

FIFTEENTH KERALA LEGISLATIVE ASSEMBLY

**COMMITTEE
ON
PUBLIC ACCOUNTS
(2021-2023)**

TWENTY FIRST REPORT

On

**Action Taken by Government on the Recommendations
contained in the Seventy Ninth Report of the
Committee on Public Accounts
(2014-2016)**

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COMMITTEE ON PUBLIC ACCOUNTS
(2021-2023)
COMPOSITION

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Shri Reji B., Additional Secretary

Shri P. S. Selvarajan, Deputy Secretary

Smt. Shamy J., Under Secretary.

INTRODUCTION

I, the Chairman, Committee on Public Accounts, having been authorised by the Committee to present this Report, on their behalf present the Twenty First Report on Action Taken by Government on the Recommendations contained in the Seventy Ninth Report of the Committee on Public Accounts (2014-2016).

The Committee considered and finalised this Report at the meeting held on 8th June 2022.

Thiruvananthapuram,
7th July, 2022.

SUNNY JOSEPH,
Chairman,
Committee on Public Accounts.

REPORT

This Report deals with the Action Taken by the Government on the recommendation contained in the 79th Report of the Committee on Public Accounts (2014-2016).

The 79th report of the Committee on Public Accounts (2014-2016) was presented to the House on 16th December 2014. This Report contained 16 recommendations relating to Health and Family Welfare department. Government was addressed on 24th December, 2014 to furnish the Statements of Action Taken on these recommendations and the final reply was received on 27th February 2020.

The Committee examined the statements of Action Taken in its meetings held on 17-10-2017, 13-12-2017, 31-10-2018, 7-8-2019, 15-12-2020 and 4-8-2021 and decided not to pursue further action on the recommendations in the light of the replies furnished by the Government. The recommendations and Government replies are incorporated in this Report.

HEALTH AND FAMILY WELFARE DEPARTMENT

Recommendation

(Sl. No. 1, Para No. 58)

The Committee chides the Health and Family Welfare Department for not formulating a master plan to implement the objectives as envisaged in the State Mental Health Policy 2000 even after thirteen years. The Committee remarks that the Mental Health Policy 2013 is not an alternative to State Master Plan and directs the Health and Family Welfare Department to formulate a Mental Health Plan at the earliest and also to furnish the revised Mental Health Policy to the members of the Committee.

Action Taken

A Sub Committee has been constituted vide G.O. (Rt) 1434/15/H&FWD dated 18-5-2015 for the formulation of a State Mental Health Plan to achieve the goals envisaged under State Mental Health Policy 2000 and revised Policy 2013. But the Committee could not complete its activities on time. With the coming of

new Government it was decided to constitute a health policy for Government of Kerala. Since the comprehensive health policy will also contain Government policies on Mental Health, it was decided not to have a separate Mental Health Policy.

Recommendation

(Sl. No. 2, Para No. 59)

The Committee notices that there is no effective mechanism to review the progress of implementation of the Mental Health Policy in our State. It is of the opinion that without reviewing the merits and demerits of a policy, it could not be evaluated. So the Committee directs the Health and Family Welfare Department to take necessary steps to evolve a methodology to review the programme.

Action Taken

Government had set up working groups to identify medium and long term of strategies for all aspects of health including Mental Health. Accordingly the working group on mental health formulated the goals. Identified for mental health better Government is in a position on initiating strategy to achieve the goals. Therefore the recommendations may be dropped.

Recommendation

(Sl. No. 3, Para No. 60)

The Committee was surprised to not that a building constructed for the Mental Health Centre, Thrissur was left idle as its construction is not favourable for accommodating lunatic patients. Intensifying the gravity the Health and Welfare Department had settled the bills even without verifying the work. The Committee remarks that the officials of the Health and Family Welfare Department are also equally responsible as the PWD for this futile work. The Committee directs the Health and Welfare department to be more vigilant in avoiding such wastage of public money and suggests that the building should be made use for other productive purposes at the earliest.

Action Taken

The building constructed in the Mental Health Centre, Thrissur has been made fully operating from 14-2-2014.

Recommendation

(Sl. No. 4, Para No. 61)

When informed that the epidemiological survey was envisaged to be completed in January 2014 itself, the Committee urges the Health and Family Welfare Department to furnish a report regarding the epidemiological survey at the earliest.

Action Taken

The Survey Report was published on 16-11-2016.

The major findings of the report are:

The study report estimated the prevalence of the following Psychiatric conditions in general population.

1. Prevalence of Psychosis

(i)	Total population 0.55% (schizophrenia – 0.23%; Bipolar disorder – 0.29%)
(ii)	Adult population – 0.71%
(iii)	Population below the age of 18 yrs 0.1%

2. Mental Retardation – 0.21% (likely to be an under estimate – mild and moderate cases of mental retardation will be missed)

3. Epilepsy – 0.23% (likely to be an under estimate)

4. Prevalence of Psychiatric conditions in, Adult population – 12.43% (18 Yrs and older)

The most common Psychiatric problems in the Adult population are Psychosis, Common Mental Disorders, Alcohol Related Problems and Dementia & other cognitive impairments. Prevalence of these conditions found in the survey are given below:

- (i) Psychosis – 0.71% (Schizophrenia 0.23%; Bipolar disorder 0.29%)
- (ii) Common Mental Disorders – 9%

This include non psychotic psychiatric disorders-Depression, Anxiety, Somatoform disorders and other minor psychiatric disorders. This is the most common psychiatric morbidity in the adult population.

- (iii) Clinically significant Alcohol related problems – 1.4%

Cases of prolonged and heavy Alcohol consumption were only considered here.

- (iv) Dementia and other cognitive impairments – 1.26% (in the population 60 Yrs and above, the prevalence is 10.48%)

5. It is observed that service of trained ASHA workers can be used to find out the prevalence of Psychiatric Conditions in the community ASHAs have been successful in identifying the prevalence of the above four adult mental health problems.

6. Increasing age and social determinants of health like poverty, low education and unemployed status were found to be associated with mental health problems in the community.

7. Assessment of service utilization and needs of people with Psychosis.

The following observation were made.

- (i) About 74.4% of the subjects with Psychosis are getting some form of treatment reducing the treatment gap to 24.6%.
- (ii) One fourth of the mentally ill patients with major mental illness are still not getting necessary treatment (Unwillingness to get treatment financial problems and shortage of medicines were the reason cited by the public). This issue has to be addressed.
- (iii) Majority of patients (89%) get treatment with modern medicine.
- (iv) Proportion of Psychotic patients on regular follow-up was only 56%.
- (v) Contribution of DMHP and CMHP in mental health care was only in 12.15% of cases.

- (vi) Facilities for vocational training, long stay care homes, short stay care homes and Day care centres for the Psychotic patients have emerged as the need of the society in the Survey. This issue has to be addressed properly.
- (vii) 43% of the psychiatric patients were depending on Government facilities for treatment.

Recommendation

(Sl. No. 5 Para No.62)

The Committee observes that an amount of Rs.56 lakh released to the Medical College Hospital, Thiruvananthapuram for enhancing the number of posts of psychiatric and also for commencing M. Phil Courses in Clinical Psychology and Psychiatric Social Worker and the diploma course in psychiatric nursing was refunded without initiating any step. It suggests that the Health and Family Welfare Department should take meticulous effort to get the amount to materialise the proposals at the earliest.

Action Taken

The fund was meant for implementation of the scheme in 2010-11 and the 1st instalment of Rs. 56 lakh which was released to the Principal, Government Medical College, Thiruvananthapuram, could not be utilised due to technical reasons, mainly because of the short span of time to fulfill the terms and conditions of the sanctioned fund. Naturally Government/implementing agencies are duty bound to refund the unutilised fund, if it is not specified in the release orders that the amount could be parked in separate fund and used for period stretching to different Financial years. Therefore at this distant of time there is no scope for either re-validation or re-allocation of the amount by Government of India.

Further Recommendation

2010-11 കാലയളവിൽ 56 ലക്ഷം രൂപ അനുവദിച്ചിട്ടും ആയത് യഥാസമയം വിനിയോഗിക്കാത്തത് സംബന്ധിച്ച് സമിതിയ്ക്ക് നൽകിയ മറുപടിയിൽ വ്യക്തതയില്ലെന്ന് അഭിപ്രായപ്പെട്ട സമിതി പ്രസ്തുത തുക വിനിയോഗിക്കാത്തത് സംബന്ധിച്ച കാരണം വിശദമാക്കുന്ന വ്യക്തമായ റിപ്പോർട്ട് ലഭ്യമാക്കാൻ നിർദ്ദേശിച്ചു.

Action Taken

An amount of Rs. 294 lakh was approved for the upgradation of Department of Psychiatry in Government Medical College, Thiruvananthapuram under the manpower development scheme-B of National Mental Health Programme (NMHP) during the financial year 2010-11. Out of this, the 1st instalment of Rs.56,00,000 was released to Medical College, Thiruvananthapuram. But the fund remained unutilised till 22-2-2013. On the basis of the direction from Government, the amount of Rs.56 lakh along with interest Rs.2,61,987 was refunded to the account of NHM. But NHM had not refunded this amount to Government of India. Meanwhile, the second instalment Rs.1,17,66,000 was sanctioned by Government of India and released to NHM.

Then the HOD of Psychiatry submitted revised proposal and Administrative Sanction was accorded by Government of Kerala. Consequently, the NHM transferred the whole amount of Rs.1,76,27,987 including the refunded amount of Rs.56 lakh and its interest Rs.2,61,987 to the account of the Principal, Government Medical College, Thiruvananthapuram on 20-6-2016. The work in this regard is in progress and hence informed that, no amount sanctioned under NMHP has been allowed to lapse.

As per Manpower Development Scheme-Plan B, increase in post of Psychiatrist is not required, instead of that hike in MD seats for Psychiatry is required. As such the post of Psychiatrist was not increased, but MD seats (Psychiatry) were increased from 3 to 11 during this period.

Regarding starting of Diploma course in Psychiatric Nursing necessary steps are being taken. The proposal for starting of MPhil course in Clinical Psychology/Post graduate diploma in Clinical Psychology is being examined in Government.

Recommendation

(Sl. No. 6 Para No.63)

The Committee recommends to take necessary steps to start Psychiatric Units in all Taluk Head Quarters Hospitals and the hospitals upgraded as District Hospitals.

Action Taken

Government have published a standard staffing pattern for Taluk Head Quarters Hospital under the Ardrum Mission implemented as part of the four major development initiatives announced by the Hon'ble Chief Minister. Psychiatry is one of the services identified under the area. Government have initiated a process for providing these services. It is expected that all services which form part of standard staffing pattern for each level of hospitals will be created for the next 3 years. When that is completed psychiatric unit will be available in all Taluk Head Quarters Hospitals provided we are able to recruit adequate number of staff. The standard staff pattern for taluk head quarters hospitals under Ardrum Mission along with the other details are enclosed herewith. (Annexure I)

Recommendation

(Sl. No. 7, Para No.64)

The Committee recommends that measures should be taken to operationalise the IMHANS at Kozhikode at the earliest. Necessary fund and posts be sanctioned for its smooth functioning.

Action Taken

Construction of the new four storied building for IMHANS in the Government Medical College Campus is Completed. The Child Development Services (CDS) of IMHANS now functions in the new building with daily out-patient clinics Adult Psychiatric out-patient clinics function on every Tuesdays and Fridays.

M-Phil Psychiatric Social work course has already started in the year 2014 with intake of 8 students and the admission process for the second batch is already started. The course is affiliated to the Kerala University of Health Sciences (KUHS). Indian Nursing Council has given approval for starting post basic Diploma in Psychiatric nursing course and the course will commence in this academic year.

It is four storied beautiful building. Due to shortage of staff the building is only partly utilized. The request for creation of minimum required faculty posts and also the request for permission to appoint minimum staff on contract basis till the posts are created is under the consideration of Government.

Recommendation

(Sl. No. 8, Para No.65)

The Committee was anxious about the plight of the lunatics. It remarks that the person once treated for psychiatric disorders will be viewed with suspicious eyes through out their life. The Committee feels pity over the fact that many patients were left abandoned at the place of treatment even after they were cured. It emphasizes the need of a State level Rehabilitation Centre under the control and supervision of the Health and Family Welfare Department with facilities for work as well as vocational training. The Committee is of the opinion that attending mental patients requires much dedication and should not be carried out as part of one's official duty. Hence it suggests to incorporate voluntary agencies in the rehabilitation of mental patients.

Action Taken

Mental care and rehabilitation of Psychiatric patients are sensitive issues to be handled with utmost care and preparation. The Psychiatric patients accommodated at different centres are of different age group and sex. The mental disorder and treatment of persons varies from one another. A few requires prolonged treatment and after care. Still then, there are a few others who are always aggressive. Government consider it as a delicate issue to be handled with more humane approach and dedication. Considering the anxiety expressed by the Public Accounts Committee, Government have engaged the leading voluntary agencies in India dealing with Mental Health, such as 'the Banyan' and 'Tata Institute of Social Sciences' to help in rehabilitation of cured patients.

Recommendation

(Sl. No. 9, Para No.66)

The Committee directs the Health and Family Welfare Department to collect and furnish detailed report regarding the Psychiatric hospitals/nursing homes, de-addiction centres, rehabilitation centres, care homes, day-care homes, etc. under the control of Non governmental Organizations or Private agencies functioning with the aid from Social Justice Department.

Action Taken

The list is appended as annexure (Annexure II).

Recommendations

(Sl. No. 10, Para No. 67)

Considering the Media reports regarding the reprehensible activities of certain private agencies including sexual abuse, the Committee demands for closing private institutions lacking adequate facilities. It directs that State Mental Health Authority has to monitor such institutions in this sector. The Committee recommends that the Health and Family Welfare Department should take necessary steps to compile a comprehensive database of all mental health treatment centres in various disciplines in the state.

Action taken

List of the institutions is appended as (Annexure III).

Recommendations

(Sl. No. 11, Para No. 68)

When informed that in our State Rehabilitation Centre, care homes, day care homes etc. for lunatics are being established with the certification of Social Justice Department under the PWD Act [Persons with disabilities (Equal Opportunities, Protection of Rights and Full participation) Act, 1995] the Committee opines that there should be a consensus between the Social Justice and Health and Family Welfare Departments in this regard and licence for such institutions should be issued under the provisions of Mental Health Act by the Health and Family Welfare Department. It directs the department to take up the matter with Government of India to resolve the contradiction in the provisions in the Mental Health Act and PWD act regarding the admission of wandering lunatics in sub centres.

Action taken

As there is no visible contradiction in the functions of Mental Health Act, 1987 regarding admission and treatment of wandering lunatics the recommendation of the Committee in this regard appears to be difficult to implement. It is settled law that if the State formulate a law on a matter that falls under the concurrent list a law made by

the Parliament shall have overriding provisions over the rule enacted by the State on the same subject. Therefore it is not within the power of the State Government to advise the Union Government in true terms and text of the recommendation. However the Health and Family Welfare Department is maintaining consensus with the Social Justice Department on managing the rehabilitation centre of those who are mentally ill.

Recommendation

(Sl. No. 12, Para No. 69)

The Committee strongly recommends to take appropriate action to conduct inspections as envisaged in the Mental Health Act and to appoint adequate number of inspectors, at the earliest.

Action Taken

As per G.O. (Rt.) 3208/14/H&FWD dated 27-9-2014, Government have appointed a pool of qualified psychiatrists as inspecting Officers at State level as per Section 13 of Mental Health Act, 1987 and Rule 29(3) of Kerala State Mental Health Rules. It was also notified as SRO 94/2015. The Psychiatric inspecting officers so appointed are authorised to inspect Psychiatric Institutions in the State based on

(a) direction from state Government or licensing authority and

(b) to inspect the facilities in the Mental Health Institutions in connection with issuing of new licences or renewal of existing licence.

In connection with (a) above 226 application for licence was received from various Private Psychiatric institutions to Kerala State Mental Health Authority which is the licensing authority till date. The Psychiatric inspecting officer have conducted inspections in 209 institutions with the directions to ratify the same and file compliance report. Based on the compliance report received from those institutions, 53 re-inspections have also been conducted by the psychiatric Inspecting officer. In connection with (a) above, 17 inspections have been conducted in different institutions.

Recommendation

(Sl. No. 13, Para No. 70)

The Committee directs the Health and Family Welfare Department that sufficient fund should be provided to construct a new building for State Mental Health Authority. It also recommends to take necessary steps to enhance the staff strength of State Mental Health Authority.

Action Taken

Renovation of Kerala State Mental Health Authority building at an estimated cost of Rs. 15,00,000 is partially completed. Electrical maintenance work estimating Rs. 2,60,000 is yet to be started. Vide letter No. A/120/2015/SMHA dated 10-4-2015 it was informed to Health and Family Welfare Department that the issue of enhancing staff strength of State Mental Health Authority shall be considered after the completion of repair and maintenance of the building.

Recommendation

(Sl. No. 14, Para No.71)

The Committee analyses that in Higher Secondary schools serious psychological issues are reported among children as a result of the increased use of mobile phones and internet as well as the mental stress due to academic competition which necessitated setting up of counselling centres in schools. Hence the Committee emphasizes the necessity of expanding mental health programme. It observes that many unauthorized counselling centres are functioning through out the State. So the Committee directs the Health and Family Welfare Department to take up the matter with central government to make necessary amendments in the Mental Health Act to make the registration of counselling centres mandatory.

Action Taken

School Mental Health Programme is being implemented under Comprehensive Mental Health Programme through District Mental Health Programme/Community Mental Health Programme in all districts. Steps are being taken to address the issues related to increased use of mobile phones and internet and mental stress due to academic competition through this Programme.

As per direction from State Government (Lr. No. 825/E1/2015/H&FWD, dated 2-6-2015) Secretary, state Mental Health Authority (Lr. No. A/120/2015/SMHA dated 2-7-2015) proposed that Health and Family Department should formulate guidelines to make it mandatory to register the counselling centres under Kerala State Mental Health Authority, and that the Government shall examine the scope of making registration of counselling centres mandatory. New Mental Health Care Act published on April 7, 2017 did not include Registration of Counselling centres in it.

Recommendation

(Sl. No. 15, Para No. 72)

The Committee expresses its dissatisfaction over the lackadaisical attitude of the Health & Family Welfare Department in not furnishing the Remedial measures taken statement regarding the Audit paragraphs even at the time of Committee meeting. It condemns the department for not complying the assurance given at the time of witness examination that notes would be furnished within one month. It reiterates its earlier demand to furnish the same within one month.

Action Taken

The Remedial Measures taken Statement of audit para 1.1 contained in the Audit Report 2010 is furnished below. National Rural Health Mission PIP 2012-13 Kerala have sanctioned fund of Rs.1,05,13,100 to Kerala State Mental Health Authority for conducting Epidemiological Survey in 5 districts such as Kollam, Idukki, Palakkad, Wayanad and Kasargod. The survey had been completed and report submitted to Government 28th April, 2016. The report was accepted vide G.o (P) No. 366/2017/H&FWD, Dated 6-2-2017. State Mental Health Authority is carrying out inspections for the purpose of issuing licence and renewal of licence.

Periodic inspection could not be conducted due to shortage of Psychiatric Inspecting officers. Steps have already been taken to fill up the existing vacancies in the Mental health Centres by promotion and appointment through PSC/Employment exchange.

The Mental Health care Act, 2017 which is coming into effect from January 7, 2018 does not have Board of Visitors. So there is no relevance in constituting Board of Visitors now.

The details of utilization of fund for the mental Health Programme in Medical College Thiruvananthapuram, Alappuzha, Kottayam, Thrissur And Kozhikode is furnished below:

1. Medical College, Thiruvananthapuram

During 2005-06 to 2008-09, an amount of Rs. 47,62,100 was received for National Mental Health Programme from Government of India. It was fully utilised and proper inspection has been done by the Mental Health Authority in Psychiatric institutions and licensing is up-to-date.

2. Medical College, Alappuzha

An amount of Rs. 30,68,000 was sanctioned by Government of India during the year 2007-08 for the purpose of upgradation of Psychiatric wing and an amount of Rs. 3,76,438 received as interest from 2007-08 From this an amount of Rs. 34,44,438 utilized for the construction of OP block in psychiatric department and Rs. 50,525 was utilised for the purchase of equipment. There is only an amount of Rs. 11,860 is remaining unspent balance.

3. Medical College, Kottayam

An amount of Rs. 26,20,000 released for the scheme DMHP during the year 2004-2005 and balance amount of Rs.348 only remaining in the year 2013 and now it is completely utilized. An amount of Rs.45,20,000 has been released by Government of India for the scheme NMHP during the year 2007-2008 and it was fully utilised in the year 2014.

4. Medical College, Thrissur

An amount of Rs.11,16,500 has been released by Government of India during the period of 2005-06 and an amount of Rs. 33,49,500 has been released during 2007-08 for the upgradation of Psychiatric wing. An amount of Rs. 17,66,000 was remaining in 2008-09 and it was fully utilized in the year 2014-15.

5. Medical College, Kozhikode

An amount of Rs. 26,20,000 was released by Government of India for this institution. An amount of Rs. 69,390 remaining in 2008-09 and it was fully utilised in the year 2009-10.

Recommendation

(Sl. No. 16, Para No. 76)

The Committee analyses that the deficiencies pointed out by Audit are due to the non-integration of Office Management System and Hospital Information System in the Regional Cancer Center, which were working on different updated technologies. The Committee evaluates that it is high time to develop a full fledged Hospital Management Information System (HMIS) adopting latest technologies. So the Committee directs the Health and Family Welfare Department to take essential steps in this regard. It also recommends that Regional Cancer Center should be permitted to go ahead with request for proposal (RFP) for HMIS at the earliest so that specific uses and design requirements of RCC could be met rather than implementing the HMIS through the e-Health Project of Government of Kerala and urges the Health & Family Welfare Department to look into the matter urgently.

Action Taken

In order to rectify the serious discrepancies and deficiencies that evolved/arose due to the use of outdated technologies and non-integration of Office Management System and Hospital Information System, it adopted a software, Tally ERP 9 as an interim measure to resolve the issues. Government have sanctioned Rs.3 (Three) crore for the development of office Management System and Hospital Information Systems vide G.O. (MS) No. 325/2013/H&FWD dated 16-7-2013. Based on this, it could develop and implement a full fledged Management Information System (HMIS) in RCC with in a period of one year.

SUNNY JOSEPH,

Chairman,

Committee on Public Accounts.

Thiruvananthapuram,

7th July, 2022.

APPENDIX-I

