



MISSION DIRECTOR NATIONAL HEALTH MISSION, J&K

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The Chief Medical Officer,

(Vice-Chairman District Health Society),

Districts- Jammu, Samba, Kathua, Rajouri, Pulwama & Budgam.

No: SHS/J&K/NHM/FMG/ 3608 - 3710

Dated: 14/06/2021

Sub: Release of GIA for "India COVID-19 Emergency Response and Health System Strengthening Preparedness Package" under NHM during the financial year 2021-22 (FMR Code:31).

Madam/Sir,

As per the approval/sanction conveyed by the Ministry of Health & Family Welfare, Govt. of India to deal with the existing pandemic of COVID-19 and subsequently approved by the Chairman, Executive Committee, State Health Society, NHM, J&K, sanction is hereby accorded to release of Grants-in-Aid of **Rs.232.20 Lac (Rupees Two Crore Thirty Two Lac and Twenty Thousand Only)** in favour of following District Health Societies under "India COVID-19 Emergency Response and Health System Strengthening Preparedness Package" for the activities mentioned in the enclosed annexure during the financial year 2021-22.

(Rs.in Lac)

S.No.	Name of District Health Society	Amount released now
1	Jammu <i>(including Rs.40 Lac for Govt. Hospital, Gandhi Nagar, Jammu)</i>	90.00
2	Samba <i>(including Rs.10 Lac for District Hospital, Samba)</i>	35.00
3	Kathua	7.20
4	Rajouri	50.00
5	Pulwama	20.00
5	Budgam	30.00
Total		232.20

Accordingly, the above sanctioned GIA is hereby electronically transferred to the official Bank Account of your District Health Society through PFMS/e-transfer.

The Grants-in-aid is released subject to the following conditions:

1. That the sanctioned funds are to be utilized for the activities enlisted in the enclosed annexure under "India COVID-19 Emergency Response and Health System Strengthening Preparedness Package" to deal with COVID-19 pandemic as per the guidelines issued by the MoH&FW, GoI and after observing all codal formalities required under rules.
2. That District Health Society may prioritize the salaries of temporary manpower engaged under ECRP and other activities as per its requirement within the indicative list, so as to ensure utilization of funds, avoiding unnecessary parking of the same at any level.

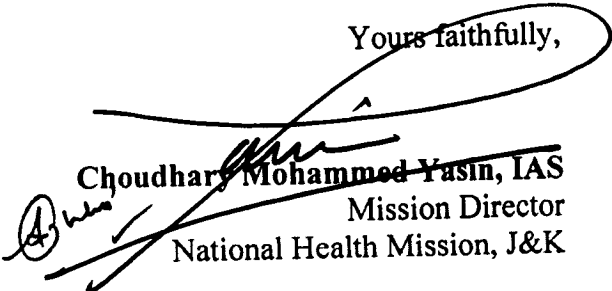
3. That the procurement can be undertaken as per the prevailing procurement rules/GFRs respectively in States/UTs.
4. That the appropriate specifications are important for ensuring the quality of procurement, MoH&FW/ICMR specifications wherever specified may be adhered to. For items for which specifications are not fixed by MoH&FW/ICMR, the States/UTs may do so by following due process as prescribed by the respective State/UT.
5. That the clear documentation must be maintained for all activities related to procurement of both goods and services. Full justification for the proposals should be recorded in the file and approval of the competent authority obtained for all procurement.
6. That it may be noted that for the period of retroactive-financing, where contracts have already been issued, the requisite World Bank form of Anti-corruption guidelines (*Annexure 6.1 as already shared*) is to be signed by contractor/supplier/service provider and the same is to be kept as record in procurement files.
7. That in case of procurement process is yet to start or bidding is ongoing, provisions listed in requisite World Bank form (*Annexure 6.2 already shared*) are to be enclosed with both bidding/RFP documents as well as contract forms.
8. That the details related to all the contracts/procurement issued/made by implementing agencies (and their subordinate agencies/hospitals etc.) should be maintained at State/UT level, which will include name of item procured, name of supplier/contractor/service provider, date of contract signing, value of contract and due completion of contract etc. as per (*Annexure 6.3 already shared*).
9. That in case of civil works if the procurement process is yet to start and/or underway but the contract is not yet signed provision listed in requisite World Bank form as per Annexure-6.4 (already conveyed) are to be enclosed with both bidding/tender/RFP documents as well as signed contracts. For contracts which are signed and where civil works have already started, the contractor is to be encouraged to comply with the provisions.
10. That the documentation for all these procurements will be maintained by the respective implementing agencies (and their subordinate agencies/hospitals etc.) to allow the World Bank (or an agency appointed by WB) to review these documents in future, if necessary.
11. That all the Districts/Implementing agencies will submit the monthly progress reports as per Annexure-5 (already shared) on monthly basis by 5th of each month.
12. That the District Health Society shall accept the funds on PFMS portal after confirming the same from their bank accounts and subsequently release funds to the concerned within two (2) days through the same portal/e- transfer under intimation to the State Health Society, NHM, J&K. Further, Districts/Blocks shall also ensure that all the expenditure is to be uploaded on PFMS portal and implement the EAT module of PFMS.
13. That the timely submission of Concurrent Audit Report & compliance to the observations of Statutory Auditor are to be done.
14. That the Physical/Financial achievements (MPR/FMR) are to be sent to the State Health Society on regular basis.

A. Singh

15. That the proper record of Bank Column Cash Books, Ledgers, Assets created, complete address of beneficiaries and other relevant records are to be maintained at all levels strictly as per the financial guidelines by MoH&FW, GoI.
16. That the accounts of the District Health Society shall be open to inspection by the sanctioning authority and Audit by the Comptroller and Auditor General of India under the provision of CAG (DPC) Act 1971 and internal audit by Principal Accounts Officer of the Ministry of Health & Family Welfare, GoI. Whenever the society is called upon to do so.

Yours faithfully,

Encls: As Stated above.


Choudhary Mohammed Yasin, IAS
Mission Director
National Health Mission, J&K

Copy to the: -

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| 1 | Financial Commissioner to Govt. Health & Medical Education Department (Chairman, Executive Committee, SHS, J&K), J&K Civil Secretariat, Jammu. | :For information |
| 2 | District Development Commissioner (<i>Chairman, District Health Society</i>) – Jammu, Samba, Kathua, Rajouri, Pulwama & Budgam. | :For information |
| 3 | Director (Planning) SHS, NHM, J&K. | :For information |
| 4 | Director Health Services, Jammu/Kashmir. | :For information |
| 5 | Financial Advisor & CAO, SHS, NHM, J&K | :For information |
| 6 | State Nodal Officer, SHS, NHM, J&K. | :For information |
| 7 | Divisional Nodal Officer, SHS, NHM, J&K, Jammu/Kashmir Division | :For information & n.a. |
| 8 | I/C website (www.nhmjk.com) | :Uploading on website |
| 9 | Cashier/Ledger Keepers. | :For recording in books of accounts/PFMS/Tally |
| 10 | Office file | :For record. |

Annexure:

List of activities w.r.t. Grants-in-Aid released towards "COVID-19 –Emergency Response and Health System Strengthening Preparedness Package"

, S. No.	FMR Code	Activity
	<i>B.31</i>	<i>COVID-19</i>
1.	B.31.1	Diagnostics including Sample Transport
2.	B.31.2	Drugs & Supplies including PPE & Masks
3.	B.31.3	Equipment/ Facilities for Patient Care including Support for Ventilators, etc.
4.	B.31.4	Temporary HR including Incentives for Community Health Volunteers
5.	B.31.5	Mobility Support
6.	B.31.6	IT Systems including Hardware & Software, etc.
7.	B.31.7	IEC/ BCC
8.	B.31.8	Training
9.	B.31.9	Misc. (Which could not be accounted for in B.31.1 to B.31.7)