.	Rs. 50.00/-(Rupees fifty) only per session.
10.	Specify the purpose of unit cost.	Imparting training or educating to the AGs on NHE components, Guidance on public services as per the module mentioned in the scheme guideline.
11.	Additional fund under NHE components etc if any.	No.
12.	If Sl. No.10 is yes, specify the purpose of expenditure.	Does not arise.
	Total Cost: 763 X 22 X Rs.50.00 = Rs. 8,39,300/- *Excess amount **Rs. 700/-** may be allotted to some projects having large Kishorisamooha proportionately.*	

(b) The fund, Rs.8,40,000/- (Rupees Eight lakhs forty thousand) only as sanctioned by the GOI (per annum for 28 ICDS Project) for NHE etc including IEC which was already drawn by the DDO, DSWE may be utilized for the same purpose during the year 2012-13 as per the budget mentioned above (based on the schematic guideline).

(c) The SDMOs/MOICs shall ensure the regular attendance of ANM/ASHA/ARSH Councillor for providing NHE as per routine to be framed jointly by SDMO and CDPOs. A joint training will be conducted in this regard.

iii) <u>Implementation of Health Check up:</u>

Fund to be incurred for the purpose are being placed to the CDPOs w.e.f. August, 2012. Health Check up of AGs should be done regularly once in 3 (three) months in a special day, Kishori Diwas as per schematic guide line. The decisions taken in respect of Health check up should be followed by the all concerned.

(a) General Health Check up of Adolescent Girls (AGs) and referral services should be done by the health functionaries with the assistance of the AWW.

(b) Medicines for common ailment of AGs shall be supplied to them on the day under supervision of the health functionaries. The CMO, SDMO, MOIC at their own level should ensure the regular supply of medicines and conducting of health check-up of AGs.

(c) IFA supplementation as given weekly (every Monday) and De-worming tablets given bi-yearly under **WIFS** programme should monitored on the day.

(d) BMI of each and every AGs should be detected on the day and recorded properly in the Kishori Card.

(e) Other activities and formalities as mentioned in the guide line shall be observed.

(f) Rs. 270/- per Kishori Samooha/per Kishori Diwas can be utilised as sanctioned. This rate of expenditure may be changed time to time.

(g) The DM & Collectors, CMOs and the District Officers of SW & SE Department shall monitor the programme and report at their own level.

iv) <u>Joint Training of Health, ICDS, Sports & Youth Affairs, School Education and NGOs/CBOs on operational frame work:</u>

(a) 3-tier Joint Training on implementation of Sabla among the officers and field level functionaries of SHFWS, SW & SE, School Education, Sports & Youth Affairs Departments, Legal Aid Authorities, Nehru Yuva Kendra, NGO/CBO shall be conducted for effective implementation of the programme.

v) <u>Implementation of Vocational Training:</u>

(a) The fund of Rs. 8,40,000/- pa. earmarked for implementation of this component will be placed to the DM & Collectors.

(b) The concerned DISEs/DISE-in-charges shall prepare a mapping exercise on training institutes/ training courses etc. with the guidance of the DM & Collectors.

(c) Fund will be placed rationally as per number of Kishori Smooha/AGs (16-18 years)/Course fee.

vi) <u>Preparation of Drama Team & Cultural Team among the AGs:</u>

(a) To make interest among the AGs on the scheme Sabla and develop awareness on different components of Life Skill Education and NHE like, legal rights and its entitlement, critical thinking, coping with stress, decision making, family welfare, child care practise, ARSH, Sanitation etc. at least 2 drama team in each project shall be formed with the AGs. Other Cultural programme shall also be organised with the AGs.

(b) Necessary fund shall be placed to the Director, ICA for organising cultural activities with the AGs.

(c) Department of SW & SE will provide musical instrument to the ICDS projects for the cultural activities.

vii) <u>Sports Activities :</u>

Sports and Youth Affairs Department may converge their programme for providing coaching on sports/yoga to enable the AGs to learn to keep fit themselves.

3. Directors of allied Departments may issue necessary instruction to the field functionaries for implementation of the scheme successfully.

(N. C. Sinha)
Principal Secretary
Government of Tripura

To:

1. Mission Director, NRHM, Tripura.
2. All DM & Collector.
3. Director, Sports & Youth Affairs/ICA/SW & SE/Education Department.
4. Principal Officer (Social Education), TTAADC, Khumulwng, West Tripura.
5. DISE, Dhalai & West Tripura (u/d) District.

<u>Copy also forwarded to:</u>

1. PS to the Chief Secretary, Government of Tripura for kind information of the Chief Secretary.
2. The Principal Secretary (Health & Family Welfare) for kind information.
3. The Principal Secretary (ICA) for kind information.
4. The Principal Secretary (Sports & Youth Affairs) for kind information.

Government of Tripura
Education (Social Welfare & Social Education) Department
Agartala, West Tripura.

No. F.1(2-21)–ICDS/SWE/2011(L-II)/5933(48) Dated, Agartala, the....15/3/...2012.

M E M O R A N D U M

Subject:- Working days and Time table for implementation of the services under RGSEAG-SABLA.

With a view to provide the Nutrition and Non-Nutrition services to the Adolescent Girls at the AWCs of Dhalai and West Tripura Districts under the scheme, Rajib Gandhi Scheme for Empowerment of Adolescent Girls (RGSEAG) – SABLA the working days and monthly time table is finalized by the Department which is as under.

Services	Days	Days of the Week	Time	Hours per day	Beneficiaries (AGs)
1	2	3	4	5	6
Non-Nutrition services	3 days in every week:	Monday, Wednesday and Friday	10 AM to 12 Noon.	2 hrs per day.	All out of school AGs (11-18 years)
Mixed group interaction:	1 day in a month	4th Sunday of every Month	Do	Do	Both Out of School and School Going AGs.
Nutrition: Hot Cooked Meals (HCM)	Daily, except Sunday.	1) Tue, Thurs & Saturday **- morning**	**9 AM** (Along with the ICDS beneficiaries.)	-	All out of school AGs (11-18 years)
		2) Mon, Wed & Friday **– Noon**	**12 Noon** (on the scheduled day of non-nutrition service session)	-	All out of school AGs (11-18 years)
		3) 4th Sunday of every month	**12 Noon** (on the day of Mixed group interaction)	-	Both Out of School and School Going AGs.
Nutrition: Take Home Ration(**THR**)	Fortnightly (1 day)	-	1st & 15th of each month	-	Only school going AGs, 15-18 years.

2. DPOs/CDPOs may prepare the calendar (quarterly), consulting with the resource persons under different agencies as well as the PRI members locally for imparting the sessions of different components under Non-Nutrition as per the above mentioned time table and intimate the Directorate accordingly.

Contd....P/2

3. The above Time table may be relaxed as per necessity of Vocational Training of the clusters of Adolescent Girls of 16-18 years (trainees) in other places.

4. Anganwadi Workers shall have to perform additional duties as per the time table mentioned above and have to maintain record in the prescribed register to be supplied soon to the Anganwadi Centres with the guidance of the Supervisors (ICDS) and submit monthly report in the prescribed form (MPR) to be supplied soon. The Supervisors, CDPOs and the DISEs will also furnish the report in the prescribed form (MPR) already supplied accordingly in time.

5. All the CDPOs under Dhalai and West Tripura District are asked to circulate the said working days and time table among the ICDS functionaries with necessary instruction accordingly.

To

i) The DISE, Dhalai/ Khowai/Sipahijala /West Tripura District.
ii) All CDPOs under Dhalai/ Khowai/Sipahijala /West Tripura District.

14/3/12

Under Secretary to the
Government of Tripura.

Copy also to:

i) The P.A. to the Hon'ble Minister, Social Welfare & Social Education Department, Government of Tripura for kind information of the Hon'ble Minister.
ii) P.S. to the Principal Secretary, Social Welfare & Social Education etc. Department, Government of Tripura for kind information of the Principal Secretary.
iii) Commissioner & Secretary, RD (Panchayat) Department, Government of Tripura for kind information.
iv) The Mission Director, NRHM, Government of Tripura, Agartala, West Tripura for favour of kind information.
v) The Principal Officer (Social Education), TTAADC, Khumlung, West Tripura for kind information and necessary action.
vi) The Director, Health & Family Welfare /Preventive Medicines/ Food & Civil Supplies/ Commerce & Industries/School Education/ Sports & Youth Affairs / Labour/Employment/ Department, Government of Tripura, Agartala, West Tripura for favour of kind information.
vii) Dy. Director (Social Education), TTAADC, Shikaribari, Ambassa, Dhalai District for information.

14/3/12

Under Secretary to the
Government of Tripura.

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Government of Tripura
Education (Social Welfare & Social Education) Department
Agartala, West Tripura

No. F. 1 (2-33) – ICDS/SWE/2007/ 5825(36) Dated, Agartala, the ....9/3/.., 2012.

MEMORANDUM

An amount of Rs 3,75,580/- has been sub-allocated to all CDPOs under West and Dhalai Districts for providing training to Sakhi & Saheli under 716 nos Kishori Samooha formed vide No.F.1(2-36)-ICDS/SWE/2011(A)/2720(34) dated, 20-09-2011 in connection with implementation of Non-Nutritional Components under SABLA for the year 2011-12.

In this connection, a Training Module for the said training is prepared by the Directorate and enclosed herewith. The DISEs, West Tripura, Dhalai District and the Principal Officer, TTAADC are requested to instruct all CDPOs under their jurisdiction to conduct the training of Sakhi & Saheli as per the module enclosed. It is also requested to the DISEs and the Principal Officer, TTAADC to prepare the project wise calendar of the said training and to intimate to this Directorate at the earliest.

The Field NGOs (List Enclosed) and Master Trainers (5 Nos) under the Department (SW & SE) as mentioned herein below may be involved in the Training of Sakhi & Saheli as resource persons. Resource person from the allied department may also be involved, locally if necessary.

List of Master Trainers:

1. Sri Tapash Acherjee, Supervisor (ICDS) deputed in West District AWTC, Narsingarh, Agartala.
2. Sri Biswanath Gope, SWE, deputed in West District AWTC, Narsingarh, Agartala.
3. Sri Krishna Chakraborty, Supervisor (RFLP), Directorate of SW & SE.
4. Sri Debabrata Misra, Supervisor (ICDS), Kamalpur-NP ICDS Project.
5. Sri Biswajit Chakma, Supervisor (ICDS), Chowmanu ICDS Project.

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The DISEs and the Principal Officers may send requisition to the respective DDOs for the Resource Persons / Master Trainers for the said training in respect of the ICDS Projects under their control with intimation to this Directorate.

To:

1. The Principal Officer (Social Education), TTAADC, Khumlung, West Tripura.
2. DISE, Dhalai & West Tripura District.

9/3/12
Under Secretary to the
Government of Tripura

Copy to:

1. PS to the Principal Secretary (SW & SE), Government of Tripura for kind information of the Principal Secretary.

2. The Head of Office/DDO in the Directorate for information and necessary action.

3. Dy. Director (Social Education), TTAADC, Shikaribari, Ambassa, Dhalai District for information and necessary action (as instructed to the DISE).

4. The CDPO, Urban/ Mohanpur/ Hezamara / Mandai/ Jirania/ Bishalgarh/ Dukli / Jampuijala/ Melaghar/ Boxanagar/ Kathalia/ Khowai/ Padmabil/ Tulashikhar/ Teliamura/ Kalyanpur/ Mungiakami / Khowai NP/Teliamura NP/ Ranirbazar NP/ Sonamura NP /Agartala No-2/Ambassa/ Dumburnagar / Salema/ Chawmanu /Kamalpur N.P. / Manu ICDS Project for information and necessary action.

5. The Principal-In-Charge, Kulai AWTC, Ambassa/ West District AWTC, Narsingarh, Agartala, West District for information and necessary action.

9/3/12
Under Secretary to the
Government of Tripura

MEMO_Sabla_kc

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Government of Tripura
Directorate of Social Welfare & Social Education
Ujan Abhoynagar, Agartala
Pin-799005.

Training Module for the Training of Sakhi & Saheli under RGSEAG – Sabla during the year, 2011-12

Sl No	Day	Module	Remarks
1	1st Day	1. Objective of the Scheme: i) Health Status of women & Adolescent Girls. ii) Social Status of women & Adolescent Girls. iii) The objectives of Sabla to uplift the status & position.	CDPOs may finalise the programme as per the module.
		2. Services of the Scheme: i) Type of services (Nutrition & Non-Nutrition): I) Significance: How the services will help to uplift the status and position of the adolescent girls (component wise, briefly).	
		3. Modalities (Process of implementation): i) Formation of Kishori Samooha ii) Training Kit. iii) Kishori Diwas (What Programme /services would be included). iv) Time table (3 days in a week, 2 hourly). v) Location.	
2	2nd Day	1. Role & Responsibilities of Sakhi & Saheli.	
		2. Kishori Card: (It should be filled up by the AGs. In the training, Sakhi/Saheli and AWWs should be taught in filling of Kishori Card.)	
		3. Briefing on the daily activities of AWW in implementation of ICDS: (Sakhi/Saheli are to assist the AWW in providing PSE, SNP, Growth monitoring etc which will serve as training ground for future.)	
7	3rd Day	1. Field visit (visiting of AWC/AWCs near by the training Centre). 2. Yoga for better living. 3. Evaluation. 4. Valedictory.	

Annexure-2

Table-2 : List of field NGOs from Tripura who are likely to be involved by the State to provide services and training of Sakhi and Sahelis under SABLA scheme.

Name of District	Sl. No.	Name of the ICDS Project for which the	Name of NGO.	Name of Block Coordinator	Contact Number
1	2	3	4	5	6
Dhalai	1	Ambassa	Prabahoo	Sri Jahar Debnath	3826222840
Dhalai	2	Salema	Bamancherra Nari Samity	Smt. Usha Das	9436496032
Dhalai	3	Kamalpur NP	All Tripura Bayappa Kalyan Samity		9436568034
Dhalai	4	Dambur Nagar	Krishak Sangha	Sri Satya Bhusan Chowdhury	9436546125
Dhalai	5	Manu	St. Vincent Welfare Society	Mr. Agnes Darlong	9856368744
Dhalai	6	Chowmanu	Baba Longtarai Sevasram		9436136018
West Tripura	7	Dukli	Matripally Mahila Silpi Sangha	Smt. Sadhana Datta Chowdhuri	3812371974
West Tripura	8	Khowai-NP	Bodhan Social Welfare Organisation	Mr. Benudhar Acherjee	9436513950
West Tripura	9	Khowai	Chetana	Smt. Gargi Bhattacherjee	9436169842
West Tripura	10	Padmabil	Yak By Yak Welfare Society	Mr. Satyajit Debbarma	9615619787
West Tripura	11	Mohanpur	Khumpui Boroi bodol	Smt. Dipali Debbarma	9862768747
West Tripura	12	Agartala-2	Chetana	Smt. Moushumi Deb	9436167476
West Tripura	13	Kathalia	Chetana	Sahanara Begam	9774358285
West Tripura	14	Munghiakami	Chetana	Smt. Priti Bhattacherjee	9862017503
West Tripura	15	Sonamura NP	Sonamura Bibhagiya Nari Kalian Samity	Smt. Pratima Roy	
West Tripura	16	Teliamura	Karailong Nari Kalyan Samity	Smt. Pratima Biswas	9774321589
West Tripura	17	Teliamura-NP	Teliamura Mahila Samity	Smt. Saraswati Dasgupta	3825262215
West Tripura	18	Tulasikhar	Chetana	Smt. Rina Roy	9436127525
West Tripura	19	Kalyanpur	Chetana	Smt. Nandita Dhar	9436138272
West Tripura	20	Ranirbazar-NP	Terresa Social Welfare	Mr. Actu Debnath	9436138679
West Tripura	21	Urban	Chetana	Smt. Mahua Sen	9436453752
West Tripura	22	Mandai	Chetana	Smt. Sumita Banerjee	9436197468
West Tripura	23	Hezamara	Kami hamkari bodol	Mr. Bibhuti Debbarma	9436504042
West Tripura	24	Melaghar	Palpara Mahila Samity	Smt. Rina Debnath	9856150476
West Tripura	25	Boxanagar	Chetana	Smt. Swapna Acherjee	9856779165
West Tripura	26	Bishalghar	Murabari Mahila Samity	Smt. Purnima Chakraborty	9436578149
West Tripura	27	Jirania	Bankimnagar Women Development Society	Smt. Pratima Saha	
West Tripura	28	Jampuija T.jala	Brilliant Club	Mr. Narayan Debbaram	9436133075

Joint Secretary
Government of Tripura

List of trainee under SABLA_KC.xls

Phone No.0381-232-6033
Fax No.0381-232-3980
E-mail-dswe_agt@yahoo.com

Government of Tripura
Directorate of Social Welfare & Social Education
Ujan Abhoynagar, Agartala
Pin-799005.

No. F. 1 (2-41) – ICDS/SWE/2011/ 3835(32) Dated, Agartala, the 30/11/2011.

M E M O

An amount of Rs 2,56,43,377/= and 1085.01 MT of Rice for implementation of Nutrition Component and Rs. 106.4 lakhs for implementation of Non-Nutrition Component under RGSEAG – Sabla scheme were allotted to the DDOs/CDPOs.

2. Since, soft copy of all the reporting forms along with the Guideline of the scheme (Sabla), in English (through e-mail) and Bengali translated MPR for AWW and Sabla-Registers (3 types) had already been sent to all CDPOs and DISE under the selected districts and accordingly, 1 day training on implementation of the scheme to all the Supervisors, CDPOs were already imparted, it is expected that CDPOs and Supervisors have already utilized the monthly seminars to educate the AWWs about the basics of the scheme though the Directorate is in exercise of preparation of training plan for Shakhi & Saheli project level, involving the local NGOs regulated by the MNGO, Chetana.

3. It was decided in the meeting held on 14-10-11 in the conference hall of the Directorate that the Nutrition Component i.e. supply of both Hot Cooked Meal (HCM) and Take Home Ration (THR) to the AGs will be started wef. 01.11.2011 and it is also expected that the nutrition programme under the scheme is already in force.

4. As per guide line of the schema, ICDS functionaries in different level are to submit the Monthly Progress Report to the immediate higher authority. The report flow chart is as follows:

2nd	4th	7th	10th	15th ←(Proceeding month)	
▼	▼	▼	▼	▼	
AWW →	Supervisor →	CDPO →	DPO/DISE →	DSWE → (of each Qtr)	WCD, Delhi

P/Cntd-2

It is, therefore, requested to all the ICDS functionaries under West Tripura & Dhalai District to take effective steps to accelerate the monitoring of implementation of the scheme and begin the reporting system with the report for the month of November, 2011 within the stipulated date as mentioned above without fail. The latest guideline of Sabla along with the reporting formats also can be available in the departmental website (www.tripurawelfare.nic.in).

(Abhishek Chandra, IAS)
Director
Social Welfare & Social Education
Tripura.

To

1. The CDPO,Urban/ Mohanpur/ Hezamara / Mandai/ Jirania/ Bishalgarh/ Dukli / Jampuijala/ Melaghar/ Boxanagar/ Kathalia/ Khowai/ Padmabil/ Tulashikhar/ Teliamura/ Kalyanpur/ Mungiakami / Khowai NP/Teliamura NP/ Ranirbazar NP/ Sonamura NP /Agartala No-2 Ambassa/ Dumburnagar / Salema/ Chawmanu /Kamalpur N.P. / Manu ICDS Project for information and necessary action.
2. DISE, Dhalai & West Tripura District for information and necessary action.
3. The Principal Officer (Social Education), TTAADC, Khumlung, West Tripura for kind information and necessary action.
4. Dy. Director (Social Education), TTAADC, Shikaribari, Ambassa, Dhalai District for information and necessary action.

(Abhishek Chandra, IAS)
Director
Social Welfare & Social Education
Tripura.

sabla_kc/P-4

Annex 7 (v)

Monthly Progress Report of RGSEAG - *Sabla* by District Programme Officer

1) **Reporting Month and Year:** _____/_ _ _ _

2) **Name of District:** _____/_____

3) **a. No. of Sectors/Projects in RGSEAG - *Sabla* District:** _____/_____

b. No. of AWCs in RGSEAG - *Sabla* District: _____

c. No of AWCs for which the MPR is being submitted: _____

4) **Beneficiary Coverage:**

4(A). Nutrition Component

Category	No. of Beneficiaries		Rate per AG
	Take Home Ration (THR)	Hot Cooked Meal (HCM)	
a. 11– 14 years: Out of School			
b. 14 – 18 years: All			
(i) In-School			
(ii) Out of School			

(i) Average Nutrition Days in the month _____

(ii) Nutritional Status*: Number of Girls with Nutritional Grades

Normal (N) _____

Malnourished (M)_____

* Formula: BMI (in kg/m^2) = Weight (in kg) ÷ (Height in m)^2

(BMI below 18.5 is underweight and BMI between 18.5 & 23.5 is normal)

4(B). Non-Nutrition Component:

Subject	No. of girls
a) Received IFA tablets	
b) Received Health check-up	
c) Attended 2 Nutrition & Health Education Counseling	
d) Attended 3 Family Welfare, ARSH & Child Care Practices counseling	
e) Attended 2 Life Skill Education counseling	
f) Exposure visit to at least 1 public service (attach details)	
g) Vocational Training received (16-18 years) (Attach details)	

5) **Total number of Guidance / Counseling Sessions conducted during the month** _____

6) **New entrants and Exit into the Scheme:**

New Entrants		Exit	
Reason	Number	Reasons	Number
Dropped out of school		Entry / re-entry into school	
Turned 11 years		Completed 18 years	
Any other		Any other	

7) **Kishori Samooh:**

a) No. of of Kishori Samooh formed (cumulative)	
b) No. of Sakhi / Sahelis trained in the month	

c) No. of AWCs where Sabla Kits available		
d) Non-nutrition services provided at:	**Place**	**Number**
	AWC	
	School	
	Panchayat Bhawan	
	Other	

8) a. Number of AWCs visited by ICDS Supervisors this month for RGSEAG - ***Sabla*** monitoring:_____

b. Number of AWCs visited by ICDS CDPOs this month for RGSEAG - ***Sabla*** monitoring:_____

c. Number of AWCs visited by DPO this month for RGSEAG - ***Sabla*** monitoring:_____

9) Number of AWCs where Kishori Diwas was celebrated this month:_____

10) Number of villages where meeting of Monitoring and Supervision Committee held during the month _____

11) Number of AWCs where RGSEAG - ***Sabla*** issues were discussed at Village Health and Sanitation Committee meeting:___

12) District-level RGSEAG - ***Sabla*** Monitoring and Supervision Committee meeting held this month? Yes/No

13) Give three key problems with regard to Scheme and action taken by you

a) Problems: _____
_____
_____

b) Action Taken: _____
_____
_____

Name of DPO: _____ Signature _____ Date:_____

Annex 7 (iv)

Monthly Progress Report of RGSEAG - *Sabla* by CDPO

1. **Reporting Month and Year:** _____/_ _____

2. **a. Name of Project and District:** _____/_____

   b. No. of Sectors in the Project: _____

   c. No. of AWCs in the Project: _____

3. **No of AWCs for which the MPR is being submitted:** _____

4. **Beneficiary Coverage:**

4(A). Nutrition Component

Category	No. of Beneficiaries	
	Take Home Ration (THR)	Hot Cooked Meal (HCM)
a. 11– 14 years: Out of School		
b. 14 – 18 years: All		
(i) In-School		
(ii) Out of School		

(i) Average Nutrition Days in the month _____
(ii) Nutritional Status*: Number of Girls with Nutritional Grades
Normal (N) _____
Malnourished (M)_____

* Formula: BMI (in kg/m²) = Weight (in kg) ÷ (Height in m)²
(BMI below 18.5 is underweight and BMI between 18.5 & 23.5 is normal)

4(B). Non-Nutrition Component:

Subject	No. of girls
a) Received IFA tablets	
b) Received Health check-up	
c) Attended 2 Nutrition & Health Education Counseling	
d) Attended 2 Family Welfare, ARSH & Child Care Practices counseling	
e) Attended 3 Life Skill Education counseling	
f) Exposure visit to at least 1 public service (attach details)	
g) Vocational Training received (16-18 years) (Attach details)	

5. **Total number of Guidance / Counseling Sessions conducted during the month** _____

6. **New entrants and Exit into the Scheme:**

New Entrants		Exit	
Reason	Number	Reasons	Number
Dropped out of school		Entry / re-entry into school	
Turned 11 years		Completed 18 years	
Any other		Any other	

7. **Kishori Samooh:**

a) No. of of Kishori Samooh formed (cumulative)		
b) No. of Sakhi / Sahelis trained in the month		
c) No. of AWCs where *Sabla* Kits available		
d) Non-nutrition services provided at:	Place	No.
	AWC	
	School	
	Panchayat Bhawan	
	Other	

8. **Number of AWCs visited by CDPO this month for RGSEAG - *Sabla* monitoring:_____**

9. **Number of AWCs where Kishori Diwas was celebrated this month:_____**

10. **Number of villages where meeting of Monitoring and Supervision Committee held during the month _____**

11. **Number of AWCs where RGSEAG - *Sabla* issues were discussed at Village Health and Sanitation Committee meeting:___**

12. **Meeting of Monitoring & Supervision Committee held: Yes / No**

13. **Give three key problems with regard to RGSEAG - *Sabla* Scheme and action taken by you**

    a) Problems: _____
    _____
    _____

    b) Action Taken: _____
    _____
    _____

Name of CDPO: _____ Signature _____ Date:_____

Annex 7 (iii)

Monthly Progress Report of RGSEAG - *Sabla* by Supervisor

1) **Reporting Month and Year:** _____/____

2) **a. Name of Sector, Project and District:** _____/_____/_____

b. Number of AWCs in the Sector: _____

3) **Number of AWCs for which MPR is being submitted:** _____

4) **Beneficiary Coverage:**

4(A). Nutrition Component:

Category	No. of Beneficiaries	
	Take Home Ration (THR)	Hot Cooked Meal (HCM)
(a) 11– 14 years: Out of School		
(b) 14 – 18 years: All		
•In-School		
•Out of School		

(i) Average Nutrition Days the month _____

(ii) Nutritional Status*: Number of Girls with Nutritional Grades

Normal (N) _____

Malnourished (M)_____

* Formula: BMI (in kg/m²) = Weight (in kg) ÷ (Height in m)²

(BMI below 18.5 is underweight and BMI between 18.5 & 23.5 is normal)

4(B). Non-Nutrition Component:

Subject	No. of girls
(a) Received IFA tablets	
(b) Received Health check-up	
(c) Attended 2 Nutrition & Health Education Counseling	
(d) Attended 3 Family Welfare, ARSH & Child Care Practices counseling	
(e) Attended 2 Life Skill Education counseling	
(f) Exposure visit to at least 1 public service (attach details)	
(g) Vocational Training received (16-18 years) (Attach details)	

5) **Total number of Guidance / Counseling Sessions conducted during the month** _____

6) **New entrants and Exit into the Scheme:**

New Entrants		Exit	
Reason	No.	Reasons	No.
Dropped out of school		Entry / re-entry into school	
Turned 11 years		Completed 18 years	
Any other		Any other	

7) **Kishori Samooh:**

a) No. of of Kishori Samooh formed (cumulative)		
b) No. of Sakhi / Sahelis trained in the month		
c) No. of AWCs where *Sabla* Kits available		
d) Non-nutrition services provided at:	Place	No.
	AWC	
	School	
	Panchayat Bhawan	
	Other	

8) **Number of AWCs visited this month for RGSEAG - *Sabla* monitoring:_____**

9) **Number of AWCs where Kishori Diwas was celebrated this month:_____**

10) **Number of villages where meeting of Monitoring and Supervision Committee held during the month _____**

11) **Number of AWCs where RGSEAG - *Sabla* issues were discussed at Village Health and Sanitation Committee meeting:___**

12) **Give three key problems with regard to RGSEAG - *Sabla* Scheme and action taken by you**

a) Problems: _____
_____
_____

b) Action Taken: _____
_____
_____

Name of Supervisor: _____ Signature _____ Date:_____

Annexure-2

Government of Tripura
Education (Social Welfare & Social Education) Department
Agartala, West Tripura.

No. F.1(2-21)-ICDS/SWE/2008/ 1755(36) Dated, Agartala, the 30/7/2011.

MEMORANDUM

Subject:- Feeding Norms for providing Nutrition Services under the Scheme, RGSEAG-SABLA.

With a view to provide nutrition to the non-school going Adolescent Girls in the age group of 11-18 years and School Going Adolescent Girls in the age group of 14-18 years at the AWCs under the selected districts, Dhalai and West Tripura, the existing cost norm provided for the Pregnant Mother and Lactating Mother under SNP will be introduced under the scheme, Rajib Gandhi Scheme for Empowerment of Adolescent Girls (RGSEAG) - SABLA. Nutrition to the Adolescent Girls in the age group of 11-18 years, who are non-school going, will be provided in the form of Hot Cooked Meal (HCM) 6 (six) days in a week in the AWCs and nutrition to the Adolescent Girls in the age group of 14-18 years, who are school going, will be provided nutrition in the form of mixture of raw rice and lentil as Take Home Ration (THR). Take Home Ration (THR) will be supplied to the Adolescent Girls fortnightly on the day of 1st and 15th day of the month. The break up of the cost norm of Hot cooked Meal (HCM) and Take Home Ration (THR) should be followed by the Anganwadi Workers is as under.

Table-1: Take Home Ration (THR) to the Adolescent Girls under SABLA:

Category	Nature of THR	Ratio per day per beneficiary	Total Quantity of THR to be supplied to the parents/guardians monthly at a time.	
			1st Working day	15th Working day
1	2	3	4	5
School Going Adolescent Girls in the age group of 14-18 years	Mixed Rice & Dal	180 gm (135 gm Rice & 45 gm Dal)	2250 gm (1688 gm Rice & 562 gm Dal	2250 gm (1688 gm Rice & 562 gm Dal

Table-2: Hot Cocked Meals (HCM) to the Adolescent Girls under SABLA:

Category	Items	Rate per kg/Lt in Rs.	Quantity	Cost	Food value	
					Energy (K.Cal)	Protein (gm)
1	2	3	4	5	6	7
All non-school going Adolescent Girls in the age group of 11-18 years	Rice	6.41	135 gm	0.87	468.45	9.31
	Lentil	65.00	45 gm	2.93	154.35	11.29
	Transportation			0.16		
	Vegetable		23 gm	0.37	30.00	0.00
	Mustered Oil	75.00	3 ml	0.23	27.00	0.00
	Fuel			0.30		
	Spices			0.15		
	Total			**Rs.5.00**	**679.80**	**20.60**

Contd....P/2

2. Anganwadi Worker will maintain record in the prescribed register to be supplied soon to the Anganwadi Centres with the guidance of the Supervisors (ICDS) and a separate account shall be maintained in the ICDS projects in connection with implementation of nutrition components under RGSEAG-SABLA.

3. All the CDPOs under Dhalai and West Tripura District are directed to introduce above mentioned procedure of cost norm to implement nutrition components under RGSEAG-SABLA and issue necessary instructions to the ICDS functionaries.

28/2/11

(M. L. Dey)
Joit Secretary to the
Government of Tripura.

To

i) The DISE, Dhalai/West Tripura District,

ii) The all CDPOs, under Dhalai/West Tripura District
.....ICDS Project,

Copy also to:

i) The P.A. to the Hon'ble Minister, Social Welfare & Social Education Department, Government of Tripura for kind information of the Hon'ble Minister.
ii) P.S. to the Principal Secretary, Social Welfare & Social Education etc. Department, Government of Tripura for kind information of the Principal Secretary.
iii) Commissioner & Secretary, RD (Panchayat) Department, Government of Tripura for kind information.
iv) The Principal Officer (Social Education), TTAADC, Khumlung, West Tripura for kind information and necessary action.
v) The Director, Food & Civil Supplies, Tripura for information.
vi) Dy. Director (Social Education), TTAADC, Shikaribari, Ambassa, Dhalai District for information.

28/2/11

(M. L. Dey)
Joit Secretary to the
Government of Tripura.

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