Chapter-II
Performance Audit

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Department of Health and Family Welfare

2.1 Functioning of AYUSH

Audit of the Directorate of AYUSH, its 24 dispensaries and three hospitals was conducted with a view to assessing the performance of the Directorate in discharging its mandated functions of providing quality healthcare facilities in Indian Systems of Medicine. Major audit findings are as follows:

Highlights

- ***Shortages in the cadres of doctor, pharmacist and nurse in three Medical Colleges with attached Hospitals, viz. Tibbia College, Dr. B. R. Sur Homeopathic Medical College Hospital and Research Centre and Chaudhary Brahm Prakash Ayurvedic Charak Sansthan were between 37 and 52 per cent.***

(Paragraph 2.1.7.1)

- ***There was significant shortage of medical staff throughout 2012-17 in AYUSH dispensaries. Against sanctioned posts of 163 Doctors and 155 Pharmacists, 28 posts of Doctor and 61 posts of Pharmacist were vacant as of March 2017. Out of 103 homeopathic dispensaries, only 24 were having full complement of staff to ensure proper patient care.***

(Paragraph 2.1.7.2)

- ***Sixteen Ayurvedic Dispensaries were working in two-room structures and five in one-room structure against the required three rooms.***

(Paragraph 2.1.8.1)

- ***Equipment and infrastructure facilities in AYUSH hospitals and dispensaries such as drug storage, emergency services, medical record department, essential diagnostic equipment, operation theatres, ambulances and were inadequate.***

(Paragraphs 2.1.8.2, 2.1.8.5, 2.1.8.7, 2.1.8.8, 2.1.8.9, 2.1.8.11 and 2.1.8.12)

- ***Delay in construction of infrastructure at Dr. B. R. Sur Homeopathic Medical College Hospital and Research Centre resulted into the Supreme Court Judgement on 27 per cent OBC reservation for student admission in SHMC not being implemented yet.***

(Paragraph 2.1.8.4)

- ***Except in Ch. Brahm Prakash Ayurvedic Charak Sansthan, none of the AYUSH hospitals had Yoga and Naturopathy facilities due to inadequate space though website of GNCTD, Directorate of AYUSH is displaying Yoga and Naturopathy as available services.***

(Paragraph 2.1.8.14)

- ***Ayurvedic and Unani dispensaries were provided with only 40 per cent of essential medicines during 2012-17. Forty three per cent of essential medicines were not available in Homeopathic Dispensaries at any given time during the period 2012-17.***

(Paragraph 2.1.9.1)

- ***Ayurvedic and Unani medicines were procured with reduced shelf life ranging between 25 and 58 per cent during 2012-17. As against the quality control mechanism in Homeopathic medicines which had provision for batch-wise and sub-batch-wise testing of medicines, the Ayurvedic and Unani Medicines had a mechanism of testing medicines on random basis.***

(Paragraph 2.1.9.4)

- ***In violation of Departmental procurement policy, Classical Ayurvedic and Unani medicines (₹ 32.87 crore) were not purchased from IMPCL by the Directorate, Tibbia College and CBPACS during 2012-17 and Patented/Proprietary medicines (₹ 14.19 crore) were not purchased through open tender.***

(Paragraph 2.1.9.5)

- ***There were inadequate inspections of manufacturing and selling units of medicines to seek assurance on the quality of these medicines. Drug Controller conducted 8, 267, and 149 inspections against 31, 424 and 180 mandatory inspections in respect of Homeopathic, Ayurvedic, and Unani manufacturing units respectively.***

(Paragraph 2.1.11.3)

2.1.1 Introduction

The Government of National Capital Territory of Delhi (GNCTD) established (May 1996) a separate Department of Indian System of Medicine and Homeopathy (ISM&H) under the Health and Family Welfare Department (H&FW or Department) to encourage the use of alternative systems of medicines such as Ayurveda, Yoga, Unani, Siddha and Homeopathy (AYUSH) in healthcare delivery and to ensure propagation of research and education in these systems. The ISM&H was renamed as Directorate of AYUSH (Directorate) in the year 2013.

This Directorate is responsible for providing healthcare facilities through 163 dispensaries (40 Ayurvedic, 20 Unani, and 103 Homeopathic) and education through undergraduate and postgraduate courses at four educational institutions[1]. Besides, Directorate is responsible for issuing licenses and registration of practitioners under Drugs and Cosmetic Act; issuing approval to the testing laboratories for Ayurveda/ Unani medicines through Drug Control Cell; and conducting market survey to check quality of available Ayurveda/ Unani medicines; and creating awareness among masses. Drug Control Department (DCD) under the H&FW grants/renews licenses to sellers and manufacturers of Allopathic drugs and Homeopathic medicines.

2.1.2 Organizational Structure

The Directorate, headed by a Director, functions under the overall supervision of the Principal Secretary, Department of Health and Family Welfare. Director is assisted by a Joint Director, three Deputy Directors, one each for Ayurveda, Homeopathy and Unani, Assistant Directors and Medical officers. Drug Control Cell under the Directorate consists of two Assistant Drug Controllers/Licensing Authority one each in Ayurveda and Unani, with three Drugs Inspectors. Drug Control Department (DCD) under H&FW functions with five Assistant Drug Controllers and 23 Drug Inspectors.

2.1.3 Audit Objectives

The main audit objective of this performance audit was to assess whether the schemes and programmes of AYUSH were adequately planned and executed effectively and efficiently with a view to promoting the use of alternative systems of medicines in healthcare delivery and ensuring propagation of research and education in these systems.

2.1.4 Audit Scope, Methodology and Criteria

The performance audit on 'Functioning of AYUSH' covering the period 2012-17 was carried out during May-August 2017. Audit examined the records of:

(a) The Office of the Directorate, Drug Control Cell, Homeopathic Wing, Drug Control Department, both Central Drug Stores, and six Ayurveda, three Unani and 15 Homeopathic dispensaries[2] out of 40 Ayurveda, 20 Unani and 103 Homeopathic dispensaries;

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[1] (i)Ayurvedic and Unani Tibbia College and Hospital (A&U Tibbia Hospital), (ii) Dr. B.R.Sur Homeopathic Medical College, Hospital and Research Centre (SHMC) (iii) Ch. Brahm Prakash Ayurvedic Charak Sansthan (CBPACS) and (iv) Nehru Homeopathic Medical College and Hospital.

[2] **DIRECTORATE OF AYUSH- Homeopathy Dispensaries (i)** PreetVihar, (ii) Saket, (iii) Dwarka Sector 14, (iv) Nangli Jalib, (v) Paschim Puri (vi) Raghubir Nagar (vii) Sardar Vallabh Bhai Patel Hospital, (viii) Kondli, (ix) South Campus Only (M,W,F), (x) Jagpravesh Chander Hospital, (xi) Seelam Pur Hospital, (xii) Suraj Mal Vihar, (xiii) Ber Sarai, (xiv) Madangir, (xv) Chaukhandi; **Ayurvedic Dispensaries** (i) Satyavadi Harish Chandra Hospital, Narela, (ii) Dharamshala Block, Dr. B.R. Ambedkar Hospital, (iii) Sector-17, Dwarka, (iv) Block A, Mayur Vihar- III, (v) H-Block, Jehangirpuri, (vi) Sonia Vihar; **Unani Dispensaries** (i) Chamelion Road, Bara Hindu Rao, (ii) Batla House, Okhala , (iii) Block A, Mayur Vihar- III, Kondli.

(b) Four autonomous bodies of Directorate, namely, Board of Homoeopathic System of Medicine, Delhi Bhartiya Chikitsa Parishad (DBCP), Examining Body for Para Medical Training for Bhartiya Chikitsa Delhi, and Delhi Homoeopathic Anusandhan Parishad (DHAP); and

(c) Three out of four Ayurvedic, Unani and Homeopathic Medical Colleges with attached hospitals[3].

An Entry Conference with the auditee organizations was conducted on 28 April 2017 to discuss the audit objectives, scope, and criteria. Records were reviewed for the selected entities. A draft Audit Report was issued to the Director, AYUSH on 19 September 2017 followed by an exit conference held with the Director, AYUSH on 27 September 2017. Their replies of August/October 2017 have been suitably included in this report.

The audit criteria used for this performance audit included – objectives and targets for GNCTD in respect of promoting AYUSH under 12th Five Year Plan; the Drugs and Cosmetics Act, 1940; the General Financial Rules (GFR) 2005; and Government policies, directions, orders and guidelines.

A 'Performance Audit of the Directorate of Indian systems of Medicine and Homeopathy' was printed in the report of the Comptroller and Auditor General of India on Government of NCT of Delhi of 2005 and Action Taken Note on the same is awaited. We however have suitably covered these points in this audit.

Audit Findings

There has been an increase in in-patient admissions and outpatients in all three hospitals and dispensaries during 2012-17 as given in **Table 2.1.1**. Expenditure on medicines increased from ₹16.09 crore in 2012-13 to ₹ 22.55 crore in 2016-17.

Table 2.1.1: Details of Patient footfall during 2012-17

Year	AYUSH Dispensaries	A&U Tibbia		SHMC		CBPACS	
		OPD	IPD	OPD	IPD	OPD	IPD
2012-13	24,27,815	2,28,284	4,295	64,022	357	2,95,753	5,903
2013-14	28,93,599	2,42,726	5,196	56,541	362	2,86,785	6,395
2014-15	32,55,223	2,36,931	5,802	64,687	428	2,67,813	6,162
2015-16	35,76,042	2,76,716	5,796	70,660	358	3,09,077	8,033
2016-17	33,93,024	2,96,727	5,317	61,629	275	3,33,150	8,073

[3] (i)Ayurvedic and Unani Tibbia College and Hospitals (A&U Tibbia hospital), (ii) Dr. B.R.Sur Homeopathic Medical College Hospital and Research Centre (SHMC) and (iii) Ch. Brahm Prakash Ayurvedic Charak Sansthan (CBPACS).

Overall increase in patient footfalls over the years means that there has been increasing awareness about efficacy and acceptance of Indian System of medications among the people. Therefore, it was important to adequately plan and execute the schemes and programmes of AYUSH effectively and efficiently to expand and promote the use of alternative systems of medicines in healthcare delivery and research and education in these systems. Audit however observed the following inadequacies and deficiencies in planning and execution of AYUSH schemes and programmes.

2.1.5 Planning

2.1.5.1 Annual action plans and implementation strategy not prepared

The National Policy on promotion of ISM&H-2002 envisages that vast infrastructure of ISM&H in the country should be optimally utilised for delivery of healthcare to the people. It also envisaged requirement of a perspective annual action plan in consonance with the national policy for integration, at the appropriate levels, of the services available under these systems of medicines. Though targets were earmarked in 12th Five Year Plan (FYP) followed by annual plans for the Directorate of AYUSH, and its autonomous bodies, hospitals and colleges, no annual action plan or overall implementation strategy was prepared by the Directorate and other institutions for achieving these targets. This has impacted implementation of the FYP as commented below.

(i) Directorate did not initiate action to achieve specific objectives of FYP viz. operationalisation of water treatment plant; installation of BMD (Bone Mineral Density) Machine to assess bone density; getting NABH accreditation for Ch. Brahm Prakash Ayurvedic Charak Sansthan; establishment of homeopathic dispensaries under Bhagidari scheme; establishment of 100 homeopathic clinics under Public Private Partnership project (PPP); introduction of paramedical courses in Ayurveda, Unani and Panchkarma technique; establishment of Hakim Ajmal Khan Academy and Museum; and construction of information cum documentation centre and academic blocks in Tibbia College. Sustainable Development Goals (SDGs) were not mapped with the ongoing services and schemes to assess whether the SDGs relevant to health services are effectively planned and implemented.

(ii) There was shortfall in implementation of other components such as (i) upgradation of radiology services in Dr. B. R. Sur Homeopathic Medical College Hospital and Research Centre (SHMC); (ii) opening of 60 new AYUSH dispensaries (25 Ayurvedic, 10 Unani and 25 Homeopathic); (iii) provision of health care services of Indian System of Medicine (ISM) through Dispensaries; (iv) procurement of Equipment and Medicines; (v) strengthening of drug control unit of ISM; and (vi) computerization of hospital services and up-gradation of library in SHMC.

2.1.5.2 Non-up gradation of radiology services in SHMC

Under the FYP, the SHMC envisaged upgradation of radiology services like X-ray, Ultrasound, and ECG machines; development of dental department, centralized air conditioning in OPDs; and strengthening of minor surgical facilities, which were not completed by conclusion of the FYP in March 2017, adversely impacting patient care services.

2.1.5.3 Shortfall in opening of new dispensaries

During the FYP, Directorate had fixed the target for opening of 60 new dispensaries against which it could open only 25 dispensaries as detailed in **Table 2.1.2**.

Table 2.1.2: Detail of shortfall in opening of new dispensaries

Dispensaries	Target of new dispensaries during 2012-17	Target Achieved	Shortfall
Homeopathic	25	12	13
Ayurvedic	25	8	17
Unani	10	5	5
Total	**60**	**25**	**35**

Directorate did not consider tapping available space and infrastructure in Delhi Government Hospitals for opening of new AYUSH dispensaries. Directorate did not establish criteria or norms for selection of area, beneficiaries to be covered, distance between two dispensaries and infrastructural supports for opening of new dispensaries. As a result, new dispensaries were opened without any objective criteria. For example, a homeopathic dispensary was opened in South Campus of Delhi University which is in close vicinity of SHMC. Directorate (October 2017) replied that it will fix the target to open dispensary in different zones of Delhi and at sufficient distance to provide healthcare uniformly.

2.1.5.4 Computerization of hospital services

The Directorate had purchased 118 computers with UPS and 87 homeopathic software[4] worth ₹ 57.50 lakh for Directorate, Central Homeopathic Drug Store, and homeopathic dispensaries during 2006-12 to computerize the inventory management and patients data in dispensaries. However, only 28 out of 103 homeopathic dispensaries were having both computer and software in working condition as of July 2017.

SHMC planned computerization of hospital services from registration to discharge of patients and up gradation of website in FYP but the same has not been completed. Total 25 computers procured during 2015-16 were not being used for patient registration and discharge services as they did not procure the related software.

[4] Softwares named Kenbo Version 1.0 (11 nos.), Hompath 8.0 Premium Collection (5 nos.) and Radar (71 nos.), which are meant for use by the doctors.

2.1.5.5 Non-upgradation of Library

As per 12th Five Year Plan (2012-17), the SHMC was to upgrade its Library having 5,720 books through full automation, smart cards (library) activation, and purchase of new books and journals with bar coding facility. However, SHMC could not achieve the target of upgradation of Library as of August 2017. SHMC replied that though new books/ journals were purchased, but neither full automation of library nor smart cards activation were initiated due to non-availability of Librarian and IT staff.

2.1.5.6 Non-functional State Medicinal Plant Board

As per directions of GOI, GNCTD constituted (2006) State Medicinal Plant Board (SMPB) with Director, AYUSH as Chief Executive Officer for co-ordination of all matters relating to medicinal plants including drawing of policies and strategies for conservation, proper harvesting, cost effective cultivation and marketing of raw materials. There was no record to show whether the Board has been meeting and performing its stated responsibilities. There was no action plan or policy for development of medicinal plants in NCTD. Directorate admitted (September 2017) that neither any survey or inspection was conducted nor any action plan/ policy was prepared for the development of medicinal plants in NCT area.

2.1.6 Financial Management

2.1.6.1 Budget Allocation and Expenditure

Year wise budget allocations and expenditure during 2012-17 are given in **Table 2.1.3**.

Table 2.1.3: Budget allocation and utilization of funds during 2012-2017

(₹ In crore)

Name of Unit	Budget allocation		Expenditure	
	Plan	Non-Plan	Plan	Non-Plan
Directorate of AYUSH	182.19	28.09	164.05	26.82
Homeopathic Wing	22.15	97.54	8.72	95.93
A & U Tibbia College	42.03	100.37	40.65	98.00
SHMC	15.85	23.50	13.39	22.80
CBPACS	82.00	-	106.80	-
Nehru Homeopathic Medical College and Hospital	14.76	54.71	13.40	52.11

Source: Demand for Grants (for expenditure figures).

Funds amounting to ₹ 31.57 crore (15.45 *per cent*) remained unutilized by the Directorate and Homeopathic wing under Plan head during the year 2012-17.

2.1.6.2 Rush of expenditure in the last month of financial year

Rule 56(3) of GFR, 2005 states that rush of expenditure beyond 15 *per cent*, particularly in the closing months of the financial year shall be regarded as a breach of financial propriety and shall be avoided. Audit noticed that in 134 cases, 15 to 100 *per cent* of expenditure under various heads of plan and non-plan were incurred in the month of March alone during 2012-17 which was against the spirit of the said rule.

Directorate stated (August 2017) that framing and finalization of certain policies takes a long time due to which, sometimes, expenditure is incurred almost at the end of the financial year. Reply is not acceptable as policies are generally framed before or at the beginning of the financial year and financial rules should be adhered while implementing the policies. Directorate and SHMC replied that the observation has been noted for future compliance.

2.1.6.3 Expenditure on advertisements without approval of competent authority

Expenditure of ₹ 1.11 crore was incurred on advertisement and publicity during three years i.e. 2015-17 by the Directorate, CBPACS, and Tibbia college without the approval of the Chief Minister/ Deputy Chief Minister, GNCTD in contravention of directions issued by the GNCTD from time to time (May 2007, April 2008, and January 2016). Thus, all expenses on the advertising and publicity were unauthorized. Further, 58.83 *per cent* of the total expenditure incurred was at the end of the financial years ostensibly to exhaust the funds. Directorate of AYUSH replied (16 January 2018) that the approval of the Chief Minister/Deputy Chief Minister, GNCTD was not required as they incurred expenditure on advertisements and publicity which were of informative nature and as such there was no creative designing in it. Reply is not acceptable. The above referred instructions of the GNCTD states that all advertisement designs in print media, hoardings, TV, sports, radio jingles or department brochures need to be compulsorily approved by the Chief Minister/Deputy Chief Minister to ensure standardization in the quality and message design.

2.1.7 Human Resource Management

2.1.7.1 Shortage of Staff in Hospitals

Significant staff shortages in the cadres of doctors, pharmacists and nurses ranging from 37 to 52 *per cent* were noticed in three Medical Colleges with attached Hospitals, viz. Tibbia College, SHMC and CBPACS as detailed in **Table 2.1.4**.

Table 2.1.4: Staff position in Medical Colleges and Hospitals

Category	Tibbia College		CBPACS		SHMC		Total		Shortage of staff	
	SS	MIP	SS	MIP	SS	MIP	SS	MIP	Nos.	%
Doctors	33	30	104	55+3*	55	21	192	109	83	43
Pharmacists	8	3	14	7	3	2	25	12	13	52
Nurses	13	3	47	31	13	12	73	46	27	37

**Outsourced*

The cadre controlling departments however failed to fill up these positions despite requests from the Hospitals. It was observed that recruitment for new doctors was in process and examination has been conducted (in December 2017). The fact remains that shortages in these cadres restrict the ability of the institutions to implement teaching and health care programs in an effective and efficient manner. Further, as per DGHS's Guidelines, one Junior Dietician is required for 50 bedded Hospital and one Dietician and one Junior Dietician for 200 bedded Hospital. Despite providing diets for in-patients as part of the treatment, SHMC, Tibbia Hospital and CBPACS did not have any posts of Dietician/Junior Dietician which indicates that the hospitals are not giving due importance to this aspect of treatment.

2.1.7.2 Shortage of staff in Dispensaries

The State Government sanctioned the posts of one General Duty Medical Officer (GDMO), one Pharmacist, and one Nursing Orderly (NO) in each dispensary. Against sanctioned posts of 163 doctors and 155 Pharmacists, 28 posts of Doctors and 61 posts of Pharmacists were vacant as of March 2017. Out of 103 homeopathic dispensaries, only 24 were having full complement of staff to ensure proper patient care. Five homeopathic doctors superannuated/ resigned during 2016-17 which led to further increase in shortage of doctors. Despite opening 25 new Ayurvedic, Homeopathic and Unani dispensaries during 2012-17, Directorate neither created new posts nor filled the vacant posts. Increasing shortages of doctors have adversely impacted functioning of dispensaries. For example, only 33 Ayurvedic and Unani dispensaries were functioning for five to six days per week whereas 25 dispensaries were functioning for three to four days a week and three were functioning for two days a week. Patient footfalls in dispensaries also decreased in 2016-17 (**Refer Table 2.1.1**) as a result of further shortage of doctors due to superannuations/resignations in 2016-17 and many female doctors availed Child Care Leave during the year.

2.1.7.3 Award of contract for outsourced services without approval

Finance Department (FD) (August 2012/March 2015) delegated powers to all Heads of Department for keeping/ engaging outsourced staff of Class-IV / Nursing Orderly/ staff (Cook) etc. against sanctioned vacant posts through private agencies with the condition that FD's approval is required at the first time with reference to the number of persons to be engaged on outsourced basis.

AYUSH hospitals outsourced services of Nursing Orderly, Security Guards, Housekeeping, Mali and Kitchen Services and incurred an expenditure of ₹ 12.35 crore during 2012-17 on this account. However, all the three hospitals selected for audit did not go to their administrative department and/or the Finance department for the required approval, and on their own decided numbers of positions to be outsourced and ordered the services. This also reflects poorly on the oversight of the Directorate and the Administrative Department.

2.1.8 Management of Infrastructure, Hospitals and equipment

2.1.8.1 Insufficient space in dispensaries

As per Directorate, a three room structure is essential to run a dispensary for benefit of the patients. However, 16 Ayurvedic dispensaries were functioning in two-room structures and 5 dispensaries in one-room structures. Shortage of space in dispensaries, especially in one-room structure cause inconvenience to doctors as well as patients especially for examining female patients which became evident from the request forwarded by CDMO, Mayur Vihar dispensary for providing more space. Further, there were no facilities for disabled persons in homoeopathic dispensaries, though barrier free environment was to be provided to disabled and elderly persons as per CPWD guidelines. Directorate stated that Directorate of Health Services (DHS) has been requested for additional space at Mayur Vihar dispensary in July 2017.

2.1.8.2 Storing of medicines in open space at guest house of Tibbia College

Ayurvedic Drug Store of the Directorate was shifted (March 2016) to guest house of Tibbia College to make space for a polyclinic without assessing

Medicines stored in open space

whether the guest house meets the drug storage standards. Even this space was found insufficient and stock of medicines were being kept in the open corridor of the guest house and in the adjacent residential complex of the college Principal. Even after a year of shifting the drug store, arrangement for proper storing of medicines/drugs was not made. Storing medicines in open space rendered it susceptible to pilferage and damage due to exposure to natural elements.

2.1.8.3 Non-utilization of newly constructed Girls hostel

A new girls' hostel comprising 16 rooms constructed at a cost of ₹ 1.90 crore to accommodate 48 students (three students in each room) of Tibbia College was ready for possession in March 2016. Tibbia College administration, however, has not taken possession of the hostel as of October 2017 to accommodate the girl students. No reason for delay in taking possession was given by Tibbia College.

2.1.8.4 Delay in construction of infrastructure at SHMC resulted into the Supreme Court Judgement on 27 *per cent* OBC reservation not being implemented yet

In compliance of the Supreme Court Judgement, the GNCTD decided to implement (July 2008) the 27 *per cent* reservation for OBC in its educational institutions and the corresponding increase in the total number of seats to be rolled out over five-year period after taking into consideration the status of infrastructure. This order of the Court and the subsequent decision of the GNCTD have so far not been implemented. Reasons for not increasing the seats include non-availability of space to accommodate the proposed increased number of students. Audit noted that the SHMC initiated the proposal in 2008 to use its vacant land within the existing campus to construct the additional facility. This, however, remains stuck for last nine years for want of routine clearance due to inadequate pursuance and intervention from authorities of SHMC and the Department.

2.1.8.5 Disaster management by hospitals

Regulation 7(5) of the Central Council of Indian Medicine (CCIM) Regulations 2012[5] stipulates that a hospital shall have minimum eight Outpatient Departments[6] including Aatyayika (Emergency) for training of students and implementation of disaster management plan of the hospital. However, Tibbia Hospital had stacked and kept unused 60 hospital beds purchased during September 2010 to September 2011 for disaster affected patients without establishing an accident or emergency area (casualty). Therefore, in the absence of accident and emergency area (Casualty), the disaster management plan and training of students was not feasible. CBPACS too did not have a furnished casualty area. The space did not have required equipment for attending medical emergencies; rather it was being used as area for yoga class.

2.1.8.6 Buildings without fire clearance

Central Homeopathic Drug Store and Homeopathic Dispensary located in Himmatpuri, Delhi and Office Building of Directorate of AYUSH (Homeopathy Wing) at Preet Vihar were running without No Objection Certificate from Delhi Fire Services as of July 2017. A fire in the premises of Drug Control Cell of the Directorate, Tibbia College campus in September 2016 damaged many items along with files and records. Director, however,

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[5] Central Council of Indian Medicine (Minimum Standard Requirements of Ayurveda Colleges and Attached Hospitals (MSR)) Regulation 2012.

[6] 1. Kayachiktsa, 2. Panchkarma, 3. Shalya Tantra, 4. Shalakya Trantra, 5. Prasooti & Striroga, 6. Kumar Bhritya (Balrog), 7. Swasthayavritta and Yoga, 8. Aatyayika (Emergency).

did not take action on recommendations of the Enquiry Committee for preventing recurrence of such incidents even after lapse of more than a year of the incident.

2.1.8.7 Absence of Medical Record Department (MRD) in AYUSH hospitals

Chapter XII of Hospital Manual states that medical record keeping has importance in efficient patient health care. Medical Record Department (MRD) should maintain complete records in all respects in safe custody and compile a monthly report of medical statistics required for hospital administration. CBPACS, SHMC and Tibbia hospitals did not have an MRD in the absence of which mandatory data such as patient attendance record, observation and follow-up record, referral record within and outside hospital, treatment record etc. was not being maintained properly.

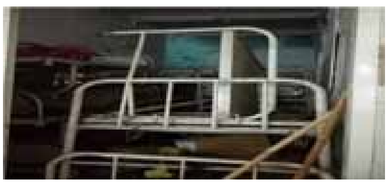
2.1.8.8 Non availability of essential equipment in Tibbia College

An advisory committee constituted by the Lieutenant Governor recommended (October 2014) procurement of equipment/instruments with estimated cost of ₹ 2.58 crore to improve the clinical services of Tibbia College and to make the college a Center of excellence for Ayurvedic and Unani treatment within a period of three years. Though a proposal for inviting tender for purchase of medical equipment was put up by Tibbia college in 2015, but later on the proposal was not followed up. Thus, equipment have not been procured and the initiative taken by the Lieutenant Governor for making the Tibbia College a center of excellence remains unfulfilled even after a lapse of more than three years. No reason was furnished by the Tibbia College for not procuring the proposed equipment.

2.1.8.9 Ultrasound Machines in Hospitals were not working

The ultra sound machines in Tibbia hospital (costing ₹ 5.72 lakh), SHMC (₹ 7.20 lakh), and CBPACS (₹ 25.05 lakh) remained non-operational since December 2012, October 2015 and April 2015, respectively due to non-availability of radiologist in these hospitals. Over the period of non-activity, some of these equipment became unusable and recently purchased equipment lost the benefit of comprehensive maintenance warranty. Efforts to appoint radiologists were not made by these hospitals and in the absence of ultra sound facility, patients were referred to other hospitals. Besides, students were deprived of learning mandatory clinical skills in these hospitals. SHMC stated that the matter was brought to the knowledge of the Directorate in August 2016.

2.1.8.10 Non utilization of beds in Tibbia hospital



Unused beds

The 300 bedded Tibbia hospital is operating only with 188 beds since 2013-14 in their indoor patient department. To make space for construction of a new OPD block, 112 beds were stacked in two separate rooms in such a poor condition that these cannot be used when required. There was no plan to restore IPD space with 300 beds despite completion of construction of new OPD block in June 2016, as it did not operationalize the beds lying unused and the number of operational beds remained 188 as of October 2017.

2.1.8.11 Operation Theatres are not in use

As *per cent*ral Council of Homeopathy (Minimum Standards Requirement (MSR) of Homeopathic Colleges and attached Hospitals) Regulations 2013 and Central Council of Indian Medicine (CCIM) Regulations 2012, hospitals attached to a College shall be provided with a well-equipped and functional Operation Theatre (OT).

The SHMC had a well-equipped OT which could not be used for want of anesthetist and full time surgeon since 2007. The SHMC did not make efforts to arrange/contract an anesthetist and a surgeon to make it functional, and instead allowed the OT facility become unusable. Also, in the absence of faculty, the students are sent to surgery department of Deen Dayal Upadhyay Hospital for their clinical training in surgery which is about 11 Kms away from SHMC.

An OT constructed in CBPACS in 2009-10 is not in use since 2015-16 due to non-availability of Gynecologist.

In Tibbia hospital, 593 female patients from maternity wards and 232 patients from Unani, surgery, ENT and other wards were transferred to other hospitals during the year 2012-17 due to non-functional OT. Medical oxygen, the most essential component for the gynae patients and patients undergoing surgery was also not available in the Tibbia hospital from 22 July 2016 till August 2017 indicating serious lapses in functioning of the Hospital and patient care.

2.1.8.12 Ambulance without Basic Life Support System

As per CCH (MSR) Regulation 2013, the hospital attached to a College shall have an Ambulance with all required facilities. SHMC did not have an ambulance to transport serious patients referred to the referral hospitals. One ambulance purchased in 2004 is generally not being used for this purpose as the SHMC did not equip it with the basic life support system like oxygen cylinder, mask, siren, emergency light etc. Tibbia College had one ambulance parked in the premises of the Hospital since February 2014 without any use. SHMC replied that two CATS (Centralized Ambulance and Trauma Services) Ambulances have now been stationed in its premises from October 2017.

2.1.8.13 Unutilized equipment in AYUSH hospitals

CBPACS had the lab facilities for pathology tests but the same could not be used due to failure to purchase reagents and/or repair the lab equipment. As a result, equipment worth ₹ 33.05 lakh were idled and patients deprived of the lab facilities.

Tibbia Hospital did not use/repair the automatic biochemistry analyzer, as a result, life of unutilized reagents and chemicals procured at a total cost of ₹ 13.64 lakh had expired.

2.1.8.14 Yoga and Naturopathy System of treatment

Yoga focuses on the prevention of diseases and treatment of many lifestyle related disorders. Naturopathy is a nature's effort to eliminate diseases and morbid matter from body to restore the health. Except in CBPACS, none of the AYUSH hospitals has Yoga and Naturopathy facilities though website of GNCTD, Directorate of AYUSH is displaying Yoga and Naturopathy as available services. Tibbia Hospital stated that these are not part of the syllabus prescribed by the Central Council of Indian Medicine. The contention of Tibbia Hospital is not tenable as each AYUSH hospital shall have Swasthayavritta and Yoga as mandatory Department as per CCIM regulation 2012. SHMC stated that the CCRYN[7] official who visited SHMC (May 2016) informed that adequate space as per proposal of CCRYN is not available in SHMC. Thus, AYUSH Directorate which was to promote Yoga and Naturopathy did not take any action to promote them in its own hospitals.

2.1.8.15 Infection Control Committee

As per DGHS Hospital Manual, each hospital should have an Infection Control Committee to oversee the measures for prevention and control of in-hospital infections and for monitoring clinical and surgery procedures, hazardous equipment, sterilizations and disinfection process etc. It also functions as a liaison between the clinical departments and the microbiologist. While the SHMC and CBPACS have this Committee, Tibbia hospital did not have such a Committee though it admitted 26,406 patients in the Indoor Patients Department (IPD) during 2012-17. Absence of the prescribed mechanism to oversee measures for prevention and control of in-hospital infections means that the hospital could be at risk in ensuring an infection safe environment. Tibbia hospital admitted absence of Infection Control Committee.

2.1.8.16 Low bed-occupancy in hospitals

The IPD of Tibbia Hospital and SHMC consisted of 300 beds and 50 beds respectively as on 31 March 2017 for treatment of patients. Audit noticed that during 2012-17, bed occupancy was very low as depicted in **Table 2.1.5**.

[7] Central Council for Research in Yoga and Naturopathy.

Table 2.1.5: Bed occupancy in hospitals

Year	No. of beds available		No. of beds occupied		% of Bed occupancy rate	
	A&U Tibbia (365 x 300)	SHMC (365x50)	A&U Tibbia	SHMC	A&U Tibbia	SHMC
2012-13	1,09,500	18,250	35,190	4,135	32	23
2013-14	1,09,500	18,250	37,384	4,497	34	25
2014-15	1,09,500	18,250	35,023	4,654	32	26
2015-16	1,09,500	18,250	38,050	3,422	35	19
2016-17	1,09,500	18,250	34,301	2,502	31	14

During the last five years, bed occupancy in the Tibbia Hospital ranged from 31 to 35 *per cent* whereas in SHMC, it ranged between 14 and 26 *per cent*. It was apparent that the existing infrastructure in the hospitals were not optimally utilized. Hospital Administration did not assess the reason for low use of IPD facilities of their hospitals. Absence of associated facilities like non-functional 'Operation Theater', ultrasound facilities, staff shortage, and absence of casualty ward in both hospitals as commented at Paragraphs nos. 2.1.7.1, 2.1.8.5, 2.1.8.9 and 2.1.8.11 and lack of oxygen facility in Tibbia could be reasons why IPD facility could not be utilised to its fullest.

SHMC stated (October 2017) that as per CCH Rules a Homeopathic Medical College admitting 60 students require 20 beds in IPD. The reply is not tenable because if the required bed strength of a Homeopathic college for admitted 50 students is 20, then why SHMC had been functioning with the excess 30 bed strength along with attached infrastructure, resources, staff strength of teachers, doctors, paramedical and other staff since 2013, indicating unjustified use of the available excess infrastructure facilities in SHMC.

2.1.8.17 Vacant seats for BAMS, BUMS and BHMS courses

Admission to courses (BAMS, BUMS and BHMS) in SHMC and CBPACS is done by IP University and in Tibbia College by Delhi University. Annual sanctioned intake of students for three selected Medical colleges for BHMS, BAMS and BUMS[8] courses and actual admittance during 2012-17 is given in **Table 2.1.6**.

Table 2.1.6: Details of seats available and filled

Year ended March	No. of sanctioned/available seats				No. of students admitted				Vacancy
	BAMS		BUMS	BHMS	BAMS		BUMS	BHMS	
	CBPACS	Tibbia	Tibbia	SHMC	CBPACS	Tibbia	Tibbia	SHMC	
2013	100	44	44	50	97	41	35	40	25
2014	100	44	44	50	92	41	36	40	29
2015	100	44	44	50	97	41	35	34	31
2016	100	44	44	50	97	41	37	37	26
2017	100	64	64	50	93	61	50	38	36

[8] BHMS – Bachelor of Homeopathic Medicine and Surgery, BUMS- Bachelor of Unani Medicine and Surgery, BAMS- Bachelor of Ayurvedic Medicine and Surgery.

Table shows that annually about 10 to 13 *per cent* seats remained vacant during 2012-17 under three undergraduate courses. Department may look into this issue and take corrective action at the earliest so as to ensure that available seats are fully utilized.

2.1.9 Discrepancies in management of medicines

2.1.9.1 Non-availability of Essential Medicines in the Drug Stores

The Directorate distributes medicines to its dispensaries through central drug stores for Unani, Ayurvedic and Homeopathic medicines. Essential Drug List (EDL) adopted by GNCTD has 277 Ayurveda and 288 Unani medicines which should be available with hospitals/dispensaries at all times in adequate quantity but two central drug stores of the Directorate never had more than 40 *per cent* of the EDL listed medicines at any time during last five years (2012-17). The drug stores procured and supplied only 110 out of 277 Ayurvedic medicines and 99 out of 288 Unani medicines during these years. Further, even those medicines available in the drug stores were not available in the three Unani and six Ayurvedic dispensaries selected for audit for periods ranging from 6 months to one year during 2012-17. Directorate replied that a new EDL was under preparation as it was not possible to procure all types of medicines listed in the EDL.

EDL for homeopathic medicines requires the dispensaries to have 314 medicines out of which 233 are dilutions which are to be maintained in four different potencies and 12 Biochems in two potencies making the total number of medicines 1,025 but 43 *per cent* medicines remained unavailable for more than 5 years. Majority of the medicines demanded were not supplied leading to shortage of medicines in Central Homeopathic Drug Store (CHDS)**.** Directorate replied that EDL for homeopathic treatment has since been revised by an experts' committee of the Directorate but audit noticed that the revised EDL is still under submission for the approval of competent authority. Failure of the Directorate in procuring and supplying essential medicines to dispensaries defeated the very purpose of preparing the EDL and also compromised the ability of dispensaries to effectively provide healthcare to patients.

2.1.9.2 Discrepancies in issue and receipt of medicines

Test-check of stock registers maintained at central drug store and at selected Ayurvedic and Unani dispensaries revealed discrepancies between the quantities of medicines shown as issued from the central drug store and the quantities received in the dispensaries.

Ayurvedic and Unani medicines valuing ₹ 6.75 lakh issued by the Central Drug Store of the Directorate were not found in the record of dispensaries during the years 2012-17. Medicines valuing ₹ 1.34 lakh were received in the selected Ayurvedic and Unani dispensaries but the same were not found mentioned in the records of issuer i.e. Central Drug Store. Further, no data/records about the details of patients, medicines, and quantity were maintained in the dispensaries. In the absence of the same, the authenticity of the process of distribution of medicines to patients could not be verified. The Directorate accepted the audit observation (October 2017). Directorate did not conduct any investigation to enquire and enforce accountability of officials responsible for such discrepancies as this could be due to misappropriation of medicines.

2.1.9.3 Loose dispensing of medicines

EDL (Ayurveda) guidelines published by the GoI discourage loose dispensing of medicines and suggested to procure medicines in standard pack sizes based on the weekly requirement of medicines for the patients as medicine quality gets altered when these are distributed in envelops due to the presence of salt in medicines, and medicines in big containers also get spoiled due to moisture in the environment. Many institutions like CGHS and ESI hospitals also procured medicines in the standard pack sizes for distribution to the patients. Audit noted that the medicines like Asava / Arista, Avaleha / Paka, Churna, Guggulu, Vati and Gutika, Ghrita, Bhasma etc. were procured in bulk and dispensed by the Ayurvedic dispensaries in small paper envelops which were neither safe from moisture nor hygienic/safe to carry, resulting in wastage of valuable medicines. Patients also complained to the Directorate of AYUSH about medicines getting spoiled due to loose dispensing of medicines in paper envelops, especially in rainy season. Directorate replied that the procurement in larger packs was cost effective. The reply is not tenable as dispensing of medicines should be as per EDL guidelines.

2.1.9.4 Purchase of medicines without adequate shelf life and other quality issues

According to purchase policy of the Directorate of AYUSH, medicines should have at least 60 *per cent* of shelf life remaining at the time of supplies but the Directorate procured Ayurvedic and Unani medicines costing ₹ 7.02 lakh with remaining shelf life ranging between 25 and 58 *per cent* during 2012-17 against the purchase policy (**Appendix 2.1.1**). Similarly, 1,600 Human Chorionic Gonadotropin (HCG) cards for detection of early pregnancy passed their shelf life in April 2016 without use as these were purchased with only 10 out of 18 months' shelf life remaining thus reflecting negligence in procurement process. Directorate replied on 8 February 2018 that a clause seeking 'at least 60 *per cent* of shelf life remaining at the time of supplies' has been included in the contract from financial year 2017-18.

Further, Directorate, Tibia Hospital, and CBPACS procured Ayurvedic and Unani medicines worth ₹ 35.36 crore, ₹ 42.59 crore and ₹ 14.88 crore respectively during 2012-17 based on the drug testing reports submitted by the suppliers. SHMC also relied on the drug testing reports submitted by the suppliers in case of homeopathic medicines procured by them. A mechanism of random selection of samples from the drug supplies by the Drug Control Cell of the Directorate for testing through Government approved laboratories was laid down by the Department and Directorate randomly selected 933 samples during 2012-17 whereas in case of Homeopathic medicines there is provision for batch-wise and sub-batch-wise testing of medicines.

Audit is of the view that the Directorate may put in place a similar quality control mechanism for procurement in case of Ayurvedic and Unani Medicines

2.1.9.5 Procurement of medicines valuing ₹ 47.06 crore

Ayurvedic and Unani medicines comprises of Classical medicines and Patented/Proprietary medicines. A response of Ministry of AYUSH, GoI dated 22 August 2012 to RTI appeal shows that purchases of Ayurvedic and Unani medicines out of funds received under National AYUSH Mission, a Centrally Sponsored Scheme, were to be made from M/s IMPCL[9], a Central Public Sector Enterprise or other Public Sector Enterprises (PSE) who have their own arrangement for manufacturing AYUSH medicines. It also stated that procurement of medicines was not to be made from Loan Licensee manufacturers keeping in view the need for ensuring quality of AYUSH drugs and medicines. The prices of IMPCL are also duly vetted by Ministry of Finance, GoI. Directorate of AYUSH, GNCTD has purchased AYUSH drugs and medicines from IMPCL out of funds received under National AYUSH Mission.

As per procurement policy of Directorate approved in 2008 for purchase of Ayurvedic and Unani medicines, Classical Ayurvedic and Unani medicines out of GNCTD funds are to be purchased directly from M/s IMPCL in line with procedure adopted by the Ministry of AYUSH, GoI, whereas procurement of patented Ayurvedic and Unani medicines were to be made through open tender process. The Directorate, Tibia College, and CBPACS together procured Classical and Patented/Proprietary Aurvedic and Unani medicines worth ₹ 47.06 crore[10] (Classical medicines of ₹ 32.87 crore and Patented/Proprietary medicines of ₹14.19 crore) during 2012-17 out of GNCTD funds without following the above Policy. Audit noted the following irregularities in this respect:

(a) In violation of Departmental procurement policy, these Classical Ayurvedic and Unani medicines were not purchased from IMPCL and Patented/Proprietary medicines were not purchased through open tender.

[9] Indian Medicines Pharmaceutical Corporation Limited, a manufacturer of Aurvedic and Unani medicines.

[10] ₹ 47.06 crore= ISM ₹ 22.25 crore, CBPACS ₹ 0.56 crore and Tibia College ₹ 24.25 crore.

(b) Instead, these medicines were purchased by directly calling rate lists from Central PSEs viz. Hindustan Lifecare Limited (HLL), Karnataka Antibiotic and Pharmaceuticals Limited (KAPL), and Rajasthan Drugs and Pharmaceuticals Limited (RDPL). Purchase orders were issued among these three companies based on medicine-wise lowest rates offered by them. This mode of solicitation is neither open tender nor limited tender.

Directorate of AYUSH, GNCTD replied (16 January 2018) that the all three companies are also PSEs and known and definitive sources and as per GFR they can go for limited tendering and they decided for PSEs because quality of medicines from private companies was poor and lowest of rates offered were accepted.

The reply is not tenable as M/s HLL, KAPL, and RDPL though Central PSEs are Loan Licensee manufacturers which means they don't have their own arrangement for manufacturing AYUSH medicines but are suppliers of the medicines manufactured by others. These PSEs therefore were not eligible for procurement of AYUSH medicines in terms of the above referred intimation dated 22 August 2012 issued by the Ministry of AYUSH, GoI, CVC guidelines, and Procurement Policy of 2008 approved by the GNCTD.

2.1.10 Functioning of Autonomous Bodies under the Directorate

2.1.10.1 Delhi Bhartiya Chikitsa Parishad

Delhi Bhartiya Chikitsa Parishad (DBCP) was established in January 2001 for providing registration of medical practitioners of Indian System of Medicines, maintenance of live register of practitioners, taking action against practitioners and to check practice in Bhartiya Chikitsa by unqualified persons. The 21 member DBCP is headed by a President and assisted by a Registrar who is the Chief Executive Officer of DBCP. Audit noticed the following irregularities in the functioning of DBCP.

(i) Draft Recruitment Rules (RRs) for the post of Registrar and other staff remained pending with the Director (ISM&H) since May 2010 for approval. Personal Secretary (PS) to the President and seven employees were appointed on contract basis by DBCP without approval of the competent authority, i.e the Lieutenant Governor, Delhi, in the full knowledge of the Directorate.

(ii) The PS to the President was found involved in forgery of his mark sheet initially to get admission in Tibbia College for which an FIR was lodged against him. Later without completing his background checks, he was contracted for the PS job based on the same forged mark sheet. The DBCP allowed the PS to President to leave without taking action as contemplated by the GNCTD. The GNCTD dissolved the DBCP in July 2015 but a new DBCP has not been constituted within a period of six months after its dissolution as per DBCP Act. After its dissolution, adequate steps were not taken by the Directorate to safeguard its fixed assets of ₹ 22.05 lakh such as computers, laptops, photocopiers, air conditioners, furniture and fixture etc. which remain unutilised. Their physical verification had also not been conducted after March 2013, and records from April 2015 like cashbook of receipts and expenditure and ledger were not being maintained. While confirming the facts, Registrar of DBCP replied that it shall function from its registered office after reconstitution.

2.1.10.2 Examining Body for Para Medical Training in Bharatiya Chikitsa

Under the provisions of Section 33 of the Delhi Bharatiya Chikitsa Parishad (DBCP) Act, 1998, an Examining Body (EB) was constituted (March 2011) by GNCTD for prescribing the courses of study and training and for conducting qualifying examinations for pharmacists, technicians, and nursing courses in respect of Bharatiya Chikitsa. Audit noticed the following irregularities in the functioning of EB:

(i) EB appointed one of its members as the Secretary of EB in June 2011 without approval of the competent authority. EB terminated services of the appointed Secretary in October 2013 on the ground of misrepresentation/concealment of facts. EB also engaged services of an advocate for fighting the case filed by the terminated Secretary without seeking approval of the GNCTD. This terminated secretary was later appointed as Chairman of EB vide Gazette Notification dated 17 March, 2016. Further, there was no evidence on file whether the approval of the competent authority, i.e., Lieutenant Governor was taken.

(ii) As per pattern of assistance, EB shall raise resources to work on self-sustaining basis within a period of 3-5 years from the date of release of first grant-in aid (GIA). The EB however has not achieved this goal. It received ₹ 34.70 lakh as GIA since its constitution but it has not performed any of its mandated functions i.e. prescribing courses of study and training and conducting qualifying examinations for Pharmacists, Technicians, and Nursing courses in respect of Bharatiya Chikitsa.

(iii) Approval of Planning and Finance Department was required for creation of posts and their service conditions. EB, however, appointed seven casual staff on their own and without following transparent procedures open for all the eligible candidates and their salaries were also fixed on ad-hoc basis. EB thus incurred irregular expenditure on salary amounting to ₹ 17.15 lakh during 2012-17.

2.1.10.3 Board of Homeopathic System of Medicines

The Board of Homeopathic System of Medicine, Delhi (Board) was established under Section III of Delhi Homeopathic Act, 1956. The main functions of the Board are - registration and renewal of registration of medical practitioners of homeopathic system of medicine in State of Delhi; to take action against various bogus institutions/quacks in homeopathy; to recognize homeopathic educational institutions for purposes of affiliation in and outside Delhi state; and to establish and/or aid research institutions. Directorate of AYUSH releases grant in aid to the Board with the condition that Board shall not do any act or undertake any activity which entails additional financial liability without approval of Administration and Finance Department. Audit noticed the following irregularities:

(i) As per the Act, Board needs prior approval of the State Government to appoint a Registrar. Board, however, appointed Registrar by promoting an official from Grade II Assistant in 2009 without the approval of the Government. Board stated that action for obtaining ex-post facto sanction of the competent authority would be taken.

(ii) The term of office of members shall be three years from the date of election or nomination as a member. Thereafter, State Government may from time to time extend this term by periods not exceeding two years in aggregate. The present Board was constituted in October 2012 and its term had expired in October 2015. The Lieutenant Governor ex-post-facto extended (January 2017) the term of present Board up to October 2016 or till reconstitution of the Board through election, whichever is earlier. The GNCTD, however, could neither conduct election within this period nor obtained extension from the Lieutenant Governor.

(iii) Though there were no provisions in the Act or Rules for giving provisional affiliation, the Board gave provisional affiliation (August 2016) to eight institutions for running pharmacy courses subject to the stipulation that the infrastructure and the teaching staff at such institutions will be ensured as per approved requirements. It was noticed that the approval of the Government had not been obtained. Further, prior to giving the affiliation, the Board was to conduct inspections of these institutions as per the Diploma in Homeopathic Pharmacy Course Regulations, 2015. Board, however, did not carry out inspections of three[11] out of these eight institutions. After issuing provisional affiliation, the Board was to re-inspect whether these institutions had achieved the required infrastructure and teaching staff but the same was not done in seven cases[12]. Three institutes out of the seven were from Delhi.

Board replied (August 2017) that it would withdraw the provisional affiliation given to four institutes outside Delhi.

[11] S.K.H. Medical College, Maharashtra; G.D. Memorial Trust, Patna and Sri Raj Bahadur Singh Memorial Trust, Allahabad.

[12] Breathwell Medicare India (Homeopathic Pharmacy College), Shakarpur, Delhi; Smt. Ishwari Devi Educational and Cultural Society (Homeopathic Pharmacy College), Shastri Nagar, Delhi; J.R. Kissan College of Pharmacy and Health Science, Rohtak, Haryana; Needy People Welfare Society, Rohini, Delhi; S.K.H. Medical College, Maharashtra; G.D. Memorial Trust, Patna and Sri Raj Bahadur Singh Memorial Trust, Allahabad.

(iv) With a view to having more effective and anti-quackery measures in NCTD, the DHS, GNCTD instructed (2014) the respective councils[13] to prepare annual plan for publicity and mass dissemination of information against quackery for generating public awareness. Further, all survey and mapping in relation to quackery and data-base thereof were also to be maintained by the respective councils. No such annual plan was prepared by the Board nor any survey or mapping of quacks carried out. Board stated (August 2017) that it takes action against unauthorized practitioners/ quacks only on receipt of complaint due to resource constraints and it would request the Directorate for release of funds for this purpose.

2.1.10.4 Chaudhary Brahm Prakash Ayurvedic Charak Sansthan

CBPACS was established in the year 2006 as an autonomous body under the Societies Registration Act, 1860 with financial assistance from GNCTD. It was to be a center of excellence as a national resource facility in the capital that would provide state of the art diagnostic and management facilities to patients in Ayurvedic System of medicines and conduct undergraduate and postgraduate courses in Ayurveda. The following irregularities were noted in the functioning of CBPACS:

(i) As per the pattern of assistance, GNCTD was to provide grant in aid to bridge the gap between the expenditure and income of CBPACS. The CBPACS had ₹ 28.70 crore in fixed deposits as at 31 March 2016. This indicates excess release of grants by the Government against the provisions of pattern of assistance.

(ii) As per the approved Recruitment Rules (RRs) (March 2013), the post of Director-Principal was to be held by an Ayurveda Professional having 20 years' experience either recruited directly or through deputation. There is no regular Director-Principal since October 2015 and Director (AYUSH) is in-Charge of this hospital. However, no efforts were made by the GNCTD for filling up the post of Director-Principal on regular basis for smooth functioning of the College and Hospital.

(iii) With a view to providing ambulance services, CBPACS (August 2012) entered into an agreement with an agency for a period of one year for hiring of an ambulance without approval of the competent authority. The ambulance was mostly utilized for pick and drop facility for the Project Director and staff of the CBPACS. It was stopped after Directorate objected (February 2013) to hiring of ambulance since CATS ambulance of GNCTD was available free of cost. An expenditure of ₹ 5.92 lakh was incurred on this account during August 2012 to July 2013 which was irregular and accountability of the

[13] Delhi Medical Council, Delhi Bhartiya Chikitsa Parishad, Board of Homeopathic System of Medicine, Delhi Council for Physiotherapy and Occupational Therapy, Delhi Dental Council.

CBPACS Administration for irregular hiring of ambulance and using it as staff vehicle was not enforced.

(iv) Special audit conducted by Directorate of Audit, GNCTD pointed out (March 2016) recovery of overpayments of ₹ 1.93 crores from the employees and irregular payment of ₹ 2.08 crores to Clinical Registrar and Senior Resident Doctors. CBPACS was directed to place the report in Finance Committee as well as Governing Council for taking the appropriate decision. However, despite lapse of one year, no action was taken either to recover overpayments/irregular payments or to place the report in Governing Council/Finance Committee as of August 2017.

(v) As per GNCTD instructions, contractual employment should be for a period of one year only and shall terminate automatically on the date of completion of one year. As regards pay scale, in case they were posted in a pay scale, their initial pay should be minimum of the pay scale and they would not be entitled for increment in pay or promotion or regularization in service. CBPACS engaged 58 contractual employees in 2010 and they have been employed continuously by giving extension regularly. Approval of the Government was not obtained by CBPACS either at the stage of appointment or at the time of extension. Thus, hiring of 58 contractual employees was ab-initio irregular. These contractual employees were also given annual increments against Government instructions.

(vi) In terms of Memorandum of Association (MOA) of the CBPACS, there should be a Finance Committee to assist the Governing Council in matters relating to finance, a Scientific Advisory Committee to facilitate clinical and research work, and an Academic Committee to pursue the objectives of CBPACS relating to academics. Though the Finance Committee was constituted in February 2014, the other Committees were not constituted as of August 2017. Scientific advisory committee was to facilitate the research work and evolve the scientific and technical programmes at the Sansthan whereas Academic Committee was to take initiative to realize the objectives of the MOA of the institutes keeping national and public interest. Absence of Scientific Advisory and Academic Committees indicate that CBPACS was not actively pursuing its objectives.

(vii) CBPACS Administration has not been using some hospital facilities meant for patients/students. Mortuary block built for the student to study the anatomy of the human body is being used by Delhi Fire Service. Out of twelve lifts available in the building, only four were functional. The condition

Seepage in the wall

Mortuary building being used by Fire services

of the hospital building was bad with seepages, broken tiles, choked drains etc. due to lack of maintenance which poses health hazard to patients/doctors/students.

(viii) Drug store of CBPACS had medicines expired during 2012-17 valuing ₹ 18.25 lakh including medicines of value ₹ 8.97 lakh supplied by CPA while the medicines remained in short supply in other Delhi hospitals and dispensaries. CBPACS did not watch the expiry period of these medicines so as to explore the possibility of using these medicines in other hospitals/dispensaries.

2.1.10.5 Delhi Homeopathic Anusandhan Parishad

Delhi Homeopathic Anusandhan Parisad (DHAP) was set up in July 1998 as an autonomous body to initiate, aid, develop, and coordinate research activities in Homeopathy in collaboration with Homeopathic Institutions and other organisations. During 2012-17, DHAP did not initiate any in-house research activities. There were 14 ongoing research projects started prior to 2012 on lifestyle diseases. 11 such projects were jointly assigned to SHMC and Nehru Homeopathic Medical College, one each to Institute of Human Behaviour and Allied Science, RBTB Hospital and Delhi State Cancer Institute. SHMC reported completion of only one project out of these 11 research projects. DHAP however had no information about the status of these research projects which means they did not monitor the progress of these projects. DHAP stated that Scientific Research Advisory Committee had not met since November 2013 to evaluate the research project works.

In addition, SHMC completed five research projects out of eight in-house research projects undertaken during this period. Remaining three ongoing projects are within the schedule time. CBPACS has an ongoing research project in collaboration with Central Council for Research in Ayurveda and Siddha. Tibbia College and Hospitals did not undertake any research project on Ayurvedic and Unani medications. SHMC had 16 publications in the national and international Journals.

2.1.11 Inspections, Quality Control and Monitoring Mechanism

The following inadequacies in inspections and monitoring were noticed:

2.1.11.1 State level Management Information System Monitoring and Evaluation Cell

Framework for implementation of National AYUSH Mission (NAM) stipulated that a dedicated Management Information System Monitoring and Evaluation Cell should be established at state level but no such cell was established by GNCTD.

2.1.11.2 State drug testing laboratory

MH&FW, GOI released (2001-02) ₹ 95 lakh to set up a drug testing lab of Indian Systems of Medicine (ISM) which was later refunded, as authorization from the Finance Department of the GNCTD was not received in time for extending the validity of the grant. Thus, due to failure of the Directorate, the grant could not be utilized. Subsequent decision to set up the facility in PPP mode was also not adequately followed up by the Directorate despite availability of funds and space (Prevention of Food Adulteration, First Floor, Lawrence Road) for setting up the laboratory. In compliance to the Rule 160 A of Drugs and Cosmetics Rule 1945, the Drug Control Cell of the Directorate of AYUSH gets tested about 1,000 survey samples of Ayurvedic/Unani medicine every quarter from government approved laboratories. It incurred an expenditure of ₹ 14 crore during the 2012-17 alone which was avoidable had the Directorate established a state drug testing laboratory. Directorate stated that efforts will be made to set up State Drug Testing laboratory for Ayurveda and Unani medicines.

2.1.11.3 Inadequate inspections of manufacturing and selling units of medicines

Rule 162 of the Drugs and Cosmetic Rules, 1945 envisages inspection of every manufacturing unit of Ayurvedic and Unani medicines twice a year and Rule 52 (1) stipulates inspection of each manufacturing unit of Homeopathic medicines once a year to ensure compliance to conditions of the license. As of March 2017, there were 57 manufacturing units of Ayurvedic, seven of Homeopathic and 23 of Unani medicines registered with the Drug Control Cell of Directorate and DCD. However, inspections of these units were not being conducted as per the said Rule/Act as detailed in **Table 2.1.7**.

Table 2.1.7: Shortfall in inspection of manufacturing units

Year Ended March	Mandatory (No.)			Conducted (No.)			Shortfall(%age)		
	Hm	Ay.	Un.	Hm.	Ay.	Un.	Hm.	Ay.	Un.
2013	5	54	28	1	45	17	4 (80)	9 (17)	11 (39)
2014	6	54	30	1	41	25	5 (83)	13 (24)	5 (17)
2015	6	90	36	-	69	34	6 (100)	21 (23)	2 (6)
2016	7	112	40	5	74	33	2 (29)	38 (34)	7 (18)
2017	7	114	46	1	38	40	6 (86)	76 (67)	6 (13)
Total	**31**	**424**	**180**	**8**	**267**	**149**	**23 (74)**	**157 (37)**	**31 (17)**

Shortfall of mandatory inspections during 2012-17 was significant. Drug Controller conducted 8, 267, and 149 inspections against 31, 424 and 180 mandatory inspections in respect of Homeopathic, Ayurvedic, and Unani manufacturing units, respectively. In the absence of requisite regular inspections, compliance to provisions of the Drugs and Cosmetic Act and quality of medicines/drugs manufactured could not be ensured.

Further, as per Rule 51 (1) of Drugs and Cosmetics Rules 1945, Drug Inspector of Drugs Control Department (DCD) was to inspect all Homeopathic establishments licensed for sale of drugs within the area assigned to him once a year. DCD did not maintain separate records for such units selling AYUSH medicines to verify whether inspections as required under the Rules were conducted. DCD replied that non-compliance to the rules was due to acute shortage of staff.

2.1.11.4 Survey to identify illegal manufactures not conducted

Drug Controller (ISM) did not have an effective system to identify the manufacturing units to bring them within their licensing regime. They had not conducted any surveys during five years covered in audit to identify units manufacturing Ayurvedic and Unani medicine without a valid license. Audit through online search found three manufacturing units established in NCT of Delhi namely, Hukam Baqai Medical Pvt Ltd, Chawri Bazar, Delhi, Tibb-e-Naqvi Dawakhana Pvt Ltd, Uttamnagar, Delhi and Sadar at old Delhi, which were operating without the mandatory license but the same were not in the knowledge of the Drug Controller. Directorate replied that these three cases would be forwarded to DBCP for necessary action.

2.1.11.5 Inadequate follow up on action against manufacturers of sub-standard medicines

There are approximately 20,000 retail outlets selling Ayurvedic medicines and 2,000 retailers in Unani sector in NCTD. During 2012-17, Drug cell found 73 drug samples of Ayurvedic and Unani medicines as 'not of standard quality' out of which only 21 sample of drugs were manufactured in Delhi. Punitive action like suspension of license or issuance of warnings were taken by the Licensing Authority (LA) of Directorate against manufactures of these 21 drug samples. 52 failed samples relate to manufacturers based outside Delhi and respective Licensing Authority of those States were requested to take appropriate action. Directorate did not follow up with these States further as to action taken like suspension of license against these manufacturers. The GNCTD thus was not in a position to ensure the quality of Ayurvedic and Unani medicines manufactured outside Delhi but sold in the NCTD.

2.1.11.6 Shortage of Drug Inspectors

As on 31 March 2017, against a sanctioned strength of 31 Drug Inspectors (DIs)**,** Drug Control Department (DCD) had 23 DIs and Indian System of Medicine (ISM) had 3 against 5 sanctioned posts of DIs. Shortage of DIs limited their ability in discharging its mandated functions relating to issuing licenses and inspections of drug manufacturing and selling units. DCD stated (August 2017) that the Department was taking steps for employment of sanctioned strength of DIs and requisition for appointment of six more DIs has been sent to UPSC in July 2017.

2.1.12 Conclusion

(a) Infrastructure facilities and equipment in AYUSH Hospitals and dispensaries such as drug storage, emergency services, essential diagnostic equipment, Operation Theatres, ambulances, medical record department and library were inadequate. Sixteen Ayurvedic Dispensaries were working in two-room structure and five in one-room structure against the required three rooms resulting in inconvenience to patients. Except in Chaudhary Brahm Prakash Ayurvedic Charak Sansthan, none of the AYUSH hospitals has Yoga and Naturopathy facilities due to inadequate space. Delay in construction of infrastructure at Dr. B. R. Sur Homeopathic Medical College, Hospital and Research Centre delayed implementation of the Supreme Court Judgment on 27 *per cent* OBC reservation for student admission in SHMC. Student intake in three medical colleges namely, Tibbia, CBPACS, and SHMC were significantly less than the sanctioned seats.

(b) There was significant shortage of medical staff throughout 2012-17 in AYUSH dispensaries. Out of 103 homeopathic dispensaries, only 24 are having full complement of staff to ensure proper patient care. Shortages in the cadres of doctors, pharmacists, and nurses in three Medical Colleges with attached Hospitals, viz. Tibbia College, SHMC and CBPACS was between 37 to 52 *per cent*. There were significant vacancies in Drug Inspectors limiting their ability to discharge the mandated functions relating to issuing licenses and inspections of drug manufacturing and selling units.

(c) Ayurvedic and Unani dispensaries were provided with only 40 *per cent* of essential medicines during 2012-17 and 43 *per cent* of essential medicines in Homeopathic Dispensaries were not available at any time during this period. Ayurvedic and Unani medicines were procured with shelf life ranging from 25 to 58 *per cent* remaining during 2012-17. As against the quality control mechanism in Homeopathic medicines which had provision for batch-wise and sub-batch-wise testing of medicines, the Ayurvedic and Unani Medicines had a mechanism of testing medicines on random basis. In violation of Departmental procurement policy, Classical Ayurvedic and Unani medicines (₹ 32.87 crore) were not purchased from IMPCL by the Directorate, Tibbia College and CBPACS during 2012-17 and Patented/Proprietary medicines (₹ 14.19 crore) were not purchased through open tender.

There were inadequate inspections of manufacturing and selling units of medicines to seek assurance on the quality of these medicines. Drug Controller conducted 8, 267, and 149 inspections against 31, 424 and 180 mandatory inspections in respect of Homeopathic, Ayurvedic, and Unani manufacturing units respectively.

2.1.13 Recommendations

(i) The Department may assess the infrastructural and staff requirements of AYUSH hospitals, dispensaries and drug controllers afresh and take effective action to fill up the gap in a time bound manner.

(ii) The Department may prepare annual action plans and implementation strategy to ensure implementation of all elements of the Five Year Plan in a time bound manner.

(iii) The Department should ensure that AYUSH medicines are procured by following the government/CVC instructions to promote transparency and competition in procurement.

(iv) The Department may take adequate steps to establish in-house drug testing facility in order to facilitate quality testing of AYUSH drugs including independent testing of purchased medicines.

(v) The Department may strengthen the inspections of units manufacturing and selling AYUSH medicines in NCTD to seek assurance on the quality of these medicines.

The matter was referred to the Government in November 2017 and their reply is awaited as of January 2018.

Department of Urban Development

2.2 Development and Strengthening of Delhi Road Network by the Municipal Corporations of Delhi

A performance audit of road works executed by the Municipal Corporations of Delhi was conducted with a view to assessing whether construction and maintenance of roads were planned with a long term perspective and executed in a transparent manner in accordance with the prescribed rules, procedures and terms and conditions of the contracts. Major audit findings are as under:

Highlights

- ***Multiple agencies were responsible for Delhi Road Network. The Urban Development Department did not establish any mechanism to coordinate the efforts of these agencies to prepare a perspective plan, lack of which hindered the effective planning and coordination in developing Delhi Road Network in a phased manner to cope up with ever increasing population of vehicles in the city. Further, there was no effective mechanism for citizens to address their grievances related to specific roads to the responsible agencies for redressal.***

  (Paragraph 2.2.6)

- ***South Delhi Municipal Corporation made a payment of ₹30.92 crore to a contractor as of July 2017 on account of post tendering increase in length of new drain from 2,538 meter to 56,636 meter and strengthening of drain from 6,769 meter to 10,226 meter. Further, construction of 5,360 meter road and drain along both side of road included in the contract were not executed in the roadwork of Okhla Industrial Area Phase I.***

  (Paragraph 2.2.8.1 (a) (i))

- ***After award of work, the design of ROB at Bijwasan was changed significantly by increasing length of its approaches, number of piles, number of spans of superstructure etc. Post tendering changes led to extra payment of ₹ 8.33 crore. In grade separator work at Dabri intersection there was deviation of 38.87 per cent with excess execution of schedule of quantities items for ₹ 19.35 crore and less execution of ₹26.47 crore. No revised technical sanction was obtained in these works.***

  (Paragraph 2.2.8.2 (i))

- ***South Delhi Municipal Corporation failed to recover mobilization advance and interest of ₹1.07 crore from a contractor though the work was abandoned by the contractor in 2013.***

(Paragraph 2.2.8.4)

- ***Incomplete remodeling of Karawal Nagar Road from Wazirabad Road to Shiv Vihar Tiraha by East Delhi Municipal Corporation resulted in unfruitful expenditure of ₹8.34 crore.***

(Paragraph 2.2.8.7)

- ***In 11 works, an expenditure of ₹8.09 crore was incurred by providing bitumen mastic carpet without constructing base course.***

(Paragraph 2.2.8.9)

- ***Awarding of works of covering of Nallah at Nauroji Nagar and Pushp Vihar without ensuring adherence to environmental norms resulted in wasteful expenditure of ₹40.58 crore.***

(Paragraph 2.2.8.12)

- ***Changes made in bid for the work of Grade Separator at Rani Jhansi Road after submission of tender resulted in post tender enhancement of cost by ₹5.22 crore.***

(Paragraph 2.2.8.13 (iii))

- ***Final payment of ₹242.55 crore for 82 works in 14 Divisions was made by the Divisions during April 2012 to March 2017 without obtaining the requisite certificates from respective Executing Officers. Forty eight works continue to be work-in-progress and delay in completion ranged between 76 and 2,899 days.***

(Paragraph 2.2.9.1 (a) and 2.2.9.2 (ii))

2.2.1 Introduction

Area of National Capital Territory of Delhi (NCTD) is 1,483 square km. NCTD is geographically divided mainly into three Municipal Corporations (MCsD) viz. North Delhi Municipal Corporation (North DMC), South Delhi Municipal Corporation (South DMC), and East Delhi Municipal Corporation (East DMC). Prior to trifurcation in April 2012, there was only one Municipal Corporation (MCD).

Section 298 of the Delhi Municipal Corporation Act 1957 makes the Municipal Corporation of Delhi the sole owner of all the roads in Delhi. Owing to financial constraints faced by MCD, the GNCTD (January 2012) curtailed legal mandate of MCD through an executive order and vested the roads having Right of Way (ROW) of 60 feet and above with GNCTD to ensure their proper maintenance and upkeep from the funds of the State

Government. Presently, besides MCsD, there are three GNCTD agencies, namely, Public Works Department (PWD), Delhi State Industrial and Infrastructure Development Corporation (DSIIDC), and Irrigation and Flood Control Department (I&FCD), and two Government of India (GoI) agencies, namely, Delhi Development Authority (DDA) and New Delhi Municipal Council (NDMC) that construct/maintain roads in NCTD. As of March 2017, there were 1.03 crore motor vehicles in Delhi plying over a road network of 33,868 kilometer (Km). Lengthwise details of Delhi roads maintained by different agencies are shown in the **Table 2.2.1**.

Table 2.2.1: Agency wise length of road maintained

(Length in Km.)

Agencies	MCsD	PWD		NDMC	I&FCD	DDA	DSIIDC	Total
		City roads	Highways					
Length of the roads	23,931	6,308	430	1,290	40	435	1,434	33,868

2.2.2 Organizational set up

All the three Municipal Corporations of Delhi (MCsD) are headed by respective Commissioners. Each of the three MCsD has its own Engineering Department headed by respective Engineer-in-Chief supported by Chief Engineers (CE), Superintending Engineers (SE) and Executive Engineers (EE) etc. There are 12 Municipal Zones (Six in North DMC, four in South DMC and two in East DMC) geographically divided into 55 works divisions (Division) headed by respective EE. There is a Quality Control Circle (QCC) in each of the MCsD for quality assurance of engineering works and also a common laboratory (MCD Lab) for MCsD for testing of engineering materials. MCD engaged Central Road Research Institute (CRRI) as an independent agency (third party) for quality assurance of works. For financial management and control, there is a Finance Wing in each of the MCsD headed by respective Controller of Accounts-cum-Financial Advisor. Urban Development Department, GNCTD (UDD) is the administrative department of MCsD.

2.2.3 Audit objectives

The main objectives of this Performance Audit were to assess whether

a) there was an effective mechanism in UDD and in MCsD to draw need based perspective plan keeping in view long term growth in vehicle population and habitat;

b) award of works and their execution by MCsD was in accordance with prescribed procedure, rules and specifications and contracts management mechanism was efficient and effective.

c) there was a mechanism in UDD to monitor the physical as well as financial progress of road works approved by GOI/GNCTD under various schemes, and

d) quality control/assurance mechanism for road works was efficient and effective.

2.2.4 Audit Scope and Methodology

This Performance Audit was carried out during May - July 2017. Out of total 55 Divisions under the three MCDs (North DMC-25, South DMC-22 and East DMC-8) 17 divisions (North DMC-8, South DMC-7and East DMC-2) which have booked a total expenditure of ₹ 10 crore and above on road works during the period from April 2012 to March 2017 were selected for this audit. In these divisions, all the 166 road works approved by GoI and GNCTD which were awarded between April 2012 to March 2017 and works awarded prior to April 2012 but remained incomplete or were completed during 2012-17 were covered. 24 works having the cost of ₹ 25 lakh and above funded by the MCsD from their own resources also formed part of this audit. As such, total 190 road works (North DMC 89, South DMC 73 and East DMC 28) involving total expenditure of ₹ 880.35 crore were selected for audit**.**

An entry conference with the officers of UDD and MCsD was held on 4 May 2017 to discuss the scope, objectives and methodology for this Performance Audit. Planning and sanctioning of road projects/works were examined at planning branches of UDD and MCsD and records relating to implementation of the sanctioned works and their quality related aspects were examined in the divisions and other field formations of MCsD. An exit conference with the UDD and MCsD was held on 28 September 2017 wherein the MCsD assured that reply on audit observations would be submitted within ten days. However, no reply was received from the North and East DMCs. Subsequently, the draft Performance Report was issued to Principal Secretary (UD) on 22 September 2017. The replies from UDD were awaited as of January 2018.

2.2.5 Audit Criteria

The performance and level of efficiency of UDD and that of MCsD in developing and strengthening of Delhi road network were evaluated considering the following as criteria:

(i) General Financial Rules, Receipt and Payment Rules and other relevant Government rules; Instructions and orders issued by Government of India and Government of NCT of Delhi;

(ii) Central Public Works Department Works Manual (CPWD Manual), Central Public Works Account Code, Delhi Schedule of Rates and directives of UTTIPEC[14];

(iii) MORTH[15], Indian Road Congress and CPWD specifications;

(iv) Provisions of General Conditions of MCsD's contracts and agreements.

Audit Findings

2.2.6 Perspective Plan not prepared

There are multiplicity of agencies responsible for Delhi Road Network. However, there is no single agency or mechanism to prepare a perspective plan for improvement of Delhi Road Network. The UDD being the nodal department of the GNCTD for development of civic facilities in Delhi did not establish any mechanism or administrative structure to coordinate the efforts of all these agencies to prepare a perspective plan. Lack of perspective plan hindered effective planning and coordination in developing Delhi Road Network in a phased manner to cope up with ever increasing population of vehicles in the city. Population of vehicles in NCTD has increased from 77.85 lakh in 2012-13 to 97.04 lakh in 2015-16 to 1.03 crore in 2016-17 but no work/project for construction of new roads, flyover or underpass was undertaken during this period by any of the 17 divisions covered in audit. Also, UDD did not evolve any mechanism for citizens to address their grievances, related to specific road to the responsible agencies for redressal.

2.2.7 Source and management of funds

Regular source of funds for MCsD for road works has been Grant-in-Aid (GIA) from GNCTD under the head LA roads and Trans Yamuna Area Development Board (TYADB). MCsD also receive Grant-in-Aid from MoUD under Jawaharlal Nehru National Urban Renewal Mission (JNNURM) and from MoRTH under Central Road Fund (CRF). These grants are received through UDD. The UDD, however, had not maintained any data/record of works approved under different heads/schemes for future reference and to watch their physical and financial progress.

2.2.7.1 Requirement and availability of funds were not properly synchronized

Grants-in-Aid from GNCTD under its head of account LA Road was the main source of funds for road works for MCsD. It was observed that there was no correlation between the works sanctioned and funds made available to MCsD under LA Road by the UDD. Works were sanctioned by the Lieutenant Governor on individual proposals but funds were released by the UDD to MCsD as GIA on quarterly basis depending upon yearly budget allocation by

[14] Unified Traffic and Transport Infrastructure (Planning and Engineering) Centre.
[15] Ministry of Road, Transport and Highways.

GNCTD without analyzing/assessing the actual requirement of MCsD. Due to mismatch of works sanctioned and funds budgeted/released, some new works sanctioned are not taken up and/or ongoing works could not progress or liabilities are accumulated for payments to the contractors. This resulted in accumulation of cash liabilities of ₹ 14.98 crore as on 31 March 2017 with South MCD on account of the contractors' bills passed under the head LA road and committed liabilities of ₹ 1.73 crore and ₹ 76.60 crore with South and North DMC, respectively, on account of award of works without availability of funds. Mismatch in works awarded and funds released hampered the progress of works. East DMC, on the other hand, had unutilized GIA amounting to ₹ 1.13 crore as on 31 March 2017.

2.2.7.2 Underutilization of Central Road Funds (CRF) by MCsD

GIA out of the CRF is provided by Ministry of Road Transport and Highways (MoRTH) to the States for road works on the basis of individual proposals submitted by them. In GNCTD, proposals for works planned to be undertaken through CRF are submitted to MoRTH by different agencies through PWD and funds from MoRTH to executing agency are routed through UDD.

Details of the proposals submitted by MCsD to PWD under CRF was not available with the MCsD. As per the information provided by PWD, the MCsD submitted only 27 proposals to PWD during the period from April 2012 to March 2017. The PWD, however, sent only 5 proposals to MoRTH and only one proposal was approved by MoRTH. Reasons for non-submission of remaining proposals by PWD and non-approval of 4 proposals by MoRTH were not found on the records of MCsD. It indicates that the proposals were not adequately pursued by MCsD to take advantage of this fund for improvement of Delhi road network.

South DMC stated that they were not expected to take further action once they had submitted the proposals for CRF funds. Reply is not acceptable as the proposals should have been actively pursued by MCsD particularly when MCsD were facing financial constraints for road works.

2.2.7.3 Unauthorized utilization of GIA

GIA from Government of India and GNCTD were received by MCsD for road work and for creation of capital assets. Audit observed that MCsD had utilized upto 10 *per cent* of such grant i.e. ₹ 73.50 crore as administrative expenses for paying salaries and other expenditure for administering the plan schemes even though there was no specific stipulation to this effect in the terms and conditions of the GIA. SDMC cited permission from the Finance Department of GNCTD vide letter dated 22 July 2011 for such deduction which they have not been able to furnish till date. The Finance department has also stated (02 February 2018) that the letter is not traceable at once and efforts will be made to trace out in future and will be provided.

It was also noticed that UDD never asked for the project-wise details of the expenditure out of the GIA released to the MCsD.

2.2.8 Execution of works and contract management

2.2.8.1 Lack of transparency coupled with time and cost overrun.

Project-II Division, Central Zone, MCD invited tender in February 2010 for Improvement and Strengthening of the roads of Okhla Industrial Area Phase I and II under JNNURM. Out of three technically qualified bids, bid of J. Kumar Infra projects Limited (Agency-I) was found the lowest (L-1) with its quote of ₹ 138.49 crore and Dinesh Chandra R. Aggarwal Infracon Private Limited (Agency-II) was the second lowest (L-II) with its quote of ₹ 142.89 crore. The Division recalled the tender on 22 December 2010 on the plea that rates quoted by Agency-I for some items were more than the justified rates worked out by MCD. Agency-1 moved the Delhi High Court (the Court) challenging recall of tender. On the directions of the Court, bids received in retendering were opened on 10 March 2011. This time Agency-2 who was the L-II in earlier tendering process was found the L-1 quoting an amount of ₹ 123.96 crore and Agency-I, the L-1 of earlier tendering process, was found the L-2 with its quote of ₹ 135.63 crore.

The Agency-I contended in the court that price quoted by Agency-2 was not workable and additional sum would be recovered through the device of escalation etc and there would be serious issue of quality. The court (March 2011) took note of apprehension of Agency-I and in their orders directed MCD to appoint CRRI as an independent agency to monitor the work with the mandate, *inter alia* to ensure timelines are met and the cost escalation is kept to the bare minimum. With a view to maintaining transparency in the execution, the Court directed that concerned independent agency would place on website of MCD quarterly progress reports of the work. Accordingly, the EE awarded the work in August 2011 to Agency-2 at a contractual amount of ₹ 123.64 crore. As of October 2017, payment of ₹ 137.29 crore had been made to the contractor. Further scrutiny revealed the following:

(a) Non-compliance of orders of Delhi High Court

Despite court orders, the MCD did not engage CRRI as independent monitoring agency. As a result, work was executed without a vigil by an independent agency on cost, and time line of the work. Scrutiny further revealed that during execution, division increased the scope of work, got executed BOQ items at higher rates, did not obtain assurance on quality of work and closed the work prematurely as brought out in subsequent paragraphs.

(i) Escalation in cost of work due to post tendering increase in scope of work

The division at post tendering stage increased the length of drain to be strengthened from 6,769 meters to 10,226 meters and length of new drain to be constructed from 2,538 meters to 56,636 meters. Division also got restoration of a road cut by DJB through this contract as extra item on market rates at a cost of ₹ 5.91 crore. Further, road to be constructed by bitumen as per SOQ, was in actual got constructed by cement concrete at an extra cost of ₹ 1.36 crore. Resultantly, a payment of ₹ 30.92 crore on account of post tendering increase in the scope of work was made to Agency-2 (up to 36 RA bill) as of July 2017. It included ₹ 20.79 crore paid at prevailing market rates which were 170 to 231 *per cent* higher than the contractual rates. Further construction of 5,360 meters length road having an area of 21,913 Square meter and drain along both sides of this road and other ancillary works was never taken up. Neither the reasons and justification for increase/decrease in the scope of work nor approval of the competent authority for post tendering alteration in the scope of the work was found on record.

South DMC stated (October 2017) that variation and deviations in estimated quantity were made as per requirement of site with the permission of competent authority. Reply is not acceptable as this was not a case of variation in the quantity but a case of increase in scope of work at post tendering stage for which revised technical sanction was to be obtained from the competent authority under Section 2.5.2 of CPWD Manual.

(ii) Insufficient records on assurance of quality of work

Reports of the mandatory quality tests by the divisional officers prescribed in CPWD and MORTH specifications and quality test reports of third party were not available with the division.

South DMC replied that quality assurance of the work had been carried out as per requirement. In support the South DMC furnished a letter of CRRI, treating it as certificate of CRRI on quality aspect of the work. Though Audit found on record detailed estimate along with scope of work and terms and conditions and it appears that CRRI must have been engaged for complete work as it is done for all works of more than ₹ 25 lakh but supporting records were not available.

(iii) Avoidable payment on account of cost escalation

Section 15.1.2 of Works Manual provides that before approval of NIT availability of clear site, approval of local bodies and layout plan for all services is desirable.

It was noticed that the work was completed with a delay of 942 days and division has paid ₹ 7.88 crore to the contractor on account of escalation beyond stipulated date of completion. This delay includes delay of 556 days on account of non-availability of hindrance free site (307 days), road cut made by DJB (124 days), detection of location of manholes (94 days) and delay of 31 days in making available site for the plant. Payment on account of cost escalation for such delays could have been avoided had the division addressed all these issues before award of work. MCD also allowed extension of time for 188 days on account of increase in scope of work but division did not take into account the decrease in scope of work. As against the contractual quantities of work of ₹ 123.64 crore, only quantities costing ₹ 94.42 crore were executed. As such there was decrease in scope of work. Hence, allowing extension of time without levy of compensation was not justified.

(b) Unjustified loading of cost of vehicle along with its running cost on work

A condition was included in the general conditions of contract (not in SOQ) that contractor would provide a new vehicle of not less than 1800 CC for the use of the Department along with fuel, maintenance, driver etc. during the period of execution of project. After completion of the project the vehicle was to be transferred to MCD. This was not justified as it amounts to buying a car through the contractor to avoid the approval of the competent authority. The project has been closed but the vehicles were not taken in to stock of South DMC.

Thus, as of August 2017, against the contractual amount of ₹ 123.64 crore for the work viz. Improvement and strengthening of the roads of Okhla Industrial Area Phase I and II under JNNURM, an amount of ₹ 137.29 crore including escalation cost of ₹ 11.95 crore have been paid to the contractor for the work, out of which only ₹ 94.42 crore was for items/quantities in the original scope of work and the balance amount of ₹ 30.92 crore was paid for quantities added during post tendering stage. Besides, timeline and quality assurances provisions were not adhered to. In spite of court orders, quarterly progress reports of CRRI were not uploaded on website of MCD. Hence, execution of work lacked transparency. South DMC stated that quarterly progress report were uploaded on website of South DMC. Reply is not tenable as quarterly progress reports were to be uploaded by CRRI, an independent monitoring agency.

2.2.8.2 Inordinate delay in completion of road bridge projects

Project-I Division, West Zone, MCD awarded the work of construction of Grade Separators at Dabri Intersection of Pankha Road (grade separator) in January 2008 under the head LA road at a contractual cost of ₹ 109.84 crore with stipulated date of completion in August 2010. The work was completed on 22 August 2014. As of August 2017, payment of ₹ 105.77 crore was made to the contractor.

The Division also awarded another work of construction of Over bridge and approach roads at Railway Level crossing at Bijwasan (over bridge) in December 2009 under the head ROB/RUB at a contractual cost of ₹ 44.21 crore with stipulated date of completion in December 2011. The work was completed with a delay of 54 months on 30 June 2016 at a total cost of ₹ 66.18 crore including cost escalation of ₹ 13.64 crore. Audit findings are as under:

(i) Non obtaining of revised technical sanction for post tendering increase in Scope of work

Section 2.5 of CPWD Manual stipulates that technical sanction to a work amounts to a guarantee that the proposals are technically sound and that the estimates are accurately prepared and based on adequate data. Section 2.5.1 (c) provides that before an estimate is technically sanctioned, detailed architectural drawings with specifications are desirable. As per Section 2.5.2, technical sanction can be exceeded upto 10 *per cent* beyond which revised 'technical sanction' shall be necessary. Similarly, if subsequent to the accord of technical sanction, material structural alterations are contemplated, the orders of the authority which sanctioned the estimate technically should be obtained, even though no additional expenditure may be involved due to such alterations.

After award of overbridge work at Bijwasan significant structural changes were made in the design of the ROB by increasing length of its approaches, number of piles, number of spans of superstructure and clear height. These changes ultimately resulted in 61 *per cent* deviation in the cost of contractual quantities of the contract. Against the contracted quantity, there was excess execution of SOQ items for ₹ 17.60 crore and less execution of ₹ 9.56 crore. It led an extra payment to the contractor of ₹ 8.33 crore. Similarly, in grade separator work of Dabri Intersection, there was a deviation of 38.87 *per cent* with excess execution of SOQ items for ₹ 19.35 crore and less execution of ₹ 26.47 crore. It clearly indicates that technical sanctions in both the works were not based on adequate data. It was further noticed that revised technical sanction was not obtained from the competent authority. Further, post tendering changes in the scope of the works with significant cost implication also compromised the sanctity and transparency of the tendering process.

South DMC in October 2017 stated that change in scope of over bridge work was due to increase in the height of girder by the Railways. Reply is not tenable as in the note submitted to the South DMC for revised administrative approval and expenditure sanction the issue of increasing the height by the railway was not brought out. Division has not offered any comment on the issue of not getting the revised technical sanction in respect of Grade Separator work at Dabri Intersection.

(ii) Avoidable time overrun and payment of cost escalation

As per section 15.1(2) of CPWD Manual availability of clear site and funds are pre-requisites for approval of NIT.

The work of over-bridge at Bijwasan was completed with a delay of 1,483 days which includes delay of 1,439 days on account of delay in land acquisition and division had paid ₹ 10.60 crore on account of cost escalation for the period beyond stipulated date of completion. The work of grade separator at Dabri Intersection was completed with a delay of 1,464 days due to delay in shifting of DJB lines, high tension lines, MTNL lines, gas pipe lines and removal of encroachment. Cost and time overrun could have been avoided had the division ensured the hindrance free site before award of works.

The extension of time for total delay without levy of compensation was not justified as some of the reasons considered as hindrances such as non-handing over of site for casting yard and delay in shifting of services are not reasons to be considered as total hindrances for all components of work. The days on which work of any type related to this contract was done or could have been done should have also been taken into consideration while granting extension of time and compensation for delay considered accordingly. Since record of hindrances for both the works, was not maintained in the prescribed manner and lacked vital information and data, exact allowable delay could not be worked out in audit.

South DMC in October 2017 stated that delay in completion of over bridge work was mainly due to delay in land acquisition. South DMC did not offer comments on the remaining issues.

(iii) Loading of Divisions' own expenditure on works

Items for providing manpower and heavy machineries to the Divisions were included in SOQ of contracts and a total payment of ₹ 1.12 crore was made to the contractors against these items as detailed given in **Table 2.2.2**.

Table 2.2.2: Items for Division's use included in the contract

Sl. No.	Item	Expenditure (in ₹)		Total (in ₹)
		Over bridge	Grade separator	
1	Beldar on daily basis	6,60,000	5,40,000	12,00,000
2	Tractor trolley	0	5,36,277	5,36,277
3	Tipper with beldar	5,76,072	0	5,76,072
4	Maintenance of AC Car for MCD staff	22,99,977	34,88,625	57,88,602
5	Computer operator	8,53,312	0	8,53,312
6	Maintenance of site office	0	22,00,000	22,00,000
	Total	**43,89,361**	**67,64,902**	**1,11,54,263**

Loading the Divisions' own expenditure on the contracts amounts to unauthorized utilization of GIA. However, no proof of supply of manpower and machineries by the contractors and their utilization by the Divisions was found on record.

In respect of over-bridge work, South DMC stated that machinery and manpower was used for mass demolition action by the Government. Reply is not acceptable as it was clearly mentioned in the SOQ that manpower was hired for keeping the site neat and clean and tractor trolley and tipper were to be used for shifting serviceable material from the site.

(iv) Execution of extra items without justification and approval

The contractors were paid ₹ 2.38 crore for extra items such as providing and fixing designer wall tiles, laying batch mix concrete, providing vehicle for MCD staff etc., but no justification or approval of competent authority for these items was found on records. In the absence of proper justification and approval of competent authority, it could not be ascertained in audit whether execution of these items was based on actual need. Further, EE irregularly procured two computers amounting to ₹ 1.20 lakh through the contractor as extra items. However, no entry was made in stock register of the Division. South DMC stated that computers were purchased for making day to day record. Reply is not acceptable as the computer, if actually needed, should have been procured through office contingencies. South DMC did not explain as to why the entries of these were not made in stock register.

(v) Undue payment to contractor

A payment of ₹ 44.35 lakh was made to the contractor for grade separator work for using reinforcement bar of Fe 500 in place of reinforcement bars of Fe 415 mentioned in contract. Reasons for not using contractual items, approval of competent authority to use Fe 500 in place of contractual Fe 415 and basis for working out price difference between Fe 415 and Fe 500 were not on record. Payments for items not approved by competent authority amounts to undue payment to contractor.

(vi) Wasteful expenditure

Grade separator work was completed in August 2014 and the contractor was paid ₹ 47.01 lakh for an item of SOQ for horticulture works comprising preparation of land/providing of good earth/manure, supply of plants and trees and manpower. Audit physically visited the site (June 2017) and noticed that there was no sign of vegetation around or below the flyover. Instead, three big office complexes were existing there i.e. Office of the EE, Pr.-I, and II, West Zone, South DMC and Office of the EE, Maintenance Division (PWD). In such a situation, it was difficult to verify whether the work was previously executed and dismantled at a later stage or it was not at all executed. It was a loss to government exchequer in both the situations.

2.2.8.3 Irregular engagement of the consultants

Section 6.13 of CPWD Manual provides that engagement of private consultant shall be resorted to only when the Director General (W) is satisfied that the architectural staff is fully occupied. Further, Department shall maintain a panel of private consultants prepared on the basis of open advertisement and appointment of private consultant in specific case will be on the basis of invitation of quotations limited to those in the panel. Thus, consultants, if needed, were to be engaged by MCD itself. However, in three works[16], MCD included a clause for providing a consultant for comprehensive consultancy for the project in the NITs rather than engaging the consultants themselves. Engagement of consultants through contractors was irregular.

Contractors of Grade separator at Dabri Mor (Work-I), Over Bridge at Bijwasan (Work-II) and Rani Jhansi Road Over Bridge works (Work-III) quoted ₹ 1.49 crore, ₹ 24.37 lakh and ₹ 1.30 crore, respectively for consultancy. Payments to contractors were made according to quoted rates in Work-I and Work-II. Contractor for Work-I signed an MOU in March 2008 with a consultant firm for providing comprehensive consultancy for this work at a fee of ₹ 1.10 crore whereas the amount quoted by him in the contract was ₹ 1.49 crore. Thus, MCD paid the contractor ₹ 39 lakh more than the fee at which he engaged the consultant. This amount could have been saved had the MCD itself engaged the consultant directly. Formal engagement letter issued by the contractors of Work-II and Work-III to the consultant and details of payments made to them by the contractors were not provided to audit.

South DMC replied that engaging consultant by agency is a standard practice in other organizations. South DMC, however, did not furnish the reasons for not observing the provisions of works manual.

2.2.8.4 Incomplete work and non-recovery of mobilization advance

MCD awarded a work under JNNURM in December 2010 for Improvement of Tigri road from MB Road to Durga Vihar, Devli road from MB Road to Devli Village, SSN Marg in village portion and EPDP road between Kalkaji using Ready Mix Concrete (RMC) at a cost of ₹ 29.96 crore with stipulated date of completion in January 2012 for which interest bearing mobilization advance of ₹ 1.50 crore was also released to the contractor in May 2011. An amount of ₹ 7.55 crore was paid to the contractor up to October 2013 and thereafter, the Contractor withdrew labour and machinery from the construction site without the permission of the Engineer-in-Charge. By this time only ₹ 67.79 lakh was recovered on account of mobilization advance and out of 18 contractual items of SOQ, only 10 items were partly executed and eight were not executed at all. Though the work was lying abandoned, the

[16] (i) Construction of Grade Separators at Dabri Intersection of Pankha Road (Work-I) (ii) Construction of Over bridge and approach roads at Railway Level crossing at Bijwasan (Work-II) and (iii) Construction of Grade Separator at Rani Jhansi Road (Work-III).

contractor was further paid ₹ 22.51 lakh till December 2014. Recovery of mobilization advance was also not effected from these payments. South DMC did not get the work completed either through this contractor or through another contractor on the risk and cost of the contractor. MCD has been holding a bank guarantee of ₹ 1.50 crore (with validity upto December 2017) against the mobilization advance but the same was not encashed to recover the dues. As of October 2017, an amount of ₹ 1.07 crore was lying unrecovered with the contractor on account of mobilization advance and interest thereon. Thus, indecision on the part of South DMC resulted in non-completion of work and non-recovery of mobilization advance ₹ 1.07 crore though the work was abandoned by the contractor more than three years ago in 2013.

South DMC stated that the part work was carried out on the roads as per scope of the work except on two roads. It was further stated that a recovery letter had been written (October 2017) to the contractor. Reply is not acceptable as MCD was holding a valid bank guarantee of ₹ 1.50 crore against the mobilization advance and earnest money of ₹ 25 lakh but the same were not encashed to recover the balance of mobilization advance and compensation for non-performance of contract though the contractor has abandoned the work in October 2013.

2.2.8.5 Inadequately planned road construction works

The work of Widening, Improvement and Strengthening of Dera Bhati Road (Road-I) along with construction of drain was awarded by Project Division, South-II in June 2011 at a contractual amount of ₹ 26.80 crore with stipulated date of completion in August 2012 under Central Road Fund. Similarly, another work for Widening, Improvement and Strengthening of Gadaipur bandh road (Road-II) was awarded by the Division in January 2012 at a cost of ₹ 11.58 crore with stipulated date of completion in January 2013. Payments of ₹ 26.26 crore and ₹ 11.53 crore had been made for Road-I and II in March 2014 and April 2015, respectively through RA bills. Audit noticed that at the time of award of work 77 and 221 numbers of trees were existing on the portion of Road-I and Road-II to be widened. The Division applied to Forest Department for permission for felling of 77 trees existing on Road-I in July 2011. The Deputy Conservator of Forests (DCF) sought some clarification from Division on 20 December 2011. Matter was not pursued by the Division thereafter. Matter of permission for felling trees in respect of work of Road-II was taken up by the Division on 8 May 2014 with Forest Department i.e. more than two years after award of work. The DCF (South) asked the MCD in November 2014 to deposit ₹ 96.60 lakh as security deposit and furnish the details of the locations of proposed compensatory plantation in lieu of felling of trees. Neither the money nor other documents were submitted to the DCF. Both the roads were constructed without removing trees. The roads were handed over to PWD in August 2014. Existence of 77 trees on

Road-I having a length of 5,760 meter and 221 trees on Road-II having a length 2,850 meter raises question mark on workability and utility of these roads. The PWD repeatedly requested the Division to remove the trees as fatal accidents were taking place because of these trees. However, trees were not removed as of July 2017.

Quality of road work was also not ensured by MCD. It is evident from the fact that soon after taking over the roads in August 2014 the PWD started making complaints about poor quality of roads but they were not attended by the South MCD. Road and drainage were to be maintained by contractor for five years from the date of completion of work. PWD asked the Division to get the defects removed but to no avail. Consequently, PWD had to incur an expenditure of ₹ 42.69 lakh on repair of drain. Thus, despite an expenditure of ₹ 38.22 crore, intended facilities of widened and improved roads could not be provided to public.

South DMC stated in October 2017 that the contractor of Road-I was asked in July 2017 to repair the damaged road. South DMC also added that widening of Road-I was re-aligned to avoid the felling of trees. It is clear from the reply that Division took up the matter with the contractor in July 2017, i.e only after being pointed out in audit whereas PWD started complaining about poor quality of road in August 2014. However, South DMC did not furnish any document evidencing change in alignment of Road-I. Audit is also of the view that expenditure of ₹ 42.69 lakh incurred by PWD should have been recovered from the contractor by encashing the bank guarantee lying with the South DMC which is valid up to 19 November 2018.

2.2.8.6 Unwarranted Expenditure

A bituminous road mainly consists of three courses (i) Water Bound Macadam (WBM), known as sub-base course, which forms a foundation of the road, (ii) Bituminous Macadam (BM)/Dense Bituminous Macadam (DBM) course as road base material and (iii) Bituminous Concrete (BC) is the top layer of the road which is known as wearing course made of crushed stone aggregates of specified grading pre-mixed with bitumen, or an open grade premix surface of small size aggregate premix with bituminous binder is laid on previously laid base course. Thus top layer of road is constructed either by the BC containing coarse/fine aggregate premix with bitumen or with open grade small size aggregate premix with bituminous binder. This layer provides riding quality to the road and comes in the direct contact of commuters. This layer is followed by seal coat to protect the road from water.

(a) Project-I Division, Shahdara (North) awarded the work of Construction of storm water drain, footpath and widening of Service Road along ROB on Shahdara Saharanpur Railway line in January 2010 at a cost of ₹ 6.44 crore under the Head LA road. Under the work, a new service road was widened and constructed by providing premix carpeting and seal coat. The work was completed on 28 December 2012 at a cost of ₹ 6.42 crore. While the work was in progress, the Division awarded another work of strengthening of the same service road again by providing BM and BC for ₹ 4.09 crore in February 2012 which was completed in June 2012 at a cost of ₹ 3.38 crore. Thus, necessity of strengthening of a road just after its construction is questionable which resulted in unwarranted expenditure of ₹ 3.38 crore. Moreover, if BC and BM was to be used for this road, this should have been included in the first contract itself.

(b) M-I Division, Shahadra (North) awarded the work for restoration of Johripur road from UP border to Shiv Vihar Tiraha and of Brijpuri road from Wazirabad road to Shiv Vihar Tiraha at a cost of ₹ 75.01 lakh in June 2011 by providing WBM, premix carpet surfacing and seal coat which was completed in December 2011. In August 2012, the Division requested Project-I Division, Shahadra (North) to take up the work of dense carpeting of same road without explaining the reason for premature strengthening. Project-I Division awarded the work of Improvement and Strengthening of these roads by providing BM and BC in June 2013 at a cost of ₹ 2.66 crore. Though the contractor was paid ₹ 2.77 crore including ₹ 11.19 lakh on account of cost escalation by December 2013, the work was in progress as of August 2017.

Thus, undue strengthening of a road has resulted an unwarranted expenditure of ₹ 2.77 crore. Non-recording of the completion of work and non-finalization of the bills even after four years of last running bill does not provide assurance that the work was actually carried out.

2.2.8.7 Unfruitful expenditure due to incomplete remodeling of a road

Length of the Karawal Nagar Road from Wazirabad Road to Shiv Vihar Tiraha is 4.2 Km. The UDD, in August 2006, conveyed the approval of Trans Yamuna Area Development Board (TYADB) for an amount of ₹ 4.85 crore for widening of a stretch of one km of this road i.e., from Wazirabad Road to Sherpur Chowk. Audit findings are as under:

i. The work of widening of a stretch of 1 km of this road was not taken up by the MCD. Reasons of non-execution of work was not found on record. In April 2007, TYADB approved an additional amount of ₹ 21.78 crore for widening of the remaining stretch of 3.2 km of the road i.e from Sherpur Chowk to Shiv Vihar Tiraha. This time Project-II Division, Shahdara (North) awarded the work, in August 2010, for Widening, Improvement and Strengthening of only a small stretch of 1.450 km of this road i.e. from Chand Bagh Culvert to Senior Secondary School, Dayalpur along with construction of raised footpath at a contractual cost of ₹ 11.67 crore with stipulated date of completion in February 2012. Payment of ₹ 8.34 crore was made to the contractor up to 10th RA bill paid in March 2013. The subject road was visited by audit along with an officer of East DMC on 21 July 2017 and it was noticed that there was a culvert on a drain on the road under reference being maintained by Irrigation and Flood Control Department, GNCTD. The road on either side of culvert was widened by the Division under


Narrow culvert in the middle of widened Karawal Nagar Road

this contract but the culvert itself was not widened by East DMC or got widened through I&FCD. The narrow culvert remained a big bottleneck undermining the utility of widening of the road.

ii. As per approved scheme, raised footpath with cement concrete curbs and paver blocks were to be constructed on both sides of the road, which were not constructed. TYADB had approved widening of complete Karawal Nagar Road of 4.2 km. However, under this contract only a small stretch of 1.450 km was widened and strengthened. Work of widening and strengthening of remaining length of 2.750 km of road had not been taken up for the reasons not found on record. Beyond Dayalpur school, the road is very narrow and without central verge. Hence, despite an expenditure of ₹ 8.34 crore intended benefits could not be provided to residents and whole of the expenditure remained unfruitful.

iii. The 10^{th} RA Bill shows that the Division paid ₹ 22.02 lakh to the contractor for reconstruction of the road with premix carpeting and seal coat but the EE in May 2013 awarded another work for strengthening of the same stretch of the road by providing dense carpeting at a contractual cost of ₹ 2.48 crore. The work was completed in July 2013 at a cost of ₹ 2.52 crore. It indicates that a road which was completed in March 2013 has again been strengthened in July 2013 resulting in unwarranted expenditure of ₹ 2.52 crore.

iv. The subject road was strengthened in July 2013 but during physical visit


Dilapidated condition of Karawal Nagar Road

it was found in very dilapidated condition with big potholes. Though it was under warranty period, the division did not get the defects rectified by the contractor.

2.2.8.8 Un-finished strengthening of road

TYADB sanctioned (June 2012) ₹ 160.10 lakh for Improvement and Strengthening of Internal Roads of DDA MIG and LIG flats at East of Loni Road including improvement of carriageway by dense carpeting, improvement of side berms and improvement and raising of existing drain. Shahdara North Project-I Division awarded the work (December 2012) of providing and laying BM and BC on designated roads. However, works of improvement of side berms and existing drains were not included in the contract for which no reasons were found on the record. The work was completed in September 2013 at a cost of ₹ 96.98 lakh. Unmaintained side berms are risky for pedestrians as well as for vehicles. Similarly, adequate arrangements to drain out rain water from road pavement is also essential for sustainability of good road condition.

2.2.8.9 Application of mastic asphalt without base course

Mastic carpeting is not a term defined in MORTH specifications. However section 515.4.2 of MORTH specifications provides for laying of the mastic asphalt on previously made base course. It was, however, noticed that six divisions incurred an expenditure of ₹ 8.09 crore during April 2012 to March 2017 for 11 works of Improvement and Strengthening of roads in disintegrated condition, by providing bitumen mastic carpet without constructing the base. Since strengthening/improvement of road by laying mastic carpeting alone without constructing the base is not specified in MORTH specifications, it could not be ascertained in audit whether desired results of strengthening of these road were achieved through these works.

2.2.8.10 Un-authorized utilization of grant-in-aid

The GNCTD in 2007 approved a scheme for 'Widening, Improvement, Strengthening and Beautification of GT Road from eastern approach of ISBT to Uttar Pradesh Border'. Project-II Division, Shahdara (North), however, unauthorisedly diverted the funds received under this scheme for construction of RCC drain from New Seelampur to Shiv Mandir including side lane from Shiv Mandir to Road No. 66 which was awarded in September 2012 at a contractual cost of ₹ 2.08 crore. The stipulated date of completion of the work was in May 2013. MCD paid ₹ 1.08 crore to the contractor till November 2013 and no progress of the work was recorded thereafter.

2.2.8.11 Undue payment to the contractor

As per directions issued by Quality Control Circle (QCC), fee for 3rd party quality assurance to CRRI was to be borne by the contractor of the work. It was however noticed that Project-I Division, Shahdara (North), East DMC made a payment of ₹ 8.98 lakh to the contractor against payment made by him to the CRRI for the work awarded vide Work Order No. 07/2015-16 dated 12 June 2015. As this expenditure was to be borne by the contractor, payment on this account to the contractor was irregular and should be recovered from the contractor.

2.2.8.12 Wasteful expenditure of ₹ 40.58 crore on incomplete covering of Nallah at Noroji Nagar and Pushp Vihar

Gazette notification of Delhi Development Authority, Ministry of Urban Development (MoUD), GOI dated 7 August 2009 stipulates that all transportation projects/transportation engineering solutions in Delhi by any agency having road engineering/infrastructure implication would require clearance of the Unified Traffic and Transport Infrastructure (Planning and Engineering) Centre of DDA (UTTIPEC). The UTTIPEC Governing body on 19 February 2010, for environmental reasons, decided that no covering of drains henceforth would be taken up by any agency and drains should be developed with the local ecological and landscape to use them as Non-Motorized Transport (NMT) connectivity routes. As some of the projects of MCD approved under JNNRUM were not getting approval of UTTIPEC, MoUD directed on 4 November 2010 that MCD may submit other projects in place of such projects for approval of the Ministry.

MoUD, GOI conveyed its approval in December 2009 for funding the projects of covering of Nallah at Nauroji Nagar (₹ 51.20 crore) and Pushp Vihar (₹ 233.00 crore) for providing parking/road-cum-parking under JNNURM. MCD did not submit the proposals to UTTIPEC and approached directly Lieutenant Governor for relaxing the directives of UTTIPEC. Lieutenant Governor did not accept the request of MCD, and directed to firm up the tender and go for an open bid process at an early date to develop an environment friendly Eco-Mobility corridor at these stretches.

MCD again on 16 May 2011 approached the Lieutenant Governor with a submission to finalize a policy for covering of nallahs in a manner which would allow percolation of water through various channels to these nallahs. It was however noticed that no reference to decision of UTTIPEC dated 19 February 2010 was made in the note. Lieutenant Governor approved the concept. The MCD thereafter did not submit the designs and drawings for covering of these nallahs, based on approved concept, to UTTIPEC for clearance, and EE (Project)-I South and EE (Project)-I Central, in September 2012, awarded the works for covering of nallahs at Naroji Nagar at a contractual cost of ₹ 33.38 crore and nallah at Pushp Vihar at a contractual cost of ₹ 163.21 crore. On an application filed in National Green Tribunal (NGT) for covering of nallah against the directives of UTTIPEC, the NGT on 13 January 2015 directed not to cover any of the drains. Thereafter both the contract have been closed in September 2015 after incurring total expenditure of ₹ 33.73 crore on these works.

Abandoned work of covering of PushpViharNallah

The MCD ignoring the directives of UTTIPEC got approved from MORTH, GOI, in February 2012, another work for Construction of road over drain from Mandoli road to Drain no. 1 near Jafrabad under CRF. The EE (Project)-I Shahdara incurred an expenditure of ₹ 6.85 crore on pre tendering preparatory works of this project such as payment to BSES, DJB and forest department but work could not be commenced because of NGT orders.

Thus, award of works for covering of Nallah, in violation of UTTIPEC directives and without its clearance, had not only resulted in wasteful expenditure of ₹ 40.58 crore, but it also made the conditions of the Nallah at Pushp Vihar and Naroji Nagar worse as despite the directions of the NGT unfinished reinforcement bars have not been removed from there. Resultantly, not only these were hampering the cleanliness of nallahs but also disturbing free flow of water. Further, there is unrecoverable loss to environment as 249 number of trees were cut by MCD for covering of Mandoli Jafrabad drain.

South DMC replied that decision of UTTIPEC was brought to the notice of the Lieutenant Governor vide note dated 16 May 2011 and the Lieutenant Governor accorded approval for execution of work. Reply is not in order as the Lieutenant Governor has never accorded the approval to execute the work without approval of UTTIPEC. Simply a concept was approved by Lieutenant Governor.

2.2.8.13 Abnormal delay and increase in cost of elevated road project

With a view to overcoming bottlenecks on congested Rani Jhansi Road cutting across densely populated commercial localities of Azad Market and Bara Hindu Rao and to providing hurdle free connectivity between Interstate

Bus Terminal, Kashmiri Gate and Idgah, Lieutenant Governor accorded (July 2006) administrative approval and expenditure sanction of ₹ 177.72 crore for construction of Grade Separator at Rani Jhansi Road. This estimated cost included cost of construction of a grade separator of ₹ 75.40 crore, cost of removal of underground utilities and of land acquisition etc. of ₹ 96.42 crore and ₹ 5.90 crore for contingencies and quality control.

Sadar Paharganj Project Division took two years to award the contract in June 2008 at a contractual amount of ₹ 93.84 crore with stipulated date of completion in October 2010. Audit noted that:

i) MCD did not do a comprehensive survey of the locality to identify affected areas to factor in relevant issues in project planning prior to administrative approval and award of work. The grade separator was to cross over a place of worship falling in its alignment and therefore, opposition from the community and possible solution including modification in alignment/design of the grade separator should have been adequately planned. MCD did not consider that there was a railway track falling in the alignment of grade separator and construction of bridge over it by railways and its cost and timelines were to be considered in this project in consultation with the Railways.

ii) MCD did not adequately estimate the presence of residential, commercial, and government properties that were to be relocated/compensated. As a result, there were recurring interruptions during execution and grade separator work which was supposed to be completed by October 2010 remain in work in progress as of August 2017 in spite of incurring an expenditure of ₹ 58.79 crore. Original cost estimate of ₹ 177.72 crore was revised (August 2014) to ₹ 724.22 crore.

The Division stated that North MCD had put forth its best efforts in completion of project despite odd conditions. Reply is not tenable as the work was inadequately planned and as a result, an important decongestion project remains incomplete for over 10 years from its approval. Besides, long construction schedule created chaos and difficulties to the residents and visitors of the localities.

iii) SPZ Project Division under North DMC invited (August 2007) item rate tender for the work of Grade Separator at Rani Jhansi Road. The work was awarded on single bid basis at an amount of ₹ 93.84 crore. Price bid documents showed that price quoted initially was revised upward in three items of schedule of quantities through cutting. Upward revisions in a single bid are not justified. Audit noticed that corresponding changes were not effected in other relevant places of the price bids. Impact of upward revision resulted in increase of ₹ 5.22 crore in total price bid from ₹ 93.44 crore to ₹ 98.66 crore.

SPZ Project Division replied (July 2017) that cutting in rates made by the bidder in the financial bid were meticulously marked/noted by the concerned Accountant and also attested by the EE. The reply is not tenable. Vague initials on the side of correction cannot be accepted as the same were not supported by remarks from the tender opening committee evidencing these revisions as if these were made prior to submission of price bids. Moreover, correction of clerical and arithmetical mistakes in the price bids noted at the time of opening bids could be justified but in this case, there were evidence of two upward revisions of the base rates in the price bids document, and should not have been accepted. Therefore, possibility of enhancement of rates in post tender stage fraudulently allowed by the MCD officials could not be ruled out, particularly since it was a single tender.

2.2.8.14 Increased cost and idle investment due to delay in execution of RUB at Kishan Ganj

A work for 'Widening of Kishan Ganj RUB and that of approach roads' was approved by the Ministry of Surface Transport, GoI in November 1992 for ₹ 24.36 crore to connect Central Delhi and West Delhi. MCD was to take up widening of approach roads and widening of existing RUB was to be assigned to the Railways. Widening of roads and RUB were to be executed simultaneously. Audit findings are as under:

(i) Increase in cost due to delay in starting the work

MCD took 12 years to pay the deposit of ₹ 17.52 crore in September 2004 and ₹ 8.89 crore in February 2006 to Railways for construction of RUB. Cost estimates were revised to ₹ 56.47 crore in August 2006. Thus, inaction on the part of MCD resulted in increase in the cost of project by ₹ 32.11 crore in the initial stage itself.

(ii) Idle investment due to non-completion of RUB

Railways started construction of underpass only in April 2012 after seven years from the receipt of amount and completed only one Box in December 2014 and submitted revised estimate from ₹ 26.41 crore to ₹ 57.40 crore and demanded additional fund of ₹ 31 crore from North DMC. MCD requested the Railway to furnish the details of expenditure out of the funds released earlier which they did not do. MCD did not release additional funds and consequently, Railway did not take up the work of remaining three boxes. It was observed that the matter was not escalated to the level of Commissioner North DMC or Urban Development Department for timely completion of project.

(iii) Non-functional RUB

For operating one box of RUB constructed by the Railways, retaining wall and other allied works were to be constructed. MCD took 23 months to award this work in December 2016 at a cost of ₹ 1.48 crore. This work was stopped in August 2017 after 60 *per cent* physical completion due to overflow of water from adjoining DJB sewage system reflecting poor planning on the part of MCD. Consequently, the only box of RUB completed in December 2014 was also lying unutilized.

(iv) Irregular payment to contractor

Section 33.10 (3) of CPWD Manual stipulates that cost escalation is to be paid for work done during the stipulated period of the contract including the justified period extended under the provision of the contract.

The stipulated date of completion of the work for construction of approaches was 14 October 2010. The work had not been completed as of August 2017.

No extension of time for delay has been granted by the competent authority but the division has paid ₹ 93.81 lakh on account of cost escalation for the period of delay beyond stipulated period of completion.

An amount of ₹ 36.92 crore have so far been incurred on this project including widening of approach roads on either side of RUB completed at a cost of ₹ 8.68 crore but widening of Kishan Ganj RUB to connect Central Delhi and West Delhi planned in 1992, however, remains as work in progress and could not be made available to the citizens.

2.2.8.15 Unfruitful expenditure in construction of RUB at Sultanpuri due to deficient planning

Work for approach road of RUB at Sultanpuri was awarded by Rohini Project-I Division in July 2010 at ₹ 38.97 crore with stipulated date of completion in August 2012. Presence of underground civic facilities like MTNL cables, DJB lines, NDPL/BSES electrical lines services in Delhi area is a known fact and should be factored prior to awarding the contract for construction work on these sites. MCD did not do the required due diligence in this respect. After achieving physical progress of 20 *per cent*, work was stopped in February 2013 due to non-removal of these underground hindrances and contract was terminated. In the meantime, the contractor was paid ₹ 9.04 crore against running bills which has become infructuous. Besides, unadjusted advance of ₹ 1.61 crore paid to the contractor was also not recovered. In the absence of approach roads, RUB constructed also could not be used depriving the public of a better road connectivity**.** Audit is of the view that security deposit should not be released without recovering the unadjusted advance.

2.2.8.16 Unauthorised deviation in quantities of items

Section 24.1.2 (2) and (3) CPWD Manual stipulate that deviation in quantities of individual items beyond the limit of 10 *per cent* should be sanctioned by the competent authority and the quantum of deviation shall be the sum of absolute value of deviated amount of all individual items. It further stipulate that if total deviation of quantity is beyond the deviation limit of 10 *per cent*, deviation beyond this limit should not be made at site without in principle approval of technical sanction authority. However, in six RUB approach road works executed during the audit period, there were deviations ranging from 43 to 72 *per cent* in quantities of items actually executed over the contractual quantities as indicated in **Table 2.2.3**. The approval of the competent authorities was not obtained in these cases either for reduction or increase of the quantities.

Table 2.2.3: Details of deviation in quantity

(₹ in crore)

Sl.No	Name of work	Contractual amount	Cost of quantities executed in excess (No. of items)	Cost of quantities executed short (No. of items)	Amount of deviation	Percentage of deviation
1	**2**	**3**	**4**	**5**	**6 (4+5)**	**7 (6/3x100)**
1	Construction of RUB at Narela	23.69	8.97 (82)	7.17 (28)	16.14	68
2	Construction of RUB near Mundka	34.62	10.21 (66)	10.62(43)	20.83	60
3	Construction of RUB near Sawan Park	19.51	6.37 (93)	6.66 (33)	13.03	67
4	Construction of RUB, Badli	24.88	5.89 (68)	4.74 (35)	10.63	43
5	Construction of RUB at Sanjay Gandhi Transport Nagar	4.26	1.35 (90)	1.34 (29)	2.69	63
6	Construction of RUB at Roshnara Garden	14.10	5.92 (70)	4.18 (52)	10.10	72
		Total	**38.71**	**34.71**	**73.42**	

In all the six works, there were excess execution of the SOQ items amounting to ₹ 38.71 crore and less execution of items amounting to ₹ 34.71 crore. It indicates that technical sanctions of the works were not based on adequate/reliable data. Further, approval of competent authority was not obtained in any of these cases.

Narela Project Division stated (August 2017) that the works were executed as per site requirements and contractual cost of both the projects was within the contractual amount. The reply is not acceptable as approval of the competent authority was not obtained as required under Section 24.1.2 (2) and (3) CPWD Manual.

2.2.8.17 Unauthorised expenditure in the work of Providing Ready Mix Concrete on Phirni road of village Hiran kudna

Narela Project Division awarded the work in July 2013 at ₹ 3.53 crore with stipulated date of start and completion as 19 July 2013 and 24 March 2014, respectively. As per contract, a road of 1,400 meter length was to be constructed, but in actual 3,446.06 meter road, almost two and half times the contractual quantity was constructed whereas six items[17] were not executed at all and the quantities executed in respect of 12 items were less than SOQ. Payment of ₹ 3.50 crore was made to the contractor up to January 2015. Thereafter, the status of the project remained the same and was not completed as of August 2017. Reasons and justification for construction of extra length at a cost of ₹ 1.09 crore were not found on the record nor the revised technical sanction was obtained. Thus, due to post tendering increase in the scope of work, Division had incurred unauthorized expenditure of ₹ 1.09 crore.

Narela Project Division replied that the extra length of the road was constructed on the demand of local residents. The reply is not acceptable as in the absence of approval of the competent authority it did not provide assurance that the construction of extra length of road was need based and technically justified.

2.2.8.18 Non recovery of ₹ 1.92 crore from contractors

Condition No.4 of additional conditions of the contract for the work of RUBs at Mundka and Rampura stipulates that if, due to site conditions, the quantity of any item of contract, whose accepted rates are lower than the justified rates worked out by the department, decreases from the quantity stipulated in the schedule of quantities, such non executed quantities shall be recovered at the difference of justified rates worked out by the Department and accepted rates of item of contract.

In Mundka and Rampura RUBs, quantities of 26 items and 29 items with tendered rates lower than justified rates were executed in lesser quantities than those mentioned in schedule of quantity of contract. Audit noticed that though payments of ₹ 34.38 crore and ₹ 5.95 crore were made to contractors of respective works up to October 2016 and October 2014 but recoveries amounting to ₹ 1.72 crore and ₹ 0.20 crore respectively according to the above condition have not been made. As of August 2017, these projects have neither been declared as complete nor final bills paid.

Rohini Project-I and Narela Project Divisions assured in July/August 2017 that the recoveries would be made. An amount of ₹ 1.73 crore is lying with Rohini Project-I Division as security deposit in respect of Mundka RUB and audit is of the view that recovery should be made out of this amount. Narela Project Division stated (January 2017) that security deposit withheld from bills of Rampura RUB amounting to ₹ 29.74 lakh has been forfeited on rescinding the project but it was not clear whether the forfeiture was on account of recoverable amount.

[17] (i) Earth work, (ii) disposal of soil, (iii) brick work, (iv) steel work, (v) cement concrete of 40 mm grade and (vi) cement concrete of 20 mm grade.

2.2.8.19 Un-authorized change in scope of work after award in the improvement and strengthening works.

Rohini Project-I Division awarded six works having total estimated cost of ₹ 19.60 crore, relating to 'Improvement of drains and side berms at Sectors 5, 6, 17 and 18 Rohini, strengthening of carriageway and improvement of drainage systems at Saraswati Vihar, Rohini, improvement and development of Roads and improvement of drains at Pushpanjali Enclave, Rohini' during 2012-17. As per schedule of quantities of these contracts, side berms were to be improved/ constructed with CC paver blocks at a total amount of ₹ 3.09 crore. However, in place of paver blocks, ready mix concrete (RMC) was used. Substituting contractual item without cost adjustment amounts to undue favor to contractors. Exact financial impact could not be worked out as quantity of RMC used in berms was not available.

The Division stated (July 2017) that scope of work was changed in the larger public interest and with the approval of competent authority. The reply is not acceptable as the requirement should have been assessed at the time of framing the estimate. The changes after the award of work were against the spirit of transparency and healthy competition and unfair to other bidders. Difference in cost due to substitution was not recovered from the contractor.

2.2.9 Non- monitoring of works at execution stage by MCsD

2.2.9.1 No assurance that works were completed as per specifications

(a) Rule 132(7) of General Financial Rules (GFR) provides that final payment shall be made on a personal certificate by the officer in-charge of execution of work that he is satisfied that the work has been executed as per the specifications and the workmanship is up to the standards. Final payment of ₹ 242.55 crore for 82 works (South DMC-34, North DMC-32 and East DMC-16) in 14 Divisions was made during April 2012 to March 2017 without obtaining the requisite certificates from respective Executing Officers.

(b) Section 30.4 of CPWD Manual states that before a road work is declared as complete in all respects, it has to be certified by the SE/EE, that the work has been carried out as per specifications.

It was, however, noticed that during the period April 2012 to March 2017, total 127 works (South DMC-55, North DMC-51 and East DMC-21) having contract value of ₹ 545.94 crore were completed but in none of these works the requisite certificate was recorded by the respective SE/EE. This shows failure of the officers to perform their designated responsibilities and there was no assurance regarding actual completion of these works and their quality.

On being pointed in audit, Engineer-in-Chief, South DMC instructed (October 2017) all the EEs to release payment to contractors after the completion certificate by the SEs.

2.2.9.2 Weak financial control mechanism in MCsD

(i) Non finalization of bills

Section 30.2 of CPWD Manual provides that final payments for works costing more than ₹ 15 lakh should be made within six months of the completion of the work. It was however noticed that in 45 works, costing more than ₹ 15 lakh, the final bills were not processed as of September 2017 even after 145 to 2,147 days of their completion. For instance, two works namely strengthening of carriageway of 13.5 meter and 18 meter of Sector 18, Rohini and strengthening of road by dense carpet at Punjabi Bagh respectively were shown completed in November 2011 and May 2017 but the bills of these works has not been finalized as of September 2017.

South DMC stated that bills were not finalized because some formalities were not completed by the contractors. Reply is not tenable as these bills are to be processed in accordance with the terms of the contract including compensation for delays attributed to the contractors. Out of 45 works, 25 works were completed after the contractual completion date (Refer to Paragraph 2.2.9.2(ii) of this report). Moreover, reasons for delays in final bill payment were not on record.

(ii) Non levy of compensation for delay

Clause 33.1(3) of CPWD Manual provides for recovery of compensation for slow progress or delay in completion of work subject to a maximum of 10 *per cent* of tendered value. Clause 33.1(4) stipulates that there is no choice for Engineer-in charge but to recover the same at the rates mentioned in clause 2 of the contract. It was noticed that out of total 190 works scrutinized in audit, 117 works completed on or before their stipulated dates of completion, 25 works were completed with a delay of 34 to 513 days and 48 works were ongoing even after 76 to 2,899 days from their stipulated date of completion. However, no compensation was levied by the competent authority on contractors for delayed completion or slow progress in these works.

(iii) Payment for works having no evidences for their actual execution

In five divisions a total amount of ₹ 7.19 crore was shown in cash books as payments for works done under the head of LA Road (**Appendix 2.2.1**). On being asked about the approval of the competent authority for these works, Divisions intimated that the same was not available. No documents like work orders, bids and contract documents, completion certificate etc. were made available to audit by the divisions in support of these payments except vouchers. Further scrutiny of the vouchers revealed that out of ₹ 7.19 crore, an amount of ₹ 1.13 crore was shown incurred on contingent expenditure of divisions such as purchase of furniture, car, construction of office cabin etc. However necessary stock entries of the items were not found in official records of the divisions. In the absence of proper documents, it could not be ascertained whether these works were actually executed and possibility of fraud cannot be ruled out.

(iv) Non maintenance of work wise details of expenditure

Section 10.3 of CPWD Manual provides that permanent and collective records of expenditure incurred in the Division during a year on each work should be maintained in the form of 'Register of Works' and it should be reviewed and initialed by the EE. Such register however was not being maintained in the Divisions which indicates lack of control to ensure that the expenditure incurred on works was in accordance with expenditure sanction of competent authority. South DMC stated that the required register would be maintained henceforth.

2.2.9.3 Non-maintenance of Records of Quality Assurance System

CRRI was to conduct Third Party Quality assurance for every project of ₹ 25 lakh and above. It was to conduct stage-wise inspections in accordance with the agreed modalities and submit complete and comprehensive inspection report within 10 days of the inspections. As per directions of Quality Control Circle, payment to contractors was required to be made after receiving third party quality assurance report from CRRI. During the period April 2012 to March 2017, total payment of ₹ 880.35 crore was made to contractors for 190 works through RA or final bills. Audit however observed that the Executive Engineers of the Works Divisions were not maintaining prescribed registers in respect of samples of materials sent for testing and sample test reports including third party quality assurance reports and quality audit documents were also not maintained. In absence of these records, Audit could not verify whether running bill and final payments to contractors were made after due consideration of third party quality assurance report from CRRI. On being pointed out in audit, E-in-C (South DMC) issued directions (October 2017) to all the EEs for strict compliance to the directives of Quality Control Circle contained in their circular dated 20 February 2007.

2.2.10 Non-compliance of provisions of MoRTH

Compliance with the MoRTH specifications for road and bridge works is a standard condition for similar works awarded by the MCsD. Section 500 and 600 of MoRTH Specifications define the procedures and specifications for bituminous and cement concrete pavement roads (CC road) respectively. A bituminous road mainly consists of three courses – Sub Base Course made of Water Bound Macadam (WBM); Base course made of Bituminous Macadam (BM); and Wearing Course made of Bituminous Concrete (BC).

During the period April 2012 to March 2017, MCsD carried out 110 works of improvement/strengthening/resurfacing of bituminous roads and 14 works of Cement Concrete roads involving total expenditure of ₹ 301.27 crore. Audit checked all the 124 road works to ascertain the level of compliance with the MoRTH specifications/procedures and the discrepancies are as under:

(i) Non-formulation of road work wise Job Mix and Mix Design

Job mix formula is a mixture of bitumen or any other binder, coarse aggregate/fine aggregate, mineral filler etc. in a specified proportion by weight or percentage to be used in construction of a specific bituminous road. Section 507.3.3 of the MoRTH specifications provides that the contractor shall inform the Engineer in writing, at least 20 days before the start of the work, of the job mix formula proposed for use in the work, and shall give the details of source and location of all materials along with test results of physical characteristics of aggregates to be used. EEs of MCsD, however, did not adhere to this, and instead incorporated a condition in NITs of road works that one job mix formula for one year shall be got designed by the contractor from MCD Lab and its cost shall be borne by the contractor irrespective of the number of works undertaken during the said year. Even this procedure was not followed in practice.

For example, MCD Lab intimated in August 2017 that they received samples of materials for job mix formula from divisions and not from contractors as required as per NIT. However, there was no record in the Divisions as well to show that samples were ever sent to MCD lab such as description and date of samples of materials dispatched to MCD Lab, sources, locations they were collected from, test results of physical characteristic of aggregates and other materials submitted by the contractors etc. The samples of the materials taken into consideration by MCD Lab were neither preserved in the MCD Lab nor made available to Division to ensure use of the same materials by the contractor in works. Neither the MCD Lab nor the Divisions has maintained record of road work wise or contractor wise job mix formula approved by MCD Lab.

Similarly, mix design of cement concrete is required to be formulated for CC roads. However, no record was found maintained in Divisions to show that mix designs were approved or got approved by EEs for CC roads.

South DMC stated that whenever contractor wants to get a new formula designed he has to submit various materials and information to the concerned division in which works have to be taken up. South DMC however did not clarify as to why this practice as defined by SDMC in their reply was not followed.

(ii) No structural designing of road pavements

Axle load of different type of vehicles moving on the road governs the structural design of a road pavement. Various bituminous roads were strengthened /improved/resurfaced by MCsD by laying new layer of 40 to 50 mm thick BC or 25 mm thick mastic asphalt. However, there was no record to show the basis on which the thickness of BC/Mastic Asphalt was decided. It indicates that no exercise was under taken to design the pavements of these roads according to axle load. Moreover, BC and Mastic Asphalt are merely wearing courses to provide riding quality to road. Thus, strengthening of the roads, previously strengthened at least five years ago, by laying BC or Mastic alone without providing new base of BM did not provide an assurance that the roads had achieved required strength and durability.

South DMC stated that for resurfacing of the existing roads, structural designing of road pavements was not necessary. Reply is not acceptable as wearing course laid on these roads also forms the part of the road crust. Hence the thickness of this course should have been designed taking into consideration the axle load on the respective road.

(iii) Non-removal of already applied bituminous layer

Section 501.8.3.2 of MoRTH specifications stipulates that where specified, the existing bituminous layer shall be removed with care. Examination of 110 works amounting to ₹ 238.33 crore revealed that new wearing course of BC was laid on roads without removing existing one in any of them. There was no document in respective Divisions about any exercise undertaken to evaluate the strength and condition of existing layer before deciding laying of new course, ignoring the fact that the existing wearing course which may already have outlived its normal life would form base for the new one. Hence there was no assurance that desired quality and strength could be added to the roads through these works. This could also mean that quality and durability of new surface got compromised resulting in untimely recurrence of potholes, and bills of quantity approved and paid for full resurfacing could be higher than the quantity actually used by the contractor.

South DMC stated that the resurfacing of roads was carried out as their existing surfaces had outlived their life and there was no necessity to remove the existing surface. Reply of South DMC is not tenable as there was no evidence in records to show that there was no need to remove the existing layer in any of the works.

(iv) Not applying seal coat to protect the roads from water

Bitumen is highly vulnerable to water. Section 513.1 of MoRTH specifications provides for application of seal coat on wearing course for sealing voids in a bituminous surface. Seal Coat provides an impermeable surfacing to prevent penetration of water in the previously laid bituminous courses. It was, however, noticed that provision for seal coat was not included in any of the works of strengthening/resurfacing of roads nor it was provided over newly laid bituminous course which may reduce the normal life span of these roads.

(v) No determination of density and thickness of bituminous courses

Sections 501.6 and 509.4.8 of the MoRTH specifications prescribe compacting of layers of BM/BC through rolling by smooth wheeled tandem rollers till the desired density of finished layer is achieved. Achieving the specified density and laying a bituminous layer of stipulated thickness was not only important to ensure the desired strength of the bituminous layers but it also had a financial implication as payment to the contractor was to be made on the basis of the volume of the compacted layer of BC/BM.

As per orders of competent authority, cutting of the core of newly laid BM/BC course for determination of its thickness and density was to be got done through CRRI. Audit, however, did not see such reports of CRRI in the case files or in any other records of the respective Divisions in respect of any of the 110 resurfacing works audited.

Although South DMC stated that the reports of CRRI included the thickness as well as field density achieved at site, the said reports were neither found on record in divisions nor were furnished by the South DMC with the reply.

(vi) Lifting the Manholes to the level of resurfaced road was left incomplete

In 20 works relating to strengthening of the roads, an item for lifting the Manholes was included in Schedule of Quantity (SOQ). However, in 17 works, the item of lifting of manholes was not at all executed and in three cases, the quantity executed was much less than that stipulated in contracts. However, no reasons were found recorded for non-execution/execution of reduced quantity by the engineers. In all these works, layers of 50 mm to 100 mm of thickness of BC/BM on roads without scarifying the existing layers means the manholes in the middle of the road pavement remained at a level lower than the resurfaced road thus creating rabbets (broad grooves) at the un-lifted manholes. Rabbets in the middle of the roads could be life threatening to the vehicular traffic as well as to pedestrians.

South DMC stated that this work was carried out by DJB as manholes were on the sewer line maintained by DJB. Reply is not acceptable as the works for raising of manhole to the level of the resurfaced road were to be taken up simultaneously and the same were part of the contracts. South DMC also did not furnish documentary evidence that the work of raising these manholes was got completed through DJB.

(vii) Non-maintenance of history sheet of roads

Proposals for strengthening/resurfacing of the roads are approved citing existing roads being more than five years old. However, no documents to verify the details of previous strengthening/resurfacing/repair and other allied works on the roads under the jurisdiction of the Divisions was found maintained. In the absence of records, audit could not verify whether strengthening of these roads was carried out on or after completion of their normal life span or any repair work was carried out on these roads at the cost of MCsD during their warrantee period. Record of grievances received from public relating to condition of roads and action taken thereon were also not found maintained in Divisions. South DMC replied that the requisite register would be maintained henceforth.

(viii) Non enforcement of maintenance and guarantee clause of contracts

As per terms and conditions of contracts, the contractors are responsible for maintaining the road and rectification of defects, if any, for a period of five years from the last day of the month in which a particular road is completed. For this to happen, the MCsD divisions were to conduct periodical survey of these roads to find faults in the roads and to ask the contractors to remove/repair the defects. However, there was no record or mechanism in the divisions to indicate that these provisions were ever enforced. Non-existence of such data indicates that contractors were never put on job by the division to rectify the defects whenever and wherever occurred on roads during the warrantee period.

Further, in all 190 cases examined by the audit, formal completion certificates were not issued by the competent authority and therefore, it is not clear as to how and from which date the warrantee clause could have been actually enforced.

South DMC replied that warranty clause was being enforced whenever required. South DMC however did not furnish evidence in support of this statement. Not ensuring compliance with these provisions also means non-maintenance of these roads to the detriment of public road safety with corresponding savings to the contractors.

2.2.11 Conclusion

Section 298 of DMC Act 1957 makes the Municipal Corporation of Delhi the sole owner of all the roads in Delhi. However, as of March 2016, out of 33,868 Km road network of Delhi, 23,931 Km are maintained by the MCsD. Public Works Department, Delhi State Industrial and Infrastructure Development Corporation, and Irrigation and Flood Control Department under the GNCTD, and Delhi Development Authority and New Delhi

Municipal Council under GoI also are constructing/maintaining roads. Audit noted that:

(a) Multiple agencies were responsible for Delhi Road Network. The Urban Development Department (UDD) did not establish any mechanism to coordinate the efforts of these agencies to prepare a perspective plan, lack of which hindered the effective planning and coordination in developing Delhi Road Network in phased manner to cope up with ever increasing population of vehicles in the city. There was failure to evolve an effective mechanism for citizens to address their grievances related to specific roads to the responsible agencies for redressal.

(b) The UDD has not been maintaining data/record of works approved during previous years under different heads/schemes for future reference and to follow up implementation of works so approved from the MCsD and their physical and financial progress. Due to mismatch of works sanctioned and funds budgeted/released, some new work sanctioned are not taken up and/or ongoing works could not progress.

(c) MCsD could not effectively tap the funds from the Central Road Fund, maintained by MoRTH for States road works, due to lack of adequate follow up. MCsD unauthorisedly transferred Grant-in-Aid meant for road works amounting to ₹ 73.50 crore to their non-plan accounts to meet their administrative and contingent expenses.

(d) There had been delays of 1,464 days and 1,483 days in completion of Bridges at Pankha Road and Bijwasan respectively besides cost escalation of ₹ 10.60 crore in over bridge at Bijwasan. Works for Grade Separator at Rani Jhansi Road and under bridge at Kishan Ganj were lagging behind 2,502 days and 2,513 days respectively from their stipulated date of completion.

(e) Quality assurance was lacking in MCsD as provisions of CPWD Manual and MoRTH specifications and instructions/directions issued by the Quality Control Circle of MCsD were not adhered to leaving scope for substandard work.

(f) Records were not maintained to verify whether strengthening of the roads was carried out on or after completion of their normal life span or any repair work was carried out on these roads at the cost of MCsD during their five years' warranty period.

(g) MCsD were not maintaining history sheets of roads or the warranty period in which the contractor was liable to repair the road constructed.

2.2.12 Recommendations

The Department may:

(i) *prepare long, medium and short term comprehensive plans based on proper survey and reliable data for development and strengthening of Delhi Road Network;*

(ii) *ensure strict compliance to provisions and specifications of CPWD and MoRTH in development/strengthening of roads;*

(iii) *evolve a mechanism for monitoring of approved road works under various heads/schemes;*

(iv) *strengthen quality assurance mechanism to ensure durability of newly constructed/strengthened roads by following guidelines/instructions issued from time to time.*

(v) *upload history sheet/warranty period of roads on its website.*

(vi) *ensure enforcement of maintenance and guarantee clause of contracts.*

The matter was referred to the Government in November 2017 and their reply is awaited as of January 2018.

Department of Weights and Measures

2.3 Working of Department of Weights and Measures, Delhi with special focus to safeguard interests of Consumers

The Department of Weights and Measures, GNCTD (Department) has the mandate to protect the interests of the consumers by ensuring accuracy of weights and measures and to ensure mandatory declarations on packaged commodities by enforcing provisions of the Legal Metrology Act 2009 and other Rules. Some of the significant audit findings are summarized below:

Highlights

- ***The Department did not conduct any survey to prepare data base of users of Weights and Measures nor prepared any annual plans to conduct inspections with balanced approach.***

(Paragraph 2.3.7.1)

- ***There was a shortage of manpower under key functionaries viz. Inspectors/Manual Assistants mainly responsible for enforcement of Act and Rules.***

(Paragraph 2.3.7.2)

- ***Due to infrastructure deficit, central assistance remained unutilized. Verification equipment provided by Government of India were not optimally utilised.***

(Paragraph 2.3.7.3 (iv) to 2.3.7.3(v))

- ***Control over revenue receipts was weak which led to mismatch in receipts and deposits in bank and non-reconciliation of revenue receipts of ₹40.32 crore with Pay and Accounts Office.***

(Paragraph 2.3.8.2 (i) to (iv))

- ***Targets for conducting inspections by Legal Metrology Officers were not fixed leading to inadequate inspection of Weighbridges and Fair Price Shops.***

(Paragraph 2.3.9.2 (b), 2.3.9.2 (c) and 2.3.9.2(d)(ii))

- ***Department had not framed any policy or guidelines for awareness campaigns for stakeholders and no consumer satisfaction surveys had been conducted. Adequate steps were not taken to make general public more participative.***

(Paragraph 2.3.9.4 (a) and 2.3.9.4 (b))

- ***Internal control mechanism was weak and ineffective.***

(Paragraph 2.3.10)

2.3.1 Introduction

Accuracy and precision in weights and measures of goods and services purchased by the consumers is paramount for consumer protection. The terms "Weights and Measures" generally mean an object/instrument/apparatus or device which is used for the purpose of making weighment or measurement while selling any goods or service to a consumer.

Photograph 1: Various types of weights and measurement instruments

The Government of India (GoI) enacted the Legal Metrology Act 2009 (Act) to establish and enforce standards of weights and measures, regulate trade and commerce in weights, measures and other goods which are sold or distributed by weight, measure or number. The Government of NCT of Delhi (GNCTD) also framed the Delhi Legal Metrology (Enforcement) Rules 2011 which provides necessary powers to the State functionaries to enforce the provisions of the aforesaid Act and Rules made thereunder. The Act and the Rules came into force with effect from 1 March 2011 and 1 April 2011 respectively repealing the Standards of Weights and Measures (Enforcement) Act 1985.

The main functions of the Department are to ensure that:

(i) Only stamped and verified electronic/mechanical weighing machines, weighbridges, taxi and auto fare meters are used in transactions;

(ii) All packaged/pre-packaged commodities offered for sale by commercial establishments have mandatory declaration as prescribed under the Act/Rules;

(iii) Issue/renewal of licenses for manufacturing, repairing and dealing of weights and measures instruments used in commercial transactions;

(iv) Registration of packers and importers of packaged commodities;

(v) Verification certificate of weighing instrument is displayed/exhibited at a prominent place by the dealer/retailers;

(vi) Net contents in packaged commodities is in accordance with the declared weight on each package;

(vii) Commercial establishments do not indulge in overcharging/under-weighing/short-measuring of any item;

(viii) Calibration of petrol/diesel tankers/lorries of petrol pump owners/other contractors and verification of flow meter, proving tanks of Oil companies and issuance of verification certificates.

2.3.2 Organizational set up

The Commissioner Food Supplies and Consumer Affairs is the overall in-charge of the Department and has been designated as Secretary (Legal Metrology). The Controller (Legal Metrology) is the Head of the Department and is responsible for the monitoring and enforcement of the Legal Metrology Act and Rules and is assisted by the Assistant Controllers (at Hqrs. level), Zonal officers/Inspectors (Legal Metrology Officers) (all responsible for enforcement through verification and inspections at nine Zonal Offices, one Calibration Unit and one Taxi Meter Unit in Delhi).

2.3.3 Audit objectives

The main audit objectives were to assess:

1. **Institutional Strengths/weaknesses:**

(i) whether efficient and effective periodical surveys were conducted to build up the data base necessary for preparing rolling perspective and annual plans, and

(ii) whether the Department was endowed with required institutional wherewithal in terms of human, financial and physical resources to carry out its mandate of licensing, calibration, verification, stamping and enforcement.

2. **Financial Management:** whether the financial management within the Department was efficient, economic and effective and also in consonance with the extant financial laws, rules, regulations, orders, etc.

3. **Enforcement Services and Compliance of Act/Rules:**

(i) whether the provisions of the Act and Rules were efficiently and effectively implemented and the targets fixed for enforcement services were achieved, and

(ii) whether effective public awareness campaigns for protection of consumer rights and effective public grievance redressal mechanism for protection (underweighing/overcharging) under the ambit of Act/Rules was in place.

4. **Internal Control, Monitoring and Evaluation:** whether efficient and effective internal controls were in place and periodical monitoring and evaluations were being undertaken.

2.3.4 Scope and Methodology of Audit

The performance audit on the working of Weights and Measures Department was conducted from May 2017 to August 2017 covering the period of five years from 2012-13 to 2016-17 by examining the records at the Head office of the Department and four zonal offices[18] out of nine zonal offices[19], Taxi Meter Unit, Calibration unit and Standard Laboratories of the Department located at four selected zonal offices.

An entry conference to discuss audit methodology, scope, objectives and criteria was held with the Secretary (Legal Metrology) on 3 May 2017. The report was issued to the Government on 15 September 2017 to elicit their response on the audit observations. An exit conference was held on 28 September 2017 with the Department. The views expressed by the Department in the exit conference and replies received have been incorporated in the report. The Department in its subsequent reply (November 2017) confirmed the facts and figures reflected in the Performance Audit Report.

2.3.5 Audit criteria

The audit findings were evaluated against criteria sourced from the following:

(i) Legal Metrology Act, 2009;

(ii) The Delhi Legal Metrology (Enforcement) Rules, 2011;

(iii) The Legal Metrology (Packaged Commodities) Rules, 2011;

(iv) The Legal Metrology (General) Rules, 2011;

(v) The Legal Metrology (Approval of Models) Rules, 2011;

(vi) The Indian Institute of Legal Metrology Rules, 2011; and

(vii) Government orders/instructions/guidelines issued from time to time.

2.3.6 Previous Performance Audit

A Performance Audit (PA) on ‘Implementation of Acts and Rules relating to consumer protection in Delhi’ was printed in the Comptroller and Auditor General’s Report of 2006 on GNCTD. In paragraph 1.8.2 of the PA, the audit findings of Department of Weights and Measures were also featured. The report has not been discussed (August 2017) by the Public Accounts Committee of the Legislative Assembly. The Department also did not initiate any action as appropriate on the audit findings which highlighted inadequacy of inspections and fixation of targets for inspections/verifications and maintenance of data base of the users of weights and measures as discussed in this report at appropriate places.

Audit findings

2.3.7 Institutional Strengths/weaknesses

Sound infrastructure, adequate manpower and funds are the institutional strengths of any organisation to achieve its mandate in an economical and

[18] East, North West, South and West zonal offices.

[19] East, West, North, South, North West, South West, North East, Central and New Delhi Zones.

efficient manner. Audit findings relating to risk based planning, inadequacy of manpower and infrastructure resources as well as shortcomings in utilisation of available infrastructure facilities are discussed in the succeeding paragraphs.

2.3.7.1 Planning- Absence of comprehensive database of users

Identification and database of commercial establishments/users of weights and measures provides vital support to the Department to prepare a risk based perspective and annual plans so that a sensible approach for conducting inspections may be applied.

Audit observed that the zonal offices of the Department did not maintain a database of commercial establishments/users of weights and measures. Survey was also not conducted by the headquarters and zonal offices to prepare the database of users to determine different type of users of weights and measures (i.e. Jewellers, Shopping malls, Fair Price Shops (FPS), Sweet Shops and other commercial establishments under its jurisdiction) even though the number of manufactures, dealers and repairers of weights and measures instruments had gradually increased from 561 as on 1 April 2012 to 721 as on 31 March 2017.

Further, test check of selected zonal offices showed that out of 842 inspections, quantum of inspections of FPS, Weighbridges, Jewellers, Petrol Pumps and LPG agencies was insignificant despite substantial malpractices incidence ranging between 4 *per cent* and 60 *per cent* were reported in these establishments as shown in **Table 2.3.1.**

Table 2.3.1: Inspection/Prosecution of various establishments by four Zonal offices

Name of zone	Total Inspections	Fair Price Shops	Cinema Halls/ Shopping Malls	Weigh bridges	Jewe-llers	Sweet shops	LPG Outlet	Petrol Pumps	Others
South	250	0	0	2	16	15	5	2	210
North West	243	5	4	4	20	32	10	2	166
East	199	5	9	2	0	26	23	0	134
West	150	0	2	4	8	6	0	21	109
Inspections	**842**	**10**	**15**	**12**	**44**	**79**	**38**	**25**	**619**
Prosecution	**316**	**6**	**6**	**4**	**12**	**20**	**7**	**1**	**260**
Percentage of prosecution to inspections		**60**	**40**	**33**	**27**	**25**	**18**	**4**	**42**

Thus, in the absence of a database of users and commercial establishments, a risk based approach to inspections was not available to ensure compliance with the provisions of Legal Metrology Act and Rules.

The Department while accepting the observation stated (October 2017) that a comprehensive database of all users and risk based action plan would be prepared. It further stated that additional manpower would be required for that purpose as Department is facing shortage of manpower.

2.3.7.2 Human Resources

The Shortage of manpower in the Department was about 30 *per cent* during 2012-13 which had gradually increased to 50 *per cent* in 2015-17. The details of sanctioned strength, persons-in-position and shortage during 2012-17 are shown in **Table 2.3.2**.

Table 2.3.2: Year wise manpower position during 2012-17

Year	Sanctioned Post	Person-in-position	Shortage	Percentage of shortage of manpower to the sanctioned post
2012-13	149	105	44	29.53
2013-14	149	98	51	34.23
2014-15	149	87	62	41.61
2015-16	149	74	75	50.34
2016-17	149	75	74	49.66

Source : Information provided by the Department

The Department did not assess cadre wise requirement for each zone keeping in view the work involved in a zone. Audit analyzed the zone and cadre wise manpower position and found inadequacy of manpower at enforcement as well as supervision level as discussed below:

(a) Inadequate Manpower for enforcement activities in Zonal offices/units.

As per Section 15 of Legal Metrology Act, 2009, Director, Controller or a Legal Metrology Officer (LMO) conducts the inspection of the premises of users of weights and measures.

Inspectors (Grade-I, II and III) in the Department are posted by the Service Department, GNCTD from Delhi Administrative Subordinate Service (DASS) cadre who are further designated/notified as "Legal Metrology Officer" with the approval of Lieutenant Governor, Delhi. The details of the staff position during 2012-17 is given in **Table 2.3.3.**

Table 2.3.3: Cadre wise manpower position of Enforcement Staff during 2012-17

	Sanctioned Posts	Person-in-Position				
		2012-13	2013-14	2014-15	2015-16	2016-17
Grade I (DASS) Inspector	11	10	8	8	8	8
Grade II (DASS) Inspector	12	12	11	6	4	8
Grade III (DASS) Inspector	34	29	30	28	22	16
Manual Assistant/Junior Manual Assistant	31	18	18	18	18	17
Total	**88**	**69**	**67**	**60**	**52**	**49**
Percentage to Sanctioned post		78.41%	76.14%	68.18%	59.09%	55.68%

Source : Information provided by the Department

It is observed that filled posts of inspectors/Manual Assistants declined from 69 in 2012-13 to 49 in 2016-17 and the shortage adversely affected enforcement activities like verification, inspection, prosecution and calibration etc. The inspections conducted declined from 11,650 in 2012-13 to 6,732 in 2016-17. Further, against sanctioned strength of 19 clerical staff, the shortage of staff ranged between 8 and 17 clerks during 2012-17 which was 42 *per cent* to 89 *per cent*. This shortage was met through hiring of 8 to 13 Data Entry Operators during 2013-17, but the inspectors posted at Zonal offices continued to be assigned administrative duties affecting the core enforcement duties.

(b) Shortage of Manpower at Supervisory Level

The post of one Deputy Director remained vacant during last five years ending March 2017 while one post of Assistant Controller was also vacant since February 2017. Audit found that vacancy in Deputy Director/Assistant Controller level resulted in inadequate monitoring of Zonal Offices/Laboratories/Units. Moreover, there were no visits/inspections to zonal offices/units by Controller/Assistant Controller during 2012-16 as discussed at Paragraph No. 2.3.10.1(i).

The Department while confirming the facts stated (October 2017) that shortage of manpower hampers the work of Department and for filling of various vacant posts several letters have been sent to Services Department by Secretary/Controller (LM)/Assistant Controller (LM) from time to time. Since the Department is mandated to protect the interests of consumers by ensuring accuracy of weights and measures, adequate manpower should be positioned to perform mandated duties.

2.3.7.3 Inadequate infrastructure facilities

(i) Disproportionate distribution of population amongst Laboratories

The Working Standard Laboratories (WSLs) are the spine of the Department where stamping and verification of weights and measures are carried out. WSL is established for zonal office and Secondary Standard Laboratory (SSL) is a state level laboratory. Equipment kept at WSL are required to be periodically verified at SSL or at Reference Standard Laboratory (national level laboratory) whereas equipment kept at SSL are required to be periodically verified at Reference Standard Laboratory. The Department has not fixed any norms for establishing Secondary Standard Laboratory (SSL) and WSLs to bring uniformity in area and population under its jurisdiction.

There are nine WSLs and one SSL under the supervision of nine Zonal officers. The Department had not established any new Secondary/Working Standard laboratory in Delhi during the period 2012-17. There were extensive variations in size of population served by these Laboratories in nine zonal offices. The North West Zonal office laboratory covering 29.87 *per cent* area of NCT of Delhi was serving population of 36.56 lakh whereas laboratory at New Delhi Zonal office covering 2.36 *per cent* area was serving population of 1.42 lakh **(Appendix 2.3.1)**. The Department while accepting the audit observation stated (October 2017) that due to shortage of staff, it could not be possible to deploy staff strength and extend the services according to the population in Delhi.

(ii) Further, there was only one Taxi Meter Unit (TMU) established at North West Zone for verification and stamping of taxi and auto rickshaw fare meters for serving 1.07 lakh[20] taxies and auto rickshaws in Delhi but possibility of creation of additional TMUs in Delhi was not explored. The Department noted (October 2017) the audit suggestion for creation of an additional Taxi Meter Unit.

(iii) Non-obtaining of periodical verification certificates for laboratory equipment

The Laboratories are equipped with various types of equipment for stamping and verification of weights and measures brought by the users. As per Section 9 (2) and 9 (3) of the Legal Metrology Act 2009, every reference standard, secondary standard and working standard balance shall be verified and stamped in such a manner and after payment of such fee as may be prescribed and weighing balances which are not verified and stamped shall not be deemed to be a valid standard. Further, Rule 6 and 7 of Delhi Legal Metrology (Enforcement) Rules 2011 also stipulates that every secondary/working standard balance kept at laboratory is required to be verified at least once within a period of 12 months.

Test check of records of one SSL and four WSLs under four selected zonal offices showed that:

(a) Equipment and balances kept in SSL and WSLs had not been got verified by the Department periodically. The five laboratories (SSL/WSLs) could provide only partial details of verification certificates obtained from Reference Standard/Secondary Standard laboratories for the period 2012-17. Audit observed that for 49 sets of equipment available with the five laboratories, verification certificates for 2012-15 were not available with Laboratories while verification certificates for 25 sets and 38 sets were not available for the year 2015-16 and 2016-17 respectively. Besides the SSL and WSLs were not maintaining any register/records of verifications of equipment, in the absence of which audit could not analyse the performance/verifications done by these laboratories.

(b) Further, Taxi Meter Unit was using 22 pulse generating machines for verification of taxi and auto rickshaw fare meters in Delhi. Audit found that out of 22 machines, 10 machines were installed and tested between February

[20] As per information provided by the Department .

2002 and September 2006 while 12 machines were installed and tested between September 2012 and July 2015. No further periodical verification certificates of these machines were obtained thereafter from the designated Test Lab (Electronic Regional Test Laboratory).

The Department while confirming the facts stated (October 2017) that the Secretary (Legal Metrology) has directed/warned the officers strictly to obtain periodical verification certificate timely for equipment kept in Laboratories/TMU.

(iv) Non-development of Land for laboratories

A plot of land (770 sq. mts. in Vishwas Nagar Delhi) was allotted to Department in 1989 for setting up of Zonal office and Taxi Meter Laboratory. Physical possession of land was handed over to Department in October 1993. The construction work of building was assigned to DSIIDC in 1993, but only boundary wall and portable huts were constructed.

The Ministry of Consumer Affairs, Food and Public Distribution, GoI had provided (July 2009) an opportunity to release funds for construction of Working Standard Laboratories/Secondary Standard Laboratory under a scheme for strengthening weights and measures infrastructure of States and Union Territories on first come first served basis. Audit found that Department did not avail the opportunity to create infrastructure on the vacant land till 2013. The GoI again (February 2013) asked the Department to send proposal to construct laboratories on available land. Thereafter, the Department initiated (May 2013) a proposal to construct an office building for which functional requirements[21] were assessed. The DTTDC submitted (March 2014) drawings for construction of building at an estimated cost of ₹ 9.99 crore. The Department sent the proposal[22] to GoI (18 March 2014) and requested to release ₹ 4.75 crore under Centrally Sponsored Scheme. The GoI desired (July 2014) that expenditure over and above ₹ 4.75 crore would be borne by GNCTD. GoI released ₹ 0.75 crore to the Department during 2014-15 (₹ 0.25 crore in March 2014 and ₹ 0.50 crore in September 2014).

Meanwhile, on the directions (June 2014) of Planning and Finance Department, GNCTD, the work was proposed to be done through PWD to save the departmental charges. The work was allotted to PWD in October 2014 for which Administrative Approval and Expenditure Sanction (AA/ES) was accorded on 31 January 2017 for ₹ 5.92 crore. The work was to be completed in 730 days from date of AA/ES.

[21] One Secondary Standard Lab, three Working Standard Labs, three Zonal officers/Inspectors room, Ministerial staff room, record room, conference hall and basic civic amenities on each floor.

[22] Six working standard laboratory one secondary standard laboratory and taxi meter unit laboratory and office of the Controller (Legal Metrology).

Audit observed that Department did not take initiative to construct the building from 1993 to 2013. Further, there was delay at every stage during 2013 to 2017. Despite release of ₹ 0.75 crore by GoI in 2014-15, the construction work has not been started so far (July 2017). GoI was also forced to revalidate the funds time and again for utilisation in next year. Thus, due to lackadaisical approach of Department, adequate infrastructure could not be created though there was only one Taxi Meter Unit for entire Delhi in North West Zone and a Zonal Office (East) was operating through portable huts in Vishwas Nagar for its Working Standard Laboratory (Photograph-2).

Photograph-2: Working Standard Laboratory at Zonal Office (East)

The Department stated (October 2017) that the construction of building at Vishwas Nagar is a big project involving a number of agencies like DDA, DSIIDC, MCD, DFC, PWD etc. from whom approvals are required before commencement of project and all out efforts are being made at highest level in this regard. The reply is not tenable as despite availability of land since 1993 no action was taken by department to construct the required infrastructure. Further the fact remains that construction work has not been started till date.

(v) Underutilization of Mobile Weighbridge Verification Cranes.

The GoI[23] provided three Weighbridge Verification Kits (Mobile Hydraulic Foldable Crane) to the Department for verification of weighbridges (WBs) in December 2007 (one crane) and March 2010 (two cranes) valuing ₹ 1.77 crore[24] under Centrally Sponsored Scheme (CSS) for strengthening the Legal Metrology Department. Audit noted that the cranes remained under-utilised due to non-availability of drivers and even after hiring of three drivers w.e.f. 14 February 2014 at hiring charges of ₹ 14,365 per month per driver. The details of registration and utilisation of cranes since their receipt are shown in **Table 2.3.4**.

[23] Ministry of Consumer Affairs and Food and Public Distribution, Government of India.
[24] One crane costing ₹ 0.53 crore and other two cranes costing ₹ 0.62 crore each.

Table 2.3.4: Utilisation of Mobile Hydraulic Cranes for verification of weighbridges

Crane No. and name of handling Zone	Date of receipt/ Date of Registration	First time utilisation of crane	Crane runs in KMs since its receipt	Audit findings
DL 1GB 6593 **South Zone**	December 2007/07.11.2008	First time operated in February 2013 but not utilized for verification of WBs till August 2017.	**523 km operated** From (13.2.2013 to 27.11.2015)	The crane was not utilized for verification of any weighbridge till August 2017 due to non-availability of driver. It ran 523 Kms upto November 2015 towards obtaining fitness certificates and periodical repairs to crane while ₹ 2.54 lakh were incurred on its maintenance/fuel. Crane had been parked in South Zone in open area without boundary wall and shed from November 2015.
DL 1GB 7046 **North West Zone**	March 2010 / 30.4.2010	First time utilized for verification of WB in August 2012.	**4226 km operated** (8.8.2012 to 11.8.2016)	Due to non-availability of heavy vehicles driver, crane was first utilised in August 2012 for verification and was last used for verification of WBs in March 2016. During this period the crane was utilized 137 times for verification purpose. After March 2016 crane was operated only for repairs/obtaining fitness upto August 2016. It had been parked in North West Zone.
DL 1GB 7047 **East Zone**	March 2010/ 30.04.2010	First time utilized for verification of WB on October 2012.	**1148 km operated** (8.8.2012 to 1.11.2016)	Due to non-availability of heavy vehicle driver, crane was first utilised in October 2012 for verification. The crane deployed in East Zone was last used for verification on 27 June 2016. During this period crane was utilized for 36 times for verification purpose and after June 2016 crane was kept parked in open area. Further, since January 2017 the crane was lying idle requiring repairs.

Photograph-3 : Cranes for verification of Weighbridges lying unused at South, East and North West Zones

(DL1GB – 6593)

(DL1GB – 7047)

(DL1GB – 7046)

Audit also found that the Department approached (27 July 2016) the GoI for surrendering two cranes and to send these elsewhere for better utilization as cranes were under-utilised in Department. Accordingly, the services of two hired drivers were also discontinued w.e.f. 7 September 2016. Despite advice by GoI (January/February 2017) to transfer one crane to Rajasthan and one to Tripura, both the cranes were still lying with the North West Zone and South Zone (August 2017).

Rule 27 of Legal Metrology (General) Rules, 2011, stipulates annual verification of weigh bridges, however, the log books of these cranes for the years 2012-17 showed that out of 2,857 WBs (543 to 597 WBs in a year), only 173 WBs (4 WBs to 74 WBs in a year) were verified by Department using cranes, reflecting Department's failure to utilize the testing facilities (cranes) provided by GoI at a cost of ₹ 1.77 crore despite incurring expenditure of ₹ 21.83 lakh on operation and maintenance of cranes during 2012-17.

It was further observed that Department did not take any initiative for charging additional fee from users (i.e. from WBs) to meet additional expenditure to use cranes, despite GoI advise citing example of Kerala Government to collect additional ₹ 2,000 on using cranes. Department could have optimally utilized three cranes by generating additional revenue to meet additional expenditure on operations of cranes.

The Department while confirming the facts stated (October 2017) that repair of Crane No. DL-1GB-7047 could not be carried out since January 2017, as no bidders came forward in tendering. It also stated that there is no covered parking available in Zonal offices.

The Reply is not acceptable as the cranes provided by the GoI remained underutilized since their receipt and Department failed to utilise high end machines/cranes due to poor planning. Further, despite decision to surrender two cranes in July 2016, both cranes are still lying unutilized in zonal offices and third crane remained unutilized since its receipt and lying unrepaired.

As regards charging additional fee, Department stated (October 2017) that no such proposal was initiated as mobile cranes could not be used in effective manner in Delhi and Department has requested GoI to surrender two mobile cranes. The reply is not acceptable as the GoI had suggested for charging of additional fee in October 2008 immediately after providing first crane, but Department did not take any initiative on the same.

(vi) Modernization of Departmental computerized applications for providing online services

The Department approached (November 2014) Delhi e-Governance Society (DeGS)[25] through Department of Information Technology (DIT), GNCTD to develop a software module for providing online services alongwith online payment facility to business establishments. The work was to be completed by 31 August 2015 in two phases[26]. The Department released (January 2016) ₹ 3.93 lakh and the software was launched on 16 April 2016. Audit found the following deficiencies in providing online services by Zones:

a) Software made for online renewal of licenses could not be started due to technical problems and zones could not receive/process applications online for renewal of licenses.

b) Out of 149 online applications received by seven zonal offices, 128 applications were processed online while 21 applications were processed manually. Even when online portal was launched, nine zonal offices received 52 applications manually between April 2016 and March 2017 and processed them manually.

Test check at selected zonal offices revealed that Zonal offices were facing problems of network failure and low speed of internet. Secretary (LM) directed (July 2016) to make amendments in the software through DeGS to rectify the problems but it was not done. Thus, despite assigning work to DeGS for modernization of departmental computerized applications by incurring ₹ 3.93 lakh, the intended benefits could not be achieved. Moreover,

[25] On panel with Department of Information Technology, GNCTD.

[26] In first phase, migration of existing data base to new server, registration of the domain name, development of search module for existing license services, creation of a new back up and maintenance of site. In second phase, the online portal for providing licenses and e-payment gateway to be developed, acknowledgement via e-mail/SMS and renewal process of license.

computers and printers available in zonal offices were of old configuration and inadequate in numbers affecting operations.

The Department confirmed (November 2017) the facts and figures.

2.3.8 Financial Management

2.3.8.1 Budget Allotment and Utilisation

The Department performed its activities through funds allocated by GNCTD and grants-in-aid given by GoI under Centrally Sponsored Scheme. Year wise details of budget allotted and actual expenditure incurred during 2012-17 is shown in **Table 2.3.5**.

Table 2.3.5: Year wise Budget allocation and actual expenditure during 2012-17

(₹ in crore)

Financial Year	Budget Provisions		Actual Expenditure		Savings/excesses	
	Plan	Non Plan	Plan	Non Plan	Plan	Non Plan
	(1)	(2)	(3)	(4)	5=(1-3)	6=(2-4)
2012-13	0.06	4.60	0.005	4.38	0.055	0.22
2013-14	0.00	4.50	0.002	4.67	(-)0.002	(-)0.17
2014-15	0.00	5.93	0.030	5.17	(-)0.03	0.76
2015-16	1.00	6.94	0.053	4.97	0.947	1.97
2016-17	1.00	10.12	0.032	5.58	0.968	4.54

Audit analysed the budget allotment and actual expenditure for the period 2012-17 as indicated in table 2.3.1 above and observed that the annual savings during 2012-17 ranged between ₹ 0.22 crore and ₹ 4.54 crore under non plan head whereas for plan funds it ranged between ₹ 0.055 crore and ₹ 0.968 crore during the period 2012-13 to 2016-17. Audit noted that there were significant savings in total expenditure (plan and non-plan) during 2015-17 ranging between 36.74 *per cent* and 49.53 *per cent.* Audit also compared actual expenditure with revised budget allotted and found that savings ranged between ₹ 0.09 crore and ₹ 1.71 crore during 2012-17. It was observed that Department did not assess the actual requirement of funds and schemes were not implemented efficiently as illustrated below:

(i) Demand of Budget in respect of Vacant Posts

The budget estimates for 2012-17 were prepared after considering posts lying vacant for more than one year which was in contravention of directions[27] made by Finance Department. There was a saving of ₹ 1.02 crore in salary head. The Department assured (October 2017) that every aspect of vacant posts will be taken into consideration while framing budget demand in future.

[27] Vide OM dated 16.09.2014, 12.08.2015 and 3.10.2016- No provisions should be kept for posts lying vacant for over one year.

(ii) Non-procurement of computers

The Department received ₹ 37.36 lakh from GNCTD under the head "Office Expenses (Information Technology)" against the demand of ₹ 171.00 lakh during 2012-17. The Department could utilise only ₹ 11.06 lakh upto March 2017 including ₹ 3.93 lakh incurred towards modernization of Departmental computerized applications during 2015-16. Against the requirement (February 2014) of 22 desktops/laptops and 22 printers, Department procured only 11 desktops and 11 printers during 2012-17. The Department stated (October 2017) that for setting up of modernized computerization, all Zonal officers have been asked to work out their assessment for new computers/printers immediately.

(iii) Non-utilization of budget allotted for Strengthening of Legal Metrology Wing.

GNCTD allotted ₹ 206.00 lakh to Department under the plan head "Strengthening of Legal Metrology Wing" from CSS during 2012-17 against which only ₹ 12.18 lakh was utilised including ₹ 11.49 lakh on salary to drivers of three mobile cranes between 2014 and 2017 which was against GoI directions as operation and maintenance of cranes provided by GoI under CSS was the responsibility of State Government.

The Department stated (October 2017) that PWD had been given the work of construction of building of Department at Vishwas Nagar Delhi and the AA and ES was issued in favour of PWD on 31 January 2017. It also stated that payment of salary of crane drivers was not in violation of GoI directions and services of two hired drivers was discontinued from 7 September 2016.

The reply is not acceptable as funds provided for strengthening of Department were not utilized till date. The construction of building has not started so far despite AA and ES having been accorded in January 2017. The utilisation of plan funds on driver's salary was not permitted by GoI, therefore, from August 2016, Department started charging it to non-plan funds.

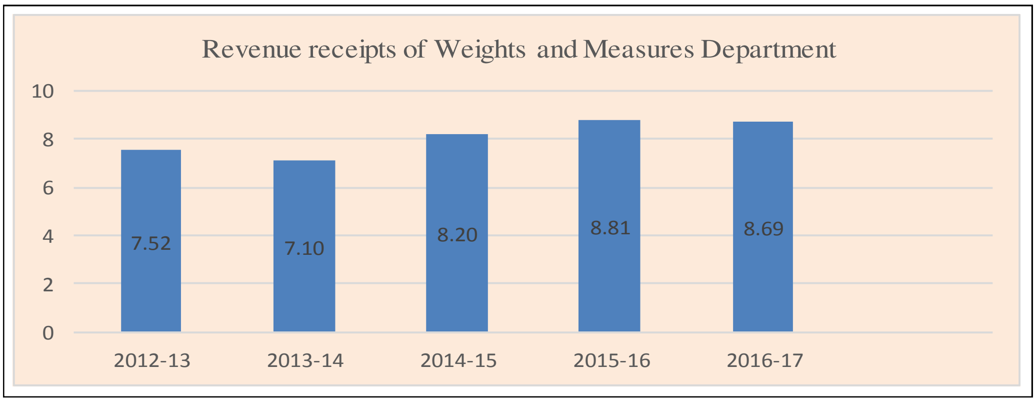
2.3.8.2 Non-tax revenue receipts

The Department collects non-tax revenue receipts in the form of fees for verification and stamping of weights/measures, calibration of equipment/weights, compounding fees, licenses fee from manufactures/repairers/dealers and registration of packers/importers of packaged commodity, penalties etc., which are required to be deposited in the Treasury. The overall revenue receipts of ₹ 40.32[28] crore collected by Department during 2012-17 is depicted in the **Chart 1.**

[28] ₹ 33.41 crore by Zones/units for various fees/levies and ₹ 6.91 crore as compounding fee by Headquarter.

Chart 1: Revenue receipts during the period 2012-17

(₹ in crore)



Source: Information provided by the Department

Each Zonal Office and Unit of the Department collects various fee from clients in cash or through demand drafts, however, from January 2017 the fee is also collected through POS machine (Point of Sale-electronic mode). Thereafter, the receipts are deposited in bank account (State Bank of India, IP Estate Branch) managed and operated by Pay and Account Office, GNCTD. Audit findings are as under:

(i) Non-reconciliation of revenue receipts with Pay and Accounts Office and mismatch in revenue collection with actual deposits in bank

Audit observed that Department did not reconcile such deposits with records of the PAO in the absence of which it could not be ascertained whether the entire revenue receipts collected were deposited or not. Audit test-checked the records of North West Zone, West zone and Calibration unit and found that there was short deposit of ₹ 6.51 lakh into bank as compared to revenue received during 2012-17 (**Appendix 2.3.2**). The Department needs to investigate the matter as the possibility of fraud could not be ruled out and recover the short deposits from the defaulting zonal offices and units.

The Department stated (October 2017) that a serious view has been taken of this matter and the Zonal offices and Assistant Accounts officer have been instructed to reconcile their fee and deposits with Pay and Accounts Office and Bank immediately.

(ii) Delay in deposit of revenue receipts

Receipt and Payment Rule 6 stipulates that all money received by or tendered to government officers on account of revenues or receipts or dues of the Government shall, without undue delay, be paid in full into the accredited bank for inclusion in government account. Further, the cash collected by Zonal offices and units will be deposited in bank within three days.

Test check of cash books and other records of six selected zonal offices and units showed that cash and demand drafts collected during 2012-17 had not been deposited into the bank within the stipulated time. Out of 1,995 cases during 2012-17, only in 163 cases (constituting 8.17 *per cent* of total cases), cash/DDs were deposited within three days while in 1,832 cases the deposits were made in bank with delay ranging upto 77 days (**Appendix 2.3.3**). The unwarranted delay of remittances of government receipts into the bank was not only a violation of government rules but also possibility of personal use of cash could not be ruled out.

Further, in the selected zonal offices and units, delay in depositing receipts into bank had resulted into accumulation of receipts ranging between ₹ 1.51 lakh and ₹ 15.06 lakh at a point of time during 2012-17 due to non-fixation of any maximum limit of accumulation of receipts in zonal offices and units.

The Department assured (October 2017) to set up a healthy mechanism for timely submission of government receipts in banks. It, however, attributed (October 2017) the delay in depositing cash/demand draft in bank to shortage of staff and to the concerned SBI bank branch at Vikas Bhawan complex at ITO, being far away from the zonal offices.

(iii) Non-furnishing of security bond: Department did not obtain the security bonds from the cashiers in the zonal offices and units during the period 2012-17 as per GFR 275, though substantial cash receipts remained under their custody prior to deposit it into the bank. The Department assured (October 2017) to take suitable action in the matter.

(iv) Improper Maintenance of Cash Books and other allied records: Zonal Offices West and East neither closed their cash books/demand draft registers at the month end nor at year end thereby violating Rule 13 of Receipt and Payment Rules, 1983. Further, there were deficiencies in maintaining records for collection and deposit of cash/DDs into bank (**Appendix 2.3.4**).

The Department assured (October 2017) that necessary steps would be taken to avoid such discrepancies in future and such discrepancies took place probably inadvertently as the LMOs were also assigned duty of cashier as additional work and some LMOs were working without any previous experience of cashier's duty.

2.3.9 Enforcement Services- Compliance of provisions of Act and Rules

The main activities of the Department are to enforce various provisions of Legal Metrology Act 2009 and Rules made thereunder which *inter alia* include periodical verification of weights and measures, issuance of licenses to manufacturers, dealers, repairers of weights and measures, conduct of inspections of premises of weights and measures users, prosecutions of violators of Legal Metrology Act/Rules and compounding of offences.

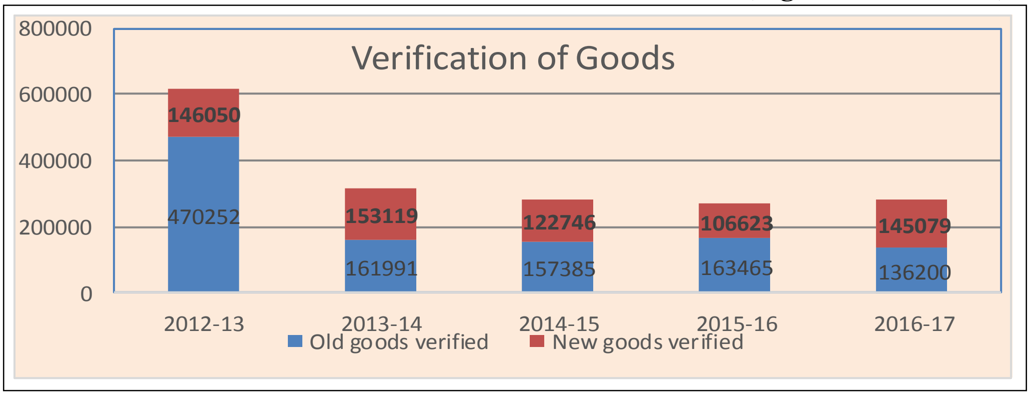
2.3.9.1 Verification of weights and measures

Rule 14 of Delhi Legal Metrology (Enforcement) Rule 2011 stipulates that every person using any weight or measure in any transaction shall present such weight or measure for verification/re-verification, at the office of legal metrology officer or at such other place as the legal metrology officer may specify in this behalf on or before the date on which the verification falls due. Rule 27 of Legal Metrology (General) Rules 2011 further stipulates verification of weights or measures at periodical intervals[29].

The details of old goods [30] verified and new goods verified by the Department during the period 2012-13 to 2016-17 are shown in **Chart 2**.

Chart 2: Year wise Verification of Goods by Department during 2012-17

(Figures in numbers)



Source: Annual reports of the department for 2012-13 to 2016-17

It can be seen that number of verifications of new and old goods declined drastically from 6.16 lakh in 2012-13 to 2.70 lakh in 2015-16. It, however, marginally increased to 2.81 lakh in 2016-17. Audit observed the following:

(i) The Department did not have any mechanism to ascertain number of weights and measures against which verification was due during a certain period. Due to this, the objective of protecting the interest of the consumers could not be ensured and the chances of use of manipulated weights and measures cannot be ruled out.

(ii) The Taxi Meter Unit (TMU) of Department is responsible for annual verification and stamping of taxi and auto rickshaw electronic fare meters.

Audit noted that TMU was verifying and stamping only taxies and auto-rickshaws brought voluntarily for verification and there was no mechanism to coordinate with the Department of Transport, GNCTD to ensure that all taxies and auto rickshaws plying on roads came up for verification and stamping. As a result, 60,863 number of taxi and auto rickshaw fare meters remained

[29] (a) twenty four months for all weights, capacity measures, length measures, tape, beam scales and counter machines (b) sixty months for storage tanks and (c) twelve months for all weight or measure including tank lorries other than mentioned in (a) and (b).

[30] Goods means weights and measures instruments.

unverified during 2012-17, thereby, defeating the objective of protecting the interest of consumers. The TMU informed that there is no provision in the server to check whether taxi and auto rickshaw fare meters were issued verification certificates timely.

The Department in reply (October 2017) confirmed the facts that it was verifying the weights and measures of users brought voluntarily and further stated that the field officers regularly inform the shopkeepers to get their weights and measures verified and also prosecute them if unverified weights and measures are found in the market. It also stated that there is no mandate to check the non-verified auto/taxi fare meter by the Weights and Measures Department. The reply is not acceptable as there is no provision in Act and Rules for exemption to inspect any type of measurement instrument under the ambit of the Department. Since the autos/taxies ply on roads, it can be inspected on roads only. Further, Department did not coordinate with Transport Department to ensure action against defaulters to restrict use of faulty fare meters.

(a) Verification of CNG/LPG dispensing units

For verification and stamping of CNG/LPG dispensers, the GoI provided four CNG/LPG flow meter kits (two CNG kits and two LPG kits) to the Department during 2012-13 which were kept in SSL in West Zone **(Photograph 4)**. In July 2014, SSL imparted one day practical training to its staff to use CNG and LPG flow meters for verification and stamping of CNG and LPG dispensers and after a lapse of six months (February 2015) these verification kits were made operational.

Photograph 4: CNG/LPG dispensers verification kits

During the test check of records at four zonal offices audit observed that:

(i) the verification kits provided by GoI in 2012-13 remained idle till January 2015 and also CNG and LPG dispensing units remained unverified, thereby affecting the safeguards of consumer's interests.

(ii) the inspection of CNG and LPG dispensing units was not conducted by the Department during 2012-17 to ensure that these were dispensing accurate quantity of CNG and LPG, in the absence of which malpractices in dispensing CNG/LPG to consumers cannot be ruled out.

(iii) though each weight and measure instrument require periodic verification from a standard laboratory, no verification of CNG and LPG flow meter kits was got done by the Department since its receipt in 2012-13. Department informed that these kits were received first time and it would now take up verification matter with Department of Consumer Affairs, GoI.

(iv) there were constraints of zonal offices to carry these heavy CNG/LPG kits to the CNG/LPG pump stations and trained manpower for conducting CNG/LPG verifications.

The Department while confirming the facts stated (October 2017) that these kits are heavy in weight and due to shortage of technical staff and non-availability of vehicles, these kits are rarely used. However, the fact remains that the high-tech/valuable machines have remained underutilized for more than five years since their receipt.

(b) Inadequate verification by Calibration unit.

Calibration Unit carries out calibration of petrol and diesel tankers/lorries of petrol pumps owners/other contractors and issues verification certificates to them. Besides, verification of Flow Meters and Proving Tanks of oil companies is also done by Calibration Unit. The calibration unit calibrated and verified 4,065 tankers/lorries and generated revenue of ₹ 1.24 crore during 2012-17.

Audit found that number of verification of tank/lorries ranged between 847 and 895 during 2012-16, which decreased to 596 in 2016-17, thereby decreasing the revenue from ₹ 29.91 lakh in 2015-16 to ₹ 24.79 lakh in 2016-17. The Unit had no mechanism to ascertain whether all the tankers/lorries were verified on due dates.

The Department while confirming the facts stated (October 2017) that due to shortage of manpower no survey was conducted. The decrease in calibration/verification of tankers/lorries and revenue in 2016-17 was due to banning of vehicles older than 10 years to ply in Delhi by Honorable National Green Tribunal. Department also accepted that there was no mechanism to ascertain that all the tankers/lorries in Delhi were verified on due dates. The details of vehicles calibrated are noted in a register and possible efforts are made to call them for next calibration on due dates.

(c) Enforcement services through less qualified Legal Metrology Officers (LMOs) and without specialized training

Services Department, GNCTD transfers DASS cadre officials in the Department of Weights and Measures and after joining in the Department, the officer/official is appointed as LMO for NCT of Delhi by issuing a Notification under Section 14(1) of Legal Metrology Act 2009 duly approved by the Lieutenant Governor, Delhi. In this regard following was observed in audit:

(i) Qualification of LMOs: Rule 28 sub rule (1) of the Legal Metrology (General) Rules 2011 stipulates that no person shall be appointed as LMO unless he is a graduate of a recognized university in science, technology or engineering or holds a recognized diploma in engineering with three year professional experience. Audit found (May 2017) that out of total 33 LMOs in the Department, only 3 LMOs met the prescribed educational criteria. The Department had not sought any relaxation from Central Government as required in Rule 28 (4) for their qualification. Audit also noted delays ranging between 19 to 128 days in issuance of notification for appointment for officials as LMOs.

The Department while confirming the facts stated (October 2017) that the matter would be brought to the notice of the Services Department to adhere to the compliance of the audit observations. It is up to the Services Department either to send a qualified officer who possess the essential qualification or get a relaxation from the Central Government regarding qualification of LMOs as stipulated under Rule 28(4). Department also assured to take due care in future for issuance of notification in time. Reply is not acceptable as the Department was responsible for intimating the provisions of Legal Metrology Act and Rules to the Services Department for deployment of staff and obtaining relaxation from Central Government.

(ii) No Specialized Training to LMOs: Sub rule (3) of Rule 28 of Legal Metrology (General Rules), 2011 stipulates that the LMOs shall have to successfully complete the basic training course at the Indian Institute of Legal Metrology (IILM), Ranchi before their postings. Audit observed that no LMO appointed during 2012-17 was sent for training at Ranchi and LMOs were performing enforcement activities in field without any specialization in Legal Metrology.

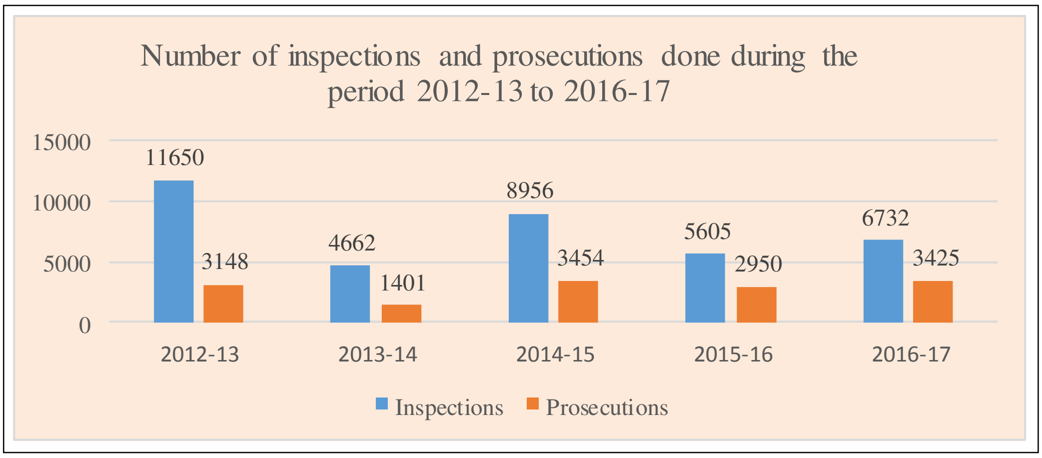
The Department stated (October 2017) that it will request the IILM, Ranchi to prepare a short term capsule training programme for LMOs keeping in view the shortage of manpower in the department.

2.3.9.2 Inspection and Prosecution

Section 15 of Legal Metrology Act, 2009 empowers the State Government to appoint LMOs and to inspect the premises of users of weights and measures to enforce the provisions of Legal Metrology Act and Rules. Rule 14 (6) of Delhi Legal Metrology (Enforcement) Rules, 2011 also stipulates that a Legal Metrology Officer may visit as frequently as possible every premises to inspect and test any weights and measures which is being used or is intended or likely to be used in any transaction.

The cases where any violations to established standards of Legal Metrology Act, 2009 and rules made thereunder were found during inspections were required to be booked for prosecution and liable for compounding. The year wise position of overall inspections conducted and number of malpractices cases booked for prosecution during 2012-17 by Department are depicted in the **Chart 3.**

Chart 3: Year wise number of inspections and prosecutions during 2012-17



Source: Information provided by Department

It is observed that number of inspections declined from 11,650 in 2012-13 to 6,732 during 2016-17. The malpractices (prosecution) cases increased from 3,148 in 2012-13 to 3,425 in 2016-17. Adequacy of inspections builds the confidence among general public that their interests have been safeguarded, however, declining trend of inspections and increase of 23.86 *per cent* in prosecution during 2012-17 reflects failure of the mechanism and violations of Rules and provisions of Act respectively.

The Department confirmed the facts (October 2017) and attributed the decline in number of inspections to the shortage of manpower and assignment of various duties to LMOs and deployment of staff for election duties in Delhi during 2014-2017.

Test check of records of four zonal offices showed the following:-

(a) Inadequate Inspection of Petrol Pumps and LPG outlets

Inspection of Petrol pumps is conducted by the Weights and Measures Department Delhi to ensure that the petrol/diesel dispensers dispense accurate quantity of petrol/diesel to the consumers and pulsar unit of the dispensing units were not faulty. Test check of records at selected zonal offices showed that only 128 to 296 petrol pumps were inspected out of 241 to 245 and only 56 to 173 LPG outlets were inspected out of 188 to 191 during 2012-17. It is further observed that of the total inspections, 2.75 *per cent* petrol pumps and 23 *per cent* LPG outlets were prosecuted during 2012-17.

Audit also observed that Department did not conduct any special drive for inspection of petrol pumps and LPG outlets during 2012-17 and thus objective of protecting interest of consumers was not fully achieved.

The Department stated (October 2017) that LPG outlets are checked by the Zonal Officers only and Headquarter also issues directions for inspection of LPG outlets from time to time and special drives are also carried out as per market intelligence. The reply is not acceptable as details for special drives undertaken for inspections of Petrol Pumps and LPG outlets during 2012-17 were not found on record. Only in May 2017 on the directions of GoI, a special drive for inspection of petrol pumps was conducted by the department.

(b) Inadequate coverage of Weighbridges during inspections

Test check of records of selected zonal offices showed that only 1 to 30 weighbridges were inspected out of 431 to 475 weighbridges during 2012-17, out of which 37 *per cent* WBs were prosecuted during 2012-17. Further, inspections of WBs were not conducted by West Zone (2012-14), North West Zone (2012-13 and 2014-15), East Zone (2012-13 and 2015-16) and by South Zone (2013-14). In the absence of the adequate number of inspections of Weighbridges the possibility of risk of using faulty and manipulated WBs could not be ruled out.

The Department while assuring (October 2017) that audit suggestion would be taken care of in future, attributed the reasons for low inspection of WBs to the shortage of manpower and time consuming process of inspection of WBs.

(c) Inadequate inspections of Fair Price Shops

Fair Price Shops (FPS) are distribution channels to distribute essential commodities like rice, wheat, sugar to the general public at controlled prices and use weighing machines for distribution of these items, therefore, come under the purview of this Department.

Test check of records of selected zonal offices revealed that only 16 to 143 FPS were inspected out of 1,111 to 1,125 FPS during 2014-17. Audit also noted that no inspections of FPS were conducted during 2012-14 by these zonal offices except one FPS by East Zone. The West Zone and North West Zone did not conduct inspection of any FPS during 2015-16 despite the fact that there were 279 and 321 number of FPS respectively in the area under their jurisdiction. Further, eight Public Distribution (PDS) godowns (2 State godowns and 6 FCI godowns), which distribute food grains to FPS and had weighing machines installed in their premises, were not inspected by the Department during 2012-17.

The Department stated (October 2017) that it did not maintain information of FPS, however it assured to take action in future to check the WBs in 8 PDS godowns. It further stated that the timing of opening and closing of FPS also causes hardship for inspection and there is shortage of staff. The reply is not acceptable as the Department should maintain proper data base of FPS under its jurisdiction and inspect them regularly to prevent any malpractice.

(d) Shortcomings in maintenance of records for Inspections and prosecution.

The Department provides a printed Inspection Report Book (IRB) to the LMOs for recording results of Inspections. Test check of 17 inspection books of selected Zonal Offices showed that:

(i) The Inspection Reports (IRs) prepared by LMOs requires two witnesses and also recording of the time of Inspection. Audit found that out of total 842 IRs, 353 IRs did not have any witness, 419 IRs contained only one witness while only 70 IRs contained two witnesses. Further, in 463 IRs, officials of the Department had signed as witness. Out of total 842 IRs, in 762 IRs the LMOs had not recorded the time of inspection.

Audit also observed that despite specific directions issued by Assistant Controller (July 2014) for filling complete information in IRs, the zonal offices did not adhere to the directions. Non-filling the prescribed information in the IRs may weaken the prosecution cases in the Court.

The Department while accepting the facts stated (October 2017) that the inspection teams do not find independent witness in the field as no person in market is willing to become witness to avoid legal complication. As regards to not mentioning the time in the inspection book, it further added that probably due to precedence, timing was not recorded in the inspection memos. The reply is not acceptable as Department needs to find a way out to take a witness alongwith inspection team from any other government department to make the inspection meaningful.

(ii) Non-fixation of targets for inspections for LMOs

The para no. 1.8.2 relating to non-fixation of targets for inspections was printed in the CAG Report, GNCTD of 2006. Audit observed that Department still had not fixed targets for conducting inspections per LMO/per day/month/year. No mechanism was established in zonal offices for periodicity of inspection, based on risk analysis in an area. Test check of 17 inspection books in selected zonal offices showed that there was no uniformity in number of inspections conducted by LMOs in a zone as shown in **Table 2.3.6.**

Table 2.3.6: Inspections conducted by LMOs per day for selected Zonal offices

Name of Zone	Number of Inspections conducted	Total number of days taken to inspect	Range of Average Inspections per Day
South	250	480	0.27 to 1.85
West	150	405	0.19 to 1.11
North West	243	428	0.23 to 1.79
East	199	492	0.23 to 1.32
Total	**842**		

The Zonal offices attributed the cause to multiple charges held by LMOs, besides other factors like leave, specific duties, market conditions etc.

The Department stated (October 2017) that targets for inspection to be conducted by LMOs could not be fixed due to shortage of staff, the LMOs also attend other duties like court duty, cash collection/deposit in bank, administrative duties, submission of periodical reports and leave period. But Zonal officers/LMOs were directed to increase the number of Inspection and prosecution in public interest. The reply is not acceptable as considering above conditions, targets for inspections were not fixed for effective enforcement and building the confidence in the general public.

(iii) Improper maintenance of Prosecution Register

Maintenance of records relating to prosecutions is essential at the time of compounding and forwarding these cases to courts. In test check of prosecution registers maintained at four zonal offices for 17 inspection books covering 842 inspections, following points were observed:

a) Out of 842 inspections, the Zonal Offices booked 322 cases for prosecutions but status of 40 cases was not recorded in Prosecution Register; in the absence of which the results of compounding could not be ascertained.

b) In 17 cases no entries were recorded in the Register, in the absence of which audit could not ascertain whether these were actually compounded, forwarded to court or withdrawn.

c) Out of 102 cases which were forwarded to court, in 76 cases, only the word "COURT" was mentioned while court case number, name of court, date of filing of case in court, next date of hearing and final outcome of case was missing; despite specific guidelines issued by Department in August 2013. In the remaining 26 cases, only date of forwarding the case to the court was recorded in register.

The Department accepted the observations and stated (October 2017) that necessary directions will be issued to all zonal offices for correcting/updating the prosecution registers and Zonal officer will be assigned to periodically check the prosecution registers.

2.3.9.3 Court cases

During inspection of premises of weights and measures user, if LMO found any violation of Act and Rules, the offender was to be compounded with fine and where the offender did not respond to the notice of the Department within the stipulated time, the case would be filed in Court of law. There were 2,250 prosecution cases pending in courts as on 1 April 2013 and Department filed 2,110 fresh cases in the court during 2013-17[31] as detailed in **Table 2.3.7.**

Table 2.3.7: Year wise position of number of cases filed and settled during 2012-17

Year	Opening Balance of court cases as on 1st April	Cases filed in Courts during the year	Court Cases settled during the year	Balance court cases at the end of the year
2012-13	Complete information not provided by zonal offices*.			
2013-14	2,250	374	381	2,243
2014-15	2,243	696	364	2,575
2015-16	2,575	396	652	2,319
2016-17	2,319	644	376	2,587
Total		**2,110**	**1,773**	

**Data of South zone not included as Zone did not provide details of court cases for 2012-15.*

It can be seen from the table that out of 4,360 cases (2,250 opening balance plus 2,110 cases filed during 2013-17), only 1,773 cases were settled (40.66 *per cent*) during the period 2013-17. The pending cases increased from 2,250 in April 2013 to 2,587 cases in March 2017 requiring effective monitoring and control mechanism in handling court cases by Department.

The Department stated (October 2017) that the evening courts which hear the cases of Department also hear the cases of banking fraud and traffic challan etc. and Department cannot direct the court to decide the cases in a time bound manner. It further added that necessary directions are being issued from time to time to zonal officers to attend the court cases and also to Home Department to direct public prosecutors to attend hearing regularly and track each court case regularly. The Department needs to establish effective monitoring mechanism for each court case and make vigorous efforts to clear the pending cases.

Audit also observed the following:

(i) **Improper Maintenance of records of Court Cases-**Audit observed that no separate court cases registers were maintained by zonal offices. The cases forwarded to court were also not recorded in the prosecution registers with sufficient details, in the absence of which the period of pendency of court cases could not be ascertained in audit. The Department stated (October 2017) that necessary guidelines will be issued

[31] excluding south zone as it could not provide complete details of court cases pending and settled for 2012-15.

to all zonal officers to update their court case/prosecution register regularly and insert all necessary entries as highlighted by audit.

(ii) **Non-formation of Separate Legal Cell-**There was no Separate Legal Cell within the Department to handle the court cases, thus the cases were handled by concerned zonal offices and LMOs, thereby, affecting their enforcement duties. Evidently, inspections decreased from 11,650 in 2012-13 to 6,732 in 2016-17. The Department stated (October 2017) that separate legal cell will be formed on deployment of adequate staff.

2.3.9.4 Consumer Awareness and Grievance redressal

(a) Awareness Campaigns and advertisements

Awareness Campaigns and advertisements in newspapers help to educate public about their rights specified in Legal Metrology Act 2009 and Rules and provide information about working of Weights and Measures Department. Audit found the following shortcomings in the awareness campaigns by the Department among various stakeholders:

(i) Department had not framed any policy and guidelines for initiating campaigns for awareness in Consumers.

(ii) During the last five years, three zonal offices[32] conducted only one meeting, four zonal offices[33] conducted two meetings and remaining two zonal offices[34] conducted four meetings with market associations in April 2016. Audit observed that apart from this, headquarters office or zonal offices did not initiate any other campaign/programme to educate consumers about their rights though in May 2016, the Assistant Controller (LM) advised Zonal Officers to make efforts in contacting market associations for creating more awareness about provisions of Legal Metrology Act 2009/Legal Metrology (Packaged Commodities) Rules 2011. The Department accepted (October 2017) that no policy/guidelines have been framed for awareness campaigns and stated that zonal officers have been directed to conduct meetings with market association as and when required to spread awareness. It further attributed it to huge shortage of staff but assured to take positive action in future to spread awareness in public.

(iii) Inadequate advertisements in newspapers: Department incurred an expenditure of ₹ 11.18 lakh in 2012-13 and ₹ 20.63 lakh in 2014-15 on advertisements for spreading awareness from the head "Office Expenses" but no expenditure was incurred during 2013-14 and 2015-17, despite availability of enough funds under the same head. Further, Minister of Food and Civil Supplies and Consumer Affairs (MoFCS),

[32] Central, North East and North Zones.
[33] East, South, West and New Delhi Zones.
[34] South West and North West Zones.

GNCTD directed (September 2016) to advertise DO's and DON'Ts for manufactures, repairers, shop-keepers, establishments and also consumers informing about their rights through hoarding/pamphlets/advertisements in leading newspapers but no advertisements were published in the newspapers till date (July 2017).

The Department stated (October 2017) that it will take positive action in future for advertisements in newspapers to spread awareness among the people and non-advertising during 2013-14 was attributed to the "Model code of conduct" for Delhi Legislative Assembly elections. The reply is not acceptable as model code of conduct in 2013 was for a period of two months from 4 October 2013 to 4 December 2013 but Department did not make efforts to publish the advertisements for spreading consumer awareness during the remaining months.

(iv) The Department also did not frame policy and guidelines for consumer participation in Department's activities. It was not associated with District Consumer Welfare Organizations, Consumer Protection Associations and any Non-Government Organisation (NGO) to make the Department more participative and approachable to General Public. Further, information provided on website was not updated[35] periodically. The Department while accepting the facts stated (October 2017) that the Assistant Programmer deployed in Department has been directed to update information on Department website from time to time.

(b) Complaints and Grievance redressal mechanism

Citizen Charter of the Department stipulates a time frame of seven days to acknowledge a complaint, 15 days for providing interim reply and 45 days for final disposal of Grievances. Further, the performance of disposal system was to be evaluated by inserting the actual disposal of Grievances within stipulated time frame. Audit observed that: -

(i) The Department had not made any periodical evaluations as stipulated in citizen charter as no such records were available with the Department.

(ii) No data for complaints/grievances received from general public and disposed off by headquarter office during 2012-17 was being maintained. However, complaints received through PGMS portal[36] was being maintained and monitored. In the absence of data, audit could not comment on total number of complaints received and their timely disposal by the Department. The Department stated (August 2017) that

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[35] As on 21 August 2017, all items on official website under the head 'Statistics' were prior to August 2016 and figures were last updated on 16 February 2017; court cases were updated upto 2015-16; List of LPG gas agencies was updated upto 08 March 2016; List of dealers/manufacturers/ Repairers were last updated on 03 January 2014.

[36] Public Grievances Monitoring System (PGMS) portal owned and maintained by PGMS, Chief Minister's office GNCTD.

no record was available from where exact figure of complaints can be provided to audit, but relevant files were available.

(iii) Test check of selected zonal offices revealed that except West Zone, complaint registers were not maintained by other three zonal offices to record the receipt and disposal of complaints. West Zone though prepared a complaint register but action taken on complaints was not recorded against the entries made from September 2016 onwards. Thus, maintenance of proper complaint register was lacking at zonal offices for recording complaints/grievances forwarded by headquarters office for action.

(iv) Audit observed that Department did not establish any mechanism to ascertain from complainants for satisfactory disposal of their grievances and no consumer satisfaction surveys were conducted during 2012-17 to assess satisfaction level of the consumers. Audit noted that an LMO (Inspector) from North West Zone was deputed as part time dealing hand for attending the complaints at headquarters office on first half of alternate days.

The Department stated (October 2017) that all complaints received through PGMS have been dealt individually since 2014 and reply is updated by Department in PGMS portal which is monitored by Office of the Chief Minister. Other complaints which are received through mail and through telephone are also dealt immediately. The reply is not acceptable as the zonal offices had not maintained any complaint registers for recording grievances and action taken there-against. Further except PGMS portal, no detail of complaints was being maintained by the Department.

2.3.10 Internal Control Mechanism

2.3.10.1 Internal control is an integral element of an organizational management processes for providing reasonable assurance of efficiency of operation, reliability of financial reporting and compliance with applicable laws and statutes so as to minimize the risk of errors and achieve the organizational objectives. To ensure achievement of such objectives, establishment of an effective internal control mechanism is a necessity. Audit observed ineffectiveness of internal control mechanism in the Department and zonal offices as discussed below:

(i) Minister of Food Supplies and Consumer Affairs directed (May 2016) Assistant Controllers for regular visits in zones, however, after September 2016, Assistant Controllers did not visit any Zonal office/unit till March 2017 reflecting inadequate monitoring by Headquarters. Between April 2012 and March 2016, the Controller and Assistant Controller did not inspect/visit any Zone/laboratory of Department to ascertain whether compliance of instructions/office orders issued by head office was complied or not. However, Assistant Controller inspected six zonal offices and units[37] on seven occasions while the Controller visited only one zonal office[38] between June and September 2016. The Department stated (October 2017) that though Controller/Assistant Controller visited zonal offices but it was not recorded on papers. It, however, assured to take positive action in future.

(ii) Test check of a register maintained by the headquarters of the Department for issuance of Inspection Report Books to LMOs for the period August 2015 to March 2017 revealed that Inspection Report Books were issued on random basis without maintaining a sequence number leading to improper monitoring of books issued and leaving scope for misuse of book. The Department assured (October 2017) to streamline the system as advised by audit.

(iii) Department did not have its own Internal Audit Wing, in the absence of which there was no control over maintenance of registers for seized goods, complaint register, reconciliations for deposits in banks, maintenance of court cases register etc. by Zonal offices and units. The Department stated (October 2017) that dedicated internal audit wing was not there due to acute shortage of staff, it however, assured to take positive action in future.

(iv) Department did not constitute any flying squad during the period 2012-17 to take corrective action on the grievances received from the consumers. The Department while accepting the facts stated (October 2017) that enforcement was done by LMOs under the supervision of Zonal officers and sometimes at Headquarters level through daily/weekly/monthly reports. Audit is of the view that formation of flying squads enables secondary checks in implementation of Acts and Rules.

(v) Non-maintenance of proper records of minutes of meetings at zonal offices: Audit found that records relating to minutes of meetings held with higher authorities were not maintained by North West, South, Calibration Unit and TMU for the period 2012-2017. The zonal offices and units intimated that circulars and office orders issued by headquarter are being conveyed on Whatsapp group and hard copies are available only at headquarters office. Since LMOs posted in Department from DASS cadre get transferred to other departments within two to three years, in the absence of proper records, no guidance/acquaintance for past activities in the Department can be made available to newly posted LMOs in zonal offices to perform their duties efficiently. The Department while accepting the audit observation for future compliance

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[37] North , North East, North West,TMU, Calibration and South Zones.

[38] South Zone.

stated (October 2017) that all the Zonal officers have been directed to maintain all necessary records of meetings/circulars/office orders in zonal offices.

(vi) Non–updation of computerized database: Department has a software to issue computerized verification certificates of weights and measures to the users. Audit found that data of manufacturers, dealers and repairers of all zones was not updated, unique ID (license no., machine serial number/meter number) and fee collected were not available in the database. In the absence of complete database, correlation of data of any user for one year with other years and analysis of fee collected was not possible. The Department while accepting the audit observation for future compliance stated (October 2017) that all out efforts will be made to resolve the shortcomings pointed out in audit and will try to prepare a strong data base available in one platform which can easily accessed by the public.

2.3.10.2 Impact Evaluation of Department's activities

Audit observed that no evaluation study was carried out during 2012-17 to evaluate the performance, effectiveness and efficiency of implementation mechanism and impact of the provisions of the Acts and Rules periodically and to suggest measures to improve its effectiveness in the interest of consumers.

The Department accepted (October 2017) that no formal evaluation has been conducted by an independent agency and noted the suggestion for future compliance.

2.3.11 Conclusion

The mandated enforcement activities of the Department were conducted on ad-hoc basis, neither any survey to prepare a data base of users was conducted nor any risk based perspective and annual plans to conduct inspections with balanced approach was prepared. There was shortage of manpower under key functionaries mainly responsible for enforcement of Act and Rules; besides, enforcement staff deployed did not have requisite minimum qualification as per the Act and Rules and specialized trainings in Legal Metrology. Despite providing central assistance by GoI for strengthening of infrastructure, creation of adequate infrastructure was lacking thereby leaving central assistance unutilized. Verification equipment provided by GoI were not optimally utilised. Control mechanism over revenue receipts was weak leading to mismatch in receipts and deposits in bank, and non-reconciliation of revenue receipts with Pay and Accounts Office. The mandated verification of weights and measures and inspections of premises of various users declined, coupled with deficiencies in inspections, thereby objective of providing assurance for safeguard of consumer interests remained to be achieved. No targets for conducting inspections by Legal Metrology Officers were fixed, no established mechanism was in place to ensure that users of weights and measures were complying with the provisions of Act and Rules. No separate legal cell was formed and large number of cases of malpractices were pending in the court for decision. Absence of policy and guidelines for awareness campaigns for stakeholders led to inadequate public awareness through advertisements/public meetings. Grievances redressal mechanism was weak as no proper records for complaints were maintained and no consumer satisfaction surveys were conducted. Adequate steps were lacking to make general public more participative. Non-compliance with key provisions of Legal Metrology Act and Rules and Financial Rules coupled with inadequate monitoring by Headquarter indicated weak and ineffective internal control system.

2.3.12 Recommendations

To protect the interests of the consumers, the Department should:

(i) *evolve a mechanism to maintain database of all the weights and measures users by way of outsourcing the survey activity to facilitate perspective/annual action plan for enforcement activities.*

(ii) *strengthen legal metrology infrastructure and utilize the central assistance efficiently.*

(iii) *reassess sanctioned strength of the Department at present scenario and make efforts for filling up of vacancies, appointment of qualified LMOs and organize specialized trainings for LMOs.*

(iv) *initiate adequate public awareness campaigns to educate general public.*

(v) *strengthen internal control and monitoring mechanism for strict enforcement of Act and Rules.*