



**Report of the  
Comptroller and Auditor General of India  
on  
General and Social Sector  
for the year ended March 2015**



**Government of Gujarat  
Report No. 2 of the year 2016**

**REPORT OF THE  
COMPTROLLER AND AUDITOR GENERAL OF INDIA  
ON  
GENERAL AND SOCIAL SECTOR**

**FOR THE YEAR ENDED MARCH 2015**

**GOVERNMENT OF GUJARAT  
REPORT NO. 2 OF 2016**

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## PREFACE

This Report for the year ended 31 March 2015 has been prepared for submission to the Governor of the State of Gujarat under Article 151 of the Constitution of India. This Report contains three Chapters.

This Report relates to audit of the Social and General Sectors of the Government departments conducted under the provisions of the Comptroller and Auditor General's (Duties, Powers and Conditions of Service) Act, 1971 and Regulations on Audit and Accounts, 2007 issued thereunder by the Comptroller and Auditor General of India. This Report is required to be placed before the State Legislature under Article 151 (2) of the Constitution of India.

The instances mentioned in this Report are those, which came to notice in the course of test audit during the period 2014-15 as well as those, which came to notice in earlier years, but could not be reported in the previous Audit Report; instances relating to the period subsequent to 2014-15 have also been included, wherever necessary.

The audit has been conducted in conformity with the Auditing Standards (March 2002) issued by Comptroller and Auditor General of India.

**CHAPTER-I**  
**INTRODUCTION**

## CHAPTER-I

### INTRODUCTION

#### 1.1 About this Report

This Report of the Comptroller and Auditor General of India (C&AG) relates to matters arising from Performance Audit of selected programmes and activities and Compliance Audit of various Departments of State Government.

Compliance Audit refers to examination of the transactions relating to expenditure of the audited entities to ascertain whether the provisions of the Constitution of India, applicable laws, rules, regulations and various orders and instructions issued by competent authorities are being complied with. On the other hand, Performance Audit, besides conducting a Compliance Audit, also examines whether the objectives of the programme/activity/department are achieved economically and efficiently.

The primary purpose of the Report is to bring to the notice important results of Audit to the State Legislature. Auditing Standards require that the materiality level for reporting should be commensurate with the nature, volume and magnitude of transactions. The findings of Audit are expected to enable the Executive to take corrective actions so as also to frame policies and directives that will lead to improved financial management of the organisations, thus, contributing to better governance.

This chapter, in addition to explaining the planning and extent of Audit, provides a synopsis of the significant deficiencies in performance of selected programme, significant audit observations made during the Compliance Audit and follow-up on previous Audit Reports. Chapter-II of this report contains findings arising out of Performance Audit of selected programme/activity/departments. Chapter-III contains observations on the Compliance Audit in Government Departments.

#### 1.2 Audited entity profile

The Accountant General (General and Social Sector Audit), Gujarat conducts Audit of the expenditure under the General and Social Services incurred by 13 Departments in the State at the Secretariat level and 119 autonomous bodies. In addition, two Departments (Panchayats, Rural Housing and Rural Development & Urban Development and Urban Housing) and 27 autonomous bodies under these Departments are audited by the Accountant General (General and Social Sector Audit), Gujarat for which separate Report on Local Bodies is presented in the State Legislature. The Departments are headed by Additional Chief Secretaries/Principal Secretaries/Secretaries, who are assisted by Directors/Commissioners/Chief Engineers and subordinate officers under them.

The summary of fiscal transactions during the years 2013-14 and 2014-15 is given in **Table 1** as follows –

Table 1: Summary of fiscal transactions

(₹ in crore)

| Receipts                         |                    |                    | Disbursements                   |                    |                  |                  |                    |
|----------------------------------|--------------------|--------------------|---------------------------------|--------------------|------------------|------------------|--------------------|
|                                  | 2013-14            | 2014-15            |                                 | 2013-14            | 2014-15          |                  |                    |
|                                  |                    |                    |                                 |                    | Non- Plan        | Plan             | Total              |
| 1                                | 2                  | 3                  | 4                               | 5                  | 6                | 7                | 8                  |
| <b>Section-A: Revenue</b>        |                    |                    |                                 |                    |                  |                  |                    |
| <b>Revenue receipts</b>          | <b>79,975.74</b>   | <b>91,977.78</b>   | <b>Revenue expenditure</b>      | <b>75,258.54</b>   | <b>60,065.41</b> | <b>26,586.30</b> | <b>86,651.71</b>   |
| Tax revenue                      | 56,372.37          | 61,339.81          | General services                | 26,820.37          | 28,761.35        | 1,241.97         | 30,003.32          |
| Non-tax revenue                  | 7,018.31           | 9,542.61           | Social services                 | 32,381.78          | 19,884.80        | 16,829.35        | 36,714.15          |
| Share of Union taxes/duties      | 9,701.93           | 10,296.35          | Economic services               | 15,730.72          | 10,883.70        | 8,514.98         | 19,398.68          |
| Grants from Government of India  | 6,883.13           | 10,799.01          | Grants-in-aid and Contributions | 325.67             | 535.56           | 0.00             | 535.56             |
| <b>Section-B: Capital</b>        |                    |                    |                                 |                    |                  |                  |                    |
| Misc. Capital receipts           | 0.00               | 241                | Capital Outlay                  | 22,677.37          | 84.00            | 24,073.76        | 24,157.76          |
| Recoveries of Loans and Advances | 140.69             | 621.38             | Loans and Advances disbursed    | 603.22             | 48.72            | 301.18           | 349.90             |
| Public Debt receipts             | 19,343.04          | 19,453.94          | Repayment of Public Debt*       | 6,203.91           | -                | -                | 5,509.20           |
| Contingency Fund                 | 0.00               | 0.11               | Contingency Fund                | 0.11               | -                | -                | 14.16              |
| Public Account receipts          | 52,019.52          | 62,387.52          | Public Account disbursements    | 50,039.25          | -                | -                | 52,309.01          |
| Opening Cash Balance             | 18,689.89          | 15,386.48          | Closing Cash Balance            | 15,386.48          | -                | -                | 21,076.47          |
| <b>Total</b>                     | <b>1,70,168.88</b> | <b>1,90,068.21</b> | <b>Total</b>                    | <b>1,70,168.88</b> |                  |                  | <b>1,90,068.21</b> |

(Source: Finance Accounts for the respective years)

\* Excluding net transactions under ways and means advances and overdrafts.

### 1.3 Authority for Audit

The authority for Audit by the C&AG is derived from Articles 149 and 151 of the Constitution of India and the Comptroller and Auditor General's (Duties, Powers and Conditions of Service) Act, 1971.

### 1.4 Organisational structure of the Office of the Accountant General (G&SSA) Gujarat

Under the directions of the C&AG, the Office of the Accountant General (General and Social Sector Audit) Gujarat conducts audit of Government Departments/Offices/Autonomous Bodies/Institutions under the General and Social Sector which are spread all over the State. The Accountant General (General and Social Sector Audit) is assisted by four Group Officers (Senior/Deputy Accountants General, heading different distinct groups of Social or General Sector Audit). The groups are manned by Senior Audit Officers and Assistant Audit Officers who conduct the Audit in the field.

## 1.5 Planning and conduct of Audit

Audit process starts with the assessment of risks faced by various Departments of Government based on expenditure incurred, criticality/complexity of activities, level of delegated financial powers, assessment of overall internal controls and concerns of stakeholders. Previous audit findings are also considered in this exercise. Based on this risk assessment, the frequency and extent of Audit are decided.

After completion of Audit of each unit, Inspection Reports containing audit findings are issued to the heads of the Departments. The Departments are requested to furnish replies to the Audit findings within one month of receipt of the Inspection Reports. Whenever replies are received, Audit findings are either settled or further action for compliance is advised. The important Audit observations arising out of these Inspection Reports are processed for inclusion in the Audit Reports, which are submitted to the Governor of the State under Article 151 of the Constitution of India, to be caused to be laid on the table of the State Legislature.

During 2014-15, in the General and Social Sector Audit Wing, 6,037 man-days were utilised to carry out Performance Audit and Compliance Audit of total 358 units. The Audit plan covered those units/entities which were vulnerable to significant risk as per our assessment.

## 1.6 Significant Audit observations

In the last few years, Audit has reported on several significant deficiencies in implementation of various programmes/activities through Performance Audits, as well as on the quality of internal controls in selected Departments which impact the success of programmes and functioning of the Departments. Similarly, the deficiencies noticed during Compliance Audit of the Government Departments/organisations were also reported upon. The present report contains three Performance Audit and four Compliance Audit paragraphs. The highlights are given in the following paragraphs.

### 1.6.1 Performance Audits

#### 1.6.1.1 Delivery of Healthcare Services in Government Hospitals at District Level

Health is one of the most important parameters for ascertaining the quality of human life. Availability, accessibility and usability of sound healthcare system are essential requirements to meet the challenges in the field of Health. In Gujarat, 21 District Hospitals (DHs), a secondary level hospital and 13 hospitals attached with medical colleges, and one tertiary care hospital on Public Private Partnership (PPP) mode, are functioning at district level to provide preventive, promotive and curative healthcare services to the population. The performance audit on “Delivery of Healthcare Services in Government Hospitals at District Level” was conducted for the period 2010-15 during April and August 2015 and the following deficiencies were noticed-

- Department had prepared a five year plan for betterment of healthcare services in district level hospitals, however, the plan was not comprehensive as the current status of healthcare services of the

hospitals *vis-a-vis* the requirement as per Indian Public Health (IPH) Standards was not identified. Further, the plan had no specific targets and enshrined timeframe to achieve the targets.

- The sanctioned strength of all cadres of staff including doctors and nurses remained much below the IPH Standards in the test-checked DHs. The shortfall in the cadres of Specialist Doctors ranged between 29 and 77 *per cent*, and that of Medical Officers ranged between seven and 69 *per cent vis-a-vis* IPH Standards. The situation was alarming in DH Surendranagar, DH Godhra and DH Petlad, where shortage in the cadre of Specialist Doctors was more than 60 *per cent* as compared with IPH Standards.
- Availability of beds in DHs was neither as per IPH Standards nor in consonance with the requirements. Out of 13,833 beds available in district level hospitals, 10,645 beds were available in 11 districts to cater to a population of 3.55 crore and only 3,188 beds were available in remaining 22 districts to cater to a population of 2.49 crore. Shortage of beds in test-checked DHs ranged between 52 and 73 *per cent*. Audit observed instances of highly congested wards and patients lying on the floor; two patients were accommodated on one bed for transfusion of iron sucrose, and patients accommodated in the passageway due to non-availability of vacant beds.
- Number of essential drugs *viz.* Amoxicilin, Diclofenac Sodium, Hepatitis B Vaccine, Injection Ceftazimide, Insulin, *etc.* were not available in the stock for more than four months in all test-checked hospitals. Resultantly, patients were forced to purchase medicines from the open market.
- Instances of supply of Not of Standard Quality (NSQ) medicines by Gujarat Medical Services Corporation Limited (GMSCL) were noticed in test-checked hospitals. Most of the NSQ medicines were issued to the patients due to delay in receipt of sample testing reports.
- Essential specialist services of General Medicines, Obstetrics and Gynaecology, Paediatrics, Orthopaedics, Radiology, *etc.* were either not available or partially available in all test-checked DHs except in DH Palanpur, due to vacant posts of Specialist Doctors.
- Accident, Emergency and Trauma care services were either not available or were not equipped with essential equipment in test-checked DHs.
- Intensive Care Units (ICU) meant to attend critically ill patients, were not available in DH Petlad, DH Surendranagar and DH Vadodara. In other test-checked DHs, only one or two ICU beds were fully equipped with life saving equipment to handle critical cases. The situation in test-checked Civil Hospitals (CHs) was also deplorable, as only five and nine ICU beds were fully equipped with life saving equipment as against 11 and 36 available beds as per IPH Standards in CH Bhavnagar and CH Vadodara respectively.

- Availability of Gynaecologists, Paediatricians and life saving equipment are essential for delivery of maternal and child healthcare services. Audit observed instances of higher neo-natal and maternal deaths, vacant posts of Gynaecologists and Paediatricians, and lack of life saving equipment and beds in the maternity ward of test-checked DHs. Instances of patients accommodated on the floor were noticed in test-checked DHs.
- The departments of diagnosis, imaging and blood banks are integral components of a hospital to provide healthcare services. Audit observed that equipment for conducting various tests were not available in the diagnosis and imaging departments in test-checked DHs. Blood bank/blood storage centres were either not established or remained non-functional in test-checked DHs except in DH Godhra, DH Surendranagar and DH Himatnagar.
- Referral management and infection control were not upto the mark in any of the test-checked DHs.
- IPH Standards prescribed for quality assurance was either not followed or partially followed by the test-checked DHs.

**(Paragraph 2.1)**

#### ***1.6.1.2 Skill Development in Gujarat***

Government of India (GoI) had introduced National Skill Development Policy, 2009 to empower all individuals through improved skills, knowledge, nationally and internationally recognised qualifications to gain access to decent employment and ensure India's competitiveness in the global market. As per the report of National Skill Development Corporation (NSDC) on skill gaps in Gujarat for the period 2012-17, the State was required to provide skill training to about 4.75 lakh youth entering the work force per annum and make them employable with decent jobs in various industrial/service sectors. The Performance Audit on "Skill Development in Gujarat" was conducted for the period 2010-15 between February and August 2015 covering working of Gujarat Skill Development Mission (GSDM) and implementation of 21 skill development schemes by eight departments in the State which revealed many areas of concern. The important findings of the performance audit are highlighted below:

- Gujarat Skill Development Mission (GSDM) has not formulated uniform skill development policy even though it was decided (June 2010) in the meeting chaired by Hon'ble Chief Minister of the State, as a result of which concerned departments implemented skill training programme without uniformity in syllabus, duration of course and fees structure. We also observed that instructions (February 2014) by Labour and Employment Department for mandatory issuance of certificates of National Council of Vocational Training/Gujarat Council of Vocational Training to all trainees were not followed by private training institutes in majority cases.
- To enhance their capacity of providing vocational training to the youth in the State, the Director of Employment and Training (DET) had established

97 new ITIs between 2010 and 2015. However, average number of students passing out remained almost static during the period 2010-15.

- After passing the trade test, candidates are required to undergo practical training in industries as apprentices to enhance their skills. Audit observed that 26 *per cent* of seats of apprentices remained vacant during 2010-15 and out of 1.63 lakh candidates enrolled, only 37 *per cent* could pass the Apprenticeship exam.
- DET established 500 Kaushalya Vardhan Kendras (KVKs) in ‘Rurban’ areas to provide formal/informal training in short term courses to the youth who had left school at early age to provide them employment or self-employment and 7.83 lakh youth had completed training during 2010-15. Beneficiary survey of 270 candidates conducted by Audit revealed that only 23 (nine *per cent*) got job placements as majority of courses taken up by KVKs were providing skills for seasonal self-employment to some extent only.
- Under Industrial Policy 2009, a target was set to establish 200 Skill Up-gradation Centres (SUCs) with capacity of 1.5 lakh trainees per year. However, Centre for Entrepreneurship Development (CED) could set-up (2012-14) only 39 SUCs and train only 0.14 lakh candidates till March 2015 nullifying the objective of preparing technically competent manpower as per industrial needs.
- Under Sant Shri Ravidas High Skill Training Programme (SSRHSTP) 17,052 candidates (36 *per cent*) got training against the target of 47,140 during 2010-15. Percentage of female trainees was only 18 *per cent* against envisaged 30 *per cent*.
- Audit found that female participation in Vocational Training Centres developed by Tribal Development Department (TDD) on Public Private Partnership mode for skill training to tribal youth was only 17 *per cent* against a target of 50 *per cent* set by TDD. Overall achievement of training target by all VTCs was 35 *per cent* only (2010-15).
- Though funds of ₹ 12.55 crore were available with Gujarat Livelihood Promotion Company (GLPC) since 2011-12 for Mission Mangalam Skill Development Programme, selection of Skill Development Partners were delayed for more than two years due to non-finalisation of terms and conditions and because of this, training to only 1,155 candidates could be provided under the scheme till March 2015.
- To put all the information in public domain is important for creating awareness as well as for transparent administration of a scheme/programme, however, the web-portal developed (2011) by GSDM remained non-operational since September 2013.
- Analysis of available data of trainees on web-portal under three major schemes revealed large number of duplications in same scheme and multiple trainings being availed of by same candidates. The achievement figures were thus over reported by 4.58 lakh trainees.

**(Paragraph 2.2)**

### 1.6.1.3 Functioning of Vadodara Urban Development Authority

Vadodara Urban Development Authority (VUDA) was established (January 1978) under Gujarat Town Planning and Urban Development (GTP&UD) Act, 1976 for planned growth and systematic development in urban areas. The main functions of VUDA include preparation of a holistic Development Plan and zone-wise town planning schemes, execution of town planning schemes, control and execution of development work in accordance with the Development Plan, and to acquire/hold/manage/dispose of property, *etc.* The First Development Plan of VUDA was finalised in 1984 and got revised in 1996 and 2012. Out of 20 Town Planning (TP) Schemes submitted by VUDA, the State Government had approved finally/preliminarily 11 TP schemes till date. The performance audit on “Functioning of VUDA” was conducted for the period 2010-15 between May and June 2015 and the following deficiencies were noticed –

- There was delay in preparation of Development Plans and TP schemes.
- As against 53 TP schemes proposed in the First Revised Development Plan, VUDA had proposed only four TP schemes. The reservation of land for specific purposes in the TP schemes was not made as per the provisions of GTP&UD Act *i.e.* as against 10 *per cent* of land to be earmarked for Socially and Economically Weaker Section (SEWS) beneficiaries, the land reserved for SEWSs in 11 TP schemes ranged between 2.69 and 6.74 *per cent* only.
- As against ₹ 292.31 crore of funds received during the period 2010-15, VUDA could utilise only ₹ 118.18 crore.
- The land acquired for Transport Nagar-cum-Logistic Park during 2000-04 remained undeveloped till date (January 2016) due to non-acquisition of a piece of land in the central portion of the site and delay in appointment of consultants, preparation of designs, *etc.*
- Out of 242 plots allotted to VUDA in 11 TP schemes for residential/commercial units for sale, SEWS housing, parks and garden, *etc.*, only 17 plots could be sold/developed by VUDA. No efforts were made by VUDA to transfer the ownership of land/plots allotted to VUDA from the name of original land owners.
- Though creation of basic amenities and infrastructure were provided in the Development Plans and TP schemes, VUDA had executed only road works as a result of which the people residing in the VUDA area were deprived of water supply system, drainage and sewerage system, street lights, parks and gardens, *etc.*
- A scheme of 2011 for providing one time concession to the owners to regularise unauthorised/irregular constructions was not implemented effectively.
- Economically Weaker Section (EWS) beneficiaries evacuated from Madhavnagar and Keshavnagar EWS housing complex, owing to collapse of blocks of Madhavnagar, could not be rehabilitated till date

of Audit (June 2015) owing to delay in commencement of construction work and stoppage of work by the contractor.

- Irregularities in execution of road works and irregular/avoidable payment to the contractors were observed in Audit.
- Internal control and grievance redressal mechanism was not effective and there was shortage of 61 *per cent* of technical staff against the sanctioned strengths.

**(Paragraph 2.3)**

### ***1.6.2 Compliance Audit of Transactions***

#### ***1.6.2.1 Undue benefit worth ₹ 6.69 crore bestowed on an agency***

Awarding of printing work of revised curriculum and syllabus without resorting to e-tender process by Gujarat Council of Educational Research and Training (GCERT) to an agency at a conditional rate in contravention to the provisions of Gujarat Public Works Manual and Central Vigilance Commission resulted in extra avoidable payment of ₹ 6.69 crore and undue favour to the agency.

**(Paragraph 3.1)**

#### ***1.6.2.2 Irregular payment of subsistence allowance and salary***

Contractual employee was suspended and reinstated in regular pay scale as if he was a government servant resulting in irregular payment of subsistence allowance and salary of ₹ 66.88 lakh.

**(Paragraph 3.2)**

#### ***1.6.2.3 Follow-up Audit on Modernisation of Police Force in Gujarat***

The implementation of the scheme in the State was last reviewed and findings included in the Audit Report (Civil) for the year ended 31 March 2009. As a follow-up, the present Audit covers the period 2009-15 to assess and evaluate the action taken by the Government on the Audit findings and recommendations included in the Audit Report for the year ended 31 March 2009.

Audit observed that corrective actions have been taken by the department in respect of mobility, weaponry, communication equipment, utilisation of funds and equipment pertaining to Forensic Science Laboratories and allotment of quarters. However, following deficiencies need urgent attention of the State Government for remedial action-

Submission of AAP to the GoI by the State Government was found to have been delayed in every year during audit period. Though, adequate number of four-wheeler and two-wheeler vehicles were available with the department, some PSs were not having the prescribed number of vehicles as per norms of BPR&D. Shortages in modern weapons as against the requirement assessed by the State Government was noticed especially in respect of BORE shot guns, Gas Guns and AK 47s. Weapons against ₹ 12.54 crore released to Ordnance Factory Board during the period 2003-15 was still awaited. POLNET

remained non-functional since its installation. The funds provided for Mega City Policing were not optimally utilised. GSPHCL could utilise only 26 per cent of funds received during the period 2009-15 due to slow progress of works and non-commencement of works. Construction of Training-cum-Store complex for Home Guards at Ahmedabad commenced after a delay of more than 10 years due to non-acquisition of land and construction of Baffle Range sanctioned in 2008-09 had not commenced due to non-finalisation of tender by GSPHCL. The police reforms were not implemented properly though directed by the Hon'ble Supreme Court of India. No corrective steps had been taken to fill up the vacant posts in the Anti Terrorist Squad and technical posts in communication. Proper monitoring by State Level Empowered Committee was found wanting in the police modernisation scheme.

(Paragraph 3.3)

#### *1.6.2.4 Unfruitful expenditure of ₹ 1.12 crore*

Non-acquisition of land by Ahmedabad Urban Development Authority resulted in non-utilisation of pipes laid besides defeating the purpose of disposal of excess storm water from Bopal pond to Ghuma pond.

(Paragraph 3.4)

## **1.7 Lack of responsiveness of Government to Audit**

### *1.7.1 Inspection Reports outstanding*

The Hand Book of Instructions for prompt Settlement of Audit Objections/Inspection Report issued by the Finance Department in 1992 provides for prompt response by the Executive to the Inspection Reports (IRs) issued by the Accountant General to ensure rectificatory action in compliance with the prescribed rules and procedures and accountability for the deficiencies, omissions, etc., noticed during the inspections. The Heads of Offices and next higher authorities are required to comply with the observations contained in the IRs, rectify the defects and omissions promptly and report their compliance to the Accountant General within four weeks of receipt of the IRs. Periodical reminders are issued to the Head of the Departments requesting them to furnish the replies expeditiously on the outstanding paragraphs in the IRs.

As of 31 December 2015, 3,261 IRs (6,287 paragraphs) were outstanding against 13 Departments under the General and Social sector. Year-wise details of IRs and paragraphs outstanding are given in **Appendix-I**.

### *1.7.2 Response of Departments to the audit paragraphs*

Three draft Performance Audit report and four draft Compliance Audit paragraphs were forwarded to the Additional Chief Secretaries/Principal Secretaries/Secretaries of the concerned administrative Departments between July 2015 and October 2015 with a request to send their responses within six weeks. The Departments replied to two out of three draft Performance Audit reports and one out of four draft Compliance Audit paragraphs featuring in this Report. Entry and exit conferences were also held with the concerned

Departments on the audit findings included in the draft report of the Performance Audit. The replies of the Departments and the views expressed by them have duly been considered while finalising this report.

### ***1.7.3 Follow-up of Audit Reports***

Rule 7 of Public Accounts Committee (Rules of Procedure) 1990 provides for furnishing Detailed Explanation (DE) to the observations which featured in Audit Reports by all the Departments of Government, within 90 days of their being laid on the Table of the Legislative Assembly.

The administrative Departments did not comply with these instructions and 19 Departments<sup>1</sup> as detailed in **Appendix-II** had not submitted 51 DEs for the period 2003-04 to 2013-14 as of 31 December 2015.

### ***1.7.4 Paragraphs to be discussed by the Public Accounts Committee***

Details of paragraphs pending discussion by the Public Accounts Committee as of 31 December 2015 are detailed in **Appendix-III**.

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<sup>1</sup> This includes audit of departments transferred to Principal Accountant General (E&RSA), Gujarat, Ahmedabad after restructuring with effect from 1 April 2012

**CHAPTER-II**  
**PERFORMANCE AUDITS**

## CHAPTER-II

This chapter contains findings of Performance Audits on “Delivery of Healthcare Services in Government Hospitals at District Level”, “Skill Development in Gujarat” and “Functioning of Vadodara Urban Development Authority”.

### HEALTH AND FAMILY WELFARE DEPARTMENT

#### 2.1 Delivery of Healthcare Services in Government Hospitals at District Level

##### Executive Summary

*Health is one of the most important parameters for ascertaining the quality of human life. Availability, accessibility and usability of sound healthcare system are essential requirements to meet the challenges in the field of Health. In Gujarat, 21 District Hospitals (DHs), a secondary level hospital and 13 hospitals attached with medical colleges, and one tertiary care hospital on Public Private Partnership (PPP) mode, are functioning at district level to provide preventive, promotive and curative healthcare services to the population. The performance audit on “Delivery of Healthcare Services in Government Hospitals at District Level” was conducted for the period 2010-15 during April and August 2015 and the following deficiencies were noticed -*

- Department had prepared a Five Year Plan for betterment of healthcare services in district level hospitals, however, the plan was not comprehensive as the current status of healthcare services of the hospitals vis-a-vis the requirement as per Indian Public Health (IPH) Standards was not identified. Further, the plan had no specific targets and enshrined timeframe to achieve the targets.*
- The sanctioned strength of all cadres of staff including doctors and nurses remained much below the IPH Standards in some test-checked DHs. The shortfall in the cadres of Specialist Doctors ranged between 29 and 77 per cent, and that of Medical Officers ranged between seven and 69 per cent vis-a-vis IPH Standards. The situation was alarming in DH Surendranagar, DH Godhra, DH Petlad and DH Vadodara where shortage in the cadre of Specialist Doctors was more than 60 per cent as compared with IPH Standards.*
- Availability of beds in DHs was neither as per IPH Standards nor in consonance with the requirements. Out of 13,833 beds available in district level hospitals, 10,645 beds were available in 11 districts to cater to a population of 3.55 crore and only 3,188 beds were available in remaining 22 districts to cater to a population of 2.49 crore. Shortage of beds in test-checked DHs ranged between 52 and 73 per cent. Audit observed instances of highly congested wards and patients lying on the floor; two patients were accommodated on one bed for transfusion of iron sucrose, and patients accommodated in the passageway due to non-availability of vacant beds.*

- *Number of essential drugs viz. Amoxycilin, Diclofenac Sodium, Hepatitis B Vaccine, Injection Ceftazimide, Insulin, etc. were not available in the stock for more than four months in all test-checked hospitals. Resultantly, patients were forced to purchase medicines from the open market.*
- *Instances of supply of Not of Standard Quality (NSQ) medicines by Gujarat Medical Services Corporation Limited (GMSCL) were noticed in test-checked hospitals. Most of the NSQ medicines were issued to the patients due to delay in receipt of sample testing reports.*
- *Essential specialist services of General Medicines, Obstetrics and Gynaecology, Paediatrics, Orthopaedics, Radiology, etc. were either not available or partially available in all test-checked DHs except in DH Palanpur, due to vacant posts of Specialist Doctors.*
- *Accident, Emergency and Trauma care services were either not available or were not equipped with essential equipment in test-checked DHs.*
- *Intensive Care Units (ICU) meant to attend critically ill patients, were not available in DH Petlad, DH Surendranagar and DH Vadodara. In other test-checked DHs, only one or two ICU beds were fully equipped with life saving equipment to handle critical cases. The situation in test-checked Civil Hospitals (CHs) was also deplorable, as only five and nine ICU beds were fully equipped with life saving equipment as against 11 and 36 available beds in CH Bhavnagar and CH Vadodara respectively.*
- *Availability of Gynaecologists, Paediatricians and life saving equipment are essential for delivery of maternal and child healthcare services. Audit observed instances of higher neo-natal and maternal deaths, vacant posts of Gynaecologists and Paediatricians, and lack of life saving equipment and beds in the maternity ward of test-checked DHs. Instances of patients accommodated on the floor were noticed in test-checked DHs.*
- *The departments of diagnosis, imaging and blood banks are integral components of a hospital to provide healthcare services. Audit observed that equipment for conducting various tests were not available in the diagnosis and imaging departments in test-checked DHs. Blood bank/blood storage centres were either not established or remained non-functional in test-checked DHs except in DH Godhra, DH Surendranagar and DH Himatnagar.*
- *Referral management and infection control were not upto the mark in any of the test-checked DHs.*
- *IPH Standards prescribed for quality assurance was either not followed or partially followed by the test-checked DHs.*

### **2.1.1 Introduction**

Health is one of the definite facilitators for ascertaining the quality of human life. Availability, accessibility and usability of sound healthcare system are essential requirements to meet the challenges in the field of Health. The Sub-Centres (SCs), Primary Health Centres (PHCs) and Community Health Centres (CHCs) are primary level healthcare units which provide preventive and promotive healthcare services to rural populace. District Hospitals (DHs) are

secondary level hospitals, being an essential component of the district healthcare system which provides preventive, promotive and curative healthcare services to the people in the districts. Hospitals attached with Medical Colleges, commonly known as Civil Hospitals (CHs) are tertiary level healthcare units, which provide all services including super specialised services.

As of March 2015, the health needs of the people of Gujarat are catered by the State Government through 34 District level Hospitals<sup>1</sup> at district level, 42 sub-DHs and 321 Community Health Centres (CHCs) at taluka level and 1,265 Primary Health Centres (PHCs) and 8,121 Sub-Centres (SCs) at village level.

The healthcare services in a State can be evaluated on the basis of the achievement against benchmark of health indicators. The status of few important health indicators of Gujarat *vis-a-vis* National average are shown in **Table 1** below -

**Table 1: Status of health indicators of Gujarat *vis-a-vis* National average**

| Sr. No. | Health Indicators  | Gujarat | National | Ranking of Gujarat among 19 big States |
|---------|--|---------|----------|--|
|         |  | 2011    | 2011     |  |
| 1       | Crude Birth Rate (CBR)<br>(per 1000 population)          | 21.30   | 21.80    | 11                                     |
| 2       | Crude Death Rate (CDR)<br>(per 1000 population)          | 6.70    | 7.10     | 07                                     |
| 3       | Total Fertility Rate (TFR)                               | 2.40    | 2.40     | 12                                     |
| 4       | Maternal Mortality Ratio (MMR)<br>(per lakh live births) | 122     | 178      | 06                                     |
| 5       | Infant Mortality Ratio (IMR)<br>(per 1000 live births)   | 41      | 44       | 09                                     |

(Source: GoI website – [www.censusindia.gov.in](http://www.censusindia.gov.in))

The table above shows that though Gujarat's position is better than national average, yet it is not among the front ranking States of the country in terms of health indices. The situation demands for better healthcare services at all levels. This performance audit report covers status of delivery of healthcare services in Government Hospitals at District level.

### 2.1.2 Organisational set-up

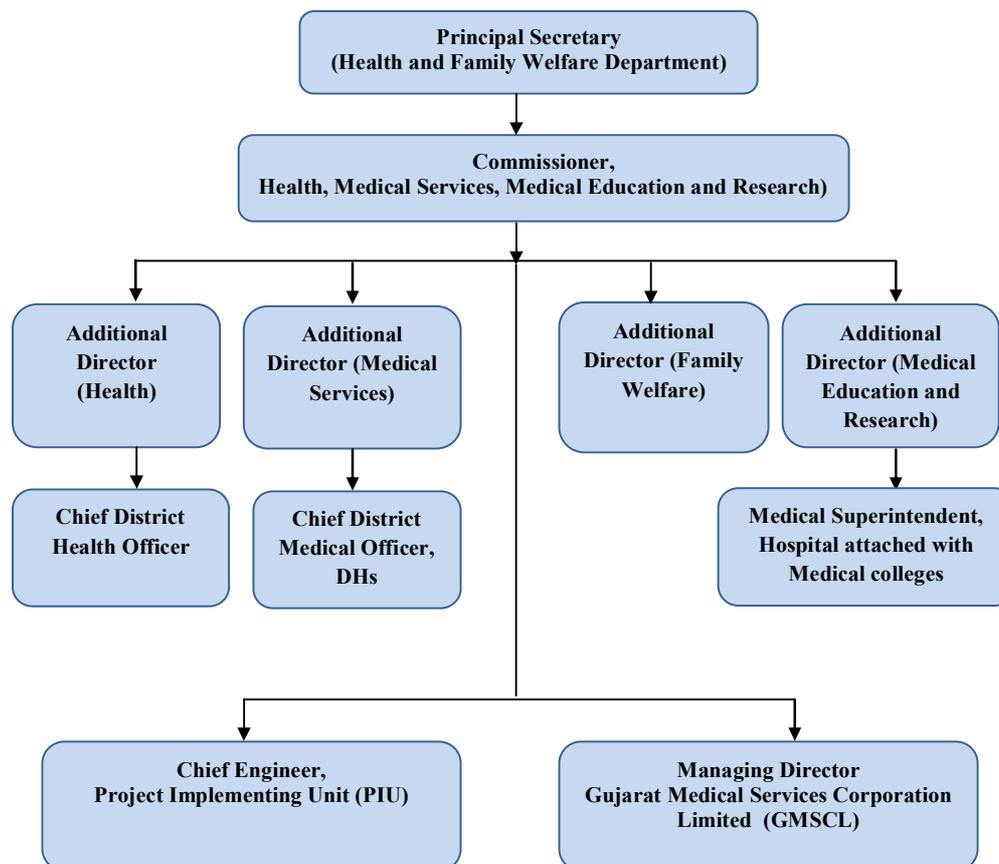
The Principal Secretary, Health and Family Welfare Department (H&FWD) is the Administrative Head of the Department. He is assisted by the Commissioner, Health, Medical services and Medical Education and Research, who in turn is assisted by four Additional Directors<sup>2</sup>. Additional Director, Medical Services is responsible for overall supervision of district hospitals (DHs) and sub-DHs in the State. Additional Director, Medical Education and Research is responsible for overall supervision of Civil Hospitals (CHs) attached with Medical College. The Chief District Medical Officer (CDMO) is responsible for supervision of medical services in the respective District Hospitals whereas Medical Superintendent of the hospital is responsible for supervision of delivery of healthcare services in the respective Civil Hospital.

<sup>1</sup> 21 District Hospitals, six hospitals attached with Government Medical College, six hospitals attached with Government Medical Education and Research Society and a hospital attached with private medical college on PPP mode

<sup>2</sup> Health (CHCs and PHCs), Medical Service (DHs and Sub-DHs), Medical Education & Research and Family Welfare

The organisational chart is depicted below –

## Organisational Chart



### 2.1.3 Audit Objectives

The broad objectives of the performance audit were to assess whether -

- the planning process was proper and robust to improve the quality of healthcare services at district level hospitals;
- adequate infrastructure, manpower, drugs and equipment, and treatment supporting units were available at district level hospitals to deliver the healthcare and ancillary services effectively and efficiently; and
- a proper system existed for quality assurance and monitoring of service delivery at district level hospitals.

### 2.1.4 Audit Criteria

In order to achieve the audit objectives, the following audit criteria were adopted -

- Guidelines of Indian Public Health (IPH) Standards for District Hospitals;
- Quality Assurance Guidelines issued by GoI;
- Policies/strategies of the State Government relating to Healthcare with special focus in respect of the District Level Hospitals;
- Guidelines for Rogi Kalyan Samiti issued by the State Government; and

- GoI and State Government Resolutions and Circulars.

### 2.1.5 Audit scope and methodology

The performance audit commenced with an ‘entry conference’ (10 April 2015) with the Principal Secretary and other officers wherein the audit objective, scope and audit criteria were discussed and the inputs of the department were obtained. The audit involved scrutiny of records for the period 2010-15 maintained at the office of the Commissioner of Health, District Hospitals and Civil Hospitals attached with Medical Colleges in nine test-checked districts to evaluate the status and standards of delivery of healthcare services to the population. Joint visit<sup>3</sup> of various departments of test-checked hospitals was also undertaken to observe the standard of delivery of healthcare services. Out of 30 districts level hospitals in 26 districts<sup>4</sup>, 10 Government hospitals<sup>5</sup> situated at district level in nine districts<sup>6</sup> were selected by adopting Simple Random Sampling without Replacement Method for detailed audit scrutiny. The scope of Audit was also extended to test-checked 18 Community Health Centres (CHCs)<sup>7</sup> to ascertain the efficacy of these centres and referral system.

An exit conference was held (13 January 2016) with Additional Chief Secretary (ACS) of Health and Family Welfare Department (H&FWD). The views of the State Government and the replies received from the department have been considered and incorporated in the report.

## Audit Findings

### 2.1.6 Planning

#### 2.1.6.1 Comprehensive Plan for up-gradation of district level hospitals

The State Government had prepared a Five Year Plan (FYP) (2012-17) for medical services and medical education for up-gradation of standards of healthcare services in district level hospitals. However, Audit observed that no appraisal was conducted by the department to identify the current status of healthcare services of the hospitals *vis-a-vis* the requirement as per IPH Standards. While the department had an Annual Plan as part of the FYP, it did not prescribe methodologies or lay a timeline to achieve the standardised norms.

The status of implementation of FYP in respect of district level hospitals as on March 2015 are shown in **Table 2** as follows –

<sup>3</sup> Audit team alongwith officials of test-checked hospitals

<sup>4</sup> Seven newly constituted (August 2013) districts were not considered as element of universe for sampling *i.e.* Aravali, Botad, Chhota-udepur, Devbhumi Dwarka, Gir Somnath, Mahisagar and Morbi. Out of 34 District level hospitals, four hospitals functioning in these districts were not considered for audit sampling.

<sup>5</sup> Seven DHs – (Dahod, Godhra, Himatnagar, Palanpur, Petlad, Surendranagar and Vadodara) and three Civil Hospitals – (Bhavnagar, Surat and Vadodara)

<sup>6</sup> Anand, Banaskantha (Palanpur), Bhavnagar, Dahod, Panchmahal (Godhra), Sabarkantha (Himatnagar), Surat, Surendranagar and Vadodara

<sup>7</sup> Anand (Dharmaj and Tarapur), Banaskantha (Piluda and Suigam), Bhavnagar (Ghogha and Sihor), Dahod (Limkheda and Singwad), Panchmahal (Ghoghamba and Sahera), Sabarkantha (Prantij and Rupal), Surat (Kathor and Sayan), Surendranagar (Ranagadh and Thangadh) and Vadodara (Padra and Savli)

**Table 2: Status of Implementation of Five Year Plan (2012-17) as on 31 March 2015**

| Sr. No. | Plan  | Status of Implementation  | Government reply   |
|---------|---|---|--|
| 1.      | Strengthening of manpower as per IPH Standards in DHs.  | No change was made in the sanctioned strength.  | The idea has been dropped.   |
| 2.      | Appointment of specialist doctors.  | 194 Specialist doctors appointed during 2012-15 under Medical Services.   | Efforts are being made to fill the gaps.                               |
| 3.      | Appointment of Cardiologist in district hospital to provide intensive cardiac care treatment. | Neither any Cardiologists were appointed nor was any training imparted to MBBS doctors though it was envisaged in the five year plan. | Training of MBBS doctors for cardiac care treatment would be provided. |
| 4.      | Increase in bed capacity of DHs.  | Bed capacity of only two DHs has been increased.  | Efforts are being made to increase the bed capacity.                   |
| 5.      | Setting-up of Non-communicable Disease (NCD) Clinics in all districts.                        | No new NCD clinics have been set-up during the period 2012-15.  | Efforts are being made for setting-up NCD clinics.                     |

The above table shows that the plan had no specific targets and was without timeframe to achieve the targets.

The Additional Chief Secretary (ACS), Health and Family Welfare Department (H&FWD) in the exit conference stated (January 2016) that comprehensive perspective plan would be prepared with time frame and would be followed through annual plan.

***The timelines for all activities enshrined in the Five Year Plan prepared by the State may be fixed and progress against these be watched on a regular basis for ensuring that the targets set are achieved.***

### ***Delivery of Healthcare Services***

The district level hospitals are expected to meet the requirements of patients referred from primary level healthcare institutions as well as patients directly approaching the hospital. The guidelines of IPH Standards envisage that each DH should deliver essential services (minimum assured services) and also aspire to deliver specialised services to address the needs of patients. A conceptualized frame-work of district level hospital is shown in **Table 3** below–

**Table 3: A conceptualized frame-work of district level hospitals**

| Driving forces   | Core Services                                    | Essential component to complement Core Services | Auxillary and supporting service/unit | Patient amenities and citizen charter |
|--|--|---|---------------------------------------|---------------------------------------|
| Adequate manpower in the cadres of doctors, para-medical, Nursing and supportive staff | Out Patient Department (OPD) Services            | Diagnostic                                      | Dietary                               | Sanitation and drinking facilities    |
| Adequate Infrastructure  | In Patient Department (IPD) Services             | Imaging   | Rogi Kalyan Samiti                    | Information to Public                 |
| Availability of Drugs and Equipment  | Accident, Emergency and Trauma care service      | Blood Bank                                      | Referral Services                     |                                       |
|  | Intensive Care Unit<br>Special Newborn Care Unit | Operation Theatre                               | Infection Control                     |                                       |

The efficacy of these frame-work and its impact on delivery of healthcare services in test-checked district level hospitals are discussed in the succeeding paragraphs -

### 2.1.7 Driving Forces of Hospitals

To run healthcare set-up efficiently and effectively, availability of adequate manpower, infrastructure and equipment are pre-requisites and act as driving forces. Shortfall or absence of these forces would have an adverse impact on quality and quantity of essential services. The efficacy of these driving forces and impact on delivery of healthcare services in test-checked district level hospitals are discussed as under –

#### 2.1.7.1 Human Resource Management

The delivery of quality healthcare services in hospitals largely depends on the adequate availability of manpower especially in the cadres of doctors, staff nurses, para-medical and other supporting staff. The details of men-in-position *vis-a-vis* sanctioned strength in the DHs and CHs in the State as on 31 March 2015 is shown in **Table 4** below –

**Table 4: Men-in-position as on 31 March 2015 *vis-a-vis* sanctioned strength**

| Particulars                       | Manpower in DHs |                 |            |                       | Manpower in CHs |                 |              |                       |
|-----------------------------------|-----------------|-----------------|------------|-----------------------|-----------------|-----------------|--------------|-----------------------|
|                                   | Sanctioned post | Men-in-position | Vacancy    | Percentage of vacancy | Sanctioned Post | Men-in-position | Vacancy      | Percentage of vacancy |
| Medical Officers                  | 270             | 183             | 87         | 32                    | 195             | 149             | 46           | 24                    |
| Specialist Doctors/<br>Professors | 390             | 176             | 214        | 55                    | 1,411           | 1,158           | 253          | 18                    |
| Staff Nurses                      | 1,260           | 965             | 295        | 23                    | 3,366           | 2,846           | 520          | 15                    |
| Para-medical staff                | 370             | 220             | 150        | 41                    | 1,048           | 893             | 155          | 15                    |
| Administrative and<br>other staff | 263             | 111             | 152        | 58                    | 432             | 309             | 123          | 28                    |
| <b>Total</b>                      | <b>2,553</b>    | <b>1,655</b>    | <b>898</b> | <b>35</b>             | <b>6,452</b>    | <b>5,355</b>    | <b>1,097</b> | <b>17</b>             |

(Source: Information furnished by the office of the Commissioner of Health, Gandhinagar)

The table above shows that the availability of manpower as against the sanctioned strength was better in CHs as compared to DHs. The shortage of Medical Officers especially Specialist Doctors, nurses and para-medical staff in DHs is an area of concern as the patients are deprived of quality treatment.

Further, the guidelines of IPH Standards for DHs envisage a minimum essential manpower in DHs based on the bed strengths. However, the availability of manpower in test-checked DHs was not in consonance with IPH Standards (**Appendix-IV**) as discussed below -

- The sanctioned strength of the DHs in some test-checked districts was much less than that stipulated in the guidelines of IPH Standards. This indicated that adequate efforts were not made by the State Government even to fill the existing vacancies against the sanctioned strength, leaving aside to increase the strength as required in accordance with the IPH Standards.
- The vacancies in the cadres of Specialist Doctors ranged between 29 and 77 *per cent*, and Medical Officers ranged between seven and 69 *per cent vis-a-vis* IPH Standards. The situation was alarming in DH Surendranagar, DH Godhra, DH Petlad and DH Vadodara where

shortage of Specialist Doctors as compared with IPH Standards was more than 60 per cent. Vacancies in the cadres of Specialist Doctors and Medical Officers had resulted in non-availability of specialist services in test-checked DHs as discussed in Paragraph 2.1.8.1 (2).

- Similarly, the vacancies in the cadres of staff nurses ranged between seven and 72 per cent, and para-medical & other staff ranged between 31 and 89 per cent vis-a-vis IPH Standards.
- Bed capacity of DH Dahod and DH Surendranagar was 150 each. Average IPD patient per year in DH Dahod and DH Surendranagar was 59,634 and 21,784 respectively during the period 2010-15. However, the sanctioned strength of staff nurses in DH Dahod was only 33 as compared to 90 in DH Surendranagar. This indicated that the sanctioned strength approved by the State Government for the DHs was not based on adequate study, as it was neither linked to bed capacity nor with inflow of patients.

The ACS H&FWD in the exit conference stated (January 2016) that despite making best efforts, gaps remained between sanctioned strength and men-in-position particularly in the cadre of doctors. It was further stated that efforts were being made to fill the vacant posts on priority basis and thereafter steps would be taken to provide manpower as per IPH Standards.

***The Government may revise the sanctioned strength of DHs in the State as envisaged in the guidelines of IPH Standards and fill up the vacancies gradually, over a timely manner (say two-three years) to provide quality healthcare facilities to the public. At least one specialist doctor for each department may be posted to all DHs to facilitate specialist services to the patients.***

#### **2.1.7.2 Availability of Infrastructure**

##### **• Availability of District Level Hospitals**

Guidelines of IPH Standards envisage a DH in every district, a hospital at the secondary referral level, to cater to the needs of people living in district headquarters, town and the rural populace in the district. In the State, there are 21 DHs and 13 tertiary care hospitals<sup>8</sup> to cater to the needs of the population (Appendix-V).

Audit observed that except for four districts (Anand, Aravali, Morbi and Veraval), all districts in the State were having either DHs and/or CHs. While Aravali, Morbi and Veraval districts are newly formed (August 2013), Anand district which was formed in October 1997 and was having a population of 20.93 lakh as per Census 2011, was without any district level hospital. In contrast, Vadodara, a neighbouring district of Anand was having one DH and two tertiary care hospitals<sup>9</sup>.

The ACS H&FWD in the exit conference stated (January 2016) that the process for acquisition of land for construction of a DH at Anand was in progress.

***The Government may take steps to establish DH in these districts to cater to the needs of the population.***

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<sup>8</sup> Hospitals attached with Medical Colleges which provides secondary as well as tertiary care

<sup>9</sup> CH Vadodara and Hospital managed by Gujarat Medical Education and Research Society (GMERS)

- *Availability of Beds in DHs*

Guidelines of IPH Standards provide that there should be 220 beds in a DH for a district having a population of 10 lakh. As of March 2015, the number of beds available in the district level hospitals was 13,833 to cater to a population of 6.04 crore in the State.

Audit observed that though the flow of OPD and IPD patients to district level hospitals increased by 19 and 22 *per cent* during 2010-15 respectively, the number of beds increased only by 12 *per cent* during that period. Audit further observed that out of 13,833 beds, 10,645 beds were available in 11 districts<sup>10</sup> to cater to a population of 3.55 crore. In remaining 22 districts, only 3,188 beds are available to cater to a population of 2.49 crore.

The guidelines of IPH Standards also provide that the requirement of beds in a DH would depend on nearest tertiary care hospitals and its distance and travel time. Audit observed that in three out of nine test-checked districts, tertiary care hospitals were functioning with adequate number of beds as per IPH Standards. However, in the remaining six test-checked districts, the availability of beds in the DHs was less than the number of beds prescribed as per IPH Standards as shown in **Table 5** below –

**Table 5: Availability of beds in six test-checked DHs as on 31 March 2015**

| DH            | Population of the district as per census 2011 (in lakh) | Number of beds required as per IPH Standards | Actual number of beds available | Shortage of beds (in <i>per cent</i> ) | Nearest district with tertiary care facility | Approximate distance to district with tertiary care facility (in kilometer) |
|---------------|---|--|---------------------------------|--|--|---|
| Petlad        | 20.93   | 440  | 119                             | 321(73)                                | Vadodara                                     | 35  |
| Palanpur      | 31.21   | 660  | 225                             | 435(66)                                | Ahmedabad                                    | 145   |
| Dahod         | 21.27   | 440  | 150                             | 290(66)                                | Vadodara<br>Ahmedabad                        | 151<br>202  |
| Godhra        | 23.91   | 440  | 210                             | 230(52)                                | Vadodara                                     | 80  |
| Himatnagar    | 24.29   | 440  | 200                             | 240(55)                                | Ahmedabad                                    | 75  |
| Surendranagar | 17.56   | 440  | 150                             | 290(66)                                | Ahmedabad<br>Rajkot                          | 126<br>106  |

The table above shows that the availability of beds in DH Palanpur, DH Dahod and DH Surendranagar was less than 40 *per cent* of the IPH Standards. Even the tertiary care hospitals which were nearest to these DHs, were at a distance of more than 100 Kilometres. Thus, the people of these districts were deprived of adequate healthcare facilities that may force them to either opt for private hospitals for treatment or to obtain treatment in congested facilities. Moving to private hospitals is a financial burden for the poor patients.

During joint visit of these DHs, Audit observed instances of highly congested wards and found patients accommodated on floor bed, two patients accommodated on one bed for transfusion of iron sucrose, as well as patients being accommodated in passage as shown in **Picture 1, Picture 2 and Picture 3**.

<sup>10</sup> Ahmedabad-2,530, Bhavnagar-709, Gandhinagar-415, Jamnagar-1,263, Junagadh-327, Kachchh-300, Patan-415, Rajkot-965, Surat-1,050, Vadodara-2,256 and Valsad-415



**Picture 1: Two patients accommodated on one bed for transfusion of iron sucrose at DH Dahod (21.05.2015)**



**Picture 2: Patients accommodated on floor at DH Surendranagar (06.05.2015)**



**Picture 3: A patient accommodated on the floor in passage at DH Palanpur (24.06.2015)**

The Chief District Medical Officers (CDMOs) stated (May-June 2015) that due to insufficient infrastructure, beds had been kept adjacent to accommodate more number of patients and arrangement of floor bed was done to give

treatment to patients in need. Audit appreciates the efforts of hospital authorities for providing treatment despite non-availability of vacant beds. However, the patients were highly vulnerable to getting hospital induced infection.

The ACS H&FWD in the exit conference stated (January 2016) that the increase in bed capacity was a continuous exercise and assured that requirement of beds in DHs in those districts where CH was not available would be assessed and needful would be done to prevent the instance of floor beds. It was further stated that budget provision had been made for construction of a new hospital at Dahod.

***The Government may note that 2.49 crore (41 per cent) of population are served by only 3,188 (23 per cent) beds in 22 districts. The Government may take steps to increase the bed capacity of DHs in the State as per IPH Standards in a systemic manner, so that the imbalance is rectified for affordable healthcare to the common man.***

- ***Creation of Infrastructure***

Project Implementation Unit (PIU), Gandhinagar and its district level offices are responsible for undertaking construction activities as well as repair and maintenance work in all Government Healthcare Institutions. During the period 2010-15, the PIU had funds of ₹ 732.64 crore including opening balance of ₹ 97.82 crore for creation of infrastructure. However, only ₹ 580.08 crore (79 per cent) have been expended as on March 2015. The details of physical achievement of PIU as against the works approved in respect of DHs<sup>11</sup> and CHs during 2011-15 is shown in **Table 6** below –

**Table 6: Physical achievement of PIU in respect of approved works as on 31 March 2015**

| Particulars  | Number of works |           |                 |            |  |                               |  |
|--------------|-----------------|-----------|-----------------|------------|--|-------------------------------|--|
|              | Approved        | Dropped   | At tender stage | Awarded    | Scheduled to be completed on or before 31 March 2015 | Completed as on 31 March 2015 | Percentage of works completed within stipulated time |
| 2010-11      | 82              | 06        | 17              | 59         | 59   | 43                            | 73   |
| 2011-12      | 164             | 16        | 63              | 85         | 85   | 54                            | 64   |
| 2012-13      | 69              | 06        | 35              | 28         | 27   | 15                            | 56   |
| 2013-14      | 14              | 00        | 07              | 07         | 01   | 01                            | 100  |
| 2014-15      | 18              | 00        | 15              | 03         | 01   | 01                            | 100  |
| <b>Total</b> | <b>347</b>      | <b>28</b> | <b>137</b>      | <b>182</b> | <b>173</b>   | <b>114</b>                    | <b>66</b>  |

(Source: Information furnished by PIU, Gandhinagar)

The table above shows that out of 347 works approved during the period 2010-15, work orders were issued for only 182 works (52 per cent). Out of these 182 works, 173 works were scheduled to be completed on or before 31 March 2015, however, only 114 works (66 per cent) could be completed within the stipulated time. Further, out of 315 works approved during 2010-13, 28 works (nine per cent) have been dropped and 115 works (37 per cent) were at tender stage.

Delay in execution of work by PIU had the following impacts on delivery of healthcare services in test-checked hospitals –

<sup>11</sup> It includes all work falling under Medical Services viz. District Hospital and Sub-District Hospital

- A work of refurbishing and reconstruction of civil and electrical work for addition and alteration of operation theatre block (B and C) in CH, Vadodara was awarded (January 2012) to an agency<sup>12</sup> at a tendered cost of ₹ 86.19 lakh. The work was to be completed by January 2013.

Audit observed that the agency had stopped (March 2014) the work after execution of the work worth ₹ 56.00 lakh due to change in structural design subsequently by PIU. Thereafter, no action was taken by the PIU to get the work completed resulting in difficulties in performing operations, as the Operation Theatre (OT) and ward of Orthopaedics wing were stationed in different buildings.

The PIU Vadodara stated (June 2015) that the work had been re-started and would be completed soon. However, the work had not been completed as of October 2015.

- Work of construction of new born intensive care unit (NICU) with 36 beds at CH Surat was awarded (July 2010) to an agency<sup>13</sup> at a tendered cost of ₹ 2.28 crore. The work was to be completed by July 2011. However, Audit observed that after executing work worth ₹ 2.18 crore, the work was stopped by the agency (March 2013) on its own without stating any reasons. This resulted in high congestion in the existing NICU as it had a capacity of 15 beds against which approximately 25 to 30 neonates were being either accommodated on additional beds or two neonates were being kept together on a single bed to provide medical aid, on regular basis.

The PIU Surat attributed (August 2015) the delay in completion of work to the agency and stated that the work had been restarted and would be completed soon. It was further stated that necessary action as per tender clause would be taken against the agency. However, the work had not been completed as of October 2015.

The ACS H&FWD in the exit conference stated (January 2016) that instruction would be issued to PIU for early completion of works.

- The guidelines of IPH Standards provide that for barrier free access to non-ambulant (wheel chair, stretcher), visually impaired and elderly persons, ramp and hand rail were required to be provided in each block of the hospital building. The guidelines further provide that the imaging department such as X-ray, CT Scan, Ultrasonography, etc, should be located at a place which is easily accessible to OPD, IPD and OT.

However, Audit observed that ramp and hand rail had not been provided in IPD in DH Dahod, DH Godhra and CH Surat. In DH Dahod, OT was located on the ground floor and the surgical ward was on first floor of the building without the facility of ramp and hand rail or lift. Attendants were seen lifting the patients on stretcher (**Picture 4**). In CH Surat, imaging department was located in the Administrative Block without any connectivity with IPD. Patients with oxygen support were seen approaching on stretcher under open sky to imaging department (**Picture 5**). The problem for the patients used to be aggravated during the rainy season.

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<sup>12</sup> M/s. Sarang Construction

<sup>13</sup> M/s Shreeji Krupa Buildcon Limited



Picture 4: Patient lifted on stretcher to cross stairs at DH Dahod (21.05.2015)



Picture 5: Patient on oxygen support approaching for Image at CH, Surat (08.07.2015)

Apart from patient's inconvenience, non-availability of ramp in IPD and ward may cause serious problems in the event of exigencies or natural calamity.

The Medical Superintendent, CH Surat stated (August 2015) that the proposal would be sent to PIU for creation of ramp and inter-connectivity between IPD and Imaging Department.

***Audit is of the view that the progress of infrastructural works may be geared up and needs of physically challenged patients may be taken care by constructing ramp and inter-connectivity between various departments.***

- ***Drugs and Equipment***

World Health Organisation (WHO) defined essential medicines as drugs that satisfy the healthcare needs of the majority of the population; they should therefore be available at all times in adequate quantity and in appropriate dosage forms, at a price the community could afford.

In this regard, it should be mentioned that the Central Medical Stores Organisation (CMSO) established (1978) in the State under Health and Family

Welfare Department is responsible for procurement, storage, distribution of medicines, surgical goods, medical equipment/instruments and insecticides to healthcare institutions of the State. With changes in the healthcare arena, there was a felt need of developing new as well as upgrading the existing functioning and processes of CMSO, and consequently develop an institution supported with necessary infrastructure to make the system responsive to meet the objectives of the universal health coverage. With the view to match the changing demands and pace of development in the sector, CMSO was transformed (July 2012) into Gujarat Medical Services Corporation Limited (GMSCL) as a company and was incorporated under Companies Act, for systematic procurement, inventory management, Management information system and to infuse professional management with establishment, development and strengthening the use of information technology in medical stores organisation. Prior to formation of GMSCL, the unspent funds with CMSO were required to be surrendered to the State Government. Details of funds placed at the disposal of CMSO/GMSCL for procurement of drugs and equipment and its utilisation thereof in respect of district level hospitals<sup>14</sup> during the period 2010-15 are given in **Table 7** below –

**Table 7: Availability of funds vis-à-vis its utilisation by CMSO/GMSCL**

| (₹ in crore) |                 |                |                       |                |                                   |                           |
|--------------|-----------------|----------------|-----------------------|----------------|-----------------------------------|---------------------------|
| Year         | Opening balance | Funds received | Total available funds | Funds utilised | Funds surrendered/closing balance | Percentage of utilisation |
| 2010-11      | Nil             | 25.48          | 25.48                 | 24.46          | 1.02                              | 96                        |
| 2011-12      | Nil             | 33.82          | 33.82                 | 32.80          | 1.02                              | 97                        |
| 2012-13      | Nil             | 37.98          | 37.98                 | 32.64          | 5.34                              | 86                        |
| 2013-14      | Nil             | 33.68          | 33.68                 | 28.91          | 4.77                              | 86                        |
| 2014-15      | 4.77            | 99.78          | 104.55                | 57.77          | 46.78                             | 55                        |
| <b>Total</b> |                 | <b>230.74</b>  |                       | <b>176.58</b>  |                                   |                           |

(Source: Information furnished by GMSCL)

The above table shows a reducing trend of utilisation of funds with respect to availability by CMSO and GMSCL during the period 2010-15. Though the percentage utilisation of funds by GMSCL was only 55 per cent against availability during the period 2014-15, the actual expenditure jumped almost 100 per cent in 2014-15 over the previous year's expenditure of ₹ 28.91 crore.

The main objective of GMSCL is to ensure timely and reliable supply of drugs and equipment throughout the year to healthcare institutions in the State by infusing professional management besides systematic procurement and inventory management. However, instances of non-availability of medicines and supply of medicines Not of Standard Quality (NSQ) were noticed in test-checked hospitals as discussed below, despite availability of sufficient funds.

- **Availability of medicines**

GMSCL has come up with a list of Essential Drugs (EDs) for the State of Gujarat containing a list of drugs that are to be procured and supplied to all healthcare institutions, irrespective of their inclusion in any other healthcare programme. This list is regularly updated by GMSCL. The ED list for 2014-15 contains 532 EDs and surgical items.

<sup>14</sup> CHs, DHs and Sub-District level hospitals

Ensuring the uninterrupted supply of EDs to hospitals plays a vital role in the delivery of quality healthcare services in hospitals. Hospitals submit online demand for drugs and medicines required during the ensuing year in the month of January every year. GMSCL consolidates demands and procures the same after following e-tender procedure. Medicines received from suppliers are stocked in GMSCL depots and subsequently distributed to various hospitals.

On scrutiny of stock register for medicines maintained in test-checked hospitals, it was observed that many EDs such as Amoxicillin, Chloroquine, Diclofenac Sodium, Hepatitis B Vaccine, Injection Ceftazimide, Insulin, Gentamicin eye drop, *etc.* were not available in the stock on regular basis. Availability of EDs as of August 2015 as against those indented by the test-checked hospitals for the year 2015-16 is shown in **Table 8** below –

**Table 8: Availability status of stock of EDs in the test-checked hospitals as on August 2015**

| Name of the hospital | Total EDs indented for the year 2015-16 (Items) | EDs not available as of August 2015 (Percentage) (Out of Col. 2) | EDs not available for one to two months (Out of Col.3) | EDs not available for two to four months (Out of Col.3) | EDs not available for more than four months (in percentage) |
|----------------------|---|--|--|---|---|
| 1                    | 2   | 3  | 4  | 5   | 6   |
| CH Bhavnagar         | 360   | 134(37)  | 21   | 16  | 97(27)  |
| CH Surat             | 483   | 125(26)  | 25   | 40  | 60(12)  |
| CH Vadodara          | 415   | 243(59)  | 49   | 68  | 126(30)   |
| DH Dahod             | 308   | 120(39)  | 21   | 16  | 83(27)  |
| DH Godhra            | 299   | 44(15)   | 08   | 02  | 34(11)  |
| DH Himatnagar        | 345   | 46(13)   | 24   | 05  | 17(05)  |
| DH Petlad            | 346   | 41(12)   | 18   | 06  | 17(05)  |
| DH Palanpur          | 366   | 109(30)  | 13   | 94  | 02(01)  |
| DH Surendranagar     | 324   | 48(15)   | 20   | 08  | 20(06)  |
| DH Vadodara          | 341   | 258(76)  | 19   | 11  | 228(67)   |

(Source: Information furnished by test-checked hospitals)

The table above shows that 12 to 76 *per cent* of EDs indented by the test-checked hospitals were not available as on August 2015. The situation was alarming in DH Vadodara as 67 *per cent* of EDs were not available for more than four months and consequently the patients were forced to purchase medicines from the open market.

The hospital authorities attributed (May-August 2015) the reasons for stock-out of medicines due to delay in supply of medicines by GMSCL and stated that essential medicines for IPD were being purchased by the hospitals locally, in case of need. The General Manager, GMSCL accepted (September 2015) the delay in supply of medicines to the hospitals and stated that drugs procurement policy was being modified to ensure uninterrupted supply of medicines to hospitals. It was further stated by the GMSCL that the indents would be called for from the hospitals in the month of November instead of January and the availability of essential medicines in the hospitals would be monitored online and the supply of medicines would be ensured before exhaustion of stock.

The ACS H&FWD in the exit conference stated (January 2016) that necessary actions were being taken by GMSCL for supply of quality medicine on continuous basis. It was further stated that construction of six new depots of GMSCL had been planned for early supply of medicines to the hospitals.

**The GMSCL may evolve a proper mechanism to ensure uninterrupted supply of quality medicines to hospitals to prevent instances of non-availability of stock.**

• **Supply of Not of Standard Quality (NSQ) medicines to hospitals**

To ensure the quality of medicines supplied to healthcare institutions, the State Government issued (July 2010) instructions for pre-dispatch testing of medicines from Food and Drug Laboratory, Vadodara. The samples are to be taken from each batch of medicines and send to the laboratory for testing the quality. The medicines of the batch with confirmed quality as per test report was to be released to healthcare institutions. It was also mentioned therein that the testing of each batch of medicines should be ensured in next three years.

GMSCL supplied medicines to healthcare institutions through five depots<sup>15</sup>. However, Audit observed that pre-dispatch testing of samples was not done by four out of five (except Adalaj) depots till March 2015. It was also observed that the medicines were supplied to healthcare institutions before receipt of pre-dispatch testing reports. Apart from pre-dispatch testing, samples are also taken from hospitals to assure quality of drugs under Drugs and Cosmetics Act, 1940.

On scrutiny of records of GMSCL, it was observed that 495 out of 13,509 samples of different medicines sent for pre-dispatch testing during 2010-15 were reported as NSQ. Similarly, 389 out of 3,325 samples (obtained from the hospitals) sent for testing under Drugs and Cosmetics Act, 1940 were reported as NSQ. Instances of receipt of NSQ medicines and subsequent issue to the patients were noticed in test-checked hospitals. From the records of the test-checked hospitals, it was observed that some of the essential as well as life saving drugs such as Injection Ampicilin, Injection Iron sucrose, Injection Gentamycin, Tablet Paracetamol, Diclofenac Sodium, Injection Oxytocin, etc. were reported as NSQ and majority of the quantity of these NSQ medicines were issued to patients. The details of receipt and issuance of NSQ medicines to the patients in test-checked hospitals during the period 2010-15 is shown in **Table 9** below –

**Table 9: Receipt and issuance of NSQ medicines in test-checked hospitals**

| Name of the Hospital | Number of batches of NSQ medicines received | Number of batches of NSQ medicines not consumed | Percentage of quantity of medicines <sup>16</sup> consumed out of the batches reported NSQ |                   |              | Percentage of batches of NSQ medicines fully consumed (Col.6/Col.2)*100 |
|----------------------|---|---|--|-------------------|--------------|---|
|                      |   |   | Upto 50 per cent   | 51 to 99 per cent | 100 per cent |   |
| 1                    | 2   | 3   | 4  | 5                 | 6            | 7   |
| CH Bhavnagar         | 23  | 01  | 01   | 05                | 16           | 70  |
| CH Surat             | 66  | 05  | 09   | 04                | 48           | 73  |
| CH Vadodara          | 52  | 01  | 12   | 04                | 35           | 67  |
| DH Dahod             | 55  | 11  | 22   | 08                | 14           | 25  |
| DH Godhra            | 58  | 07  | 05   | 03                | 43           | 74  |
| DH Himatnagar        | 41  | 03  | 08   | 08                | 22           | 54  |
| DH Petlad            | 15  | 06  | 05   | 01                | 03           | 20  |
| DH Palanpur          | 30  | 06  | 09   | 05                | 10           | 33  |
| DH Surendranagar     | 30  | 05  | 06   | 04                | 15           | 50  |
| DH Vadodara          | 29  | 03  | 09   | 02                | 15           | 52  |
| <b>Total</b>         | <b>399</b>                                  | <b>48</b>                                       | <b>86</b>  | <b>44</b>         | <b>221</b>   | <b>55</b>   |

(Source: Information furnished by test-checked hospitals)

<sup>15</sup> Adalaj, Amreli, Jamnagar, Patan and Surat

<sup>16</sup> Tablets/Capsules, Injection, Miscellaneous, Surgical and Dressing

The above table shows that the test-checked hospitals had issued NSQ medicines to the patients. Further, 221 batches out of 399 batches (55 per cent) of NSQ medicines received by these test-checked hospitals were fully utilised by issuing to the patients due to delay in receipt of testing report (of around four months to one year) from the date of supply of medicines.

Supply and issue of NSQ medicines is a serious concern as the medicines given to the patients may be less effective or ineffective. Besides, the public would lose the trust bestowed on Government hospitals.

The General Manager GMSCL accepted (September 2015) the facts and stated that pre-dispatch testing was now being done at all depots since July 2015 and two private laboratories had also been engaged for testing the samples to get the testing report in time.

The ACS H&FWD in the exit conference stated (January 2016) that the issue was of great concern and many measures such as making it mandatory for supplier to enclose laboratory test certificate with each and every batch of medicine, empanelment of two more laboratories for pre-dispatch testing, 100 per cent and 25 per cent pre-dispatch testing from Adalaj depot and other depots respectively, etc. had been initiated. It was further stated that all possible efforts would be made to prevent supply of NSQ medicines.

***The challenge however lies in cutting down the time consumed for testing of sample medicines, both pre-dispatch and hospital-supplies. The Government may prescribe the time to be taken in testing of medicines and the GMSCL should ensure strict compliance to the same and replace the NSQ medicines forthwith. Punitive action against errant suppliers of NSQ medicines needs to be taken so as to ensure deterrence.***

- ***Storage of Medicines***

To sustain effectiveness of drugs, proper infrastructural facility is required in every hospital to store the drugs in prescribed manner. Audit observed that the storage facility and its management were satisfactory in test-checked hospitals except in DH Godhra and DH Dahod. In DH Godhra, the store room was in a dilapidated condition and medicines were exposed to rain whereas in DH Dahod, there were only two small refrigerators to preserve the injections. Injections instructed to be stored in a cool place (two to eight degree celsius) were kept outside, as both refrigerators were filled with Anti-Rabies Serum/Anti-Snake Serum/Anti-Tetanus Serum, etc.

The CDMO DH Dahod stated (June 2015) that new refrigerators would be procured and provided to pharmacy department for storage of drugs.

The ACS H&FWD in the exit conference stated (January 2016) that instructions would be issued to head of all DHs for proper upkeep of medicines.

***The hospital authorities should make necessary arrangements forthwith for storing medicines in prescribed manner for maintaining their effectiveness.***

## **2.1.8 Core Services**

### **2.1.8.1 OPD and IPD Services**

#### **(1) Registration of Patients**

Registration of patients is the first step for getting healthcare facilities in hospitals. Around 400 to 600 patients visit each DH and around 800 to 2,000 patients visit each CH daily. There were two counters in each of the test-checked DHs except DH Vadodara<sup>17</sup> and eight to eleven counters in each of the test-checked CH for registration of patients. During joint field visit of registration counters in the test-checked hospitals, Audit observed long queues of patients in front of registration counters (**Picture 6 and 7**). Based on the information furnished to Audit, it was observed that patients had to wait for one to two hours for getting themselves registered. These facts indicated that the number of counters were not sufficient to handle the volume of work.



**Picture 6: Registration Counter in CH Surat (07.07.2015)**



**Picture 7: Registration Counters in DH Palanpur (25.06.2015)**

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<sup>17</sup> Five counters were available to register 800-900 patient daily in DH Vadodara

Apart from insufficient counters, Audit observed that there was no facility of ceiling fans in the public area of registration counter in DH Palanpur and the registration counters in DH Dahod was in open area without any roof.

Hospital authorities stated (May-July 2015) that efforts would be made to provide better facilities.

The ACS H&FWD in the exit conference stated (January 2016) that instructions would be issued to head of all DHs for proper arrangement for early registration of patients.

## (2) Availability of Specialist Services

Guidelines of IPH Standards provide that each DH should provide essential specialist services called minimum assured services such as General Medicine, General Surgery, Obstetrics and Gynaecology, Paediatrics, Anaesthesia, Ophthalmology, Orthopaedics, ENT, Radiology, etc.

Audit observed that specialist services of all aforesaid departments had been established in all test-checked CHs. However, as discussed in paragraph 2.1.7.1, due to 55 per cent vacancy in the post of specialist doctors against sanctioned posts in test-checked DHs, some of the specialist services were either partially available (three hours daily specialist service under CM Setu scheme or doctors hired through Rogi Kalyan Samiti) or not available at all. Availability of specialist services in test-checked DHs are shown in **Table 10** below –

**Table 10: Availability of specialist services in test-checked DHs as on 31 March 2015**

| Sr. No. | Name of DHs   | Services partially available                                  | Services not available                          |
|---------|---------------|---|---|
| 1.      | Dahod         | ENT   | -----   |
| 2.      | Godhra        | General Medicine, Obstetrics and Gynaecology                  | Orthopaedics, ENT and Radiology                 |
| 3.      | Himatnagar    | -----   | Radiology                                       |
| 4.      | Palanpur      | Radiology   | -----   |
| 5.      | Petlad        | Paediatrics, ENT and Orthopaedics                             | General Medicine, General Surgery and Radiology |
| 6.      | Surendranagar | Obstetrics and Gynaecology, Paediatrics, ENT and Orthopaedics | General Medicine, Anaesthesia and Radiology     |
| 7.      | Vadodara      | ----  | Radiology                                       |

(Source: Information furnished by test-checked DHs)

The above table shows that the situation in DH Surendranagar, DH Petlad and DH Godhra was very deplorable as most of the essential services were either partially available or were not available. Further, regular service of radiology was not available in any of the test-checked hospitals except DH Dahod.

The hospital authorities stated (May-July 2015) that services were not available due to vacant posts of Specialist Doctors.

The ACS H&FWD in the exit conference stated (January 2016) that Specialist Doctors were appointed under CM Setu and other state flagship programmes to render the service. However, efforts would be made for providing essential specialist services on 24X7 basis in all DHs.

***The Government may take action to post at least one Specialist Doctor in each department at all DHs to make services of Specialist Doctors available to the patients.***

**(3) Patient care in OPD and IPD**

Audit observed non-compliance of various norms prescribed under IPH Standards and National Rural Health Mission (NRHM) guidelines on quality assurance as discussed below -

- In CH Bhavnagar, CH Surat and DH Palanpur, there was only one examination table and one X-ray viewer for four to five patients.
- In DH Dahod, separate male and female wards were not available. Further, wards were highly congested in all test-checked DHs due to presence of high number of attendants.
- Toilets attached with female ward in DH Surendranagar and toilets attached with orthopaedic ward in DH Dahod were non-functional. Patients expressed difficulties due to non-functional toilets.

**2.1.8.2 Accident, Emergency and Trauma Care Services**

The guidelines of IPH Standards provide that each DH should have Accident and Emergency Services, with distinct entries. The emergency department should be equipped with life saving instruments such as Ventilator, Multi-parameter monitor, Cardiac monitor with defibrillator, *etc.* to treat accidental and emergency cases effectively.

Audit observed that -

- Emergency department and Trauma care centre are available in all the three test-checked CHs.
- Out of seven test-checked DHs, Accident and Emergency services were not available in DH Dahod, DH Petlad and DH Vadodara.
- Emergency department was operational in DH Godhra and DH Surendranagar. However, the hospitals were not equipped to deal with emergency cases due to non-availability of regular services of specialist doctors of medicine, orthopaedics, *etc.* Even essential equipment such as ventilator, cardiac monitor, *etc.* were not available with the departments.
- Trauma Care Centres were to be established to provide intensive medical services at nearest place to the victims during highway accidents and utilise golden hours of the treatment to save precious life of the victims. In the State, 18 trauma care centres have been established and are functional. However, Audit observed that there were no trauma care centres on National Highway No. 59 connecting Ahmedabad to Indore which passes through Godhra and Dahod districts. Non-availability of trauma care centre coupled with inefficient accident and emergency services in DH Godhra and DH Dahod jeopardises the life of accident victims.
- A trauma care centre constructed (2008) at a cost of ₹ 1.92 crore at CH Bhavnagar was functional and 31,852 patients have been treated there upto February, 2012. Thereafter, service of trauma centre was discontinued due to non-availability of doctors and supporting staff.

The building was being utilised by shifting other departments. Thus, the very objective behind establishment of trauma care centre got defeated.

The Government stated (December 2015) that necessary steps are being taken to equip all hospitals with all necessary life saving instruments in phased manner to ensure adequate emergency, accident and trauma care services. As regards trauma care centre at CH Bhavnagar, the ACS H&FWD in the exit conference stated (January 2016) that the matter would be reviewed and necessary action would be taken to make the trauma care centre functional.

### 2.1.8.3 Intensive Care Unit

The guidelines of IPH Standards provide that each DH should have an Intensive Care Unit (ICU) to attend critically ill patients such as major medical and surgical cases, head injuries, severe haemorrhage, *etc.*, requiring highly skilled life saving medical aid and nursing care. The guidelines of IPH Standards further provide that the number of beds may be restricted initially to five *per cent* of the total bed capacity of the hospital and gradually expanded to 10 *per cent*. Life saving equipment such as High End Monitor (HEM), Ventilator, and Thrombosis Prevention Device (TPD), Oxygen therapy for each bed and common Ultrasound (USG) and Defibrillator are essential to save critical patients. The availability of equipment and efficacy of ICU in test-checked hospitals are shown in **Table 11** below –

**Table 11: Availability of equipment and efficacy of ICU in test-checked hospitals as on 31 March 2015**

| Name of the Hospitals | Number of beds                     |                |                  |                        | Fully equipped ICU beds | Availability of equipment (NA= Not available) |            |     |        |     |               |
|-----------------------|------------------------------------|----------------|------------------|------------------------|-------------------------|---|------------|-----|--------|-----|---------------|
|                       | Beds required as per IPH Standards | Beds available | Shortage of beds | Percentage of shortage |                         | HEM   | Ventilator | TPD | Oxygen | USG | Defibrillator |
| CH Bhavnagar          | 35                                 | 11             | 24               | 69                     | 05                      | 24  | 05         | NA  | YES    | YES | YES           |
| CH Surat              | 52                                 | 30             | 22               | 42                     | 27                      | 27  | 31         | YES | YES    | YES | YES           |
| CH Vadodara           | 75                                 | 36             | 39               | 52                     | 09                      | 09  | 20         | NA  | YES    | NA  | YES           |
| DH Dahod              | 08                                 | 05             | 03               | 38                     | Nil                     | NA  | NA         | NA  | YES    | NA  | YES           |
| DH Godhra             | 10                                 | 02             | 08               | 80                     | 01                      | 01  | 02         | NA  | YES    | NA  | YES           |
| DH Himatnagar         | 10                                 | 10             | -                | -                      | 02                      | 02  | 02         | YES | YES    | NA  | YES           |
| DH Petlad             | 10                                 | NA             | NA               | 100                    | NA                      | NA  | NA         | NA  | NA     | NA  | NA            |
| DH Palanpur           | 10                                 | 02             | 08               | 80                     | 01                      | 01  | 01         | YES | YES    | NA  | YES           |
| DH Surendranagar      | 08                                 | NA             | NA               | 100                    | NA                      | NA  | NA         | NA  | NA     | NA  | NA            |
| DH Vadodara           | 10                                 | NA             | NA               | 100                    | NA                      | NA  | NA         | NA  | NA     | NA  | NA            |

(Source: Information furnished by test-checked hospitals)

The above table shows that ICU was not available in three out of seven test-checked DHs. In the remaining four DHs, the shortage of beds as compared to IPH Standards ranged from 38 to 80 *per cent* and only one or two beds were fully equipped with life saving equipment to handle critical cases. The position was also very deplorable even in CHs, as only five out of 11 beds and nine out of 36 beds in CH Bhavnagar and CH Vadodara respectively were fully equipped with life saving equipment.

Audit observed that -

- In DH Surendranagar, a new block was constructed (February 2012) for establishment of ICU at a cost of ₹ 69.85 lakh and four Multi-parameter monitors were procured (November 2011) at a cost of ₹ 9.78 lakh for

use in the ICU. However, Audit observed that the ICU was not operational (May 2015) due to vacant posts of physicians, Orthopaedic Surgeons, etc.

- In CH Surat, a new Medical Intensive Care Unit (MICU) of 12 beds constructed (January 2013) at a cost of ₹ 55.65 lakh alongwith necessary medical fittings and equipment such as medical gas pipeline, bed head panel, ICU beds, 12 ventilators costing ₹ 99.29 lakh was found non-operational due to shortage of nursing staff and other supporting staff since its establishment (**Picture 8**).



**Picture 8: A well equipped MICU lying non-operational at CH Surat (21.07.2015)**

The Medical Superintendent, CH Surat stated (August 2015) that demand for additional staff had been submitted (April 2014) to the Government for making the MICU operational.

***The Government may review the availability of emergency departments and ICUs functioning in all district level hospitals and take necessary measures to establish these units to deal with critical cases effectively wherever they are deficient.***

The ACS H&FWD in the exit conference agreed (January 2016) to the recommendation and stated that Government would review the functioning of ICUs in all district level hospitals and necessary action would be taken to strengthen these units to deal with critical cases effectively.

#### ***2.1.8.4 Maternal, Child and Neo-natal Healthcare Services***

Reducing the maternal and infant mortality is a key goal of Reproductive and Child Health Programme under the National Rural Health Mission. Government of India launched (June 2011) Janani Sishu Suraksha Karyakaram (JSSK) to assure free services to all pregnant women and sick neonates accessing public health institutions. The JSSK guidelines state that about 67,000 women in India die every year due to pregnancy related complications. Similarly, nine lakh newborns die within the first four weeks of birth. Thus, first 28 days of infancy are very important and critical for survival of new-born children.

The details of births, neo-natal and maternal deaths in test-checked hospitals during the period 2010-15 are shown in **Table 12** as below –

**Table 12: Details of births, neo-natal and maternal deaths in test-checked hospitals during 2010-15**

| Name of Hospitals | Number of births | Number of neonatal deaths | Neo-natal death rate (per 1,000 live births) | Number of maternal deaths | Maternal Mortality Rate (per one lakh live births) |
|-------------------|------------------|---------------------------|--|---------------------------|--|
| CH Bhavnagar      | 15,213           | 366                       | 24   | 23                        | 151  |
| CH Surat          | 33,077           | 712                       | 22   | 174                       | 526  |
| CH Vadodara       | 22,845           | 1,887                     | 82   | 197                       | 862  |
| DH Dahod          | 18,223           | 166                       | 09   | 35                        | 192  |
| DH Godhra         | 2,461            | 10                        | 04   | 01                        | 41   |
| DH Himatnagar     | 2,839            | 265                       | 93   | 13                        | 458  |
| DH Petlad         | 4,246            | 02                        | 01   | 01                        | 23   |
| DH Palanpur       | 1,885            | 91                        | 48   | 12                        | 637  |
| DH Surendranagar  | 844              | 06                        | 07   | 00                        | 00   |
| DH Vadodara       | 14,400           | 10                        | 01   | 01                        | 07   |

(Source: Information furnished by test-checked hospitals)

The above table shows higher neo-natal deaths in CH Vadodara, DH Himatnagar and DH Palanpur, and higher Maternal Mortality Rate (MMR) in all CHs, DH Palanpur and DH Himatnagar as compared to the State Infant Mortality Rate (IMR) and MMR mentioned in **Table 1** which stand at 41 and 122 respectively. The high mortality rates in hospitals indicate that hospitals are not well equipped to deal with critical cases.

The hospital authorities stated (May-July 2015) that despite making best efforts, neonates and mothers could not be saved as they were brought to the hospitals at an advanced stage of deterioration. The fact remains that the number of deaths registered in hospitals was on higher side as compared to the State average. Further, as discussed in preceding paragraphs, lack of facilities in ICU and non-availability of regular specialist doctors resulted in poor quality of maternal healthcare services in the hospitals which require to be strengthened in order to achieve the goal of reducing maternal and infant mortality as envisaged in JSSK guidelines.

The ACS H&FWD in the exit conference stated (January 2016) that Government was keen to improve the maternal, child and neonatal healthcare and all necessary steps would be taken for its betterment.

Audit further observed that –

- In DH Surendranagar, the posts of Gynaecologist and Paediatrician were lying vacant since November 2011. Resultantly, average delivery cases in a month was less than 15, as people hesitated to come for institutional delivery in the hospital.
- Maternity ward of CH Surat was highly congested and patients were found lying on the floor (**Picture 9**).



**Picture 9: Patients found lying on the floor in the maternity ward of CH Surat (08.07.2015)**

The hospital authority attributed (July 2015) the reasons of less availability of beds in maternity ward for accommodation of patients on the floor. However, Audit is of the view that the State Government may take urgent actions for enhancing the bed capacity in the maternity ward to avoid neonatal and maternal deaths on account of infections.

- Important equipment such as Incubator, Ventilator, Baby Cardiac Monitor, *etc.* to handle critical cases were not available in any of the test-checked DHs.
- As per provisions of JSSK guidelines, mother and new born child should be kept under medical observation for 48 hours in case of normal delivery. However, Audit observed at DH Dahod, DH Godhra, DH Palanpur and CH Surat that the mother and new born child were being discharged on the same day or before 48 hours.

The CDMO, DH Dahod stated (June 2015) that one of the reasons for early discharge of patients was shortage of beds in maternity ward. The hospital authorities of other DHs and CHs stated (May-July 2015) that patients were discharged on their own request.

#### **2.1.8.5 Special Newborn Care Unit**

Special Newborn Care Unit (SNCU) is meant to provide medical treatment for child born prematurely (born before 37 weeks of pregnancy), having low birth weight or have a medical condition that requires special care. The SNCU facilities provided controlled environment, individual warming and close monitoring devices, intravenous fluid and medications by infusion pump, central oxygen, oxygen generators, bedside procedures, *e.g.* resuscitation and exchange transfusion, portable x-ray, and in-house side laboratory services.

The guidelines of IPH Standards envisage that SNCU should have at least 12 beds alongwith facility of day and night shelter for mothers of neonates. The SNCU should be well equipped with all required equipment and should be kept dust free.

Audit observed that -

- The SNCU was established in all test-checked DHs (except DH Surendranagar). However, the number of beds available in each of the test-checked DHs was only five to six.
- In DH Surendranagar, it was observed that the bed procured for child care was lying idle due to non-establishment of SNCU (**Picture 10**).



**Picture 10: SNCU bed lying idle at DH Surendranagar (15.05.2015)**

The CDMO DH Surendranagar stated (August 2015) that SNCU was not set-up in the DH due to vacant posts of Gynaecologist and Paediatrician.

- Due to shortage of beds, an instance of two neonates accommodated on one bed was noticed at DH Palanpur (**Picture 11**).



**Picture 11: Two neonates accommodated on one SNCU bed in DH Palanpur (25.06.2015)**

Further, a neonatal ventilator purchased (June 2014) by DH Palanpur at a cost of ₹ 14.18 lakh for maintaining physiologic normalcy of infants was found lying idle due to non-availability of centralised oxygen supply in SNCU (**Picture 12**). Lack of action on the part of the hospital authorities resulted in idling of the equipment and deprivation of intended treatment to the neonates.



**Picture 12: Neonatal Ventilator lying idle in DH Palanpur (25.06.2015)**

The CDMO, DH Palanpur stated (June 2015) that demand for more beds in SNCU would be placed to Government and necessary action would be taken to use the Neonatal Ventilator.

- Facility of day and night shelter for mothers of neonates kept in SNCU was not available at DH Himatnagar and DH Dahod.
- In all test-checked DHs, there was shortage of important equipment such as Infantmeter, spot lamp, Portable X-ray, cardiac monitor, *etc.* Further, equipment for disinfection such as electronic fumigator, disinfectant sprayer, formalin vaporizer, *etc.* were also not available in any of the test-checked DHs.

***The Government may strengthen the maternal and child health departments in all hospitals by deploying specialist doctors and providing requisite equipment and adequate number of beds, to prevent the stage of advanced deterioration which ultimately leads to higher IMR and MMR.***

The ACS H&FWD in the exit conference agreed (January 2016) to the recommendation and stated that Government is keen to improve the maternal child and neonatal healthcare and all necessary steps would be taken for betterment.

### ***2.1.9 Essential component to complement Core Services***

#### ***2.1.9.1 Diagnosis Service***

Laboratory diagnostic service is required for providing effective diagnosis of the disease suffered by the patient, measure the quantum of medicines to be provided, quantify the extent of cure effected, identify the medical sensitivities of the patient to avoid wrong/under/over medication resulting in adverse effects and to extend the research and development capabilities of the medical process. The guidelines of IPH Standards envisage that each district hospital laboratory should be able to perform all tests required to diagnose epidemics or important diseases from the view point of public health. The details of availability of diagnosis services as per IPH Standards in test-checked hospitals are shown in **Table 13** as follows–

**Table 13: Availability of diagnosis service in test-checked hospitals as on 31 March 2015**

| Name of the hospitals | Availability of diagnosis services |  |               |               |         |               |     |           |
|-----------------------|------------------------------------|--|---------------|---------------|---------|---------------|-----|-----------|
|                       | Clinical pathology                 | Haematology Bone Marrow/ Sickle Cell Anaemia/ Thalesemia | Micro-Biology | Bio-chemistry | Cardiac | Ophthalmology | ENT | Endoscopy |
| CH, Bhavnagar         | Yes                                | Partial  | Yes           | Partial       | Yes     | Yes           | Yes | Yes       |
| CH, Surat             | Yes                                | Partial  | Yes           | Partial       | Yes     | Yes           | Yes | Partial   |
| CH, Vadodara          | Yes                                | Partial  | Yes           | Partial       | Yes     | Yes           | Yes | Yes       |
| DH, Dahod             | Yes                                | Partial  | Partial       | Partial       | No      | Yes           | No  | No        |
| DH, Godhra            | Yes                                | Partial  | Yes           | Partial       | No      | Yes           | No  | No        |
| DH, Himatnagar        | Yes                                | Partial  | Yes           | Partial       | Yes     | Yes           | Yes | No        |
| DH, Petlad            | Yes                                | Partial  | Yes           | Partial       | No      | Yes           | No  | No        |
| DH, Palanpur          | Yes                                | Partial  | Partial       | Partial       | No      | Yes           | No  | No        |
| DH, Surendranagar     | Yes                                | Partial  | Yes           | Partial       | Yes     | Yes           | No  | No        |
| DH, Vadodara          | Yes                                | Partial  | Yes           | Partial       | No      | Yes           | No  | No        |

(Source: Information furnished by test-checked hospitals)

The above table shows that most of the pathological tests except few were available in all test-checked hospitals. However, facility of advance tests related to Cardiac, ENT or Endoscopy was available in only a few of the test-checked DHs and CHs.

Audit further observed -

- Shortage of important equipment such as Electrolyte Analyzer, Haematology Analyzer, Infant Glucometer, *etc.* in the diagnosis laboratory of all test-checked DHs.
- The guidelines of IPH Standards envisage separate areas for sample collection, sample processing, haematology, bio-chemistry, clinical pathology and reporting, *etc.* However, Audit observed at DH Dahod and DH Palanpur that collection and processing of samples were being done in one room in contravention to the provisions of guidelines of IPH Standards.

The ACS H&FWD in the exit conference stated (January 2016) that the State Government was going to launch free Laboratory Nidan Yojana for providing diagnosis services in all DHs. It was further stated that procurement of important equipment under this scheme by GMSCL was under process.

#### 2.1.9.2 Imaging Services

The guidelines of IPH Standards provide that each DH should have imaging facilities such as X-ray, Portable X-ray, two Ultra Sonography (USG) - one for gynaec and one for others patients, C.T Scan, Mass Miniature Radiography (MMR) for chest and Barium Meal Test (BMT), *etc.* Details of availability of imaging services in test-checked hospitals are shown in **Table 14** as follows –

**Table 14: Availability of Imaging Services in test-checked hospitals as on 31 March 2015**

| Name of the hospitals | X-ray | Portable X-ray | USG    |        | CT Scan | MMR | BMT |
|-----------------------|-------|----------------|--------|--------|---------|-----|-----|
|                       |       |                | Gynaec | Others |         |     |     |
| CH, Bhavnagar         | Yes   | No             | Yes    | Yes    | Yes     | No  | No  |
| CH, Surat             | Yes   | No             | Yes    | Yes    | Yes     | No  | No  |
| CH, Vadodara          | Yes   | No             | Yes    | Yes    | Yes     | No  | No  |
| DH, Dahod             | Yes   | No             | Yes    | Yes    | No      | No  | No  |
| DH, Godhra            | Yes   | No             | Yes    | Yes    | No      | No  | No  |
| DH, Himatnagar        | Yes   | No             | No     | No     | No      | No  | No  |
| DH, Petlad            | Yes   | No             | Yes    | Yes    | No      | No  | No  |
| DH, Palanpur          | Yes   | No             | Yes    | Yes    | Yes     | No  | No  |
| DH, Surendranagar     | Yes   | No             | No     | No     | No      | No  | No  |
| DH, Vadodara          | Yes   | No             | Yes    | No     | No      | No  | No  |

(Source: Information furnished by test-checked hospitals)

The above table shows that the facilities of Portable X-Ray, CT Scan (except three CHs and DH Palanpur), MMR and BMT were not available in any of the test-checked hospitals, as a result, the patients had to approach outside agencies for the tests.

Audit further observed that –

- In DH Palanpur, a CT scan machine purchased (June 2014) for Trauma Care Centre was being utilised without a Radiologist. The images taken by the technician were being sent to Medical College, Jamnagar for opinion. Till date (August 2015), 153 tests had been carried out since its installation. However, a CT scan machine purchased (March 2004) at DH Himatnagar at a cost of ₹ 92.86 lakh is lying idle since January 2014 due to vacancy of a Radiologist (**Picture 13**) and in DH Dahod, a Radiologist is posted but no CT scan machine is available. The efforts made by DH Palanpur are highly appreciable and the same efforts could have been made by DH Himatnagar. The State Government could also utilise the services of the lone Radiologist posted at DH Dahod for DH Himatnagar.



**Picture 13: CT Scan machine lying idle at DH Himatnagar (01.09.2015)**

- In CH Surat, despite availability of CT scan machine and Radiologist, the patients (including BPL patients) were being sent outside for the tests.

The Medical Superintendent stated (July 2015) that as the machine was old (2007 model) and not of required capacity, the patients were being sent outside for the tests. It was further stated that a demand (February 2014) for supply of CT scan machine of 128 slide had been made to the Government, however, the same was awaited (July 2015).

- In DH Surendranagar, a CT scan machine imported (February 2006) at a cost of US\$ 1.97 lakh was found non-functional since January 2010 due to a fault in the X-ray Tube of the machine. The hospital could obtain only 10 images since its installation. The manufacturer company submitted (August 2010) a quotation of ₹ 28.00 lakh for replacement of X-ray Tube. However, the machine could not be repaired and the State Government subsequently accorded (August 2014) permission to condemn the machine. Thus, the machine procured was not optimally utilised and was lying idle for want of repair besides depriving the patients of the facility who were forced to get the tests done from outside.
- Atomic Energy Regulatory Board (AERB) guidelines (August 2004) on licensing of X-ray units stipulate that licence for operating radiation installation be obtained and the X-ray units ensure adherence to prescribed safety standards, availability of appropriate radiation monitors and dosimeter devices for radiation surveillance.

Audit observed at CH Bhavnagar, DH Dahod and DH Palanpur that the X-ray machine had been put into operation without obtaining licence from the competent authority. The technicians manning the X-ray units were not provided Thermo Luminescence Dosimeter (TLD) badges to indicate levels of exposure to radiation. In the absence of TLD badges and safety certification from the competent authority, Audit could not vouchsafe the reasonability of radiation levels the patients and technicians are exposed to.

- USG machine was not available in DH Himatnagar and DH Surendranagar. In DH Vadodara, USG available was not being utilised since January 2014 due to non-availability of a Radiologist.

The ACS H&FWD in the exit conference stated (January 2016) that the State Government had planned to provide CT scan machine/other imaging equipment of required capacity in all DHs through PPP mode in future.

***The Government may take initiatives to ensure availability of basic imaging facilities such as USG, CT scan and Portable X-ray machines in all DHs for early and proper diagnosis of diseases.***

### ***2.1.9.3 Blood Bank***

Blood Bank/storage centre is an essential element in the functioning of any hospital. The guidelines of IPH Standards provide that hospitals should follow standard operating procedures for management of blood bank services including policy on rational use of blood and blood products as promulgated by the Government. A Compliance Audit on “Functioning of blood banks” in the State was undertaken and findings thereof were incorporated in Paragraph 3.2

under Chapter - III (Compliance Audit) in the Report of the Comptroller and Auditor General of India (General and Social Sector) for the year ended March 2014 – Government of Gujarat.

Audit reviewed the functioning of blood banks (BBs) in test-checked DHs during this audit and following deficiencies were noticed -

- The facility of BB/Blood Storage centre was not available in DH Dahod and DH Petlad among the test-checked DHs. Non-availability of BB in DH Dahod was pointed out in earlier Audit, however, no corrective action have been initiated by the Department till December 2015. The CDMOs stated (May-July 2015) that in case of any need of blood, either the hospital arranged it from Red Cross Society or the patients arranged it themselves.
- Blood component separation facilities to separate whole blood into its constituent components such as red blood cells, platelets, plasma, *etc.* were available in all test-checked CHs. However, separation facility was not available in any of the test-checked DHs.
- In DH Palanpur, the licence of the BB was cancelled (August 2013) by the Commissioner, Food and Drugs Control Administration due to deficiencies noticed during inspection. The licence was renewed (March 2015), however, the BB remained non-functional as of June 2015 as requisite facilities were not made available by hospital authorities. Similarly, in DH Vadodara, the BB was non-functional since January 2015 under directives of the Commissioner, Food and Drugs Control Administration due to non-compliance of the prescribed standard. The CDMOs stated (June 2015) that the hospital arranged the required blood from BBs managed by Private Trusts and necessary action was being taken to make the BB operational.

The ACS H&FWD in the exit conference stated (January 2016) that BBs were available in most of the DHs. For DHs without BBs, an MoU had been made with the Indian Red Cross Society for supply of blood. However, necessary action would be taken to establish BB in all DHs and keep them functional.

***The Government may ensure availability of functional BB to provide quality blood and blood components to all who are in need of them.***

#### ***2.1.9.4 Operation Theatres***

The guidelines of IPH Standards provide that DHs should have minimum three Operation Theatres (OTs) equipped with all instruments, with departments of surgery, ICU, imaging, Central Sterile Supply Department (CSSD), *etc.* near to the OTs. It further provides that the OTs should have preparatory, pre-operative and post-operative resting rooms. However, Audit observed in test-checked hospitals that –

- OTs were functional and fumigated regularly in all test-checked hospitals.
- Pre-operative and post-operative rooms were not found in DH Dahod and the patients after surgery were being shifted from the OT to respective wards. Thus, the surgical patients were at risk of being infected.

- The guidelines of IPH Standards stipulate establishment of CSSD in each DH for sterilisation of equipment and implementation of standard operating procedure for transfer of unsterile and sterile equipment between CSSD and other departments. However, Audit observed that CSSD was not established in any of the test-checked DHs except DH Godhra and DH Himatnagar. In absence of CSSD, the equipment were sterilized in autoclave machines kept in the OTs.
- In CH Surat, the work of renovation, modification and construction of 24 OTs was completed by PIU at a cost of ₹ 15.66 crore and was handed over (October 2013) to the hospital authorities. However, Audit observed that eight OTs constructed at a cost of ₹ 3.04 crore have not been put to use even after a lapse of more than 18 months by hospital authorities from the date of taking possession, due to shortage of nursing and supporting staff (**Picture 14**). This resulted in idling of OTs despite incurring huge expenditure.



**Picture 14: Non-operational OT at CH Surat (25.07.2015)**

The Medical Superintendent, CH Surat accepted (July 2015) the fact and stated that demand for filling up 36 vacancies had been placed (November 2013) to the Government, however, the same was still awaited (July 2015).

The ACS H&FWD in the exit conference stated (January 2016) that action to fill the vacant posts had been initiated and OTs would be made operational immediately after filling-up these vacant posts.

### **2.1.10 Auxiliary and Supporting Services**

#### **2.1.10.1 Dietary service**

The dietary service of a hospital is an important therapeutic tool. The guidelines of IPH Standards envisage supply of diet to patients thrice a day. It further envisages that the food supplied should be patient specific such as diabetic, semi solid, liquid, *etc.* Audit observed that free of cost diet was being provided to all indoor patients in all test-checked hospitals, three times a day. However, hygiene in serving the diet was not being observed, as the cooks and serving staff were not wearing head masks, gloves, *etc.* during cooking and serving food to the patients as prescribed in the guidelines (**Picture 15 and 16**).



Picture 15: Food served to patients without gloves in DH Dahod (21.05.2015)



Picture 16: Food cooked without headmask in DH Dahod (21.05.2015)

The CDMOs of concerned DHs accepted that patient specific food was not being provided by the hospitals.

The Government stated (December 2015) that necessary instruction would be given to all DHs to ensure supply of quality hygienic food to all patients in the hospital.

***Audit appreciates the hospital authorities for providing free of cost food to IPD patients. However, Audit is of the view that the Government may ensure supply of patient specific food and maintenance of hygiene during cooking and serving of food.***

#### ***2.1.10.2 Rogi Kalyan Samiti (RKS)***

National Rural Health Mission (NRHM) envisages upgrading the healthcare institutions to IPH Standards by providing sustainable quality healthcare with total transparency, accountability and people's participation. To ensure a degree of permanence and sustainability, Rogi Kalyan Samiti (RKS) was established in all healthcare institutions. The main functions of RKS were to identify and redress the problems faced by patients and encouraging community participation in maintenance of hospitals. RKS receives funds in

the form of various grants from State and Central Government, by levying user charges for the services rendered to patients, donations, *etc.*

### (1) Redressal of problems

The issues such as non-availability of stock of medicines, non-availability of specialist doctors, lack of diagnostic services, *etc.* discussed in the preceding paragraphs were to be redressed by the RKSs. The details of patient specific issues and redressal thereof by RKS in test-checked hospitals are shown in **Table 15** below –

**Table 15: Redressal of patient specific issues by RKS in test-checked hospitals**

| Sr. No. | Issues  | Applicable to | Course of Action  | Initiatives taken by RKS   |
|---------|---|---------------|---|--|
| 1       | Non-availability of prescribed medicines                      | All hospitals | Provide medicines to the poor patients.                                   | Medicines were provided to poor patients in all hospitals.                   |
| 2       | Non-availability of diagnosis and imaging service             | All hospitals | Provide the services through outside Laboratories.                        | Provided to only poor patients in test-checked CHs.                          |
| 3       | Non-availability of specialist doctors                        | Only DHs      | Specialist doctors should be hired to bridge the gaps.                    | Few Specialist doctors were hired in test-checked DHs except in DH Vadodara. |
| 4       | Lack of Super-Specialist services                             | All hospitals | Super-specialist doctors should be hired for quality healthcare services. | Provided only in CH Surat.   |
| 5       | Non-availability of waiting sheds for patients and attendants | All hospitals | Construction of waiting sheds with sitting arrangements.                  | Was not provided in any of the test-checked hospitals                        |

The table above shows that RKS in the test-checked hospitals has made efforts for redressal of patient specific issues to some extent. However, they could be a little more proactive in addressing the patient specific issues such as hiring super-specialist doctors and providing sheds, *etc.* in hospitals where these services are deficient.

The Government stated (December 2015) that necessary instructions would be issued to the RKS of all DHs for becoming more proactive in redressal of patients specific issues.

#### 2.1.10.3 Referral System

##### (1) Efficacy of First Referral Unit

Community Health Centre (CHC) is the first referral unit to provide healthcare for cases referred from Primary Health Centres (PHCs) and for cases in need of specialist care approaching the CHC directly. During visit of 18 CHCs of nine test-checked districts, Audit observed that –

- Two CHCs<sup>18</sup> were functioning in a small and dilapidated building
- The guidelines of IPH Standards for CHC provide that each CHC should have five Specialist Doctors *viz.* Physician, General Surgeon, Obstetrician and Gynaecologist, Paediatrician and Anaesthetist besides two general duty Medical Officers. However, Specialist Doctors were not available in 11 out of 18 test-checked CHCs<sup>19</sup>.

<sup>18</sup> Ghoghamba and Ranagadh

<sup>19</sup> Ghogha, Ghoghamba, Kathor, Piluda, Ranagadh, Rupal, Sahera, Singwad, Savli, Suigam and Thangadh

- Laboratory and diagnosis services were found wanting on many counts in all test-checked CHCs.
- Facility of X-ray was not available in six CHCs<sup>20</sup>.
- Operation Theatre was not functional in four CHCs<sup>21</sup>.
- Facility of blood storage was not available in any of the CHCs.

The ACS H&FWD in the exit conference stated (January 2016) that continuous efforts were being made for upgradation of CHCs to deliver quality healthcare services.

### ***(2) Referral Management***

The quality assurance guidelines prescribe that when a patient is referred to a higher level hospital, the hospital authorities are required to inform in advance about the referral of the patients to the bigger hospital in order to enable them to avail better medical care. It further provides that the hospital authorities should follow-up with the treatment of the referred patient. However, Audit observed that this mechanism was neither developed nor followed in any of the test-checked DHs.

Further, all DHs were having ICU on wheels ambulance to refer critical patient to higher level hospitals with advance medical support. However, it was observed that a trained technician was not being sent with the ambulance to operate life saving instruments installed in the ICU on wheels. Thus, the very purpose of ICU on wheels got defeated.

The CDMO of DHs attributed (August 2015) the reasons of shortage of trained technicians with the hospital.

The ACS H&FWD in the exit conference stated (January 2016) that instructions would be issued to head of all DHs particularly those, which are at far distance from CH.

### ***(3) Ambulance facilities***

Availability of ambulance as per need is essential to refer patients to the higher level hospitals in time. Audit observed that each of the test-checked DHs was having a fleet of only two to three ambulances. For DH Dahod, DH Palanpur and DH Surendranagar, the tertiary care services being more than 100 Km. away, on referring patients to tertiary care hospitals, the ambulance used to return after a minimum of six hours. Thus, due to non-availability of adequate ambulance and tertiary care hospitals, patients or attendants of patients were being forced to arrange private ambulances.

The CDMOs stated (May-June 2015) that proposal for supply of two more ambulances had been sent to the Government but the same was still awaited (August 2015).

The Government stated (December 2015) that more ambulances would be made available to these hospitals in due course.

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<sup>20</sup> Ghoghamba, Kathor, Padra, Ranagadh, Sahera and Sayan

<sup>21</sup> Ghoghamba, Piluda, Ranagadh and Suigam

***The Government may take measures to provide Specialist Doctors, diagnosis and imaging facilities, OTs and Blood Storage facilities in all CHCs for better healthcare services. Further, adequate number of ambulances may be provided to those DHs which are situated far away from CH for timely referral of patients to tertiary care centres.***

#### ***2.1.10.4 Infection Control Management***

Guidelines of IPH Standards provide that each hospital should constitute an infection control team and develop Standard Operating Procedures (SOP) for aseptic procedures, culture surveillance and determination of hospital acquired infections. Apart from safe injection administration practices, safe disposal of bio-medical waste, general cleanliness and adoption of hygienic practices are important tools in prevention of infection.

Audit observed in test-checked hospitals that -

- Infection control team was not constituted in DH Dahod and DH Surendranagar to take preventive measures to control hospital acquired infection.
- In CH Surat, OPD of Medicine and OPD of Tuberculosis (TB) are located in front of each other in the same corridor. Similarly, in CH Vadodara, Chest and TB wards are functioning in the same hall without any separator. Such mismanagement on the part of hospital authorities makes the patients of chest ward highly vulnerable to TB viruses.
- In DH Surendranagar, patients suffering from infectious diseases were accommodated with other patients in the same ward. Thus, risk of infection spreading to other patients cannot be ruled out.
- In DH Godhra, washrooms for patients of female medical ward and female isolation wards were common which makes the patients highly vulnerable to getting infections from other patients.

The Government stated (December 2015) that guidelines had already been issued and necessary instructions would be issued to DHs for corrective actions.

***The heads of all district level hospitals may take measures to strengthen infection control management, through systemic reforms and implementing already available SOP on the matter.***

#### ***2.1.11 Patient Amenities and Citizen's Charter***

##### ***2.1.11.1 Sanitation and drinking water facilities***

Sanitation and drinking water facilities were available in all test-checked hospitals. However, upkeep and maintenance level was poor in DH Dahod, DH Godhra and DH Surendranagar.

##### ***2.1.11.2 Citizen's charter and Grievance Redressal System***

List of services available in the hospitals, user fees, signages, *etc.* were found displayed in all test-checked hospitals for the convenience of the patients. However, none of the test-checked hospitals had maintained a complaint

register. In absence of a complaint register, Audit could not ascertain the response of hospital administration to resolve the patient specific issues and grievances.

The Government stated (December 2015) that necessary instructions would be issued to all DHs to take requisite action immediately.

***Audit is of the view that though patient amenities have been provided to a great extent, however the area of concern highlighted above may be addressed in a time bound manner. Also, a complaint register at a convenient place should be maintained in all hospitals for the patients and their attendants, which should be reviewed by the head of the hospital regularly and periodically.***

### ***2.1.12 Quality Assurance and Monitoring***

The guidelines of IPH Standards advocate that hospitals should develop and implement standard operating procedures for the administrative and clinical processes to ensure quality of all services provided by the hospitals. The details of implementation of IPH Standard recommendations in test-checked hospitals are shown in **Table 16** as below –

**Table 16: Details of IPH Standards recommendations implemented in test-checked hospitals as on August 2015**

| <b>Sr. No.</b> | <b>Component</b>                              | <b>What IPH Standards says</b>  | <b>Implemented</b>  | <b>Not implemented</b>                                  |
|----------------|---|---|---|---|
| 1              | Check-list                                    | For proper monitoring and delivery of services, hospitals would develop and implement checklist for various processes viz. Housekeeping, Bio-Medical Waste, Surgical safety, etc.   | In all test-checked CHs and DH Palanpur.  | In any of the test-checked DHs (except in DH Palanpur). |
| 2              | Internal Audit                                | Internal audit of the services available in hospitals should be done on regular basis. Findings are to be discussed in meeting of hospital monitoring committee and take corrective action.                                   | In all CHs.   | In any of the test-checked DHs.                         |
| 3              | Medical Audit                                 | A medical audit committee shall be constituted in all hospitals. The committee shall select records of patient randomly. Records shall be evaluated for completeness against standard content format and clinical management. | In all CHs.   | In any of the test-checked DHs.                         |
| 4              | Mortality Review                              | Review of all mortality that occurs in hospitals shall be done on fortnightly basis. All maternal death in hospitals shall come under this purview.   | In all CHs.   | Only maternal death reviewed in all DHs.                |
| 5              | Hospital Management Information System (HMIS) | A standard format for capturing key performance indicators should be developed and reviewed regularly.  | HMIS was operative but deficient, as out of 30 modules, six to ten modules were not operational in any of the test-checked CHs and DHs. Thus, monitoring of the performance of hospitals was not adequate in the State. |   |

The above table shows that quality assurance and monitoring level was poor in all test-checked DHs. The CDMO of test-checked DHs stated (August 2015) that the prescribed procedures were not being followed due to shortage of manpower and heavy work load. However, Audit is of the view that these checks are prescribed to upgrade and improve the standards of healthcare services in the State and they need to be adhered to diligently.

The Government stated (December 2015) that instructions had been issued to all DHs to form medical audit committee and to review all mortality that occurred in the hospitals.

### 2.1.13 Other points of interest

(1) Government accorded (2010) sanction for setting-up a Stem cell therapy institute at CH Surat for treatment of genetic disorder disease. Accordingly, a stem cell laboratory was constructed (September 2013) at a cost of ₹ 1.27 crore and various equipment such as Microscope, Cell Centrifuge, Cryomade Freezer, etc. were procured at a cost of ₹ 33.16 lakh. However, the laboratory remained non-operational as of October 2015 due to non-availability of Flourescence Activated Cell Sorting (FACS) machine, a fundamental equipment of stem cell laboratory which allows rapid and accurate characterisation of stem cell population as well as isolation of rare stem cells or differentiated cells from contaminating cell populations.

The Government stated (December 2015) that construction of Stem Cell Therapy Institute was under progress.

(2) Audiometer, an equipment for ENT department, procured (June 2011) at a cost of ₹ 5.52 lakh each in DH Dahod and DH Palanpur was lying idle in the store despite availability of an ENT specialist in each of these hospitals (Picture 17).



Picture 17: Audiometer lying idle in the store room at DH Palanpur (25.06.2015)

The CDMO attributed (June 2015) non-availability of a sound proof room, for non-functioning of the machine.

The Government stated (December 2015) that the concerned CDMOs had been instructed to make sound proof room in the ENT Department.

#### **2.1.14 Conclusion and Recommendations**

The Performance Audit on “Delivery of Healthcare Services in Government Hospitals at District Level” revealed appreciable efforts of the Government in creation of infrastructure, supply of free medicines to all patients and diets to all indoor patients. However, following major deficiencies in delivery of healthcare services were noticed during the course of Audit which needs urgent attention of the State Government for remedial action –

- Health Department had prepared a five year plan for betterment of healthcare services in district level hospitals, however, the plan was not comprehensive as the current status of healthcare services of the hospital *vis-à-vis* the requirement as per IPH Standards was not identified. Further, the plan had no specific target and enshrined timeframe to achieve the targets.

***The timelines for all activities enshrined in the Five Year Plan prepared by the State may be fixed and progress against these be watched on a regular basis for ensuring that the targets set are achieved.***

- The sanctioned strength of all cadres of staff including doctors and nurses remains much below the IPH Standards. Shortage in manpower exclusively in the cadres of specialists and medical officers was noticed at State level as well as in test-checked hospitals. Specialist services of various departments were either not available or partially available in test-checked district hospitals.

***The Government may revise the sanctioned strength of DHs in the State as envisaged in the guidelines of IPH Standards and fill up the vacancies gradually, over a timely manner (say two-three years) to provide quality healthcare facilities to the public. At least one specialist doctor for each department may be posted to all DHs to facilitate specialist services to the patients.***

- Availability of beds in district hospitals was neither as per IPH Standards nor in consonance with the requirements. Resultantly, patients were seen lying on floor for treatment.

***The Government may take steps to increase the bed capacity of DHs in the State as per IPH Standards in a systemic manner, so that the imbalance is rectified for affordable healthcare to the common man.***

- Availability of essential drugs of standard quality in hospitals plays a vital role in the delivery of quality healthcare services. Instances of stock out of number of essential medicines, non-testing of samples and issue of NSQ medicines to the patients were noticed in all test-checked hospitals.

***The GMSCL may evolve a proper mechanism to ensure uninterrupted supply of quality medicines to hospitals to prevent instances of non-availability of stock. The Government may prescribe the time to be taken in testing of medicines and the GMSCL should ensure strict compliance to the same and replace the NSQ medicines forthwith.***

***Punitive action against errant suppliers of NSQ medicines needs to be taken so as to ensure deterrence.***

- Availability of well equipped emergency and ICU in all hospitals are essential to save the patients in critical condition. Audit observed that emergency departments and ICUs were not established as per IPH Standards in test-checked hospitals.

***The Government may review the availability of emergency departments and ICUs functioning in all district level hospitals and take necessary measures to establish these units to deal with critical cases effectively wherever they are deficient.***

- Availability of Gynaecologists, Paediatricians and life saving equipment are essential for delivery of maternal and child healthcare services. Audit observed higher neo-natal and maternal deaths, vacant posts of Gynaecologist and Paediatrician, and lack of life saving equipment and beds in all test-checked district hospitals.

***The Government may strengthen the maternal and child health departments in all hospitals by deploying specialist doctors and providing requisite equipment and adequate number of beds, to prevent the stage of advanced deterioration which ultimately leads to higher IMR and MMR.***

- The departments of diagnosis, imaging and blood banks are integral components of a hospital to provide healthcare services. Audit observed that equipment for conducting various tests were not available in the diagnostics and imaging departments in test-checked district hospitals. Blood bank/blood storage centres were either not established or remained non-functional in four test-checked district hospitals.

***The Government may take initiatives to ensure availability of basic imaging facilities such as USG, CT scan and Portable X-ray machines in all DHs for early and proper diagnosis of diseases. Further, the Government may ensure availability of functional BB to provide quality blood and blood components to all who are in need of them.***

- All test-checked district level hospitals need strengthening of healthcare services. However, DH Surendranagar need special attention because of deplorable condition of its healthcare delivery due to acute shortage of specialist doctors, non-existence of Emergency and ICU services, lack of imaging facilities and poor maternal, child and neo-natal healthcare services. Similarly, in DH Dahod despite availability of regular specialist services, delivery of healthcare services suffered due to lack of emergency and accident services, ICU, Blood bank, etc., as well as lower bed capacity as against the requirement. Deficient healthcare services in DH coupled with availability of CHs at more than 100 km. away from the district have compounded the problem of patients in need of treatment.

***The Government may give urgent attention for upgradation of these two DHs to provide proper healthcare services to the people of these two districts.***

## LABOUR AND EMPLOYMENT DEPARTMENT

### 2.2 Skill Development in Gujarat

#### Executive Summary

*Government of India (GoI) had introduced National Skill Development Policy, 2009 to empower all individuals through improved skills, knowledge, nationally and internationally recognised qualifications to gain access to decent employment and ensure India's competitiveness in the global market. As per the report of National Skill Development Corporation (NSDC) on skill gaps in Gujarat for the period 2012-17, the State was required to provide skill training to about 4.75 lakh youth entering the work force per annum and make them employable with decent jobs in various industrial/service sectors. The Performance Audit on "Skill Development in Gujarat" was conducted for the period 2010-15 between February and August 2015 covering working of Gujarat Skill Development Mission (GSDM) and implementation of 21 skill development schemes by eight departments in the State which revealed many areas of concern. The important findings of the performance audit are highlighted below:*

- Gujarat Skill Development Mission (GSDM) has not formulated uniform skill development policy even though it was decided (June 2010) in the meeting chaired by Hon'ble Chief Minister of the State, as a result of which concerned departments implemented skill training programme without uniformity in syllabus, duration of course and fees structure. We also observed that instructions (February 2014) by Labour and Employment Department for mandatory issuance of certificates of National Council of Vocational Training/Gujarat Council of Vocational Training to all trainees were not followed by private training institutes in majority cases.*
- To enhance their capacity of providing vocational training to the youth in the State, the Director of Employment and Training (DET) had established 97 new ITIs between 2010 and 2015. However, average number of students passing out remained almost static during the period 2010-15.*
- After passing the trade test, candidates are required to undergo practical training in industries as apprentices to enhance their skills. Audit observed that 26 per cent of seats of apprentices remained vacant during 2010-15 and out of 1.63 lakh candidates enrolled, only 37 per cent could pass the Apprenticeship exam.*
- DET established 500 Kaushalya Vardhan Kendras (KVKs) in 'Rurban' areas to provide formal/informal training in short term courses to the youth who had left school at early age to provide them employment or self-employment and 7.83 lakh youth had completed training during 2010-15. Beneficiary survey of 270 candidates conducted by Audit revealed that only 23 (nine per cent) got job placements as majority of courses taken up by KVKs were providing skills for seasonal self-employment to some extent only.*

- *Under Industrial Policy 2009, a target was set to establish 200 Skill Up-gradation Centres (SUCs) with capacity of 1.5 lakh trainees per year. However, Centre for Entrepreneurship Development (CED) could set-up (2012-14) only 39 SUCs and train only 0.14 lakh candidates till March 2015 nullifying the objective of preparing technically competent manpower as per industrial needs.*
- *Under Sant Shri Ravidas High Skill Training Programme (SSRHSTP) 17,052 candidates (36 per cent) got training against the target of 47,140 during 2010-15. Percentage of female trainees was only 18 per cent against envisaged 30 per cent.*
- *Audit found that female participation in Vocational Training Centres developed by Tribal Development Department (TDD) on Public Private Partnership mode for skill training to tribal youth was only 17 per cent against a target of 50 per cent set by TDD. Overall achievement of training target by all VTCs was 35 per cent only (2010-15).*
- *Though funds of ₹ 12.55 crore were available with Gujarat Livelihood Promotion Company (GLPC) since 2011-12 for Mission Mangalam Skill Development Programme, selection of Skill Development Partners were delayed for more than two years due to non-finalisation of terms and conditions and because of this, training to only 1,155 candidates could be provided under the scheme till March 2015.*
- *To put all the information in public domain is important for creating awareness as well as for transparent administration of a scheme/programme, however, the web-portal developed (2011) by GSDM remained non-operational since September 2013.*
- *Analysis of available data of trainees on web-portal under three major schemes revealed large number of duplications in same scheme and multiple trainings being availed of by same candidates. The achievement figures were thus over reported by 4.58 lakh trainees.*

### 2.2.1 Introduction

India is one of the youngest nations in the world with more than 62 per cent of its population in the working age group (15-59 years). National Skill Development Corporation has set a target of skilling 500 million people by 2022 which includes those entering the labour market for the first time and those already employed in the organised/unorganised sectors. As reported by 68<sup>th</sup> Round of National Statistical Survey Organisation (2012), only 4.69 per cent of India's total workforce has undergone formal skill training, compared to 52 per cent in the United States of America, 68 per cent in the United Kingdom, 75 per cent in Germany, 80 per cent in Japan and 96 per cent in South Korea.

Our country faces the dual challenge of dealing with paucity of highly trained workforce, as well as non-employability of large sections of the conventionally educated youth, who possess little or no job-skills. Government of India (GoI) had introduced National Skill Development Policy (NSDP), 2009 which was superseded by National Policy for Skill Development and Entrepreneurship

2015, to give fresh impetus to the agenda of Skill India and help create an appropriate ecosystem that facilitates imparting employable skills to its growing workforce over the next few decades.

As per skill gap survey report of National Skill Development Corporation (NSDC) for the State of Gujarat, an additional 60.51 lakh people are expected to enter the working age group population between 2012 and 2017. Considering the historical trend in labour participation rates of Gujarat, the State would witness a gross addition of 35.15 lakh people to the labour force and as per NSDC report, 30.96 lakh new jobs would be created in the State during the period 2012-17. The State requires to provide vocational skill training to about 23.75 lakh youth during 2012-17 (excluding requirement of 2.95 lakh highly skilled manpower which would come from Technical Education System and 4.26 lakh manpower from Agriculture and Allied Activities *i.e.* primary sector requirement) who are expected to enter the industrial/service sectors. Considering the importance of skill development, Performance Audit was undertaken with an objective to assess the capacity development in the State and its efficient utilisation for providing quality skill trainings and employment opportunities to the youth in the State.

### **2.2.2 Organisational set-up**

Additional Chief Secretary (ACS), Labour and Employment Department is the administrative head of the department, under whose aegis schemes such as Craftsman Training Scheme (CTS), Apprenticeship Training Scheme (ATS), Modular Employable Skills (MES) of Skill Development Initiative (SDI) Scheme, eMPOWER (electronic – manpower), Kaushalya Vardhan Kendra (KVK), Industrial - Kaushalya Vardhan Kendra (i-KVK) and Skill Voucher Scheme (SVS) are implemented. Director of Employment and Training (DET) is responsible for overseeing the implementation of these schemes and is assisted by four<sup>22</sup> Regional Deputy Directors (RDDs). The Principal, Industrial Training Institutes (ITIs) and Co-ordinator, KVK are responsible for implementation of schemes at field levels.

Chief Executive Officer (CEO), Gujarat Skill Development Mission (GSDM) is the head of the apex body constituted under Labour and Employment Department for overall convergence of all skill development activities carried out by eight departments in the State. Organisational structure comprising eight departments and its field offices is shown in **Appendix-VI**.

### **2.2.3 Audit scope and methodology**

As per information provided by GSDM, eight departments are involved in the implementation of skill development programmes in the State. Audit reviewed the 21 skill development schemes (**Appendix-VII**) being implemented by these departments of the State {Labour and Employment Department (LED), Industries and Mines Department (IMD), Education Department (ED), Social Justice and Empowerment Department (SJED), Tribal Development Department (TDD), Urban Development and Urban Housing Department (UD&UHD), Panchayats, Rural Housing and Rural Development Department

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<sup>22</sup> Ahmedabad, Rajkot, Surat and Vadodara

(PRH&RDD), and Women and Child Development Department (WCDD)} and assessed the aspects of planning, implementation strategy adopted, achievement against target set for training and job placement, monitoring and evaluation system of each scheme, *etc.*, for the period 2010-15.

To provide adequate coverage and reasonable assurance in Audit, the records maintained by eight departments at State level and field level offices in eight<sup>23</sup> out of 26 districts were test-checked between April and August 2015. At field level, Audit also test-checked records maintained in 32 Government Industrial Training Institutes (ITIs) out of 282 in the State, one Kaushalya Vardhan Kendra (KVK) attached to each selected ITI (**Appendix-VIII**) and one agency imparting skills training along with the district office in selected districts for each scheme (**Appendix-IX**).

Audit also conducted telephonic survey of ten candidates at each selected field unit to obtain feedback about training quality, their present status of employment and monthly remuneration/income obtained. Audit captured photographs of poor infrastructure and un-installed machineries in support of audit observations.

An entry conference was held (5 June 2015) with the Principal Secretary of LED and representatives of other departments to apprise the Audit objectives and Audit methodology. An exit conference was held (23 December 2015) with the heads of concerned departments under the chairmanship of the Principal Secretary LED to discuss the Audit findings. The views of the State Government emanating from the exit conference and the replies received from the respective departments have been considered and duly incorporated in the Report.

#### 2.2.4 Audit Objectives

The broad objectives of the performance audit were -

- To ascertain whether skill gap analysis was made after assessing the requirements of skilled workforce in different sectors of industries/services and proper planning was made to meet these requirements;
- To assess the adequacy of infrastructure such as classrooms, workshops, tools, equipment, *etc.* and manpower for efficient functioning of the ITIs, KVKs and other Government/private training institutes;
- To ascertain whether target set for number of candidates to be trained and their job placement were achieved by various departments; and
- To ascertain whether effective mechanism were in place for monitoring and evaluation of the skill development training programmes and the post-training employment was adequate and successful, wherever such records are maintained.

<sup>23</sup> Central-North Gujarat : Ahmedabad and Mehsana, East-Central Gujarat : Panchmahal and Vadodara, South Gujarat : Bharuch and Valsad, and Saurashtra Region : Jamnagar and Rajkot

### **2.2.5 Audit Criteria**

In order to achieve the audit objectives, the following audit criteria were adopted -

- National Skill Development Policy 2009;
- National Policy for Skill Development and Entrepreneurship 2015;
- Report of National Skill Development Corporation on skill gap study in Gujarat;
- Training Manual for ITIs issued by the Director General of Employment and Training (DGET) New Delhi;
- Apprentices Act, 1961;
- Norms prescribed by the National Council for Vocational Training (NCVT) and Gujarat Council for Vocational Training (GCVT);
- Guidelines of various schemes implemented by concerned departments associated with skill development; and
- Government instructions, circulars, resolutions, orders, *etc.*

## **Audit Findings and Responses**

### **2.2.6 Planning for Skill Development**

#### **2.2.6.1 Implementation of uniform policy on skill development**

The State Government constituted (February 2009) “Gujarat Skill Development Mission” (GSDM) with an objective to suggest an aggregated action plan for developing skill among the youth. The GSDM was reconstituted (November 2009) by the State Government to provide inter-sectoral coordination on critical challenges and for convergence of various schemes of skill and employment being implemented by various departments. Consequent upon reconstitution, an Executive Committee with members from all departments imparting skill development training was formed with Hon’ble Chief Minister as its Chairman.

To overcome certain critical issues<sup>24</sup> discussed during the three meeting (between April and June 2010) of GSDM, in a meeting (30 June 2010) of Executive Committee, it was decided to prepare a uniform skill development policy covering all departments imparting skill development training covering following aspects -

- Courses from the Modular Employable Skill (MES) list should be selected and a common curriculum should be followed. In case of need of other courses, the same should be got approved from GCVT.
- All training programmes should be certified by NCVT or GCVT.

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<sup>24</sup> Non-following uniform criterion for selection of training provider, non-following uniform cost of training, non-following prescribed curriculum, non-providing recognised certificates, non-following defined method for monitoring, *etc.*

- All departments should provide skill vouchers to the beneficiaries and payments to the agencies providing training should be made only after completion of training and certification by assessing agencies approved by NCVT or GCVT.
- Develop a common web-portal with information such as list of agencies working in the State, courses of training, list of candidates trained, candidates employed, salary received by candidates, etc.

However, Audit observed that the GSDM had not formulated the uniform skill development policy as envisaged above. LED issued (January 2014) instructions in this respect to all departments after a lapse of more than three years. Audit further observed that follow-up of implementation of instructions was not done by the LED which resulted in non-observance of instructions by many departments as discussed in the succeeding paragraphs –

***(1) Follow-up of common course curriculum in skill training***

Though GSDM had decided (June 2010) to make it mandatory for all departments to follow common curriculum as approved by NCVT (MES)/GCVT, Audit observed that –

- Private agencies selected by TDD imparted the training for a course of “Retail and sales” with various durations (one month, three months and six months) and charged different charges for the course (₹ 21,900, ₹ 30,000 and ₹ 35,099) during the period 2010-14.
- In case of trainings imparted under Urban Youth Motivation, Employment and Entrepreneur Development (UMEED) scheme implemented by UD&UHD and General Training Scheme (GTS) implemented by WCDD, the course contents were not got approved from GCVT during the period 2010-15.
- The duration of training for “Wireman” and “Fitter” courses imparted by Cottage Industrial Training Centres was of one year whereas the duration of training for the same course imparted by DET was of two years. Similarly, “Body Repairs” course developed by TATA Motors and TOYOTA Motors under Public Private Partnership (PPP) mode was for six months and one year duration respectively. Further, the GCVT issued same certificates in both the cases, though they were for different durations.

Imparting similar trainings by different departments without following common course curriculum could lead to confusion among the trainees as well as the employers.

The CEO, GSDM stated (August 2015) that all the departments engaged in skill development, frame their own policy based on National Skill Development Policy and get it implemented accordingly. The Principal Secretary LED in the exit conference stated (December 2015) that State level skill development policy had been prepared and would be declared by February 2016. However, Audit is of the view that had the GSDM provided a common course curriculum by convergence of all skill development programmes

implemented by various departments as envisaged in the Executive Committee meeting held in June 2010, the skill development programmes undertaken in the State could have been implemented in a uniform manner, for greater success.

### ***(2) Issuance of NCVT/GCVT certification in skill training***

GSDM decided (June 2010) and issued instructions (January 2014) to provide Government approved certificates (NCVT or GCVT in other cases) to all trainees for better employment opportunities. However, Audit observed that -

- Under UMEED and GTS, NCVT or GCVT certificates have not been issued to the candidates on their successful completion of training by the implementing units during the period 2010-15 as no such provision was made in the work orders issued to private training institutes. On similar grounds, provision for issuance of NCVT or GCVT certificates was not made mandatory in the skill development trainings provided by Gujarat Knowledge Society (GKS) working under ED.
- Though the provision of issuance of NCVT certificates was envisaged in the guidelines of Sant Shri Ravidas High Skill Training Programmes (SSRHSTP) implemented by SJED and High Quality Employment Oriented Skill Training Programme (HQEOSTP) implemented by TDD, it was observed that NCVT/GCVT certificates were not issued to the candidates on completion of the training during 2010-15. This was due to non-adoption of course curriculum as approved by NCVT/GCVT.

The CEO, GSDM attributed (August 2015) the reasons of varied duration of training courses imparted by different departments *i.e.* 15 to 120 hours and non-observance of NCVT/GCVT criteria for non-issuance of NCVT/GCVT certificates. This indicated that GSDM failed to monitor the implementation of NCVT (MES) or GCVT courses by all the departments.

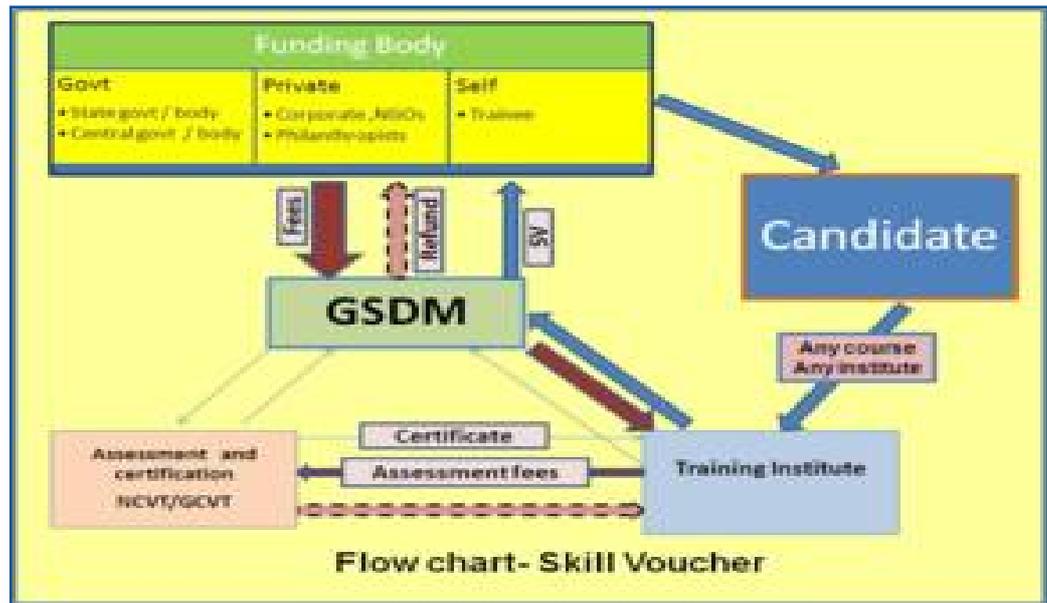
***Steps may be taken to impart the skill development training as per the criteria of NCVT or GCVT and certificates recognised by these institutions may be issued to all trainees to enable them to get better jobs.***

### ***(3) Implementation of Skill Voucher Scheme***

The National Skill Development Policy, 2009 envisaged focus on student funding instead of institutional funding by providing scholarships or skill vouchers. Accordingly, LED introduced (April 2011) “Skill Voucher Scheme (SVS)” with an aim to empower the real stakeholders *i.e.* the trainees. The flow of funds under the scheme is shown in **Chart 1** below. GSDM was the nodal agency for implementation of SVS and the scheme guidelines envisaged –

- Every department has to obtain skill vouchers in the name of candidates from GSDM after paying the requisite fees;
- The candidate can choose the course for training from any training institutes registered with GSDM; and
- On successful completion of the training, assessment and certification, the fees would be reimbursed to the concerned training institutes by GSDM.

Chart 1: Funds flow chart of Skill Voucher Scheme



This initiative of the State Government was highly appreciated in the Planning Commission's Regional Conference on skill development and was recommended for implementation in other States. However, Audit observed that the implementation of the scheme in the State was partially successful as the departments involved in skill development training did not obtain the vouchers from GSDM (except for LED which obtained 44,128 skill vouchers for training of English language during 2012-14). Further, it was observed that no efforts were made by GSDM for its proper implementation having known that other departments have not approached for the skill vouchers though regular skill trainings were being provided by those departments. Thus, the very purpose of introducing the SVS was not achieved.

The CEO, GSDM stated (August 2015) that the SVS was operational and 44,128 skill vouchers had been issued. The Principal Secretary LED in the exit conference stated (December 2015) that due to diversity of various courses, its period and involvement of many institutes, the SVS was not feasible. However, the fact remained that facility of skill voucher to the candidates was not provided in the training courses imparted by other departments, which deprived the candidates from choosing the courses and institutes as per their liking.

***The Government may formulate a comprehensive Skill Development Policy and initiate concrete steps in a time bound manner for implementation of all actionable points as decided in the meeting of Executive Committee of GSDM held on 30 June 2010.***

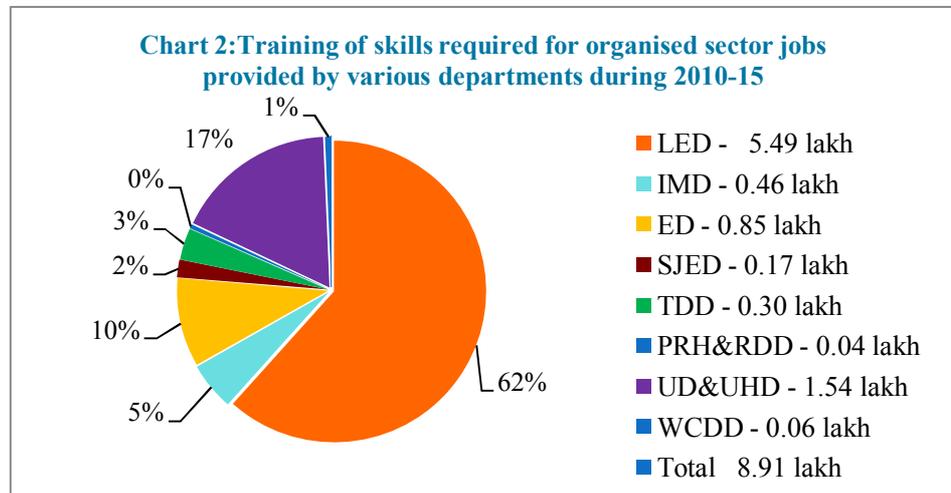
#### ***2.2.6.2 Utilisation of capacity for skill development training***

The NSDP envisages the State Governments to set-up priority and policy planning, gathering of statistics and preparation of work plan to meet sector specific skills requirement. The State Government established (January 2012) "Gujarat Skill Development Society (GSDS)" to assist the GSDM in increasing capacity building of each department involved in skill development to achieve the target set by the GoI.

DET engaged (April 2011) an agency<sup>25</sup> to conduct skill gap survey and mapping in the State. Audit observed that the report submitted (April 2012) by the agency was not accepted by the joint committee<sup>26</sup>, as it was incomplete.

From the information furnished to Audit, it was observed that the eight departments involved in providing skill development training in the State had a capacity of 11.11 lakh trainees per annum as of May 2015 (**Appendix-X**). However, the number of candidates trained by these departments in a year was 5.48 lakh *i.e.* 27.38 lakh<sup>27</sup> during the period 2010-15 as shown in **Appendix-XI**. Thus, the utilisation of capacity of providing skill development training in the State was 49 *per cent* (5.48 lakh per annum) of the available capacity.

Further, as per skill gap study report of NSDC for the State (2012-17), employable training was required to be provided to an average of 4.75 lakh youth per year who are likely to join labour force every year. Out of these 27.38 lakh candidates trained in the State during 2010-15, it was observed that 18.47 lakh candidates (67 *per cent*) were provided training for value addition or self-employment *i.e.* Basic Computer Course training to 7.80 lakh candidates under eMPower scheme<sup>28</sup>, English language proficiency training to 3.59 lakh candidates by Society for Creation of Opportunity through Proficiency in English (SCOPE), 6.26 lakh candidates under Kaushalya Vardhan Kendra scheme, 0.52 lakh candidates under General Training scheme and 0.30 lakh candidates under Girls Empowering scheme. Skill training needed for securing organised sector jobs was imparted to 8.91 lakh candidates during the period 2010-15 as shown in **Chart 2** below –



(Source: Information provided by the concerned departments)

<sup>25</sup> M/s. KPMG Advisory Services Private Limited

<sup>26</sup> Joint Committee comprised of Dy. Director (DET) and Principals of ITI Kubernagar and ITI Saraspur

<sup>27</sup> After deducting the candidates having availed more than one time training in same course or multi-skill training.

<sup>28</sup> Introduced by LED on the occasion of 150<sup>th</sup> Birth Anniversary of Swami Vivekanand with an aim to provide training relating to Computer and Information Technology to the youth of Gujarat (6.30 lakh candidates by DET and 1.50 lakh candidates by Gujarat Knowledge Society).

The DET stated (December 2015) that Audit had not considered 1,25,774 candidates<sup>29</sup> assessed under various other schemes during 2010-15 and also the training capacity of about 2.5 lakh candidates in a year available in the private sector, which was not funded by the Government. DET further stated that NSDC report envisaged requirement of only 11.70 lakh semi-skilled (2.34 lakh per annum) and 11.86 lakh minimally skilled manpower. As minimally skilled manpower requires no formal training or minimal training, 11.70 lakh semi-skilled manpower could be considered for providing of skill training. Audit reckons that the State Government had provided skill training to a large number of youth, however, Audit is of the view that more stress should be laid on providing skills needed in the industries and service sectors in the State.

## Implementation of Skill Development Programme

### 2.2.7 Labour and Employment Department

LED is responsible for implementing seven skill development schemes viz., Skill Voucher Scheme (SVS), Craftsman Training Scheme (CTS), Apprenticeship Training Scheme (ATS), Kaushalya Vardhan Kendra (KVK) Scheme, Modular Employable Skills (MES) under Skill Development Initiative (SDI) Scheme, eMPOWER and Industrial - Kaushalya Vardhan Kendra (i-KVK) Scheme.

#### 2.2.7.1 Funds received and expenditure

The details of funds allocated to DET and expenditure thereof during the period 2010-15 is given in **Table 1** below –

**Table 1: Details of budget provision, funds released and expenditure incurred by DET**

(₹ in crore)

| Year         | Budget Provision |               | Funds released  |               | Expenditure     |               | Saving/Excess    |                  |
|--------------|------------------|---------------|-----------------|---------------|-----------------|---------------|------------------|------------------|
|              | Plan             | Non-Plan      | Plan            | Non-Plan      | Plan            | Non-Plan      | Plan             | Non-Plan         |
| 2010-11      | 122.37           | 139.06        | 166.02          | 171.16        | 169.67          | 166.06        | (-) 03.65        | (+) 05.10        |
| 2011-12      | 201.95           | 145.43        | 194.89          | 165.06        | 176.02          | 162.27        | (+) 18.87        | (+) 02.79        |
| 2012-13      | 236.49           | 183.81        | 228.02          | 185.58        | 226.73          | 177.94        | (+) 01.29        | (+) 07.64        |
| 2013-14      | 352.37           | 193.26        | 358.70          | 191.09        | 315.02          | 191.44        | (+) 43.68        | (-) 00.35        |
| 2014-15      | 539.40           | 214.35        | 408.43          | 215.69        | 381.42          | 216.23        | (+) 27.01        | (-) 00.54        |
| <b>Total</b> | <b>1,452.58</b>  | <b>875.91</b> | <b>1,356.06</b> | <b>928.58</b> | <b>1,268.86</b> | <b>913.94</b> | <b>(+) 87.20</b> | <b>(+) 14.64</b> |

(Source: Information provided by DET)

<sup>29</sup> 59,827 candidates under STAR scheme of GoI, 21,719 candidates under Superior Technology Scheme, 5,534 candidates trained under short term courses and 38,694 trained under Skill Certification Scheme.

As seen from the above table, the plan expenditure increased from ₹ 169.67 crore (2010-11) to ₹ 381.42 crore (2014-15) (125 per cent). However, number of candidates passing out from ITIs (on whom the majority of funds of DET was expended), remained almost static during the period as discussed in paragraph 2.2.7.2.

In addition to above, DET also received (2010-15) GoI funds of ₹ 227.50 crore for up-gradation of ITIs under PPP mode and ₹ 16.04 crore for reimbursement of claims by agencies for imparting training under MES. The State Government had also released funds of ₹ 1,003.79 crore to Roads and Buildings Department (R&B) for construction/renovation works of ITIs during 2010-15, out of which an expenditure of ₹ 631.65 crore only has been incurred as of March 2015.

### 2.2.7.2 Craftsman Training Scheme

Craftsman Training Scheme (CTS) is a flagship scheme of Ministry of Labour and Employment to ensure steady flow of skilled workforce. Under CTS, the concerned State department was responsible for introducing new ITIs/trades in the emerging areas of fast changing industrial environment by conducting skill assessment survey.

CTS scheme in the State is implemented through 282 Government ITIs, 113 Grants-in-aid Industrial Training Centres (ITC) and 384 Self Financed ITCs as of March 2015. The details of number of students enrolled and passed out from all ITIs/ITCs under CTS during the period 2010-15 are shown in **Table 2** below –

**Table 2: Details of number of students enrolled and passed out from ITIs/ITCs under CTS**

| Year         | Intake Capacity <sup>30</sup> | Number of students enrolled | Number of students who appeared in the exam | Number of students dropped out | Percentage of drop-out | Number of students passed out |
|--------------|-------------------------------|-----------------------------|---|--------------------------------|------------------------|-------------------------------|
| 2010-11      | 81,130                        | 70,320                      | 62,308                                      | 8,012                          | 11                     | 56,506                        |
| 2011-12      | 85,902                        | 74,441                      | 63,609                                      | 10,832                         | 15                     | 59,446                        |
| 2012-13      | 95,035                        | 71,746                      | 63,602                                      | 8,144                          | 11                     | 58,033                        |
| 2013-14      | 1,09,989                      | 92,154                      | 75,115                                      | 17,039                         | 18                     | 66,320                        |
| 2014-15      | 1,16,905                      | 1,04,867                    | 63,242                                      | 41,625                         | 40                     | 56,089                        |
| <b>Total</b> | <b>4,88,961</b>               | <b>4,13,528</b>             | <b>3,27,876</b>                             | <b>85,652</b>                  | <b>21</b>              | <b>2,96,394</b>               |

(Source: Information provided by DET)

The above table shows that 0.86 lakh (21 per cent) out of 4.14 lakh students enrolled during the period 2010-15 had dropped out before appearing for the examination. Though, DET had increased the intake capacity every year, the number of pass-outs remained almost static. The department had established 97 new Government ITIs to enhance intake of trainees during the period 2010-15. However, Audit observed that the seven<sup>31</sup> out of 32 test-checked ITIs were not

<sup>30</sup> In same year for six months courses, in previous year for one year courses and in previous two years for two years courses

<sup>31</sup> Four of Rajkot district (Disable Rajkot, Morbi Road Rajkot, Tankara and Upleta), one of Vadodara district (Karjan), one of Bharuch district (Dahej) and one of Ahmedabad district (Ranip)

having their own building. Further, it was observed that the availability of buildings, machineries and manpower was not ensured and the percentage of drop-out in these ITIs ranged between 19 and 41 during the period 2010-15. Thus, DET failed in its objective to train more youth under CTS despite initiating new ITIs and increasing intake capacity in existing ITIs.

The DET attributed (December 2015) the reasons of high drop-out ratio to candidates leaving studies for jobs, shifting to diploma engineering from ITIs, students denied from appearing in exams due to less attendance (below 80 *per cent*) with reference to the norms of DGET, *etc.* However, Audit observed that Principals of ITIs (ITI Disable Rajkot, ITI Morbi Road Rajkot, *etc.*) had highlighted to DET that due to inadequate space/infrastructure and deficiencies in buildings, some willing candidates did not turn up for enrolment. Therefore, high drop-out rate may be attributable to non-availability of adequate machineries, manpower, *etc.* in ITIs as discussed below, which also adversely affected the quality of training –

### ***(1) Deficiencies of buildings/space in ITIs***

As per NCVT norms, each ITI should have its own building with adequate space for classrooms and workshops for providing effective training. Audit observed that adequate space for classrooms and workshops as per NCVT norms were not being followed in 16 out of 32 Government ITIs test-checked. Further, as per information provided by DET, 185 out of 282 Government ITIs were functioning in own building while the remaining 97 ITIs (28 ITIs initiated between 1983 and 2009) were functioning in rented or rent free Government accommodation. Out of these 97 ITIs, construction work has been taken up in respect of 11 ITIs, land has been acquired for 50 ITIs but the construction work is yet to be taken up and in remaining 36 ITIs, the required land is yet to be identified (August 2015).

The Principal Secretary LED in the exit conference stated (December 2015) that construction of new buildings were under progress.

### ***(2) Machineries lying idle in ITIs***

In ITIs, the major part of the training imparted to the students is practical knowledge by using the tools and machineries prescribed in the courses. Thus, availability of prescribed tools and machineries in an ITI is an important factor. However, during joint field visit of test-checked ITIs, Audit observed that the required tools and machineries were not available with the ITIs as they were not provided by the DET. It was further observed that some tools and machineries provided by the DET were lying uninstalled or idle in the ITIs due to non-availability of space and requisite electricity connection, pending demonstration/installation by the supplier, *etc.* **(Picture 1 and 2).**



**Picture 1: Machineries (Fuel injection pump received in June 2012 and Cut section model received in March 2015) lying un-installed at ITI Tankara due to space shortage (16.04.2015)**



**Picture 2 : Machineries (Cut-away machine delivered in January 2013 and Diesel Engine delivered in March 2014) lying idle at ITI, Karjan due to shortage of space (22.07.2015)**

The Principals of concerned ITIs stated (March-August 2015) that the tools and machineries were not installed due to various reasons beyond their control. It was further stated that the practical trainings were provided to the students in nearby ITIs or industries. The reply itself highlights inadequate planning on the part of ITIs and DET before procuring the machineries besides depriving the students of adequate practical training.

### (3) Installation and demonstration of machineries

The purchase of tools, machineries, equipment, *etc.* for the ITIs is made centrally in the State. The tenders are finalised by the DET and the payments to the suppliers are made by ITI Kubernagar, Ahmedabad. As per the condition of Acceptance of Tender (AT) for all purchases, payment (90 *per cent* prior to 2013 and 75 *per cent* thereafter) was to be made to the supplier on supply and remaining payment on completion of installation and demonstration at concerned ITIs.

In all purchases, the suppliers brought the tendered items to ITI Kubernagar which was returned to the suppliers with instruction to dispatch the same to the concerned ITIs and part payment (90 or 75 *per cent*) was made to the agencies. Audit observed that the payment was made without taking possession of the tendered items by the ITI Kubernagar or without ascertaining the delivery at the concerned ITIs. Important information about the items such as serial numbers of machinery or equipment and reports of delivery, installation and demonstration at consignee ITIs were not available with ITI Kubernagar.

Audit observed that in respect of payment of ₹ 26.97 crore made for 2,329 items during the period 2005-14, installation and demonstration certificates were not available with ITI Kubernagar. This indicated that neither ITI Kubernagar nor DET made any efforts to ascertain whether the items had been delivered timely and installed by the supplier in the respective ITIs. The possibility of non-delivery of items by the supplier at the concerned ITIs after receipt of 90 or 75 *per cent* payment cannot be ruled out.

In reply, DET stated (September 2015) that installation reports and demonstration certificates of 1,192 out of 2,329 items mentioned by Audit had been collected from concerned ITIs. On scrutiny of these installation and demonstration certificates by Audit, it was observed that only 85 items had been installed in time. There was delay upto seven years<sup>32</sup> in installation of 694 items and the dates of installation and demonstration were not mentioned in 413 certificates.

The Principal Secretary LED in the exit conference stated (December 2015) that a new purchase guideline had been introduced for timely purchase and installation of machineries. The DET in its further reply (December 2015) informed that now installation and demonstration certificates of only 118 items valuing ₹ 1.96 crore were pending.

### (4) Shortage of manpower

Availability of adequate manpower in ITIs is an important aspect for imparting proper training to the students. The details of sanctioned strength *vis-à-vis* men-in-position in ITIs as on March 2015 is shown in **Table 3** as follows –

<sup>32</sup> 175 items delayed by one to 12 months, 129 items delayed by more than one to two years, 177 items delayed by more than two to three years, 82 items delayed by more than three to four years, 50 items delayed by more than four to five years, 68 items delayed by more than five to six years and 13 items delayed by more than six to seven years.

**Table 3: Details of sanctioned strength *vis-a-vis* men-in-position as on March 2015**

| Details of post                         | Sanctioned Posts | Men-in-position | Vacant Posts | Percentage of vacant posts |
|---|------------------|-----------------|--------------|----------------------------|
| Principal (Class II)                    | 295              | 158             | 137          | 46                         |
| Supervisor/Instructor                   | 7,263            | 4,942           | 2,321        | 32                         |
| Store Keeper and Assistant Store Keeper | 430              | 43              | 387          | 90                         |
| Head Clerk and Junior Clerk             | 511              | 180             | 331          | 65                         |

(Source: Information provided by DET)

The above table shows that the vacancy in the posts of Principal and Supervisor/Instructor was 46 and 32 *per cent* respectively. The Principal Secretary LED in the exit conference stated (December 2015) that the recruitment process of staff was under progress. However, the shortage of Supervisor/Instructor in ITIs is an area of concern as the students are deprived of quality training and the absence of Principals would adversely affect the proper functioning and management of the ITIs.

***The Government may take action for optimal utilisation of machineries lying idle and the vacant posts in all ITIs may be filled-up, as adequate manpower is necessary for service delivery.***

### ***2.2.7.3 Affiliation of trade with NCVT***

DET had issued (November 2013 and November 2014) instructions to all ITIs that all trades approved under NCVT pattern should be affiliated to NCVT. However, as of March 2015, only 69,392 out of 1,47,814 seats (47 *per cent*) sanctioned under NCVT trades had been affiliated to NCVT. Audit observed that out of 51,647 seats increased in trades approved under NCVT pattern during the period 2010-15, DET could obtain affiliation for 6,944 seats (13 *per cent*) only and remaining 44,703 seats continued on non-affiliation basis. As a result, students who passed out from ITIs on non-affiliated seats during the period 2010-15 could not be provided with NCVT affiliated certificates but were provided with GCVT affiliated certificate. Audit observed in test-checked ITIs that the affiliation could not be obtained due to non-availability of adequate space and machineries as per norms prescribed by NCVT. NCVT certificate gets national recognition and is helpful to the trainees in acquiring better jobs as compared to GCVT certificate. Further, NCVT certificate holders are eligible for 50 *per cent* rebate<sup>33</sup> in training period for Apprenticeship course as compared to 25 *per cent* rebate given to GCVT certificate holders. Thus, the students passing out from ITIs were deprived of better career prospects and benefit of rebate for training of apprenticeship courses due to lack of co-ordinated efforts between DET and ITIs for providing adequate space and infrastructure as per NCVT norms.

<sup>33</sup> For example a NCVT certificate holder would get rebate of one year for a two year course of Apprenticeship while a GCVT certificate holder would get rebate of six months for the same course.

#### 2.2.7.4 Apprentice Training Scheme

After passing the trade test under Craftsman Training Scheme (CTS), the students are required to undergo a practical training in industries as apprentice to enhance their skills. As per the provisions of the Apprentices Act, 1961, it is obligatory on the part of industries to train a certain number of apprentices assigned by the Apprenticeship Advisors in designated trades. Apprenticeship Advisors are responsible for curriculum development, training, inspection of industries, identification of seats for apprentices, taking legal action in case of violation of Apprentices Act and non-filling posts of apprentices, *etc.* The apprentices are required to appear for an examination conducted by DGET for obtaining the All India Trade Test Certificate. The details of number of candidates enrolled as apprentices *vis-a-vis* number of candidates who passed the examination between 2010 and 2015 is shown in **Table 4** below –

**Table 4: Details of number of candidates enrolled as apprentices *vis-a-vis* passed out**

| Calendar year | Number of industries or units identified | Number of seats identified in industries | Number of candidates enrolled during the year | Number of vacant seats during the year | Number of candidates passed out during the year | Percentage                  |   |
|---------------|--|--|---|--|---|-----------------------------|---|
|               |  |  |   |  |   | Vacant seats to total seats | Passed out to number of students enrolled |
| 2010-11       | 5,218                                    | 38,367                                   | 29,083  | 9,284                                  | 11,814  | 24                          | 41  |
| 2011-12       | 5,381                                    | 39,446                                   | 30,515  | 8,931                                  | 11,750  | 23                          | 39  |
| 2012-13       | 5,433                                    | 40,248                                   | 31,480  | 8,768                                  | 11,518  | 22                          | 37  |
| 2013-14       | 7,701                                    | 49,778                                   | 40,356  | 9,422                                  | 12,094  | 19                          | 30  |
| 2014-15       | 8,754                                    | 53,143                                   | 32,060  | 21,083                                 | 12,819  | 40                          | 40  |
| <b>Total</b>  |  | <b>2,20,982</b>                          | <b>1,63,494</b>                               | <b>57,488</b>                          | <b>59,995</b>                                   | <b>26</b>                   | <b>37</b>                                 |

(Source: Information provided by the DET)

The above table shows that the percentage of vacant seats *vis-a-vis* the seats identified in the industries ranged from 19 to 40 and the number of candidates passed out *vis-a-vis* number of students enrolled ranged from 30 to 41 during the period 2010-15. This indicated that semi-skilled candidates passing out from ITIs could not improve their skills by successfully completing apprenticeship training and getting exposure to industrial environment.

Audit observed that 37 out of 46 sanctioned posts (80 *per cent*) of Apprenticeship Advisors in the State were vacant as of March 2015. It was further observed that only 297 legal cases had been filed against industrial establishments for non-filling of posts of apprentices and violating Apprentices Act during the period 2011 and 2012; no case has been filed thereafter. Thus, shortage in the post of Apprenticeship Advisor adversely affected the implementation of the Apprentices Act, 1961 in the State.

The DET agreed (August 2015) and attributed unpopularity of certain trades for seats remaining vacant and long tenure of the training, study mobility and social reasons for high percentage of drop-outs. Audit is of the view that if NCVT certificates were issued, the apprenticeship training period could be reduced to 50 *per cent* (as mentioned in paragraph 2.2.7.3) and this might help in reducing the drop-outs.

### 2.2.7.5 Modular Employable Skills Scheme

GoI, Ministry of Labour and Employment launched (May 2007) Modular Employable Skills (MES) scheme, under Skill Development Initiative (SDI). The DET was responsible for implementation of the scheme in the State. Under this scheme, early school leavers and existing workers specially those in unorganised sectors were to be trained for employable skills. The skills of existing workers could also be tested and certified under this scheme.

In the State, there are 772 registered Vocational Training Providers<sup>34</sup> (VTPs). The details of number of workers trained *vis-a-vis* target fixed by GoI and expenditure incurred under the scheme during the period 2010-15 is shown in **Table 5** below –

**Table 5: Details of achievement of target and expenditure incurred under the scheme**  
(₹ in crore)

| Year         | Target fixed by GoI<br>(Number of workers) |                | Achievement<br>(Number of workers) |                | Funds released by<br>DGET | Expenditure<br>incurred |
|--------------|--|----------------|------------------------------------|----------------|---------------------------|-------------------------|
|              | Training                                   | Direct Testing | Training                           | Direct Testing |                           |                         |
| 2010-11      | 13,346                                     | Not available  | 3,860                              | Nil            | 3.00                      | 0.57                    |
| 2011-12      | Not available                              | Not available  | 7,890                              | Nil            | 2.78                      | 0.85                    |
| 2012-13      | 45,106                                     | Not available  | 7,631                              | 23,469         | 4.26                      | 2.90                    |
| 2013-14      | Not available                              | Not available  | 38,581                             | 10,278         | 0.00                      | 2.67                    |
| 2014-15      | Not available                              | Not available  | 24,650                             | 28,751         | 6.00                      | 3.00                    |
| <b>Total</b> |  |                | <b>82,612</b>                      | <b>62,498</b>  | <b>16.04</b>              | <b>9.99</b>             |

(Source: Information provided by DET)

From the above table, it can be seen that the achievement of training was far below the target set by GoI during 2010-11 and 2012-13. From the information furnished by DET, Audit observed that registration of 62 VTPs have been cancelled due to their misconduct in training such as enrolment of same students in more than one batch at same time, irregular signature in attendance sheet, fake enrolment, irregular collection of fees, etc.

The DET stated (December 2015) that the target set by GoI was not achieved due to lack of awareness among the public regarding the scheme.

### 2.2.7.6 Kaushalya Vardhan Kendras

LED initiated (June 2010) establishment of Kaushalya Vardhan Kendras (KVKs) at 150 rural<sup>35</sup> areas with an objective to provide formal/informal training in GCVT pattern short term courses to the youth who had left school at early age to get themselves employed or for self employment. In the State, a total of 500 KVKs<sup>36</sup> have been established during the period 2010-15. The details of target *vis-à-vis* actually trained is shown in **Table 6** as follows –

<sup>34</sup> 139 Government ITIs, 497 KVKs, 13 Government organisations, 22 Grants-in-Aid/Self Finance Industrial Training Centres, 79 Private partners and 22 i-KVKs.

<sup>35</sup> Cluster of five to six villages

<sup>36</sup> 2010-11: 150, 2011-12 : 150, 2012-13 : 35 and 2014-15 : 165

Table 6: Details of target vis-à-vis actually trained in KVKs

| Year         | Number of KVKs in operation | Target for KVKs (number to be trained) | Total beneficiaries trained | Actual number of trainees after reducing candidates of eMPOWER and duplication | Shortfall in achievement of target |
|--------------|-----------------------------|--|-----------------------------|--|------------------------------------|
| 2010-11      | 150                         | 1,20,000                               | 1,16,565                    | 7,82,556   | 5,13,444<br>(40 per cent)          |
| 2011-12      | 300                         | 2,40,000                               | 2,47,526                    |  |                                    |
| 2012-13      | 335                         | 2,68,000                               | 4,43,608                    |  |                                    |
| 2013-14      | 335                         | 2,68,000                               | 2,91,893                    |  |                                    |
| 2014-15      | 500                         | 4,00,000                               | 1,71,919                    |  |                                    |
| <b>Total</b> |                             | <b>12,96,000</b>                       | <b>12,71,511</b>            |  |                                    |

(Source: Information furnished by DET and duplication worked out by Audit)

From the above table, it appears that the target have been almost achieved, however, on scrutiny of the records, Audit observed that -

- Training provided to 1.43 lakh candidates under eMPOWER scheme through KVKs during the year 2012-13 was shown as target achieved under KVK scheme though it pertained to eMPOWER scheme.
- Out of the remaining 11.29 lakh candidates trained in regular courses of KVK, there were 1.87 lakh candidates who were provided multiple trainings for 5.34 lakh times (either same training taken more than once or same candidate trained in multiple trades). As such while beneficiaries were only 1.87 lakh, as against 5.34 lakh claimed by DET.
- With an aim to achieve the target fixed, KVKs imparted training to 1.81 lakh candidates for very small life skill courses such as ironing, mehendi making, etc. with duration of two to five days without prescribed syllabus or approval of GCVT.

On conducting a beneficiary survey of 270 candidates who had completed training at KVKs, Audit observed that only 23 candidates got employment, 101 candidates could use the skill for seasonal self employment to some extent only, while remaining 146 candidates could not get any employment, post training.

The Principal Secretary LED in the exit conference agreed (December 2015) to take action against officials involved in duplication of training in the same course. It was further stated that multi-skilling was necessary as some employers demand candidates who can perform multiple job.

#### • *Unfruitful expenditure on machineries provided to KVKs*

Out of additional provision of ₹ 500 crore approved by the Planning Commission for the year 2010-11, ₹ 59.96 crore was earmarked for KVKs. The Purchase committee of the department (LED) decided (October 2010) to purchase modern machineries for various courses implemented by the KVKs. However, Audit observed that modern machineries (such as 150 sets of four items and 50 sets of one item for basic welding trade costing ₹ 20.75 crore, 50 sets of eight items for two wheeler repair trade costing ₹ 3.01 crore and 50 sets of 15 items for repairing of electrical home appliances trade costing ₹ 0.92

crore) purchased for various trades from the funds were lying idle in test-checked KVKs since its purchase (**Picture 3 and 4**).



**Picture 3: Simulator Welding Machine costing ₹ 27.00 lakh received on 27.07.2012 was lying unutilised at KVK Kavitha (14.07.2015)**



**Picture 4: Automobile System costing ₹ 1.00 lakh received in March 2012 was lying unutilised at KVK Shokhada (July 2015)**

The Co-ordinators of concerned KVKs attributed the reasons of non-availability of technical instructors for idling of these machineries. Thus, expenditure incurred on purchase of latest machineries remained unfruitful.

***The Government may appoint the technical instructors in the KVKs for efficient utilisation of modern machineries for providing employable training to youth of rural areas.***

### ***2.2.8 Industries and Mines Department***

#### ***2.2.8.1 Centre for Entrepreneurship Development***

Industries and Mines Department (IMD) of the State Government introduced (February 2009) “Enhancement of Technical Competence and Manpower Scheme” under Gujarat Industrial Policy, 2009 with an aim to develop industry

responsive and readily employable skilled manpower, focusing on local resources through Public Private Partnership (PPP) mode. Centre for Entrepreneurship Development (CED) under IMD is the nodal agency for implementation of schemes.

CED implemented four schemes under “Enhancement of Technical Competence and Manpower Scheme” with an objective to develop the capacity for training two lakh candidates per annum from the fifth year (2014-15) of implementation of these schemes. IMD provided ₹ 212.17 crore to CED during the period 2010-13 for implementation of these four schemes. However, Audit observed that out of available funds of ₹ 270.17 crore (including ₹ 58.00 crore being interest earned), CED could utilise only ₹ 52.56 crore during the period 2010-15.

Audit further observed that the pace of implementation of all the four schemes by CED was very slow and the target of developing capacity for training two lakh candidates per annum from the fifth year could not be achieved as discussed in the succeeding paragraphs –

### *(1) State Level Anchor Institutes*

State Level Anchor Institutes (SLAI) were established with the objectives to provide technical support to the technical educational institutions and to provide training in the sector across shop floor, supervisory and managerial level by capacity building, and curriculum revision and bench marking of the courses for enhancement of technically competent manpower. As of March 2015, there were seven<sup>37</sup> SLAIs in the State and 15,627 candidates have been provided skill training under the scheme during 2010-15.

On scrutiny of records of three<sup>38</sup> out of seven SLAIs, Audit observed following major deficiencies -

- The need assessment survey was to be carried out by an SLAI to look into the skill demand of its sector and compare the same with existing skill base of the employees. Based on the survey, the SLAI was required to develop appropriate training courses addressing various gaps. However, the need assessment survey was not carried out by any of the three test-checked SLAIs.
- The objective of capacity building by providing training to instructors and technical staff could be achieved partially due to poor response from ITIs and Diploma/Degree colleges, as they failed to send their staff for training.
- The curriculums revised (January 2014) by the SLAIs were not put to use due to lack of response and co-operation from Gujarat

<sup>37</sup> (1) Chemical and Petrochemical – Dharamsinh Desai Institute of Technology, Nadiad and Lalbhai Dalpatbhai College of Engineering, Ahmedabad, (2) Textiles – M.S. University, Vadodara, (3) Apparels – National Institute of Fashion Technology (NIFT), Gandhinagar, (4) Plastic and Packaging – Central Institute of Plastics Engineering and Technology (CIPET), Ahmedabad, (5) Gems and Jewellery – Indian Diamond Institute, Surat, (6) Engineering and Auto – Sardar Vallabhbhai National Institute of Technology, Surat, (7) Infrastructure – Centre for Environmental Planning and Technology (CEPT), Ahmedabad

<sup>38</sup> (1) M.S. University, Vadodara, (2) CIPET, Ahmedabad and (3) CEPT, Ahmedabad

Technological University (GTU), as it had its own review committee and different schedule for revision of courses.

- SLAI was to benchmark the courses offered by ITIs/Polytechnics and Engineering Colleges with international/national standards, however, it was not done.

Thus, due to lack of co-ordination among SLAIs, Technical Institutes<sup>39</sup> and GTU, the envisaged objectives could not be fully achieved.

## ***(2) Skill Up-gradation Centres at Gujarat Industrial Development Corporation Estates/ITI Premises***

Skill Up-gradation Centre (SUC) was to be developed up to March 2014 in the premises of each Gujarat Industrial Development Corporation (GIDC) estate or ITIs on Public Private Partnership (PPP) mode. The Industries Commissioner, GIDC and DET were responsible for allocating land and building for developing the SUC. CED was responsible for providing one time financial assistance of ₹ 1.00 crore for procurement of machineries and equipment. CED had set a target of setting-up 200 SUCs (100 in the premises of GIDC estates and 100 in ITI premises) to operate five batches of 25 trainees in two shifts in three trades with overall target of training 1.50 lakh trainees per year.

Audit observed that 39 SUCs have been operationalised in the premises of GIDC estates and 14,117 trainees have been enrolled in different technical trades during the period 2012-15. Out of 14,117 trainees enrolled, only 9,866 trainees (70 per cent) passed out successfully, of which only 3,618 trainees (37 per cent) got job placements. On scrutiny of records of seven<sup>40</sup> test-checked SUCs, Audit observed that -

- Against the target of 21,000 trainees, only 13,337 candidates were enrolled, out of whom only 4,631 (22 per cent) candidates completed training during the period 2010-15.
- Adequate tools and machineries/equipment were not available with the test-checked SUCs. All the available tools and machineries/equipment were kept in a common workshop which made it difficult to operate more number of courses at the same time.
- Other departments provided free of cost skill training under various schemes whereas the SUCs charged fees ranging from ₹ 3,000 to ₹ 20,000 from the trainees for similar courses which resulted in less candidates turning up to SUCs for such courses.

Lack of infrastructure and higher fee structure, resulted in low enrolment of trainees in SUCs, defeating the very purpose of establishment of SUCs in the State and nullifying the objective of preparing technically competent manpower as per industrial needs.

The Director, CED stated (December 2015) that in the revised Industrial Policy, 2015, the tuition fees would be reimbursed to the institutes by CED, and, henceforth would not be charged from the candidates.

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<sup>39</sup> Institutes/colleges providing technical education

<sup>40</sup> M/s. Everonn - Lodhika and Vatva, M/s. GOLs - Jhagadia, Halol, Savli and Vapi and M/s. IMS Proschool Private Limited - Kadi

- **Establishment of SUCs in ITI premises**

Out of 100 SUCs to be established in the premises of ITIs, CED identified (March 2010) places for establishment of 89 SUCs. The R&B department submitted an estimate of ₹ 1.08 crore for each SUC and IMD released (March 2010) ₹ 0.50 crore to CED for each SUC. However, Audit observed that due to lack of co-ordination between CED and DET, the construction work could not be taken up and finally the project was dropped. As such, no SUC was established in ITI premises.

The Director, CED stated (August 2015) that the project was not approved by DET and hence got dropped.

### **(3) Skill Development Centres for short term bridge courses**

Under this scheme, a new course or existing courses with addition of certain subject addressing their specific requirement were to be introduced by the industry partners in the existing ITIs/Institutes under PPP mode. The host ITI/Institute was to provide the basic infrastructural facilities such as land and building, and the cost of machineries and equipment (maximum ₹ 1.00 crore) was to be shared in the ratio of 75:25 between CED and industry partner. CED had set a target of setting-up (up to March 2014) 10 Skill Development Centres (SDCs) to operate six batches with 25 trainees in two shifts in two trades with overall target of training 6,000 trainees per year.

Audit observed that out of nine proposals for establishing SDCs sent to State Level Approval Committee (SLAC) between March 2009 and August 2014, seven proposals were approved and two proposals were dropped. As of December 2015, only five SDCs have been operationalised. Further till March 2015, only 46 trainees were provided training, of whom only 35 trainees had passed-out and were provided job placement.

The Director CED stated (August 2015) that proposals of two centres have been dropped due to non-compliance of conditions while the work of two centres approved was under process of implementation. The fact remains that against the target of 6,000 trainees per year, the achievement was only 46 trainees.

### **(4) Specialised Skill Development Centres**

For specialised training in the areas such as marine engineering, mining, specialised pipes laying, logistic and services, etc., Specialised Skill Development Centres (SSDC) were to be established by providing financial assistance to institutes, universities, industries associations, or any other legal entity registered under Societies Act, Trust Act or Companies Act. Financial assistance to the extent of 50 *per cent* of the project cost (maximum ₹ 2.00 crore) was to be provided for capital investment on building, equipment, machineries, electrification, furniture, etc. CED had set a target of setting-up 40 centres to operate six batches with 25 trainees in two shifts in two trades with an overall target of training 24,000 trainees per year.

Audit observed that out of 20 proposals for establishing SSDCs sent to State Level Approval Committee (SLAC) between June 2009 and December 2014, 16 proposals were approved and four proposals were dropped. As of December 2015, 14 SSDCs have been operationalised and the remaining two SSDCs were under implementation. Against the target of 19,800 trainees set for nine SSDCs

operational during the audit period, only 7,360 trainees were provided training by these nine SSDCs, of whom 7,184 trainees had passed out successfully and 6,269 trainees (87 per cent) got job placement as of March 2015.

The Director, CED attributed (August 2015) the non-operationalisation of proposed SSDCs to non-compliance of pre-requisite conditions by some industries/institutes as specified by SLAC.

Among the operational SSDCs, Audit test-checked the records of three SSDCs<sup>41</sup> and in one SSDC operated by TOYOTA, Audit observed that the trainees had been trained on latest machineries and equipment, and also got job placement in same company or other automobile companies. This highlights the fact that the scheme can be helpful in skill development if implemented effectively.

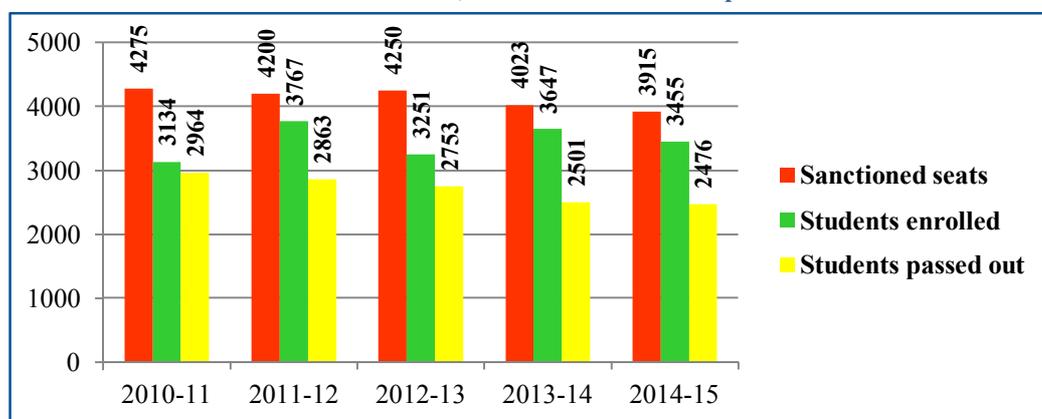
***CED may take proactive steps in respect of SUCs and SDCs to achieve their goal of preparing industry-responsive and technically competent manpower. As the post-training employment was very high under SSDC training, it may consider establishment of more SSDCs for providing employment in specialised service sectors to the youth of Gujarat.***

#### 2.2.8.2 Cottage Industries Training Centres

In the State, there were 43 Cottage Industries Training Centres (CITCs) as of March 2015. Of these 43 CITCs, 26 were functioning in rented buildings. During field visit of seven test-checked CITCs<sup>42</sup>, Audit observed that except CITC Vadodara, all other CITCs were functioning in dilapidated buildings. Though an average of four trades were being operated in each CITC, only two sheds were available in test-checked CITCs for theory as well as practical sessions. Audit observed that no effective steps have been taken by the Commissioner of Cottage Industries (CCI) for construction of new buildings or renovation of existing buildings for providing quality infrastructural facilities to the students of CITCs.

The details of number of seats sanctioned, number of students enrolled *vis-a-vis* number of students passed out from CITCs during the period 2010-15 is shown in **Chart 3** below -

**Chart 3: Details of sanctioned seats, students enrolled and passed out from CITCs**



<sup>41</sup> M/s. TOYOTA Motors Ahmedabad, M/s. Narmadanagar Rural Development Society Dahej and M/s. Rishi FIBC Solution Private Limited, Padra, Vadodara

<sup>42</sup> Kubernagar (Ahmedabad district), Bharuch (Bharuch district), Mehsana (Mehsana district), Halol (Panchmahal district), Morbi (Rajkot district), Vadodara (Vadodara district) and Vapi (Valsad district)

The above chart indicates a decreasing trend in number of students passing out during the period 2010-15. Further, the sanctioned seats for enrolment of students were reduced from 4,275 in 2010-11 to 3,915 in 2014-15 as the training centres had been closed due to shortage of staff.

- **Mismanagement of machineries/equipment**

For up-gradation of CITCs, machineries worth ₹ 7.34 crore were supplied and installed in various CITCs by Gujarat Rural Industries Marketing Corporation (GRIMCO), Gandhinagar during 2007-08. However, Audit observed at test-checked CITCs that four major machineries<sup>43</sup> costing ₹ 3.05 crore were not put to use since their procurement due to non-availability of qualified trainers or specific machineries not being required as per the course curriculum (**Picture 5, 6 and 7**). In CITC Kubernagar, trade of carpentry was running without furniture, machineries and equipment (**Picture 8**). Thus, these machineries were provided without ensuring its requirement/availability of trainers. On the other hand, some trades were operating without availability of basic machines/tools.



**Picture 5: CNC machine transferred from CITC, Morbi due to non-use and lying idle at CITC, Vadodara since 2008-09 (24.07.2015)**



**Picture 6: Surface Grinder machine lying idle at CITC, Halol due to non-availability of qualified trainers since 2008-09 (23.07.2015)**

<sup>43</sup> Nine vertical milling machines (₹ 75.69 lakh), 12 CNC leth machines (₹ 148.92 lakh), Nine Surface Grinding machines (₹ 68.04 lakh) and Nine shaping machines (₹ 12.60 lakh)



**Picture 7: Shaping Machine lying idle due to non-availability of qualified trainers since 2008-09 (07.07.2015)**



**Picture 8: CITC Kubernagar operating without machinery, equipment and furniture since 2008-09 (19.05.2015)**

Commissioner, Cottage Industries stated (December 2015) that in a meeting held in November 2015 with Principal Secretary, LED, it had been decided to hand over all CITCs in the State to DET for efficient and effective use of the machineries and equipment for providing training through ITIs and KVKs.

## **2.2.9 Education Department**

### **2.2.9.1 Working of Gujarat Knowledge Society**

Education Department (ED) established (September 2007) Gujarat Knowledge Society (GKS) with an aim to empower the youth with high expertise skills and open up new employment avenues. GKS was instituted to customise short term courses that can be easily provided to common man at a nominal fee. Fees ranging from ₹ 1,000 to ₹ 4,000 were collected from candidates and shared between Training Partners/Institutional Training Partners (70 per cent towards training cost) and GKS (30 per cent for assessment, certification, etc.). In addition to the above, GKS also implemented eMPOWER scheme of LED and Girls Empowering project of Rashtriya Madhyamik Shiksha Abhiyan (RMSA).

The details of candidates trained by GKS in above schemes during the period 2010-15 are shown in **Table 7** below–

**Table 7: Details of candidates trained by GKS under various schemes**

| Year         | Target set by Government | Candidate Registered (Shown as trained in Regular scheme) | Actual candidates passed out (Regular scheme) | Basic Computer Course (eMPOWER) | Girls Empowering |
|--------------|--------------------------|---|---|---------------------------------|------------------|
| 2010-11      | 50,000                   | 1,23,072  | 85,013  | 00                              | 00               |
| 2011-12      | 50,000                   | 69,090  |   | 00                              | 5,776            |
| 2012-13      | 50,000                   | 16,636  |   | 1,02,483                        | 00               |
| 2013-14      | 50,000                   | 9,314   |   | 50,825                          | 24,479           |
| 2014-15      | 50,000                   | 7,522   |   | 00                              | 00               |
| <b>Total</b> | <b>2,50,000</b>          | <b>2,25,634</b>   | <b>85,013</b>                                 | <b>1,53,308</b>                 | <b>30,255</b>    |

(Source: Information provided by GKS)

The above table shows a downward trend in candidates registered under regular scheme during the period 2010-15. Audit observed that -

- GKS had shown 2.26 lakh registered candidates as their achievement, however, only 0.85 lakh candidates could pass out during the period 2010-15.
- Under eMPOWER, GKS had provided training in Computer Fundamental, MS Office and Networking to 1.53 lakh secondary school students. Audit observed that the training was awarded by GKS to the same private agency that had provided computer system in secondary schools and have been providing training to teachers and students in the schools under RMSA. Thus, providing similar training at school as well as at GKS was duplication and the expenditure incurred proved redundant.

Audit is of the view that GKS could not accomplish its objective to empower the youth with high expertise skills as only around 85,000 candidates have been trained during 2010-15.

***The GKS may encourage their training partners to provide industry-responsive vocational training to the youth of the State to fulfill the needs of industries.***

#### ***2.2.10 Skill Development by other departments***

In the State, seven skill development training schemes are being implemented by five other departments of the State with the help of private training institutes in addition to the schemes discussed in the foregoing paragraphs. The achievements and deficiencies noticed during audit in the implementation of these schemes are discussed in the succeeding paragraphs –

##### ***2.2.10.1 Sant Shri Ravidas High Skill Training Programme***

Social Justice and Empowerment Department (SJED) introduced (March 2008) a training scheme “Sant Shri Ravidas High Skill Training Programme” with an aim to train youth of Scheduled Castes in various employable courses. A Project Management Committee and Taskforce Committee was constituted

(July 2010) for effective implementation of the scheme. SJED issued (between September and December 2011) work orders to 13 private training institutes for providing training in 30 selected courses.

The scheme was implemented in only three cities<sup>44</sup> and the Director, Social Welfare was responsible for implementation of the scheme through District Backward Class Welfare Officer (DBCWO). The overall achievement of job placement against the targets set by SJED during last four years is shown in **Table 8** below –

**Table 8: Details of candidates trained and job placement achieved**

| Cities       | Target set for trainees | Number of candidates trained | Total number of candidates provided job placement | Percentage of job placement to total trained |
|--------------|-------------------------|------------------------------|---|--|
| Ahmedabad    | 47,140                  | 6,937                        | 5,690   | 82   |
| Rajkot       |                         | 1,801                        | 1,321   | 73   |
| Vadodara     |                         | 8,314                        | 4,585   | 55   |
| <b>Total</b> | <b>47,140</b>           | <b>17,052</b>                | <b>11,596</b>                                     | <b>68</b>                                    |

(Source: Information provided by Director, SJED)

The above table shows that the overall achievement was only 17,052 (36 per cent) as against the target of 47,140. On scrutiny of records, Audit observed that -

- Out of 13 agencies identified, two agencies had not imparted any training, while the achievement of another agency was only three per cent, which resulted in shortfall in achievement of target.
- Percentage of female candidates trained was only 3,115 (18 per cent) against envisaged 30 per cent.
- Though issuance of NCVT certificates was made mandatory in the guidelines, the approval of NCVT (MES) for the courses selected for training was not obtained. In absence of NCVT approval, NCVT certificate of Basic Computer Operating, MS Office and Internet was provided to the candidates instead of NCVT certificate for the course in which the training was imparted to the candidates (like web-designing, hardware maintenance, networking, etc.).
- At Ahmedabad, it was observed that same three candidates were included as residential trainees between January and May 2014 by two different training providers. In a similar case, the names of two candidates were shown as trainees in two different courses during overlapping period by a training provider. In yet another such instance noticed in Audit, five candidates were shown as trainees in two different batches during different period of time for the same course by another agency. These instances indicated that the private training institutes might not be submitting correct information of number of candidates trained so as to claim higher course fees from the Government which ranged from ₹ 18,000 to ₹ 30,000 per candidate.

<sup>44</sup> Ahmedabad, Rajkot and Vadodara

- On conduct of beneficiary survey at Rajkot, Audit observed that though a candidate had not participated in training, certificate was issued and fees was claimed from the Government by the agency.

The Director, Social Welfare stated (December 2015) that notices had been issued to the concerned agencies and an amount of ₹ 2.36 lakh have been recovered by DBCWO Ahmedabad from agencies for irregular claim made by them. As regards NCVT certificates, the DBCWO Rajkot stated (July 2015) that only basic certificate of NCVT was provided to the candidates and attributed the non-achievement of targets of trainees to the difficulty in getting candidates.

The Principal Secretary LED in the exit conference stated (December 2015) that 100 *per cent* verification of trainees would be done to find out cases of duplication.

### 2.2.10.2 Vocational Training Centres

Tribal Development Department (TDD) introduced (June 2008) a scheme of Vocational Training Centres (VTC) to provide advanced industry specific employment oriented training with latest machineries to tribal youth with active support of industries in the neighbourhood. The Development Support Agency of Gujarat (D-SAG) of the TDD was responsible for implementation of the scheme. TDD identified (between 2007 and 2010) eight industries/institutes for setting-up of VTC on PPP mode. Government provided land (up to 10 acres), 75 *per cent* of capital cost (building, machineries and equipment) and 100 *per cent* recurring grant. Funds of ₹ 54.18 crore under the scheme was provided through the Tribal Sub Plan grant of GoI during the period 2010-15. The overall achievement of job placement achieved against the targets set by TDD during the period 2010-15 is shown in **Table 9** below –

**Table 9: Details of candidates trained and job placement achieved**

| Year         | Target set for trainees | Number of candidates trained | Job placement achieved | Percentage of job placement |
|--------------|-------------------------|------------------------------|------------------------|-----------------------------|
| 2010-11      | 44,354                  | 1,180                        | 906                    | 77                          |
| 2011-12      |                         | 3,274                        | 2,506                  | 77                          |
| 2012-13      |                         | 4,226                        | 3,330                  | 79                          |
| 2013-14      |                         | 3,228                        | 2,424                  | 75                          |
| 2014-15      |                         | 3,779                        | 2,596                  | 69                          |
| <b>Total</b> | <b>44,354</b>           | <b>15,687</b>                | <b>11,762</b>          | <b>75</b>                   |

(Source: Information provided by D-SAG)

The above table shows that as against the target of 44,354 trainees set for the period 2010-15, the TDD could provide training only to 15,687 candidates (35 *per cent*). Further, the female participation in the scheme was only 17 *per cent* as against the target of 50 *per cent* set by TDD.

On scrutiny of records of three test-checked VTCs<sup>45</sup>, Audit observed that All Gujarat Institute of Driving, Technical Training and Research (AGIDTTR), a

<sup>45</sup> Society for Education Welfare and Action (SEWA) Rural, Jaghadia, All Gujarat Institute of Driving, Technical Training and Research (AGIDTTR), Vaghodia and M/s. Atul, Valsad

VTC was established (September 2009) for tribal youth with an objective to provide training to at least 5,200 trainees per year. On scrutiny of records, it was observed that –

- Against sanctioned posts of 40 instructors/technicians, only 14 could be appointed as of July 2015.
- Against target of 5,200 candidates per annum, only 6,822 candidates could be trained between September 2009 and July 2015.
- Out of 18 courses sanctioned, only one driving course (Light Motor Vehicle and Personality Development Training) could be operated continuously by AGIDTTR. In addition, AGIDTTR also commenced another driving course (LMV Commercial Driving Training) from 2014-15. However, none of the remaining 16 courses were operated during 2010-15.
- Only two simulators and 10 vehicles were available with AGIDTTR as of July 2015, which were not sufficient for providing training to 300 candidates enrolled at a time. Practical training of only 10 hours (2.5 hours on simulator and 7.5 hours of driving) was provided to each candidate during 45 days residential training programme.

Audit observed that due to shortage of instructors and vehicles, target of trainees could not be achieved by AGIDTTR. The Deputy Director (AGIDTTR) stated (July 2015) that matter of increasing the number of instructors and vehicles were under process.

### **2.2.10.3 High Quality Employment Oriented Skill Training Programme**

To provide short-term training in high-demand and need-based trades to unemployed tribal youth of the State, TDD implemented (2010-11) High Quality Employment Oriented Skill Training Programme (HQEOSTP). The Development Support Agency of Gujarat (D-SAG) was responsible for implementing the scheme. The skill training under the scheme was provided by selected private training institutes.

The TDD released funds of ₹ 49.30 crore (₹ 39.80 crore from GoI and ₹ 9.50 crore from State budget) to D-SAG during the period 2010-15 and D-SAG incurred expenditure of ₹ 34.45 crore as of March 2015. D-SAG had selected 15 private training institutes through e-tendering in three phases. The overall achievement of job placement achieved by private training institutes against the targets set by D-SAG during Phases I to III are shown in **Table 10** below –

**Table 10: Details of candidates trained and job placement achieved**

| Phases              | Target set for trainees | Number of candidates trained | Percentage of target achieved | Job placement achieved | Percentage of job placement |
|---------------------|-------------------------|------------------------------|-------------------------------|------------------------|-----------------------------|
| I                   | 10,880                  | 7,180                        | 66                            | 5,858                  | 82                          |
| II                  | 11,190                  | 4,371                        | 39                            | 2,859                  | 65                          |
| III                 | 15,240                  | 2,746                        | 18                            | 1,372                  | 50                          |
| Other <sup>46</sup> | 1,000                   | 449                          | 45                            | 365                    | 81                          |
| <b>Total</b>        | <b>38,310</b>           | <b>14,746</b>                | <b>39</b>                     | <b>10,454</b>          | <b>71</b>                   |

(Source: Information furnished by D-SAG)

<sup>46</sup> CIPET, Ahmedabad and Indo German Tool Room (IGTR), Ahmedabad

On scrutiny of the records, Audit observed the following in the implementation of the scheme -

- Against the target of 38,310 candidates allotted to training institutes, training could be provided to only 14,746 (39 per cent) candidates during the period 2010-15.
- Out of 35 trades allotted to private training institutes, targets were achieved only in three trades while in seven other trades, no training was imparted.
- D-SAG had not identified any sector, course or trade with reference to the requirement of tribal youth, geographical areas of tribal inhabitations, needs of industries in tribal areas, etc. The private training institutes themselves proposed the areas/sectors in which they were interested in imparting training and submitted the same in the tender documents.
- Though issuance of NCVT certificates was made mandatory in the guidelines, the approval of NCVT (MES) for the courses selected for training was not obtained. In absence of NCVT approval, certificate of lowest module of MES of IT sector was issued to the candidates.
- Uniformity in the courses were not ensured as same courses were conducted by different private training institutes with different durations and different fee structures.

From the above, it could be seen that the monitoring of D-SAG was not effective as no efforts were made by D-SAG either to issue instructions or to take action against the private training institutes for the shortfall in achievement of targets.

The CEO, D-SAG stated (December 2015) that due to lack of interest on the part of tribal youth and non-availability of grant, the target of training the number of trainees could not be achieved.

#### **2.2.10.4 Mission Manglam Skill Development Programme**

The Panchayats, Rural Housing and Rural Development Department introduced (September 2011) Mission Mangalam Skill Development Programme (MMSDP) with the objective to enhance employment opportunities for rural youth in the State. Gujarat Livelihood Promotion Company Limited (GLPC) - a State owned company, was responsible for implementation of the scheme. The scheme was implemented by engaging private training partners termed as Skill Development Partners (SDPs) on PPP mode. GLPC entered (January-July 2014) into Memorandums of Understanding with four SDPs and allocated target of training 4,800 candidates within one year with dual conditions of providing training to 30 per cent female candidates and 75 per cent job placement to successful candidates.

Audit observed that as of March 2015, GLPC could utilise only ₹ 0.37 crore out of available funds of ₹ 12.55 crore. Agency-wise details of candidates enrolled *vis-a-vis* job placement provided against the target is shown in **Table 11** as follows –

**Table 11: Details of agency-wise candidates enrolled vis-a-vis placed on job upto March 2015**

| Name of SDP                               | Target allotted | Number of candidates enrolled | Percentage of achievement | Number of candidates passed             | Number of candidates placed on job |
|---|-----------------|-------------------------------|---------------------------|---|------------------------------------|
| M/s. ICA Infotech Private Limited, Rajkot | 1,000           | 225                           | 23                        | 121<br>(100 candidates' result awaited) | 95                                 |
| M/s. CL Educate                           | 2,000           | 377                           | 19                        | 377                                     | 275                                |
| M/s. Ambuja Cement Foundation             | 1,000           | 231                           | 23                        | (Result awaited)                        | 96                                 |
| M/s. Gramin Vikas Trust                   | 800             | 322                           | 40                        | 128                                     | 226                                |
| <b>Total</b>                              | <b>4,800</b>    | <b>1,155</b>                  | <b>24</b>                 | <b>626</b>                              | <b>692</b>                         |

(Source: Information furnished by GLPC)

The above table shows that the achievement as regards enrolment of candidates by the four SDPs against the target allocated to them was only 24 per cent. Audit observed that though funds were available with GLPC since 2011-12, the selection of SDPs was delayed by more than two years due to non-finalisation of terms and conditions of the contracts. Audit further observed that -

- One SDP after completing training for 322 candidates, stopped the training due to non-payment of funds by GLPC.
- Similarly, SDP at Rajkot also stopped the training after completing training of two batches due to lack of co-operation from GLPC.

Thus, despite availability of ₹ 12.55 crore, the objective of enhancing employment opportunities to the rural youth could not be achieved due to ineffective implementation of the scheme by GLPC. The Commissioner, Rural Development in the exit conference stated (December 2015) that the payment was not made to any agency due to pending verification of data at GLPC level.

#### **2.2.10.5 Deen Dayal Upadhyaya - Grameen Kaushalya Yojana**

GoI introduced (2013-14) Deen Dayal Upadhyaya – Grameen Kaushalya Yojana<sup>47</sup> (DDU-GKY) with the objective to drive the national agenda for inclusive growth, by developing skills and productive capacity of the rural youth from poor families. It bridges the gap of formal education and marketable skills, by funding training projects benchmarked with global standards, with an emphasis on placement, retention, career progression and foreign placement. The expenditure of the scheme was sharable in the ratio of 75:25 between GoI and the State Government. GLPC was responsible for implementation of the scheme.

As per Annual Action Plan (2013-14), 45,000 candidates were to be covered by GLPC and accordingly, GoI released (November 2013) ₹ 31.73 crore as central share and the State Government released (December 2013) its matching share of ₹ 10.57 crore to the GLPC. In turn, GLPC released (August 2014-February

<sup>47</sup> Initially scheme was named "Aajeevika Skills" which was renamed as DDU-GKY

2015) ₹ 24.44 crore as first installment (advance 25 per cent) to 18 selected Project Implementing Agencies (PIAs).

Audit observed that 16 out of above 18 PIAs had started (2014-15) the training programme. As of March 2015, against the target of 45,000 candidates for 2013-14, the PIAs had enrolled only 3,312 candidates due to delay in their selection by GLPC. Out of 3,312 candidates, only 587 candidates had passed out successfully, however, 1,009 candidates got job placement.

***GLPC may exercise strict control over the private training partners to achieve the targets set for them for providing vocational training to rural youth of the State to enable them to get sustainable employment in industries/services sectors.***

#### **2.2.10.6 General Training Scheme**

Women and Child Development Department (WCDD) introduced General Training Scheme (GTS) for up-gradation of skill of women in the State. Gujarat Women's Economic Development Corporation Limited (GWEDCL), Gandhinagar was responsible for implementation of the scheme by providing training through Non-Government Organisations (NGOs) to BPL women between the age group of 18 to 35. The training were being provided in 27 trades during 2010-15 like beauty parlour, tailoring, sewing, etc. WCDD released ₹ 13.20 crore to GWEDCL during the period 2010-15 and the GWEDCL incurred an expenditure of ₹ 9.24 crore. As per the information furnished by GWEDCL, against the target of 64,724 candidates to be trained by the NGOs under the scheme during the period 2010-15, 58,188 candidates have been trained by the NGOs. Audit observed that –

- GWEDCL had not fixed any syllabi for these courses nor made provision for administering any examination for the courses.
- On scrutiny of records of test-checked NGOs, it was observed that though the work order issued stipulated training for five hours per day, the NGOs had provided training for only two to three hours.
- Records of employment or self-employment generated for the candidates from the training were not being maintained either by the GWEDCL or the NGOs. As such the success or otherwise of the skills developed under this scheme could not be vouchsafed in Audit.

GWEDCL stated (December 2015) that from 2015-16 instructions had been issued to impart training for five hours a day. It was also stated that henceforth the records of employment/self-employment generated post-training would be maintained.

#### **2.2.11 Outcome of Beneficiary Survey**

Audit conducted a telephonic survey of ten candidates at each selected training provider to obtain feedback about training quality, their present status of employment and monthly remuneration/income obtained. The telephonic survey was conducted in presence of the officials of field units and were got authenticated.

Outcome of 1,060 telephonic interviews in the survey revealed that 410 trainees (39 per cent) got employed post training, 255 (24 per cent) became self-employed and 395 (37 per cent) remained un-employed. Out of 410 employed candidates, 179 candidates (44 per cent) received salary below the minimum wage rate of ₹ 6,960 per month and 231 (56 per cent) candidates received salary above the minimum wage rate.

Analysis of telephonic survey revealed that out of 1,060 candidates surveyed, 270 were from KVKs out of whom 23 (nine per cent) got employment, 390 were from ITIs/CITCs out of whom 184 (47 per cent) got employment and 400 were from other PPP mode schemes out of whom 203 (51 per cent) got employment.

The above analysis indicated that urgent steps are required to be taken to strengthen the institutional mechanism so that post-training employability and opportunities for the candidates are enhanced. The Principal Secretary LED in the exit conference (December 2015) assured to initiate necessary action in the matter.

### **2.2.12 Monitoring and Evaluation**

#### **2.2.12.1 Functioning of web-portal developed by GSDM**

GSDM acts as an apex body for monitoring, evaluation, coordination, convergence and providing overall policy direction for skill development activities in Gujarat. GSDM was responsible for collecting data and providing a complete picture of skill development programmes being implemented in the State to provide analysis in respect of skill-wise, area-wise and beneficiary group-wise data of the candidates trained under various schemes, information relating to their employment, average salary received, etc.

To give effect to this approach, GSDM had developed a comprehensive web-portal ([www.gsdm.in](http://www.gsdm.in)) with following features -

- Free and open on-line registration for all the training institutes providing employable skill training and prospective employers posting job requirements;
- Uploading of the list of candidates in each institute for each course in the public domain;
- List of ranking of all the courses being imparted in the State showing clearly the supply *i.e.* number being trained, demand, placement and average salary; and
- Listing and ranking all the institutes of the State on the basis of placement percentage, average salary and employability index.

Audit observed that web-portal developed (2011) by GSDM became non-operational in 2013. In absence of the web-portal, transparency in delivery of programme could not be ensured, as many cases of duplication of candidates among same as well as different schemes were noticed by Audit as discussed in succeeding paragraphs.

The Principal Secretary LED in the exit conference stated (December 2015) that new skill registry portal was under consideration for overall monitoring and data bank.

***GSDM may ensure that the web-portal under consideration be developed in a time-bound manner and put to use at the earliest. It may also ensure placement of trainees with remunerative salaries.***

#### ***2.2.12.2 Incorrect reporting of number of trainees due to multi-skilling or repetition of trainings***

The issues of duplicate certificates, bogus candidates and multiple trainings to the same student are grave concerns for effective implementation of skill development programmes. To resolve this issue, a common web-portal is an absolute necessity to capture the details. Audit observed that the web-portal developed by GSDM had these features and could have helped in reducing the instances of duplication, multiple trainings to same candidates, etc.

Audit analysis of available data on web-portal under three major schemes revealed large number of duplications in same scheme and multiple trainings being availed of by same candidates as shown in **Table 12** as below –

**Table 12: Statement showing duplication/repetition of candidate in three major schemes**

| Sr. No. | Name of the schemes  | Number of beneficiaries trained as stated by the department | Number of beneficiaries who had been trained for more than once | Total number of training obtained by beneficiaries shown in column (4) | Excess number of trainees reported due to multiple training by same beneficiaries (5) – (4) | Actual number of beneficiaries trained after deducting duplication |
|---------|----------------------|---|---|--|---|--|
| 1       | 2                    | 3   | 4   | 5  | 6   | 7  |
| 1(a)    | MES Direct test      | 62,498  | 3,644   | 7,653  | 4,009   | 58,489   |
| 1(b)    | MES through Training | 82,612  | 3,492   | 9,835  | 6,343   | 76,269   |
| 2(a)    | GKS (eMPOWER)        | 1,53,308  | 3,282   | 6,774  | 3,492   | 1,49,816   |
| 2(b)    | DET (eMPOWER)        | 7,66,179  | 81,109  | 1,79,121   | 98,012  | 6,68,167   |
| 3       | KVK                  | 11,28,989   | 1,87,335  | 5,33,768   | 3,46,433  | 7,82,556   |
|         | <b>Total</b>         | <b>21,93,586</b>  | <b>2,78,862</b>   | <b>7,37,151</b>  | <b>4,58,289</b>   | <b>17,35,297</b>   |

Audit analysis of these schemes revealed that the achievement figures reported were in excess by 4.58 lakh due to duplication/multiple trainings imparted to the same candidates.

Director (DET) stated (December 2015) that the web-portal had no facility to check/avoid duplication under MES scheme. It was further stated that many of the training modules are such which supplement each other under KVK and eMPOWER schemes and hence, trainees prefer to undergo training in more than one module. The CEO (GKS) stated (July 2015) that many students after enrolling in MIS had not paid fees which resulted in appearance of their names second time in MIS list. However, the fact remains that the total skilled

manpower was over-reported by 4.58 lakh as the multiple trainings under KVK and eMPOWER by some candidates; and enrolment of some candidates for second time in GKS does not account for additional manpower skilled under these schemes.

### ***2.2.12.3 Convening meetings of Governing Body and Executive Committee of GKS***

As per the Article of Association of GKS, the Governing Body (GB) chaired by the Hon'ble Minister of Education was required to meet at least two times in a year. Similarly, the Executive Committee (EC) chaired by the Principal Secretary of ED was to meet at least four times in a year. However, it was observed that no meeting of the GB was held while the EC met only twice (October 2010 and September 2011) during the period 2010-15.

The CEO (GKS) stated (July 2015) that the required meetings could not be convened due to several engagements of GKS officers towards achieving the primary objectives. However, the primary objectives of GKS could not be achieved as only around 85,000 candidates were trained during 2010-15 as mentioned in paragraph 2.2.9.1.

### ***2.2.13 Conclusions and Recommendations***

Government of India had introduced National Skill Development Policy, 2009 to empower all individuals through improved skills to gain access to decent employment and ensure India's competitiveness in the global market. Some areas of concern relating to implementation of various skill development schemes are highlighted below -

- Gujarat Skill Development Mission (GSDM) had not formulated a uniform skill development policy even though it was decided (June 2010) in the meeting chaired by Hon'ble Chief Minister of the State. In absence of a uniform policy, concerned departments had started implementing skill training programmes without uniform syllabus, duration of course and fee structure. Certificates of National Council of Vocational Training/Gujarat Council of Vocational Training were not provided in majority of cases by private training institutes thus defeating the chances of a sustainable job opportunity to candidates and enhanced the possibility of their exploitation.

***The Government may formulate a comprehensive Skill Development Policy and initiate concrete steps in a time bound manner for implementation of all actionable points as decided in the meeting of Executive Committee of GSDM held on 30 June 2010. Further, steps may be taken to impart the skill development training as per the criteria of NCVT or GCVT and certificates recognised by these institutions may be issued to all trainees to enable them to get better jobs.***

- Though State Government had increased numbers of ITIs and new batches in Craftsman Training Scheme, average students passing out from these institutes remained almost static. Audit also noticed cases of drop-out, under utilisation of machineries and lack of adequate manpower in some of the test-checked ITIs.

***The Government may take action for optimal utilisation of machineries lying idle and the vacant posts in all ITIs may be filled-up, as adequate manpower is necessary for service delivery.***

- In Kaushalya Vardhan Kendras, as against the target of 12.96 lakh, only 7.83 lakh (60 per cent) candidates got training during the period 2010-15. As per beneficiary survey carried out of 270 candidates trained in Kaushalya Vardhan Kendras, only nine per cent got job placement. Modern machineries purchased for various trades in test-checked KVKs were lying idle due to non-availability of technical instructors.

***The Government may appoint the technical instructors in KVKs for efficient utilisation of modern machineries for providing employable training to youth of rural areas.***

- Against the target of 200 Skill Up-gradation Centres (SUCs) with capacity of 1.5 lakh trainees per year were to be set-up by Centre for Entrepreneurship Development (CED) under Industrial Policy 2009, the CED had set-up only 39 SUCs and training to only 0.14 lakh candidates could be imparted till March 2015. Against the target of 10 Skill Development Centres (SDCs) for short term bridge courses and 40 Specialised Skill Development Centres (SSDC) to be set-up by CED on PPP mode, only five and 14 got operationalised respectively due to non-compliance of pre-requisite conditions by some industries/institutes.

***CED may take proactive steps in respect of SUCs and SDCs to achieve their goal of preparing industry-responsive and technically competent manpower. As the post-training employment was very high under SSDC training, it may consider establishment of more SSDCs for providing employment in specialised service sectors to the youth of Gujarat.***

- GKS could not accomplish its objective to empower the youth with high expertise skills as only around 0.85 lakh candidates have been trained against the target of 2.50 lakh during 2010-15.

***The GKS may encourage their training partners to provide industry-responsive vocational training to the youth of the State to fulfill the needs of industries.***

- The GLPC under Mission Mangalam Skill Development Programme and Deen Dayal Upadhyaya – Grameen Kaushalya Yojana could provide training to only 24 per cent and seven per cent candidates respectively against the target of number of trainees set for the private training partners.

***GLPC may exercise strict control over the private training partners to achieve the targets set for them for providing vocational training to rural youth of the State to enable them to get sustainable employment in industries/services sectors.***

- Audit scrutiny revealed that the web-portal pertaining to skill development was not functional. Audit found that only a third of trained persons received a good salary while more than a third remained

unemployed post their skill development training. Also a remunerative salary eluded almost 44 *per cent* of employed candidates surveyed, as they received salaries less than minimum wages fixed by the State.

***GSDM may ensure that the web-portal under consideration be developed in a time-bound manner and put to use at the earliest. It may also ensure placement of trainees with remunerative salaries.***

## URBAN DEVELOPMENT AND URBAN HOUSING DEPARTMENT

### 2.3 Functioning of Vadodara Urban Development Authority

#### Executive summary

*Vadodara Urban Development Authority (VUDA) was established (January 1978) under Gujarat Town Planning and Urban Development (GTP&UD) Act, 1976 for planned growth and systematic development in urban areas. The main functions of VUDA include preparation of a holistic Development Plan and zone-wise town planning schemes, execution of town planning schemes, control and execution of development work in accordance with the Development Plan, and to acquire/hold/manage/dispose of property, etc. The First Development Plan of VUDA was finalised in 1984 and got revised in 1996 and 2012. Out of 20 Town Planning (TP) Schemes submitted by VUDA, the State Government had approved finally/preliminarily 11 TP schemes till date. The performance audit on “Functioning of VUDA” was conducted for the period 2010-15 between May and June 2015 and the following deficiencies were noticed –*

- *There was delay in preparation of Development Plans and TP schemes.*
- *As against 53 TP schemes proposed in the First Revised Development Plan, VUDA had proposed only four TP schemes. The reservation of land for specific purposes in the TP schemes was not made as per the provisions of GTP&UD Act i.e. as against 10 per cent of land to be earmarked for Socially and Economically Weaker Section (SEWS) beneficiaries, the land reserved for SEWSs in 11 TP schemes ranged between 2.69 and 6.74 per cent only.*
- *As against ₹ 292.31 crore of funds received during the period 2010-15, VUDA could utilise only ₹ 118.18 crore.*
- *The land acquired for Transport Nagar-cum-Logistic Park during 2000-04 remained undeveloped till date (January 2016) due to non-acquisition of a piece of land in the central portion of the site and delay in appointment of consultants, preparation of designs, etc.*
- *Out of 242 plots allotted to VUDA in 11 TP schemes for residential/commercial units for sale, SEWS housing, parks and garden, etc., only 17 plots could be sold/developed by VUDA. No efforts were made by VUDA to transfer the ownership of land/plots allotted to VUDA from the name of original land owners.*
- *Though creation of basic amenities and infrastructure were provided in the Development Plans and TP schemes, VUDA had executed only road works as a result of which the people residing in the VUDA area were deprived of water supply system, drainage and sewerage system, street lights, parks and gardens, etc.*
- *A scheme of 2011 for providing one time concession to the owners to regularise unauthorised/irregular constructions was not implemented effectively.*

- ***Economically Weaker Section (EWS) beneficiaries evacuated from Madhavnagar and Keshavnagar EWS housing complex, owing to collapse of blocks of Madhavnagar could not be rehabilitated till date of Audit (June 2015) owing to delay in commencement of construction work and stoppage of work by the contractor.***
- ***Irregularities in execution of road works and irregular/avoidable payment to the contractors were observed in Audit.***
- ***Internal control and grievance redressal mechanism was not effective and there was shortage of 61 per cent of technical staff against the sanctioned strengths.***

### ***2.3.1 Introduction***

Owing to rapid urbanisation, cities are prone to expand beyond their territorial limits. Keeping this in view, Vadodara Urban Development Authority (VUDA) was established (January 1978) under Gujarat Town Planning and Urban Development (GTP&UD) Act, 1976 for planned growth and systematic development of urban areas. The urban areas to be developed are allotted by the State Government to the Urban Authorities. The jurisdiction of VUDA extends to 104 villages of Vadodara, Vaghodia and Padra Taluka of Vadodara district comprising an area of 714.56 square kilometre (sq. km.). The main functions of VUDA include preparation of a holistic Development Plan and zone-wise town planning schemes, execution of Town Planning schemes, control and execution of development work in accordance with the development plan, and to acquire/hold/manage/dispose of property, etc. Development Plans have been prepared by VUDA by dividing the available land into 13 zones.

### ***2.3.2 Organisational set-up***

VUDA is under the administrative control of the Urban Development and Urban Housing Department (UD&UHD) and is governed by a Board consisting of a Chairman and other Members. Member Secretary of the Board appointed by the Government is the Chief Executive Authority of VUDA.

### ***2.3.3 Audit objectives***

The Performance Audit was conducted to assess whether –

- the Development Plans and Town Planning schemes prepared were comprehensive, adequate and realistic;
- adequate funds were available and utilised efficiently;
- the developmental works envisaged in the Development Plan and Town Planning schemes were executed efficiently and effectively; and
- Internal control mechanism was adequate and effective.

### ***2.3.4 Audit criteria***

The Audit criteria applied for this Performance Audit was -

- Gujarat Town Planning and Urban Development Act, 1976, Gujarat Town Planning and Urban Development Rules, 1979 and General Development Control Regulations (GDCR);

- Development Plans and Town Planning Schemes;
- Urban/Area Development Authority (Disposal of Land other Properties) Regulation, 2002; and
- Guidelines/orders issued by UD&UHD and Minutes of the Board meetings.

### **2.3.5 Audit scope and methodology**

To assess the working of VUDA and to ascertain whether the developmental activities were carried out as per the provisions made in Gujarat Town Planning and Urban Development (GTP&UD) Act, 1976, Gujarat Town Planning and Urban Development Rules, 1979 and General Development Control Regulations (GDCR), records at VUDA for the period 2010-15 were test-checked by Audit between May and June 2015. An entry conference was held (May 2015) with the Deputy Collector of VUDA to apprise the Audit objectives and Audit methodology. An exit conference was held (29 January 2016) with Deputy Secretary of Urban Development and Urban Housing Department (UD&UHD). The views of the department have been considered and incorporated in the report.

### **Audit findings**

The audit findings pertain to works executed with respect to First Development Plan (1984) and First Revised Development Plan (1996). The Second Revised Development Plan (2011) has not been covered in Audit as its execution period extends upto the year 2031.

### **2.3.6 Planning**

#### **2.3.6.1 Preparation and implementation of Development Plans**

GTP&UD Act, 1976 and Rules made thereunder provides that a Comprehensive Development Plan indicating urban land use map as well as physical development plan should be prepared and published within three years of the constitution of the Authority. The Act further stipulates that the Development Authority shall revise the Development Plan at least once in 10 years from the date on which a final development plan came into force.

The First Development Plan of VUDA was finalised in 1984 and got further revised in 1996 and 2012. There was no record to indicate the reasons for such delay in finalising the plan. Audit noticed that the First Development Plan was not comprehensive as the details of Town Planning (TP) schemes to be taken up for the development of earmarked areas were not included in the Plan. The First Revised Development Plan envisaged 53 TP schemes while the Second Revised Development Plan envisaged 75 TP schemes. Due to absence of a Comprehensive Plan, there was disorderly development with excessive pressure on existing infrastructure.

All the Development Plans set specific targets on share of land use for residential, commercial, industrial, public/institutional, water bodies, environmental sensitive zones and other utilities to be achieved by 2001, 2011 and 2031 respectively (**Appendix-XII**). However, no Annual Action Plans in line with such targets were prepared (May 2015) by VUDA for regulated implementation of the respective Development Plans.

VUDA accepted (June 2015) that the First Development Plan was not comprehensive and the extent of disorderly development could be assessed after conducting survey which could be to the extent of five to 10 *per cent*. It was further stated that the annual action plan would be prepared for achieving the target set in the Second Revised Development Plan. The Deputy Secretary UD&UHD in the exit conference stated (January 2016) that henceforth, instructions would be issued for preparation of comprehensive Development Plan and delay in finalisation of Development Plan would be avoided in future.

#### ***2.3.6.2 Preparation of Town Planning (TP) Schemes***

The GTP&UD Act provides that the Development Authority shall undertake preparation of TP schemes. Before making any TP schemes, appropriate authority shall, by resolution, declare its intention to make such a scheme in respect of such area and prepare and publish the draft scheme in Official Gazette within nine months from the date of declaration of intention and submit draft scheme to Government for sanction. The State Government may sanction such scheme, within six months from the date of its receipt, by notification, sanction such scheme with or without modifications or subject to such conditions as it may think fit to impose (or refuse to sanction it). The approval of the TP scheme takes place in three stages *i.e.* approval of draft scheme, preliminary approval of scheme and then final approval.

Though no TP scheme was proposed in the First Development Plan, VUDA had submitted (1984-96) 10 draft TP schemes to the State Government for approval and the State Government had accorded final approval for three TP schemes and preliminary approval for another four TP schemes. The First Revised Development Plan envisaged in 1996 that 53 TP schemes would be implemented by 2011. However, only four draft TP schemes have been submitted by VUDA to the State Government till date (June 2015). Out of these, only two schemes have been finally approved by the State Government (**Appendix-XIII**). Non-preparation of envisaged TP schemes and delay in approval of the draft TP schemes resulted in unorganised and slow development of the earmarked area, as marking of the final plot, its sale and allotment of land could be done only after receipt of preliminary approval.

VUDA while admitting slow development due to delay in approval of TP schemes stated (June 2015) that the delay occurred mainly due to adhering to prescribed procedures such as issue of notice to individuals and hearing them. The Deputy Secretary UD&UHD in the exit conference stated (January 2016) that recently Government had issued (August 2014) instructions for finalising the TP schemes within 18 months from the date of appointment of Town Planning Officer for a TP scheme, thus, the delay would be avoided in future.

#### ***2.3.6.3 Provisions for reservation/allotment of land in Town Planning Schemes***

As per the provision of GTP&UD Act, 50 *per cent* of the total land proposed in a TP scheme may be allotted for plot holders while the remaining land may be earmarked for Road (15 *per cent*), Parks/Play-grounds/Garden/Open space (five *per cent*), social infrastructure<sup>48</sup> (five *per cent*), plots for sale by VUDA (15 *per cent*) for commercial/residential purposes and housing for members of

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<sup>48</sup> such as school, dispensary, fire brigade, public utility place, *etc.*

socially and economically weaker sections (10 per cent). The details of land earmarked for specific purposes in 11 TP schemes preliminarily and finally approved by the State Government (May 2015) is shown in **Table 1** below –

**Table 1: Land earmarked for specific purposes in TP schemes**  
(Area in square metre)

| Name of TP scheme    | Total Area of TP | Area allotted to plot holders | Area for Socially and Economically Weaker Section | Area for sale by VUDA | Area for Park/Garden/Open Space | Area for Social Infrastructure | Area for Roads          |
|----------------------|------------------|-------------------------------|---|-----------------------|---------------------------------|--------------------------------|-------------------------|
| Bhayli TP-1          | 8,50,000         | 4,48,629(52.78)               | 28,135(3.31)                                      | 41,335(4.86)          | 2,016(0.24)                     | 14,785(1.74)                   | 3,15,100(37.07)         |
| Bhayli TP-2          | 6,84,692         | 4,64,672(67.87)               | 33,419(4.88)                                      | 43,180(6.31)          | 835(0.12)                       | 15,080(2.20)                   | 1,27,506(18.62)         |
| Bhayli TP-3          | 7,10,638         | 5,01,723(70.60)               | 32,487(4.57)                                      | 29,318(4.13)          | 6,462(0.91)                     | 21,327(3.00)                   | 1,19,321(16.79)         |
| Bhayli TP-4          | 7,40,142         | 4,86,457(65.72)               | 26,420(3.57)                                      | 26,086(3.52)          | 13,414(1.81)                    | 16,092(2.17)                   | 1,71,673(23.19)         |
| Bil TP-1             | 9,38,322         | 6,25,349(66.65)               | 46,640(4.97)                                      | 57,736(6.15)          | 25,173(2.68)                    | 5,659(0.60)                    | 1,77,765(18.94)         |
| Khanpur-Ankodia TP-2 | 6,30,000         | 3,58,935(56.97)               | 17,903(2.84)                                      | 27,080(4.30)          | 3,701(0.59)                     | 18,812(2.99)                   | 2,03,569(32.31)         |
| Nimetha TP-1         | 7,88,900         | 5,15,983(65.41)               | 21,258(2.69)                                      | 80,490(10.20)         | 1,062(0.13)                     | 6,746(0.86)                    | 1,63,361(20.71)         |
| Padra TP-1           | 6,71,000         | 5,35,592(79.82)               | 45,197(6.74)                                      | 11,661(1.74)          | 1,075(0.16)                     | 0(0.00)                        | 77,475(11.55)           |
| Padra TP-2           | 5,85,600         | 5,06,360(86.47)               | 29,723(5.08)                                      | 10,393(1.77)          | 1,709(0.29)                     | 15,255(2.61)                   | 2,2160(3.78)            |
| Sevasi TP-1          | 7,36,974         | 4,76,121(64.60)               | 31,775(4.31)                                      | 33,257(4.51)          | 2,603(0.35)                     | 16,129(2.19)                   | 1,77,089(24.03)         |
| Vemali TP-1          | 7,00,000         | 4,68,622(66.95)               | 24,788(3.54)                                      | 43,026(6.15)          | 8,674(1.24)                     | 4,273(0.61)                    | 1,50,617(21.52)         |
| <b>Total</b>         | <b>80,36,268</b> | <b>53,88,443(67.05)</b>       | <b>3,37,745(4.20)</b>                             | <b>4,03,562(5.02)</b> | <b>66,724(0.83)</b>             | <b>1,34,158(1.67)</b>          | <b>17,05,636(21.22)</b> |

(Source: Information furnished by VUDA)

**Note: Figures in bracket indicate percentage to total area**

From above table it can be seen that the prescribed proportion of land to be earmarked for specific purposes was not adhered to in the above TP schemes prepared by the VUDA. The Socially and Economically Weaker Sections were deprived of housing facility as the land reserved in the TP schemes for them ranged between 2.69 and 6.74 per cent as against the prescribed 10 per cent of total land area of the TP scheme.

The Deputy Secretary UD&UHD in the exit conference stated (January 2016) that prescribed proportion of land earmarked for specific purposes would be ensured in forthcoming TP schemes.

***The provisions of GTP&UD Act for reservation of land for specific purposes in the TP schemes may be adhered to for an orderly development of the TP area.***

### 2.3.7 Financial Management

#### 2.3.7.1 Receipt and Expenditure

VUDA generates its own capital and revenue funds. Major components of capital receipts are sale proceeds of plots and residential flats/shops, premium collection on leased plots, recovery of development charges, collection of incremental contribution in the area, etc. Major components of revenue receipts are recovery of fines, supervision charges and rent of land and building, income by sale of tender forms, forfeiture of deposits, etc. VUDA also receives capital grants from the State Government for approved projects such as drainage, sewerage, water supply, etc. Capital receipts are utilised for carrying out construction of building and development activities. Revenue receipts are utilised for establishment and administrative expenses. Year-wise details of

receipts and expenditure of VUDA during the period 2010-15 is shown in **Table 2** below –

**Table 2: Receipt and Expenditure of VUDA during 2010-15**

| Year         | Receipts      |               |               | Expenditure  |              |               | Surplus(+)<br>Deficit (-) | Percentage of<br>Expenditure |           |
|--------------|---------------|---------------|---------------|--------------|--------------|---------------|---------------------------|------------------------------|-----------|
|              | Capital       | Revenue       | Total         | Capital      | Revenue      | Total         |                           | Capital                      | Revenue   |
| 2010-11      | 5.33          | 39.51         | 44.84         | 4.88         | 3.72         | 8.60          | 36.24                     | 92                           | 09        |
| 2011-12      | 7.08          | 5.18          | 12.26         | 8.42         | 2.68         | 11.10         | 1.16                      | 119                          | 52        |
| 2012-13      | 43.63         | 12.30         | 55.93         | 19.27        | 3.68         | 22.95         | 32.98                     | 44                           | 30        |
| 2013-14      | 53.88         | 23.19         | 77.07         | 23.70        | 4.12         | 27.82         | 49.25                     | 44                           | 18        |
| 2014-15      | 63.38         | 38.83         | 102.21        | 42.77        | 4.94         | 47.71         | 54.50                     | 67                           | 13        |
| <b>Total</b> | <b>173.30</b> | <b>119.01</b> | <b>292.31</b> | <b>99.04</b> | <b>19.14</b> | <b>118.18</b> | <b>174.13</b>             | <b>57</b>                    | <b>16</b> |

(Source: Information furnished by VUDA)

From the above table it can be seen that capital receipts of VUDA increased from the year 2011-12 onwards, which was mainly due to levy of amenities fees (January 2012) and income from sale of plots (2013-14). However, VUDA could utilise only ₹ 118.18 crore (40 per cent) as against total receipt of ₹ 292.31 crore during the period 2010-15. The capital expenditure was only ₹ 99.04 crore (57 per cent) as against capital receipt of ₹ 173.30 crore and the revenue expenditure was only ₹ 19.14 crore (16 per cent) as against revenue receipt of ₹ 119.01 crore. The capital expenditure includes repayment of loan (₹ 2.74 crore) and refund of funds (₹ 10.00 crore) received from State Government under Swarnim Jayanti Mukhyamantri Shaheri Vikas Yojana (SJMSVY). Thus, the capital expenditure on development activities was only ₹ 86.30 crore. Though the yearly capital expenditure had increased over the period 2010-15, it was seen that capital projects like Sewerage, Drainage, Water Supply, etc. proposed in the approved TP schemes were not taken up.

The Deputy Secretary UD&UHD in the exit conference stated (January 2016) that capital projects and development activities would be carried out in due course.

### 2.3.7.2 Seed money loan

VUDA received (1977-96) ₹ 5.34 crore<sup>49</sup> as seed money from the State Government. The seed money was sanctioned as interest free loan upto April 1985 and thereafter interest and penal interest at the rate of 11 and 2.5 per cent per annum respectively was payable. The GTP&UD Act provides that repayment of loans shall have priority over all other payments. Even the State Government issued (December 2003) instructions for repayment of seed money. However, Audit observed that VUDA had repaid only ₹ 4.35 crore<sup>50</sup> upto March 2000 and the interest liability had increased to ₹ 5.96 crore<sup>51</sup> as of March 2015.

VUDA stated (May 2015) that due to paucity of funds, seed money loan was not refunded, however, the issue would be taken up with the Government for waiver of interest. However, Audit observed that inspite of direction from the Government for repayment of loan and VUDA having ₹ 185.24 crore in fixed

<sup>49</sup> ₹ 1.24 crore (1977-85) + ₹ 4.10 crore (1985-96)

<sup>50</sup> ₹ 3.00 crore (1995-96), ₹ 0.25 crore (1997-98), ₹ 0.45 crore (1998-99) and ₹ 0.65 crore (1999-00)

<sup>51</sup> ₹ 4.86 crore (Interest) + ₹ 1.10 crore (Penal Interest)

deposits with Gujarat State Financial Services Limited (GSFS) as on 31 March 2015, the loan was not repaid which resulted in piling up of interest liability.

### 2.3.7.3 Recovery of betterment charges

GTP&UD Act provides that the owner of each plot included in the final TP scheme shall be primarily liable for the payment of the contribution leviable in respect of such plot towards betterment charge as one time charge. Audit observed that as against ₹ 77.76 crore recoverable from 1,232 plot owners included in the 11 approved TP schemes<sup>52</sup>, VUDA could recover only ₹ 14.84 crore from 191 plot owners as of March 2015 and an amount of ₹ 62.92 crore was yet to be recovered from 1,041 plot owners.

VUDA stated (June 2015) that due to shortage of staff, the recovery of betterment charge from plot owners was not done and assured that notices would be served to plot owners for early payment of betterment charges.

The Deputy Secretary UD&UHD in the exit conference stated (January 2016) that effective steps would be initiated to recover the outstanding betterment charges.

### 2.3.7.4 Utilisation of Amenities fees collected

GTP&UD Act provides for levy and collection of amenities fees for the execution of works such as supply of water, disposal of sewerage and provision of other services and amenities. However, Audit observed that the provision for collection of amenities fees were not made in the General Development Control Regulations (GDCR) of 1984 and 1996 which resulted in non-levy of fees from developers and plot holders while granting permission for development.

Audit further observed that based on the provision made in GDCR 2006, an amount of ₹ 100.71 crore was collected from the developers and plot holders during 2012-15, however, till date (March 2015) only ₹ 1.44 crore could be utilised. This indicated that works for providing basic amenities had not been carried out by the authority as discussed in Paragraph 2.3.9.1 though sufficient funds were available for the same.

The Deputy Secretary in the exit conference stated (January 2016) that a consultant had been appointed for preparation of draft project report (DPR) for water supply, sewerage disposal schemes, etc. in respect of five zones<sup>53</sup> and the said amount would be utilised in phased manner.

***The Government may issue instructions to VUDA to expedite provision of basic amenities to the residents of the TP area.***

## Development activities

### 2.3.8 Land Management

#### 2.3.8.1 Acquisition of Land by VUDA

As per GTP&UD Act, one of the main functions of the area Development Authority was to acquire, hold, manage and dispose of property, movable or

<sup>52</sup> Two TP schemes prior to First Development Plan, seven TP schemes of First Development Plan and two TP schemes of First Revised Development Plan

<sup>53</sup> Zone 1 - Undera-Koyali-Ankodia (Part), Zone 2 - Ankodia (Part), Khanpur, Mahapura, and Sevasi, Zone 3 – Bhayli, Gokalpura and Raipura, Zone 4 – Ankhhol, Hanumanpura, Khantaba, Sayajipura and Sikandarapura, and Zone 5 - Dumad, Sama, Vemali TP-1 and Vemali TP-2

immovable, as it may deem necessary. The Development Authority in the development plan indicates the number of town planning schemes to be taken up from the area allotted for development and land required to be acquired for various purposes from the area other than those included in the TP schemes. The allotment of land under TP scheme area is done as per the provision of GTP&UD Act as discussed in Paragraph 2.3.6.3.

The First Revised Development Plan (1996) envisaged acquisition of 58.42 hectares of land for development of Transport Nagar. VUDA acquired (2000-04) 60.25 hectares<sup>54</sup> of land at the cost of ₹ 55.89 lakh for the development of Transport Nagar-cum-Logistic Park which include parking facility for large and small vehicles, transport offices, bank, post office, shops for spare parts, hotel-motel, restaurant, petrol pump and other primary facilities. Audit observed that VUDA failed to acquire a piece of land admeasuring 15,985 sq. mtrs.(1.60 hectare) in the central part of the proposed site, which came to the knowledge of VUDA only when the person in possession of land had published (January 2008) a public notice regarding “No objection of the said land”. Thereafter, VUDA approached the Collector for acquisition of said land but the same was not accepted (August 2011) by the Collector stating that the land could be acquired by making new application or through purchase from the owner.

However, Audit observed that no further action was initiated by VUDA for acquiring or purchasing the said land. In the meantime, VUDA awarded (October 2008) the work to Gujarat Infrastructure Development Board (GIDB) for appointing a consultant to prepare designs and for selection of potential investors to develop the Transport Nagar-cum-Logistic Park on Public Private Partnership (PPP) mode. GIDB appointed (April 2012) a consultant<sup>55</sup>, however, the work has not been taken up till date (June 2015) due to non-acquisition of the said land and non-availability of potential investor to develop the Transport Nagar-cum-Logistic Park. Thus, the Transport Nagar-cum-Logistic Park has not been developed (June 2015) though more than 11 years have elapsed since acquisition of land. Audit further observed that due to delay in development of land for Transport Nagar, original land owners have started demanding back their land *i.e.* a land owner of Revenue Survey No. 588/3 demanded (February 2015) back his land admeasuring 75,474 sq. mtrs.

VUDA stated (June 2015) that the delay occurred due to non-availability of an investor for development on PPP Mode. As regards non-acquisition of land, it was stated that a proposal for acquiring the un-acquired land has been made (April 2011) to the Collector which is at final stage.

***Audit is of the view that VUDA may take steps to develop the Transport Nagar-cum-Logistic Park to avoid further delay.***

The Deputy Secretary UD&UHD in the exit conference agreed (January 2016) to take early action to resolve the issues and commence the work of Transport Nagar-cum-Logistic Park.

### ***2.3.8.2 Disposal of land***

Out of 1,474 plots earmarked in the 11 TP schemes finally/preliminarily approved by the State Government, 242 plots admeasuring 9.45 lakh square

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<sup>54</sup> Amliyara – 26.00 hectares, Harni – 20.85 hectares and Kotali – 13.40 hectares

<sup>55</sup> M/s. Jones Lang LaSalle Property Consultants (India) Private Limited, Ahmedabad

metres (sq. mtrs.) were available with VUDA for development purpose such as residential, commercial, housing for socially and economically weaker sections, open space, parks and gardens, public utility infrastructure, *etc.* as shown in the **Table 3** below –

**Table 3: Plots available with VUDA in 11 TP schemes**

| Sr. No.      | Name of Scheme        | Date of approval | Number of Plots | Number of plots available with VUDA | Area of plots available with VUDA (in sq. mtrs.) |
|--------------|-----------------------|------------------|-----------------|-------------------------------------|--|
| 1.           | Bhayli TP-1           | 15.07.2014       | 129             | 23                                  | 86,271   |
| 2.           | Bhayli TP-2           | 21.01.2014       | 116             | 20                                  | 92,514   |
| 3.           | Bhayli TP-3           | 22.01.2014       | 125             | 24                                  | 89,595   |
| 4.           | Bhayli TP-4           | 08.01.2013       | 184             | 33                                  | 82,012   |
| 5.           | Bil TP -1             | 07.06.1999       | 140             | 28                                  | 1,35,199   |
| 6.           | Khanpur-Ankodia TP -2 | 14.12.2006       | 97              | 15                                  | 67,496   |
| 7.           | Nimeta TP-1           | 28.06.1998       | 103             | 17                                  | 1,12,556   |
| 8.           | Padra TP -1           | 28.08.1990       | 157             | 13                                  | 57,933   |
| 9.           | Padra TP-2            | 28.08.1990       | 72              | 16                                  | 57,080   |
| 10.          | Sevasi TP-1           | 07.05.2013       | 156             | 26                                  | 83,764   |
| 11.          | Vemali TP-1           | 25.05.2006       | 195             | 27                                  | 80,761   |
| <b>Total</b> |                       |                  | <b>1,474</b>    | <b>242</b>                          | <b>9,45,181</b>                                  |

(Source: Information furnished by VUDA)

- Out of 242 plots available with VUDA, 116 plots were for sale/development of residential/commercial complexes and the proceeds from the sale of land was to be used for the purpose of providing infrastructural facilities. Audit observed that out of 116 plots admeasuring 4,03,562 sq. mtrs., VUDA had developed commercial complex in two plots admeasuring 2,323 sq. mtrs. while another four plots admeasuring 14,002 sq. mtrs were sold for ₹ 40.78 crore. For the remaining 110 plots, VUDA have not even fixed the sale price of plots in respect of eight TP schemes. This indicated that 110 plots available with VUDA were lying un-disposed/undeveloped, thus, defeating the very purpose of approval of TP schemes. Besides, VUDA also failed to generate income by sale of plots which could have been utilised for providing infrastructural and basic amenities to the residents.

VUDA stated (June 2015) that public auction for plots at Padra TP-1 and Padra TP-2 schemes were held but only two offers were received. Hence, it was decided to sell the plots after construction of roads.

- Urban/Area Development Authority (Disposal of Land other Properties) Regulation, 2002 provides that the plots earmarked for Socially and Economically Weaker Section may be allotted to EWS beneficiaries or be allotted after developing housing projects either by VUDA or by other Government organisations such as Gujarat Housing Board (GHB), Gujarat Rural Housing Board (GRHB), *etc.* at the rates, as decided by the authority (VUDA). Audit observed that out of 50 plots admeasuring 3,37,745 sq. mtrs. earmarked for EWS in 11 TP schemes, only 11 plots admeasuring 82,888 sq. mtrs. have been allotted/disposed of while the remaining 39 plots are yet to be developed or disposed of (May 2015). Out of 11 plots, six plots had been allotted to GHB and one plot to Padra Nagarpalika. In two plots, VUDA have developed an EWS

housing scheme and in the other two plots, the work of EWS housing scheme is in progress.

The Deputy Secretary UD&UHD in the exit conference stated (January 2016) that housing for EWS would be constructed under Mukhyamantri Gruh Yojana and plots would be disposed of as per norms in near future.

- Urban/Area Development Authority (Disposal of Land other Properties) Regulation, 2002 provides that site earmarked for Parks and Garden may be allotted to the Local Bodies (LBs), Public Institutions (PIs), Charitable Trusts (Trusts) or Private Limited Companies (Companies) on a lease of five years for the development and maintenance of the same with advertisement rights. However, Audit observed in one of the TP scheme *i.e.* Padra TP-2 that no plots had been earmarked for the said purpose whereas 36 plots admeasuring 66,724 sq. mtrs. had been earmarked in the remaining 10 TP schemes. It was further observed that no efforts had been made by VUDA in any of the TP schemes either to develop the plots itself or allot the same to LBs, PIs, trusts or companies for development. Thus, the residents of the TP schemes were deprived of the facilities of Parks and Gardens.

VUDA stated (June 2015) that the possession of these plots had been taken over recently and the proposal for development of parks and gardens on Public Private Partnership (PPP) mode was under consideration. The Deputy Secretary UD&UHD in the exit conference also stated (January 2016) that Parks and Gardens would be developed under PPP mode in due course.

#### ***2.3.8.3 Transfer of Ownership of Land***

GTP&UD Rules, 1979 provide that the ownership of the land allotted to the authority shall be corrected in the revenue records immediately on approval of the TP scheme by the State Government. Audit observed that the ownership of all 242 plots available with VUDA for development was shown in the land records to be with the original land owners. It was also observed that an individual who had purchased a plot from VUDA through auction was denied loan by the bank due to title clearance problem *i.e.* non-transfer of plot in the name of VUDA and then in the name of the individual.

VUDA stated (June 2015) that oral requests were made to the District Inspector of Land Records (DILR) but due to shortage of staff in their office, the same could not be done. Audit is of the view that urgent action is required to be taken for clearance of title of the land in favour of VUDA for development of the area by taking up the matter with DILR, as almost one to 24 years have elapsed since finalisation of 11 TP schemes.

***The Government may issue instructions to VUDA for taking steps to transfer the ownership of the land/plots from the name of original land owners to the name of VUDA to avoid any legal complications in future.***

#### ***2.3.8.4 Maintenance of Asset Register***

Rule 190(2) of GFR, 2005 and Form – Q of GTP&UD Rules provide maintenance of asset register (Register of Fixed Assets). However, Audit

observed that VUDA was not maintaining an asset register of plots in the possession of VUDA.

VUDA stated (June 2015) that the land register/asset register was not being maintained; however, the details of TP wise plots were being maintained in the computer in MS word. Audit is of the view that a register may be maintained as there was every possibility of losing the data from the computer or alteration of data by unauthorised persons.

### **2.3.9 Infrastructure and amenities development**

#### **2.3.9.1 Creation of infrastructure and amenities**

The First Development Plan and the First Revised Development Plan envisaged various development works with an estimated cost of ₹ 200.00 crore and ₹ 428.27 crore respectively as shown in **Appendix-XIV**. Audit observed that though the provision of infrastructure and basic amenities were provided in the development plans and TP schemes, however, VUDA had executed works relating to roads only.

Audit further observed that –

- Out of 11 TP schemes approved finally/preliminarily, 59,100 metres of road work have been completed in ten TP schemes. The road work of Nimetha TP-1 (4,465 metres) was yet to be taken up (June 2015) due to less number of residents in the TP area.
- The residents of VUDA area were dependent on ground water for drinking and other day-to-day activities due to non-execution of water supply works.
- Due to non-availability of drainage and sewerage system, the sewage was being disposed of in open area or in soak pit by the residents of the VUDA area. Audit is of the view that accumulation of sewage in open area and overflowing of soak pit could be hazardous to the environment and also may lead to spread of diseases. It was observed from the records of VUDA that the residents of Gordhan Park, Ambikadham Society, Gopinath tenement, surrounding areas of Petrofil Road, Pushpak township on Refinery Road, southern area of Gorwa-Undera Road, *etc.* made five complaints between December 2011 and June 2014 regarding stranded over-flown sewage as it entered into their houses through drainage line and VUDA carried out temporary arrangement to clear the blockage. However, the problem persisted and the residents were living in unhygienic conditions. During the site visit (June 2015), Audit observed stranded over-flown sewage at Krishnadeep Tenements and Ambika Park on the southern side of the Gorwa-Undera Road as shown in **Picture 1 and Picture 2**. VUDA while accepting the fact of stranded over-flown sewage stated (June 2015) that temporary arrangement of pumping the sewage through auxiliary pumping station situated nearby was made, however, the pumping was not done on regular basis.



Picture 1: Sewage water accumulated in the Entrance of Krishnadeep Tenaments (02.06.2015)



Picture 2: Sewage water accumulated in open plot of Ambika Park (02.06.2015)

- As against 1,474 plots to be developed in the 11 TP schemes, 1,232 plots had been allotted to original plot holders. However, Audit observed that only 306 out of 1,232 plots have been developed till date. The reasons for non-development of plots by original plot holders could be attributed to non-development of these areas by VUDA in terms of water supply system, drainage and sewerage system, streetlights, etc. Audit further observed that though Padra TP-1 and Nimeta TP-1 schemes were approved in August 1990 and June 1998 respectively, only 13 (eight per cent) and seven (seven per cent) plots against 157 and 103 plots had been developed by original plot holders. Thus, even after lapse of more than 24 years from the date of final approval of these TP schemes, VUDA failed to develop the earmarked TP area.

VUDA attributed (June 2015) paucity of funds for non-creation of basic amenities in the development area. The Deputy Secretary UD&UHD in the exit conference stated (January 2016) that the work of preparation of draft project report (DPR) for drainage and sewerage works had been awarded and the work would commence shortly and other facilities such as supply of drinking water and street light would be provided in a phased manner. However, Audit is of the view that the amenities fee of ₹ 99.27 crore lying unutilised with VUDA could have been utilised for providing basic amenities in the development area for maintaining hygienic environment.

***It is recommended that basic amenities such as water supply system, drainage and sewerage system, streetlights, etc. be developed by VUDA so that people moving to VUDA area could avail these amenities.***

#### ***2.3.9.2 Regularisation of Unauthorised Development***

State Government introduced (October 2011) “Gujarat Regularisation of Un-authorized Development (GRUD) Act, 2011” to extend one time concession to the owners to regularise their unauthorised/irregular constructions on payment of prescribed compounding fees. As per the provision of the Act, the owners have to submit the applications within six months from the date of introduction of the Act which was further extended upto 17 August 2013. The applications received were required to be scrutinised and finalised within a period of 18 months.

VUDA received 1,464 applications upto 17 August 2013, however, only 78 applications (five *per cent*) could be finalised by VUDA till 16 January 2015. Audit further observed that though the State Government had extended the time period for finalisation of pending applications upto August 2015, no progress was made by VUDA and 1,386 applications were yet to be processed (May 2015).

VUDA attributed (June 2015) the pendency to non-submission of ownership documents, photographs, plan of construction, documents relating conversion of agricultural land to non-agricultural land, construction on Government land, *etc.* along with the applications by the owners. However, Audit observed that VUDA had neither rejected the applications nor called for the required documents from the owners for finalisation of applications within the prescribed time schedule or even thereafter. ***Thus, inaction and inordinate delay in processing the applications by VUDA deprived the applicants from the benefit of the scheme.***

The Deputy Secretary UD&UHD in the exit conference stated (January 2016) that instructions would be issued to VUDA for processing the pending applications.

## Housing Projects

### 2.3.9.3 Collapse of building at Madhavnagar

GTP&UD Act provides that the authority may carry any development works in the urban development area as may be assigned to it by the State Government from time to time.

Under the 15 point programme of Mukhyamantri Yojana, VUDA had executed (between 1999 and 2001) five housing schemes<sup>56</sup> for EWS beneficiaries consisting of 2,246 housing units and the same were allotted to the beneficiaries between 2000 and 2005.

Audit observed that two blocks<sup>57</sup> of EWS housing complex consisting of 458 dwelling units constructed in March 2001 at Madhavnagar by VUDA through a private contractor, collapsed (August 2013) causing loss of 11 lives and property of occupants (**Picture 3 and 4**). The incident of collapse of blocks within 11 years indicated sub-standard execution of work and non-monitoring of the quality of work by VUDA officials. The State Government appointed (August 2013) a high level inquiry committee to ascertain the cause of collapse, and fix responsibility for the lapses and negligence with terms of reference to submit the report within one month. The committee submitted (October 2013) its report as per its terms of reference. However, the final action on the report was pending (October 2015) with another committee constituted (March 2014) by the State Government for examination of the report and recommendations on suitable action against accused officials. The residents of other blocks consisting of 430 dwelling units were evacuated (September 2013) with a condition that they would be rehabilitated in an alternate EWS housing complex at the same site.

<sup>56</sup> Dindayal Nagar-1 (Gotri – 504 units), Dindayal Nagar-2 (Gotri – 212 units), Dindayal Nagar-3 (Gotri – 806 units), Madhavnagar (Atladra – 458 units) and Keshavnagar (Atladra – 266 units)

<sup>57</sup> Block No. 10 and 11



Picture 3: Collapsed EWS housing complex at Madhavnagar (obtained from the records)



Picture 4: Collapsed EWS housing complex at Madhavnagar (obtained from the records)

As the structural designs of Keshavnagar EWS housing complex was similar to Madhavnagar EWS housing complex, VUDA decided (October 2013) to evacuate the residents of Keshavnagar (266 units in 19 blocks) also and dismantle the complex.

For rehabilitation of these evacuated EWS beneficiaries, VUDA awarded (December 2013) the work of developing housing complex at Madhavnagar and Keshavnagar to an agency<sup>58</sup> on PPP mode with built up area of total 47,655 sq. mtrs.<sup>59</sup> As per the terms and conditions of the PPP mode, the agency was to accommodate all the original beneficiaries within the built up area of 18,304 sq. mtrs.<sup>60</sup> and the remaining built up area could be utilised by the agency for sale with 20 per cent for commercial and the rest for residential purpose. The agency was required to complete the projects in 14 months from the date of signing of the agreement and pay ₹ 1,500 per month as rent to 724 beneficiaries till their rehabilitation. However, Audit observed that the agency had not started work at Keshavnagar till date (June 2015) and the work at Madhavnagar was stopped (March 2015) by the agency after executing the work upto plinth in respect of three out of 10 blocks to be constructed as the agency demanded additional built up area to construct more floors for sale. Audit observed that VUDA had not signed the agreement with the agency till date (May 2015). It was further observed that details of monthly payments made to above 724 beneficiaries were not monitored by VUDA as no records indicating the date and amount paid by the agency to beneficiaries had been maintained by VUDA. In the absence of records, Audit could not vouchsafe whether the agency had paid rent regularly and timely to affected EWS beneficiaries. Non-completion of project in time by the agency and lack of monitoring by VUDA deprived EWS beneficiaries of proper housing facility and they had to face financial and other hardships.

VUDA while accepting the above facts stated (June 2015) that notices had been served to the agency for the delay and non-starting of work. It was further stated that rent to the beneficiaries were being paid regularly. However, Audit observed that VUDA had received complaints from the beneficiaries in October and November 2014 regarding non-payment of rent.

<sup>58</sup> M/s. N. A. Construction, Ahmedabad

<sup>59</sup> Madhavnagar – 25,800 sq. mtrs. and Keshavnagar – 21,855 sq. mtrs.

<sup>60</sup> Madhavnagar – 11,585 sq. mtrs. and Keshavnagar – 6,719 sq. mtrs.

The Deputy Secretary UD&UHD in the exit conference stated (January 2016) that the contractor had been blacklisted and removed from the work (28 December 2015); fresh tenders have been invited (January 2016) with condition in the tender to make advance rent payments for making payments of rent to the beneficiaries. It was further stated that timely payment of rent to beneficiaries by the agency would be ensured and records of rent payment would be maintained.

***The Government may issue instructions to VUDA for taking expeditious action to complete the project in a time bound manner and rehabilitate the EWS beneficiaries at the earliest. VUDA may also monitor the regular payment of rent to the affected EWS beneficiaries.***

### Road Works

VUDA completed targeted road works in 10 out of 11 TP schemes. The road works were carried out by engaging private agencies. On scrutiny of records of road works, Audit observed the following –

#### ***2.3.9.4 Time period for bid submission***

As per the Resolution (March 2007) of Roads and Buildings (R&B) Department for e-tender process, for contracts with value above ₹ 3.00 crore, there should be a time gap of 30 days between the date of uploading of blank tender paper and last date of submission of bid. However, the time gap provided by VUDA was only 15 days in all the 10 works awarded with estimated cost above ₹ 3.00 crore. Thus, VUDA had awarded works without following the prescribed procedure meant for getting healthy competitive rates.

VUDA stated (June 2015) that though time gap was less, the bids received were more than 10 *per cent* lower than the estimated cost. It was further stated that henceforth time would be provided as envisaged in the R&B resolution.

#### ***2.3.9.5 Execution of contract agreements***

Gujarat Public Works Manual provides that work order may be issued only after making an agreement with the contractor. However, Audit observed that work orders in respect of all 10 road works were issued before executing an agreement with the contractor. The delay in executing agreements ranged from 36 to 223 days from the date of issue of work orders in respect of these works (**Appendix-XV**). Non-execution of timely agreement could result in failure to take action against the contractor on abandonment of work as noticed in respect of construction of EWS housing at Madhavnagar and Keshavnagar.

VUDA while admitting the fact, stated (June 2015) that henceforth provisions of Manual would be adhered to.

#### ***2.3.9.6 Observance of Government instructions pertaining to Road works***

On scrutiny of records, Audit observed that Government instructions were not followed by VUDA in four out of 10 road works which resulted in irregular and avoidable expenditure to the contractors as discussed below -

- (i) Government instructions (November 1997, November 1998 and June 2001) provide that if contractor fails to complete the work within the stipulated time limit, then no payment towards price variation in star rate of asphalt would be made to the contractor for the asphalt used after the stipulated date of

completion. However, Audit observed in two road works<sup>61</sup> though the works were not completed within the stipulated time limit, ₹ 1.19 crore was paid to the contractors on account of price variation of star rate for asphalt used after the stipulated date of completion.

VUDA stated (June 2015) that as extension of time limit was granted, price variation was paid as per tender condition. The reply is not convincing as non-eligibility of price variation on asphalt was specifically mentioned in the letter of time extension issued to the contractor and the payment was made in contravention to above Government instructions.

(ii) Government instructions (June 1991) as well as specification of Ministry of Road, Transport and Highways (MORTH) provide that where the material to receive an overlay is a freshly laid bituminous layer that has not been subjected to traffic or contaminated by dust, a tack coat is not mandatory where the overlay is to be completed within two days. Audit observed in four road works<sup>62</sup> that payment of ₹ 51.13 lakh was made to the contractors for unwarranted consumption of 110.311 Metric Tonnes (MT) of asphalt used for application of tack coat in 2,20,622 sq. mtrs. of area at the rate of five Kg. per 10 sq. mtrs.

VUDA stated (June 2015) that provision of tack coat was kept in tender to allow the lower layer to settle and avoid any deterioration due to traffic movement. However, provision of MORTH would be followed henceforth. Audit observed that the carpet work was done in a width of 5.5 metres and there was enough space for diverting the traffic. Further, the road was constructed in townships which were at developing stage and thus diversion of traffic was easy, unlike that in highways.

Thus, non-adherence to Government instructions by VUDA in above road works resulted in undue financial benefits to the contractors of ₹ 1.70 crore. VUDA, while finalising the tenders, execution of works and payments to the contractors should adhere to all Government instructions so that prudent financial decisions are taken.

The Deputy Secretary UD&UHD in the exit conference stated (January 2016) that Government instructions regarding execution of road works would be adhered to in future.

### ***2.3.10 Internal Control***

#### ***2.3.10.1 Establishment of Internal Audit Wing***

Internal Audit examines and evaluates the level of compliance with the departmental rules and procedures and provides reasonable assurance to the management on the adequacy of the existing internal controls. The primary function of Internal Audit is ensuring the accuracy of the accounts and presenting correct statement of financial transactions of the organisation. However, Audit observed that no Internal Audit Wing had been established by VUDA to conduct internal audit of various wings.

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<sup>61</sup> Sevasi TP-1 – ₹ 0.43 crore (704.86 MT) and Bhayli TP-4 - ₹ 0.76 crore (597.248 MT)

<sup>62</sup> Sevasi TP-1 – ₹ 10.14 lakh for 22.167 MT (44,333 sq. mtrs.), Bhayli TP-2 - ₹ 11.22 lakh for 23.710 MT (47,421 sq. mtrs.), Bhayli TP-3 - ₹ 13.84 lakh for 30.773 MT (61,546 sq. mtrs.) and Bhayli TP-4 - ₹ 15.93 lakh for 33.661 MT (67,322 sq. mtrs.)

VUDA attributed (June 2015) shortage of staff to non-establishment of the Internal Audit wing. It was also stated that the same would be established on sanction of additional staff by the Government. Considering the huge transactions in VUDA, risk of over-payment, under-realisation of receipt, etc., an Internal Audit wing would definitely aid the management in exercising effective control over the affairs.

The Deputy Secretary UD&UHD in the exit conference agreed (January 2016) to set-up an Internal Audit wing in VUDA.

### 2.3.10.2 Public Grievances Redressal Mechanism

Vadodara Urban Development Authority mostly deals with the public. For effective public grievances redressal, mechanism for receipt of complaints and their due acknowledgement, diarising the complaints, registration of complaints, disposal of complaints in a first-come-first served manner, noting of action taken in respect of complaints in a register, periodic monitoring of system of disposals and follow-up by superior authorities are necessary. However, Audit observed that such a system was not in place in VUDA. There was no separate Public Grievances Redressal Cell in VUDA. Even the complaints received were not diarised in a register to watch proper redressal of the same.

VUDA stated (June 2015) that all branches are directly dealing with the grievances, however, a centralised grievance redressal mechanism would be developed shortly. Since there was no record of registering the complaints and their redressal, Audit could not vouchsafe the timeliness of redressal of public grievances.

As VUDA has a large public dealing function, it is imperative that an effective public grievance redressal system and mechanism be developed at the earliest.

The Deputy Secretary UD&UHD in the exit conference stated (January 2016) that a dedicated grievance redressal cell would be established in VUDA.

### 2.3.11 Human Resource Management

#### 2.3.11.1 Shortage of Manpower

The men-in-position as against the sanction strength of VUDA as on May 2015 is shown in **Table 4** below –

**Table 4: Details of sanctioned strength vis-à-vis men-in-position as on May 2015**

| Category of staffs      | Sanctioned strength | Men-in-position | Shortage  | Percentage of shortage |
|-------------------------|---------------------|-----------------|-----------|------------------------|
| Administrative          | 14                  | 07              | 07        | 50                     |
| Technical               | 31                  | 12              | 19        | 61                     |
| Supportive(Driver/peon) | 17                  | 09              | 08        | 47                     |
| <b>Total</b>            | <b>62</b>           | <b>28</b>       | <b>34</b> | <b>55</b>              |

(Source: Information provided by VUDA)

The above table shows that shortage in Technical staff is more than other categories. Audit observed shortage of technical staffs viz. assistant town planner (1), head draftsman (1), assistant draftsman (2), junior draftsman (2), tracer (1), surveyor-technical (4) and surveyors (6). The post of head draftsman was vacant since May 1996, assistant draftsmen since November 2003 and surveyors since three to 19 years.

The Deputy Secretary UD&UHD in the exit conference stated (January 2016) that action would be taken to provide/recruit adequate technical staff in VUDA.

### **2.3.12 Conclusion and Recommendation**

The Performance Audit on the “Functioning of Vadodara Urban Development Authority” revealed some areas of concerns and gaps, which are highlighted below along with a set of recommendations as a way forward -

- As against 53 TP schemes proposed in the First Revised Development Plans, VUDA had proposed only four TP schemes. The reservation of land for specific purposes in the TP schemes was not made as per the provisions of GTP&UD Act.

***The provisions of GTP&UD Act for reservation of land for specific purposes in the TP schemes may be adhered to for an orderly development of the TP area.***

- Out of an amount of ₹ 100.71 crore collected by VUDA as amenities fees from the developers and plot holders during 2012-15, VUDA could utilise only ₹ 1.44 crore for the said purpose.

***The Government may issue instructions to VUDA to expedite provision of basic amenities to the residents of the TP area.***

- The land acquired for Transport Nagar-cum-Logistic Park remained undeveloped due to non-acquisition of a piece of land in the central portion of the site and delay in appointment of consultants, preparation of designs, non-availability of potential investors on PPP mode for its development, etc.

***The Government may issue instructions to VUDA to take steps to develop the Transport Nagar-cum-Logistic Park to avoid further delay.***

- Out of 242 plots admeasuring 9.45 lakh square metres allotted to VUDA in 11 TP schemes for development purpose such as residential/commercial complexes for sale, housing for socially and economically weaker sections, parks and gardens, social infrastructure, it was observed that only 17 plots had been developed or disposed of by VUDA. No efforts were made by VUDA for transferring the ownership of the plots/land allotted to VUDA from the name of the original land owners.

***The Government may issue instructions to VUDA for taking steps to transfer the ownership of the land/plots from the name of original land owners to the name of VUDA to avoid any legal complications in future.***

- EWS beneficiaries evacuated from Madhavnagar and Keshavnagar could not be rehabilitated due to delay in commencement of construction work and abandoning of work by the contractor. Even the details of monthly payments made to 724 EWS beneficiaries by the contractor were not being monitored by VUDA.

***The Government may issue instructions to VUDA for taking expeditious action to complete the project in a time bound manner and rehabilitate the EWS beneficiaries at the earliest. VUDA may also monitor the regular payment of rent to the affected EWS beneficiaries.***

The matter was reported to the Government (July 2015). Reply is awaited (January 2016).

**CHAPTER-III**  
**COMPLIANCE AUDITS**

## CHAPTER-III

### COMPLIANCE AUDIT

This Chapter contains one Theme Based Audit paragraph on “Follow-up Audit on Modernisation of Police Force in Gujarat” and three individual paragraphs on Audit of transactions.

### EDUCATION DEPARTMENT

#### 3.1 Undue benefit worth ₹ 6.69 crore bestowed on an agency

*Awarding of printing work of revised curriculum and syllabus without resorting to e-tender process by Gujarat Council of Educational Research and Training (GCERT) to an agency at a conditional rate in contravention to the provisions of Gujarat Public Works Manual and Central Vigilance Commission resulted in extra avoidable payment of ₹ 6.69 crore and undue favour to the agency.*

Gujarat Council of Educational Research and Training (GCERT) is a pivotal institution at State level for enhancement of qualitative education at primary and secondary schools. The Education Department of the State Government entrusted (October 2013) to GCERT, the work of printing of School based Comprehensive Evaluation (SCE), formats, teacher edition text books, test papers and score sheets. For this funds of ₹ 17.11 crore were released to GCERT in March 2014.

In the meanwhile the Tender Approval Committee<sup>1</sup> (named “Prakashan Samiti”) of GCERT invited (February 2013) tenders for appointing an agency for printing works of 35,000 to 40,000 numbers of “Jivan Shikshan” magazine and other literatures of GCERT for the year 2013-14. Audit observed (February 2015) that GCERT had not resorted to e-tendering process which was in contravention to the instructions (May 2011) of the State Government which stipulates that the tenders with estimated cost above ₹ 10.00 lakh should be invited through e-procurement process. Out of seven bidders, five bidders were disqualified at pre-bid stage and out of the remaining two agencies, the price bid of M/s. Reliable Art Printery Private Limited, Ahmedabad (agency) was selected (April 2013) by the committee for the printing works of GCERT. The committee had invited rates for “single side” and “double side” printing in single colour and four colour, with and without paper. The agency had quoted (April 2013) the following rates as shown in **Table 1** as follows –

<sup>1</sup> (i) Director, GCERT (ii) Secretary, GCERT (iii) Accounts Officer, GCERT (iv) Representative of Director, Printing and Stationery (v) Director, Gujarat State Schools Textbook Board (vi) Reader, Prakashan Branch, GCERT and (vii) Reader Assistant, Prakashan Branch, GCERT

**Table 1: Rates quoted in the price-bid by the agency and effective rate**

| Paper Size and Colour | Side   | 1,000 numbers with 70 Gram per square metre (GSM) paper (Amount in paise) |  | 1,000 numbers without paper (Amount in paise) |
|-----------------------|--------|---|--|---|
|                       |        | Quoted rate   | Effective rate                           |   |
| 1/4 Single Colour     | Single | 27  | 27                                       | 09  |
|                       | Double | 29 one side   | 58 + five per cent Value Added Tax (VAT) | 11  |
| Legal Size            | Single | 30  | 30                                       | 09  |
|                       | Double | 32 one side   | 64 + five per cent VAT                   | 11  |
| 1/4 Four Colour       | Single | 36  | 36                                       | 12  |
|                       | Double | 46 one side   | 92 + five per cent VAT                   | 22  |
| Legal Size            | Single | 43  | 43                                       | 12  |
|                       | Double | 53 one side   | 106 + five per cent VAT                  | 22  |

(Source: Information collected from the records of GCERT)

The double side rate for printing with paper was quoted with a condition that the rate was for “single side” only whereas no such condition was quoted for printing without paper. The purpose of showing single page rate against double page rate with a condition by the agency was not justifiable. Audit observed (February 2015) that in the comparative statement prepared on the date of opening of price-bid (22 April 2013), the rate considered for double side printing was the rate quoted by the agency without the condition of “single side”. It was further observed that after the agency being selected by the committee, the agency clarified (29 April 2013) that the rate for double side was double the rate quoted.

From the above table, it can be seen that the difference between the rate quoted for printing without paper on “single side” and “double side” was almost same as compared to rates quoted for printing with paper. Audit observed from the records of GCERT that for the printing works of GCERT for the year 2011-12, the same agency had quoted (March 2011) the following rates as shown in **Table 2** below –

**Table 2: Rates quoted by the agency for printing works for the year 2011-12**

| Paper size and colour | Side   | 1,000 numbers with 70 GSM paper (Amount in paise) | 1,000 numbers without paper (Amount in paise) |
|-----------------------|--------|---|---|
| 1/4 Single Colour     | Single | 16  | 15  |
|                       | Double | 19  | 18  |
| Legal Size            | Single | 18  | 16  |
|                       | Double | 20  | 19  |

(Source: Information collected from the records of GCERT)

It can be seen that the difference between “single side” and “double side” printing with paper was only three paise and two paise for 1/4 single colour and legal size paper respectively. Thus, the conditional rate considered by the committee for awarding the contract to the agency in 2013-14 was not correct.

Further, as per the provisions of Gujarat Public Works Manual (GPWM), 1987 and Central Vigilance Commission (CVC) guidelines (May 2004), any price bid containing any condition was to be rejected outright. However, the committee selected the agency for the printing work of GCERT for the year 2013-14 in contravention to the provisions of GPWM and CVC.

It may also be mentioned that as per the instructions issued by Industries and Mines Department, a “no objection certificate” from Manager, Government Printing Press was required to be obtained for awarding printing work with estimated cost above ₹ 10.00 lakh to private press. Therefore, the committee was required to obtain a “no objection certificate” and thereafter should have gone for fresh tenders. However, in contravention to the above, the committee awarded (between September 2013 and August 2014) printing work of SCE, etc. as per the requirements of Education department to M/s. Reliable Art Printery Private Limited, Ahmedabad without inviting fresh tenders, though the work involved double side printing and the payments were made to the agency at the double the rate of single side. By adopting the rate of single side printing to double side printing, GCERT incurred an extra expenditure of ₹ 6.69 crore as shown in **Appendix-XVI**, which could have been avoided.

GCERT stated (December 2015) that due to enforcement of model code of conduct for the Lok Sabha elections, the tender was not invited for the work. The funds were received at the fag end of March 2014, hence, considering the urgency of the work and to avoid lapse of grant, the work was awarded to the said agency. It was further stated that contract was awarded to the lowest bidder as the rates of the agency was less than the second qualified agency and “no objection certificate” was obtained from the Government Printing Press.

The reply is not convincing as from the records available with Audit, it is evident that GCERT was aware since October 2013 that it was to carry out the printing work of SCE, etc. and fresh tenders should have been invited before the enforcement of model code of conduct.

It was also seen from the documents furnished with the reply that GCERT had approached the Government Printing Press for the “no objection certificate” in March 2014 whereas the work orders for the printing work in question were issued between September 2013 and August 2014. Thus, acceptance of conditional rate had resulted in extending undue benefit to the agency besides loss of ₹ 6.69 crore to the State Government.

The matter was reported to the Government in July 2015. Reply is awaited (January 2016).

## HEALTH AND FAMILY WELFARE DEPARTMENT

### 3.2 Irregular payment of subsistence allowance and salary

***Contractual employee was suspended and reinstated in regular pay scale as if he was a government servant resulting in irregular payment of subsistence allowance and salary of ₹ 66.88 lakh.***

In order to bring improvement in quality of medical education and increase the scope of core subjects like anatomy, physiology and forensic medicine and super specialty subjects like orthopedics, ENT, chest diseases, etc. the Health and Family Welfare Department (Department) of the State Government floated (May 2002) a scheme to engage medical teachers on contractual basis (with fixed pay<sup>2</sup>) allowing them to undertake private practice. This was to be

<sup>2</sup> ₹ 7,500 and ₹ 10,000 for Associate Professor and Professor respectively

done in accordance with the criteria of Medical Council of India (MCI) and was intended to overcome the prevailing acute shortages of medical teachers in these subjects. As per the scheme guidelines only three types of persons could apply under the scheme *viz.*, those who have retired on superannuation, and those who have voluntarily retired, or, who were in their own private practice; further the serving teachers of Government medical colleges of the rank of associate professor and above, who had completed 10 years of pensionable service could file their option to get appointment on contractual basis under the scheme by October 2002.

A Professor of Urology at B.J. Medical College, Ahmedabad submitted (June 2002) his option for the appointment under the scheme. The Professor continued on the regular post till the acceptance of application by the Department (May 2005) and was appointed on contractual basis under the scheme at B.J. Medical College, Ahmedabad with effect from 01 June 2005.

Audit scrutiny of the records of B.J. Medical College, Ahmedabad disclosed (November 2013) that the Professor while working as the President of MCI was booked (April 2010) by the Central Bureau of Investigation (CBI) on corruption charges. Consequent upon arrest by CBI, the Department issued (May 2010) two orders, one terminating the contractual appointment (made under the Scheme) with immediate effect and the other placing him under suspension from regular service with effect from 22 April 2010 *i.e.* from the date of arrest as if deemed suspended under Rule 5 of the Gujarat State Services (Discipline and Appeal) Rules, 1971 because the detention period exceeded 48 hours (from 22 April 2010 to 01 May 2010). The department further ordered (March 2012) that the Professor would be paid subsistence allowance with effect from 22 April 2010 at the rate of the leave salary which would have been drawn if he had been on leave on half pay basis as on 31 May 2005 in accordance with Rule 68 of Gujarat Civil Services (Joining Time, Foreign Service, *etc.*) Rules, 2002. The Professor was paid ₹ 24.19 lakh as subsistence allowance for the period 22 April 2010 to 04 July 2013. Subsequently, on getting acquitted from the corruption charges, he was reinstated as Professor and Head of Department of Urology at B.J. Medical College, Ahmedabad with effect from 05 July 2013. The Professor was paid salary as applicable to regular employee amounting to ₹ 42,68,570 for the period from 05 July 2013 to 11 May 2015. The Professor voluntarily resigned from the post thereafter.

Audit observed that as per the scheme document, the option to get appointment on contractual basis could be rescinded within a period of one year from the date of start of contractual appointment and the service after that could not be counted as pensionable service. Since the Professor continued on contractual appointment from 01 June 2005 to 22 April 2010 and the option to rescind was available till 31 May 2006, such option of rescinding the contractual appointment and coming back to the regular post of Professor and Head of Department of Urology was not available. As per the records furnished to Audit, the Professor had not given any option for rescinding the contractual appointment and reverting back to the regular post within one year from the date of start of contractual appointment. Therefore, the payment of ₹ 24.19 lakh as subsistence allowance for the period from 22 April 2010 to

04 July 2013 and payment of ₹ 42.69 lakh as salary for the period from 05 July 2013 to 11 May 2015 was irregular.

The Department stated (October 2015) that the matter pertaining to subsistence allowance in this case was referred to the Legal Department of the State Government and the subsistence allowance paid to him was in accordance with the opinion of the Legal Department, which was endorsed by the General Administration Department and concurred to by the Finance Department, Chief Secretary, Hon'ble Minister (Health) and Hon'ble Chief Minister of the State. It was further stated that the irregularities taken cognizance of by CBI was done as MCI President and it is not connected with the work as Professor and Head of Department of Urology.

Audit is of the view that the action of the Government lacked justification as it was in contravention to the scheme guidelines, which allowed rescinding the contractual appointment within one year only, as explicitly mentioned in the resolution (May 2002) of the State Government. Had the Professor not been suspended and been allowed to continue to render services as contractual employee, he would have drawn ₹ 3.84 lakh<sup>3</sup> only as contractual pay whereas being under suspension, he did not render any service to Government but he was paid ₹ 24.19 lakh. This does not appear logical. Even for the period after revocation of suspension, the Professor would have drawn ₹ 2.22 lakh as contractual employee whereas he was paid ₹ 42.69 lakh deeming to be a regular employee though he had forfeited his option of rescinding the contractual appointment with effect from 31 May 2006.

## HOME DEPARTMENT

### 3.3 Follow-up Audit on Modernisation of Police Force in Gujarat

#### 3.3.1 Introduction

The scheme of Modernisation of Police Force (MoPF) was launched (1969-70) by the Ministry of Home Affairs, Government of India (GoI) for modernising police forces in the country to enable them to effectively face the emerging challenges to internal security. A revised scheme involving substantial outlay of Central assistance was launched by the GoI in February 2001 for a period of ten years which was extended by another two years and was further extended (February 2013) for a five year period (2012-17). The basic objectives of the scheme were to meet the deficiencies in the State Police Forces as identified by the Bureau of Police Research and Development (BPR&D)<sup>4</sup> and to achieve planned development and modernisation of the State Police Forces with latest technology.

Police Force functions under the Home department of the State Government headed by Additional Chief Secretary (ACS) who is responsible for implementation and monitoring of the scheme (**Appendix-XVII**). The Director General and Inspector General of Police (DG&IGP) is the head of the department. Deputy Inspector General (DIG) (Police Modernisation) is in direct charge of Modernisation Programme. The Directorate of Forensic

<sup>3</sup> 38 months and 13 days at the rate of ₹ 10,000 per month

<sup>4</sup> Is a research and development organisation positioned to guide on policy for Modernisation of police force. It sets norms and standards for each aspects of the policing.

Science (DFS), Gandhinagar, Managing Director, Gujarat State Police Housing Corporation Limited (GSPHCL), Gandhinagar, Commissioner of Police (CP), Ahmedabad and Commandant General, Home Guards, Ahmedabad are responsible for formulation and implementation of the scheme. A State Level Empowered Committee (SLEC) has been set-up (February 2007) under the Chairmanship of the State Chief Secretary for speedy sanction of Annual Action Plans (AAPs) and for proper monitoring of the implementation of the scheme.

The implementation of the scheme in the State was last reviewed and findings included in the Audit Report (Civil) for the year ended 31 March 2009. As a follow-up, the present Audit covers the period 2009-15 to assess and evaluate the action taken by the Government on the Audit findings and recommendations included in the Audit Report for the year ended 31 March 2009. For this purpose, Audit questionnaires were issued (March 2015) and records maintained in the office of ACS (Home) and Director General & Inspector General of Police (DG&IGP), DFS, GSPHCL, CP Ahmedabad, Commandant General, Home Guards and eight out of 26 District Superintendents of Police involved in the implementation of the scheme were test-checked between April 2015 and August 2015.

#### **Audit analysis of follow-up action by the Government on earlier Audit observations**

The shortcomings in the implementation of the scheme pointed out in the Audit Report for the year ended 31 March 2009 are given in (**Appendix–XVIII**). Following six recommendations were proposed in the Report based on the findings of the Performance Audit –

- State Government should prepare perspective plan after assessment of deficiencies, actual requirement with reference to infrastructure *i.e.* administrative and residential buildings, mobility, weaponry, communication, *etc.* Annual Action Plan should flow from these perspective plans and be submitted to GoI in time.
- New vehicles purchased under the scheme should not be allotted in place of condemned ones as the purpose of the scheme is to augment existing fleet of vehicles and create capital assets. Vehicles meant for police stations, out posts, highway patrolling, *etc.* should not be placed at the disposal of the officers of the district police headquarters.
- Immediate action is required to address shortage of modern weapons and ammunitions.
- The existing infrastructure with reference to communication technology need to be upgraded and requisite accessories should be procured to utilise them optimally.
- Police reforms should be implemented in letter and spirit for modernising the working environment of police department.
- State Level Empowered Committee (SLEC) should monitor and evaluate the implementation of the scheme on regular basis.

In the Detailed Explanatory Notes submitted (June 2014) to the Public Accounts Committee (PAC), the Government had assured that steps would be

taken to address the audit findings (**Appendix-XVIII**). The Report is yet to be taken up for discussion by the PAC (December 2015).

### **Audit findings**

A follow-up audit was conducted and the findings were as follows -

#### **3.3.2 Planning**

##### **3.3.2.1 Submission/approval of Annual Action Plan**

State Government was required to submit the Annual Action Plan (AAP) every year by due dates as specified by GoI after being approved by the State Level Empowered Committee (SLEC). Delay in submission/approval of AAP was pointed out earlier in the Audit Report for the year ended 31 March 2009 (Paragraph 1.1.8.2). In the detailed explanatory notes submitted (June 2014) to the PAC, the department had not offered any specific reply. However, similar deficiency during the current Audit was also noticed. Details of delay in submission of AAP by the State Government during the period 2009-15 are shown in **Table 1** below –

**Table 1: Delay in submission of AAP**

| Year    | Due date for submission of AAP to GoI | Date of approval of AAP by SLEC | Actual date of submission of AAP to GoI | Delay in submission of AAP to GoI (in days) |
|---------|---------------------------------------|---------------------------------|---|---|
| 2009-10 | 22.12.2008                            |                                 | 31.01.2009                              | 40  |
| 2010-11 | 30.12.2009                            | No meeting held                 | 15.03.2010                              | 75  |
| 2011-12 | 31.08.2011                            |                                 | 01.10.2011                              | 31  |
| 2012-13 | 15.04.2012                            | 17.07.2012                      | 20.07.2012                              | 96  |
| 2013-14 | 25.03.2013                            | 09.05.2013                      | 26.06.2013                              | 93  |
| 2014-15 | 04.06.2014                            | No meeting held                 | 19.06.2014                              | 15  |

(Source: Information provided by the Home Department)

The above table shows that the approval of the SLEC was not obtained in four out of six AAPs and the State Government had not submitted the AAPs to the GoI by due dates in any of the years covered in Audit. The delay ranged from 15 to 96 days which consequently resulted in delay in approval by the GoI. Therefore, the implementing agencies were left with insufficient time to utilise the funds in the same year, which resulted in unspent balances every year, thus, affecting timely implementation of the plans.

#### **3.3.3 Financial Management**

The scheme was implemented by the GoI as a Non-Plan scheme upto 2012-13 and the Central assistance was released to State Governments under Non-Plan head. From 2013-14, the Central assistance was provided partly under Non-Plan and partly under Plan head. The items required by the State Police under mobility, weapons, equipment, training equipment, forensic equipment, *etc.* were funded under Non-Plan and construction/upgradation of police stations, outposts, police lines, police housing, forensic science laboratories, training infrastructure and construction of buildings were funded under Plan head. Central share was 75 per cent of the approved AAP during 2005-12 which was reduced to 60 per cent from 2012-13.

Short release of central assistance due to non-utilisation of substantial scheme funds was pointed out earlier in the Audit Report for the year ended 31 March 2009 (Paragraph 1.1.9). In the detailed explanatory notes submitted (June 2014) to the PAC, the department attributed the reasons for delay in purchase procedure due to issues pertaining technology selection and in an effort to procure items which meet the requirements of Gujarat police. However, Audit noticed similar deficiency during subsequent period between 2009 and 2015.

Details of approved plan size, share of GoI and State Government with reference to the approved plan and funds released by GoI and State Government and the expenditure incurred under the scheme (2009-15) are shown in **Table 2** below –

**Table 2: Details of expenditure incurred under the scheme during 2009-15**

(₹ in crore)

| Year         | Share of approved plan |                  |               | Funds released |               |                  |               |               | Expenditure |               | Percentage of expenditure to funds released |          | Excess(+) Savings(-) |
|--------------|------------------------|------------------|---------------|----------------|---------------|------------------|---------------|---------------|-------------|---------------|---|----------|----------------------|
|              | GoI                    | State Government | Total         | GoI            |               | State Government |               | Total         | Plan        | Non-Plan      | Plan  | Non-Plan |                      |
|              |                        |                  |               | Plan           | Non-Plan      | Plan             | Non-Plan      |               |             |               |   |          |                      |
| 2009-10      | 65.60                  | 21.87            | 87.47         | -              | 52.18         | -                | 20.87         | 73.05         | -           | 44.47         | -   | 61       | -28.58               |
| 2010-11      | 73.57                  | 24.52            | 98.09         | -              | 55.27         | -                | 24.51         | 79.78         | -           | 50.12         | -   | 63       | -29.66               |
| 2011-12      | 42.57                  | 14.19            | 56.76         | -              | 33.22         | -                | 14.20         | 47.42         | -           | 11.26         | -   | 24       | -36.16               |
| 2012-13      | 12.99                  | 8.66             | 21.65         | -              | 12.99         | -                | 8.66          | 21.65         | -           | 7.88          | -   | 36       | -13.77               |
| 2013-14      | 78.43                  | 48.93            | 127.36        | 47.51          | 30.92         | 30.20            | 18.73         | 127.36        | 0.00        | 22.34         | 0   | 45       | -105.02              |
| 2014-15      | 72.73                  | 48.48            | 121.21        | 38.98          | 33.67         | 25.19            | 23.31         | 121.15        | 0.00        | 20.20         | 0   | 35       | -100.95              |
| <b>Total</b> | <b>345.89</b>          | <b>166.65</b>    | <b>512.54</b> | <b>86.49</b>   | <b>218.25</b> | <b>55.39</b>     | <b>110.28</b> | <b>470.41</b> | <b>0.00</b> | <b>156.27</b> |   |          | <b>-314.14</b>       |

(Source: Information furnished by the DG&IGP)

The above table shows a decreasing trend of Non-Plan expenditure against the funds released during the period 2009-15 and non-utilisation of Plan funds of ₹ 141.88 crore received during the period 2013-15. The percentage of Non-Plan expenditure decreased from 63 per cent (2010-11) to 35 per cent (2014-15).

Audit further observed that the department had parked an amount of ₹ 45.84 crore<sup>5</sup> with GSPHCL during the period 2011-14 to avoid lapsing of the grant. As of March 2015, an amount of ₹ 35.67 crore including interest accrued on the funds was lying unspent with GSPHCL.

### 3.3.4 Mobility

#### 3.3.4.1 Availability of vehicles at police stations

Mobility is vital for efficient and effective performance of police force. As per the study report of BPR&D, mobility could be achieved only when a well equipped police force has the ability to move the entire police force at once. BPR&D prescribed availability of two four-wheelers (light motor vehicles) and three two-wheelers (motor cycles) at every Police Station (PS) to meet the requirement of mobility of police force. As of March 2015, as against the requirement of 2,266 four-wheelers and 5,396 two-wheelers (as per BPR&D norms for the State), the availability of these vehicles were 3,434 and 5,873 respectively.

<sup>5</sup> 2011-12 – ₹ 38.38 crore, 2012-13 - ₹ 2.44 and 2013-14 - ₹ 5.02 crore

Non-fulfilment of minimum requirement of vehicles at test-checked PSs as prescribed by BPR&D had been pointed out earlier in the Audit Report for the year ended 31 March 2009 (Paragraph 1.1.10.1). In the detailed explanatory notes submitted (June 2014) to the PAC, the department had stated that vehicles were available with the PSs as per requirement. However, Audit observed that though excess four-wheelers were available in the State, the shortage of these vehicles at PSs was noticed as on 31 March 2015. As against the requirement of 1,176 four-wheelers in the State for total 588 PS, only 1,065 four-wheelers were available in the PSs. Though BPR&D norms prescribed for two four-wheelers in each PS, 302 PSs were having only one four-wheeler and two PSs had no four-wheeler (**Appendix-XIX**).

As regards two-wheelers, Audit observed that though excess two-wheelers were available, 49 PSs were having only two two-wheelers, 22 PSs were having only one two-wheeler and 21 PSs had no two-wheelers (**Appendix-XIX**). Thus, the minimum requirement of vehicles at PSs as prescribed by BPR&D was not fulfilled till March 2015. This indicated that though vehicles were available with the department, the distribution of the same among PSs was not rational.

***The State Government may review the allocation of vehicles among various PSs/other wings so as to make optimum utilisation of the same in view of the BPR&D guidelines.***

### 3.3.5 Weaponry

To meet the challenges of terrorists and criminals, equipped with high tech and latest weapons, up-gradation of weaponry is of utmost importance for the police force. Under MoPF scheme, State Government procures modern weaponry every year.

#### 3.3.5.1 Availability of modern weapons with Gujarat Police

Overall 60 per cent shortage of modern weapons was pointed out earlier in the Audit Report for the year ended 31 March 2009 (Paragraph 1.1.11.1). Audit observed that the overall shortage had been brought down from 60 to 36 per cent and norms of BPR&D had been fulfilled; however, there was a shortage of these weapons as against the requirement assessed by the State Government based upon the special threat perception, long vulnerable coastline and concentration of major economic assets. The details of shortage of modern weapons as against the State's own assessment as on 31 March 2015 is shown in **Table 3** as follows –

**Table 3: Shortage of modern weapons as on 31 March 2015**

| Type of weapon         | Requirement as per |                 | Actual availability | Shortage with reference to State scale | Shortage in Percentage |             |
|------------------------|--------------------|-----------------|---------------------|--|------------------------|-------------|
|                        | BPR&D              | State Scale     |                     |  | BPR&D                  | State Scale |
| Glock/SIG Pistols      | 10,929             | 33,633          | 20,043              | 13,590                                 | -                      | 40          |
| AK 47                  | 245                | 6,704           | 1,605               | 5,099                                  | -                      | 76          |
| 9mm Carbine & 9mm MP-5 | 3,857              | 11,015          | 5,827               | 5,188                                  | -                      | 47          |
| INSAS and 7.62 SLR     | 303                | 81,673          | 59,683              | 21,990                                 | -                      | 27          |
| BORE shot Gun          | 6,022              | 8,396           | 2,743               | 5,653                                  | 54                     | 67          |
| Gas Gun                | 420                | 2,992           | 2,781               | 211                                    | -                      | 07          |
| <b>Total</b>           | <b>21,776</b>      | <b>1,44,413</b> | <b>92,682</b>       | <b>51,731</b>                          |                        | <b>36</b>   |

(Source: Information provided by the DG&IGP)

The above table shows that there was no shortage of modern weapons as per BPR&D norms except for BORE shot gun, the shortage of which stood at 54 *per cent*. The shortage of modern weapons as per State specific requirement ranged between seven *per cent* in case of Gas Guns and 76 *per cent* in case of AK 47s. Non-availability of adequate number of modern weaponry could compromise the striking capability of police force.

***Audit is of the view that the State Government may consider equipping its police forces with adequate weaponry in view of its assessed threat perception.***

### 3.3.5.2 Working of Anti Terrorist Squad

Anti Terrorist Squad (ATS) was formed in 1993 to counter the increasing threat to internal security from terrorist organisations. It has a sanctioned staff of 64 police personnel. Shortage of staff in ATS was pointed out earlier in the Audit Report for the year ended 31 March 2009 (Paragraph 1.1.11.4). In the detailed explanatory notes submitted (June 2014) to the PAC, the department had stated that the vacancy would be filled in 2014-15. However, it was observed that there was a shortage of personnel in various cadres as of March 2015 as shown in **Table 4** below –

**Table 4: Shortage of police personnel against sanctioned strength as on 31 March 2015**

| Cadre                                | As of March 2009    |                  |         |                       | As of March 2015    |                  |         |                       |
|--------------------------------------|---------------------|------------------|---------|-----------------------|---------------------|------------------|---------|-----------------------|
|                                      | Sanctioned strength | Present strength | Vacancy | Percentage of vacancy | Sanctioned strength | Present strength | Vacancy | Percentage of vacancy |
| Inspector General (Operations)       | 1                   | 0                | 1       | 100                   | 1                   | 1                | 0       | 0                     |
| Deputy Inspector General (Operation) | 1                   | 2                | (-1)    | 0                     | 1                   | 0                | 1       | 100                   |
| Superintendent of Police (Operation) | 3                   | 1                | 2       | 67                    | 3                   | 1                | 2       | 67                    |
| Deputy Superintendent of Police      | 3                   | 3                | 0       | 0                     | 3                   | 0                | 3       | 100                   |
| Police Inspector                     | 12                  | 11               | 1       | 8                     | 12                  | 9                | 3       | 25                    |
| Police Sub-inspector                 | 18                  | 7                | 11      | 61                    | 18                  | 11               | 7       | 39                    |
| Head Constable                       | 20                  | 9                | 11      | 55                    | 20                  | 7                | 13      | 65                    |
| Police Constable                     | 6                   | 6                | 0       | 0                     | 6                   | 26               | (-20)   | 0                     |

(Source: Information provided by DG&IGP)

The above table shows that the vacancies in the key posts of Deputy Inspector General (Operation), Deputy Superintendent of Police and Police Inspector had increased as on March 2015.

***Audit is of the view that the State Government may assess threat perception with regard to internal security and accordingly strengthen the ATS.***

### 3.3.5.3 Supply of weapons by Government of India

Under MoPF scheme, GoI accords its approval for supply of weapons to State Government through Ordnance Factory Board (OFB). The grant for supply of weapons is deducted by GoI from the funds allotted under MoPF scheme and

is directly paid to the weapons supplying agencies. The State Government was responsible for procurement of weapons by regular follow-up with OFB.

Non-supply of weapons against funds of ₹ 6.15 crore<sup>6</sup> retained (2003-08) by GoI was pointed out in earlier Audit Report for the year ended March 2009 (Paragraph 1.1.11.5). In the detailed explanatory notes submitted (June 2014) to the PAC, the department had stated that the procurements of these weapons centrally was in progress. However, Audit observed that as against ₹ 6.15 crore retained by GoI during 2003-08, the weapons against ₹ 6.09 crore<sup>7</sup> were still awaited (March 2015) from the OFB. Audit further observed that weapons against ₹ 6.45 crore<sup>8</sup> deducted by GoI during 2008-15 were still awaited (March 2015) from the OFB.

***Audit recommends that the department may regularly follow-up with OFB for getting its share of weapons for which payments have already been deducted.***

### 3.3.6 Communication

#### 3.3.6.1 POLNET

Modern means of communication are the backbone of effective policing. With a view to cope up with deficiency in existing communication system and to cater to the needs and maintenance of Law and Order in the country, GoI decided (October 2002) to establish a dedicated satellite based integrated Police Communication Network (POLNET) for Police and Para military forces. It provides a unified and full proof police satellite communications network with cryptographic cover to integrate the entire country for quick exchange of data at a speed thousand times faster than the present radio communications systems used by the police. It also facilitates exchange of information on the movement of criminals, crime fact-sheets and access to Interpol's crime profiles of foreign terrorist organisations and individuals, etc. The project aimed at installation of 24 Very Small Aperture Terminals (V-SAT) and 434 Multi Access Radio Telephony (MART) for linking National capital with all State capitals and further extending the connectivity down to the District headquarters/PS level. The work of execution of "POLNET" project was awarded (November 2002) by GoI to Bharat Electronics Limited (BEL), Ghaziabad covering 434 out of 464 PSs in the State as on 31 March 2003.

Non-functioning of POLNET was pointed out in the earlier Audit Report for the year ended March 2009 (Paragraph 1.1.12.1), however, Audit observed that the POLNET remained non-functional till date (October 2015). Audit further observed that out of 434 Remote Subscribers Units (RSUs) to be installed at PSs, 202 RSUs were not installed while remaining 232 RSUs were non-operational (October 2015). Audit also observed that generator sets had not been provided to POLNET stations and air-conditioners had not been provided to district headquarters for maintaining temperature for working of V-SAT. It was also found that Radio Frequency Modulator (RFM) cards at

<sup>6</sup> ₹ 0.15 crore (2003-04) + ₹ 1.49 crore (2004-05) + ₹ 3.63 crore (2005-06) + ₹ 0.88 crore (2007-08)

<sup>7</sup> ₹ 0.15 crore (2003-04), ₹ 1.49 crore (2004-05), ₹ 3.63 crore (2005-06) and ₹ 0.82 crore (2007-08)

<sup>8</sup> ₹ 0.78 crore (2008-09), ₹ 1.28 crore (2009-10), ₹ 1.43 crore (2012-13) and ₹ 2.96 crore (2014-15)

State Police Headquarters at Gandhinagar were not functioning (October 2015). Thus, the objective of integrating police communication network could not be achieved.

In the detailed explanatory notes submitted (June 2014) to the PAC, the department accepted the non-functioning of POLNET and attributed the reasons of PSs being beyond the line of sight and non-replacement of RFM card by BEL.

***It is recommended that the department may ensure rectification of the POLNET for its effective utilisation in communication.***

### 3.3.6.2 Technical Man Power in communication

For smooth operation of communication system, adequate skilled and trained manpower is an essential requirement. From the information furnished to Audit, it was observed that the vacancy in the post of Police Wireless Inspector and Police Wireless Sub-Inspector had reduced as compared to the vacancy position as of March 2009, which was pointed out in the earlier Audit Report for the year ended March 2009 (Paragraph 1.1.12.4). However, the percentage of vacancy increased in the post of Radio Operator and Radio Technician as shown in **Table 5** below –

**Table 5: Shortage of Technical manpower as of March 2009 and March 2015**

| Cadre                         | As of March 2009    |                  |            |                       | As of March 2015    |                  |            |                       |
|-------------------------------|---------------------|------------------|------------|-----------------------|---------------------|------------------|------------|-----------------------|
|                               | Sanctioned strength | Present strength | Vacancy    | Percentage of vacancy | Sanctioned strength | Present strength | Vacancy    | Percentage of vacancy |
| Police Wireless Inspector     | 32                  | 02               | 30         | 94                    | 35                  | 21               | 14         | 40                    |
| Police Wireless Sub-Inspector | 363                 | 204              | 159        | 44                    | 405                 | 359              | 46         | 11                    |
| Radio Operator                | 349                 | 309              | 40         | 11                    | 483                 | 272              | 211        | 44                    |
| Radio Technician              | 101                 | 97               | 4          | 04                    | 113                 | 57               | 56         | 50                    |
| <b>Total</b>                  | <b>845</b>          | <b>612</b>       | <b>233</b> | <b>28</b>             | <b>1,036</b>        | <b>709</b>       | <b>327</b> | <b>32</b>             |

(Source: Information provided by the DG&IGP and CAG's Audit Report – 2008-09)

From the above table, it can be seen that the percentage of vacancy increased from 11 to 44 in case of Radio Operator and from four to 50 in case of Radio Technician. It could also be observed that the overall vacancy increased from 28 to 32 *per cent*. The Government has taken little initiative to fill the vacancies in Radio Operator and Radio Technician cadres. In fact, persons-in-position in these two cadres have fallen in the corresponding periods (2009-15).

***The State Government may take effective action to recruit Radio Operators and Radio Technicians to make effective use of wireless system.***

### 3.3.7 Mega City Policing

GoI introduced a new concept of Mega City Policing as a sub-plan under MoPF from the year 2005-06 with a view to enable police to counter specific problems of crime investigation, traffic management, up-gradation of control

rooms and installation of digital radio trunking system<sup>9</sup>, etc. In Gujarat, Ahmedabad City was covered under Mega City component.

Non-procurement of 1,502 items approved under AAPs for the period 2006-09 was pointed out in the earlier Audit Report for the year ended March 2009 (Paragraph 1.1.14). Audit observed that 1,198 out of 1,502 items have not been procured by the department till date (March 2015). In the detailed explanatory notes submitted (June 2014) to the PAC, the department accepted that these items were not procured due to non-finalisation of tender, pending decision of the Secretariat Purchase Committee (SPC), non-finalisation of specifications, etc. Audit observed that CCTV, Digital Radio Trunking System and Variable Signal Messaging System approved in the AAPs of 2006-07 and 2007-08 have not been procured till date (August 2015), though these are important equipment for crime detection, better communication network and traffic control.

Audit further observed that even the items approved in the subsequent AAPs (2009-15) were also not procured within the financial year by the department which resulted in non-utilisation of grants under Mega City component as shown in **Table 6** below –

**Table 6: Non-utilisation of grants under Mega City component**

(₹ in crore)

| Year         | Grant received | Expenditure  | Unspent amount | Percentage of unspent amount to grant received |
|--------------|----------------|--------------|----------------|--|
| 2009-10      | 4.00           | 1.56         | 2.44           | 61   |
| 2010-11      | 7.46           | 6.51         | 0.95           | 13   |
| 2011-12      | 7.36           | 5.40         | 1.96           | 27   |
| 2012-13      | 0              | 0            | 0              | 0  |
| 2013-14      | 8.37           | 0            | 8.37           | 100  |
| 2014-15      | 23.44          | 0            | 23.44          | 100  |
| <b>Total</b> | <b>50.63</b>   | <b>13.47</b> | <b>37.16</b>   | <b>73</b>                                      |

(Source: Information provided by the Commissioner of Police, Ahmedabad City)

It can be seen from the above table that the department could utilise only ₹ 13.47 crore as against ₹ 50.63 crore received during 2009-15. Thus, despite availability of funds, the items approved could not be procured, adversely affecting the objective of Mega City Policing.

### 3.3.7.1 Purchase of International Mobile Subscriber Identity catcher

An International Mobile Subscriber Identity (IMSI) catcher is a telephony eavesdropping device used for intercepting mobile phone traffic and tracking movement of mobile phone users. It masquerades as a base station and logs the IMSI numbers of all the mobile stations in the area, as they attempt to attach to the IMSI catcher. It allows forcing the mobile phone connected to it to use no call encryption or to use easily breakable encryption, making the call data easy to intercept and convert to audio.

<sup>9</sup> Traditional radio equipment works on the principle that all parties involved agree on what frequencies they would utilise. Trunking radios constantly renegotiate the frequencies used for conversation. This allows for more efficient utilisation of limited frequencies available.

In the AAP 2012-13, procurement of three IMSI catchers at a cost of ₹ 0.60 crore was sanctioned. The Commissioner of Police, Ahmedabad placed (March 2014) the order to an agency<sup>10</sup> with stipulation to supply the equipment by 31 March 2014. An amount of ₹ 1.51 crore was drawn on an abstract contingent (AC) bill. However, Audit observed that the supplier failed to supply the equipment till date (August 2015) for want of Custom Duty exemption certificate from the department. This resulted in non-procurement of equipment, despite availability of funds (and the funds drawn on AC bill are lying outside the Government account till date).

### ***3.3.7.2 City Surveillance and Intelligent Traffic Management System***

To safeguard public areas, to minimise environmental and human threats, and to prevent crime a City Surveillance and Intelligent Traffic Management System (CSITMS) was sanctioned in the AAP for the year 2013-14 under Mega City Policing. GoI released (March 2014) its share of ₹ 5.02 crore to Gujarat Police Housing Corporation Limited (GSPHCL). However, Audit observed that despite availability of funds, the system was not procured by Commissioner of Police, Ahmedabad till date (August 2015) due to non-finalisation of tenders.

***The State Government may procure and put to proper use of these items to achieve the objectives of Mega City Policing.***

### ***3.3.8 Forensic Science Laboratory***

#### ***3.3.8.1 Utilisation of Automated Finger Print Identification System***

Automated Finger Print Identification System (AFIS) was installed (March 2004) at 25 district level offices and a central server at Director of Forensic Service (DFS), Gandhinagar for online verification and identification of finger prints data of criminals. In the earlier Audit Report for the year ended March 2009 (Paragraph 1.1.15.1), Audit had pointed out that the AFIS at Kachchh-Bhuj district was not utilised due to non-availability of online connectivity. In the detailed explanatory notes submitted (June 2014) to the PAC, the department stated that AFIS at all 25 districts were working online. However, in March 2015, it was observed that online connectivity with central server was not available in Bhavnagar (since October 2013) and Valsad with Ahwa-Dang (since October 2014). Further, due to shortage of staff in eight districts<sup>11</sup>, finger prints data of criminals captured in these districts were not being done online; instead the information were being sent physically to DFS Gandhinagar for entry in the central server, resulting in delay in entry and verification of the history of the criminals. Thus, the purpose of integrating all district units with DFS for online verification and identification of finger prints of criminals could not be achieved.

***The State Government may initiate action to connect all the districts online with the central server and may recruit personnel at district level so as to ensure timely entry of finger prints data of criminals in central server.***

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<sup>10</sup> M/s. National Co-operative Consumers Federation of India Limited, Mumbai

<sup>11</sup> Anand, Banaskantha, Junagadh, Kachchh-Bhuj, Kheda, Narmada, Navsari and Porbandar

### 3.3.9 Gujarat State Police Housing Corporation Limited

#### 3.3.9.1 Utilisation of funds

The scheme laid special emphasis on construction of residential and non-residential buildings with a view to provide better working environment to the police personnel. Gujarat State Police Housing Corporation Limited (GSPHCL) was entrusted with the work of constructing police buildings. DG&IGP prepares a priority list of works to be undertaken under the scheme every year, which are included in the AAP. After approval of AAP, GoI allots its share of funds to GSPHCL directly and the State Government releases a matching share.

The details of funds received and expenditure incurred by GSPHCL during the period 2009-15 are shown in **Table 7** below –

**Table 7: Funds received and expenditure incurred by GSPHCL during 2009-15**

(₹ in crore)

| Year         | Funds released by GoI | Funds released by State Government | Total funds received | Expenditure  | Percentage of expenditure to funds received |
|--------------|-----------------------|------------------------------------|----------------------|--------------|---|
| 2009-10      | 16.40                 | 0.00                               | 16.40                | 18.16        | 111   |
| 2010-11      | 15.76                 | 3.79                               | 19.55                | 15.56        | 80  |
| 2011-12      | 2.30                  | 0.00                               | 2.30                 | 0.00         | 0   |
| 2012-13      | 0.00                  | 0.00                               | 0.00                 | 0.00         | 0   |
| 2013-14      | 37.97                 | 30.20                              | 68.17                | 8.44         | 12  |
| 2014-15      | 30.50                 | 25.19                              | 55.69                | 0.00         | 0   |
| <b>Total</b> | <b>102.93</b>         | <b>59.18</b>                       | <b>162.11</b>        | <b>42.16</b> | <b>26</b>                                   |

(Source: Information provided by GSPHCL)

It can be seen from the above table that GSPHCL could utilise only ₹ 42.16 crore (26 per cent) as against ₹ 162.11 crore received during the period 2009-15. Non-utilisation of funds was due to slow progress of works and non-commencement of works on account of non-availability of land, pending approval of layout plans, delay in finalisation of tenders, *etc.* as discussed in the succeeding paragraphs.

#### 3.3.9.2 Construction of Training-cum-Store complex

Non-commencement of construction of a Training-cum-Store complex for Home Guards at Ahmedabad (approved in 2003-04 at the cost of ₹ 0.85 crore) despite obtaining permission (November 2008) of Archeological Survey of India (ASI) had been pointed out in the earlier Audit Report for the year ended March 2009. In the detailed explanatory notes submitted (June 2014) to the PAC, the department accepted the facts and cited the delay due to non-availability of clear and adequate land, and considerable delay in obtaining permission from ASI. It was further stated that necessary process of transferring the ownership of the land from Public Works Department to Home Guards was in progress. As the Administrative block of the Home Guards headquarters building was treated as condemned by GSPHCL, the State Government decided (April 2010) to construct “Home Guard Bhavan with Training-cum-Store complex” instead of constructing only a Training-

cum-Store complex. However, Audit observed that the revised proposal was not sent to GoI. Audit further observed that the work order was issued by GSPHCL only in January 2015 at the cost of ₹ 11.38 crore and the construction had reached only up to foundation level as of June 2015. Thus, the project approved in 2003-04 commenced after a delay of more than 10 years. This deprived the Home Guards of proper training facility. Also, Audit is of the view that had the State Government sent the revised proposal including the construction of Administrative block, the central assistance to that extent could have been obtained.

### ***3.3.9.3 Construction of Baffle Range***

Construction of Baffle Range at four districts<sup>12</sup> was sanctioned (2008-09) and GoI released (2009-10) grant of ₹ 5.60 crore. Audit observed that a tender of ₹ 1.69 crore for Baffle Range, Bharuch (June 2010) was cancelled (February 2011) due to non-availability of required land. This indicated that the department had invited tenders without ascertaining the availability of land. The department later decided (July 2014) to construct the same at district Patan instead of Bharuch, however, the work had not commenced (August 2015) due to non-finalisation of tender. Thus, lack of planning on the part of GSPHCL resulted in non-commencement of work even after lapse of five years from the receipt of central assistance.

***Audit is of view that proper planning and identification of land, etc. may be done in advance before seeking GoI assistance so as to avoid non-utilisation of funds for long periods of time.***

### ***3.3.9.4 Construction of infrastructure at Police Academy***

Non-commencement of nine out of 15 works approved (2003-04) for providing necessary infrastructure at Police Academy, Karai was pointed out in the earlier Audit Report for the year ended March 2009. In the detailed explanatory notes submitted (June 2014) to PAC, department stated that out of nine works, two works have been completed, three works are in progress and four works are yet to be taken up due to change in site (two works<sup>13</sup>) and want of priority approval from DG&IGP (two works<sup>14</sup>).

However, Audit observed that only four out of nine works have been completed till date (August 2015). The work of Quarter Guard and Magazine Room commenced in May 2014 was in progress while the remaining four works<sup>15</sup> have not been taken up (August 2015) due to above reasons advanced by the department and non-finalisation of plans and estimates. Thus, even after lapse of more than 10 years, GSPHCL have failed to complete the works of the academy, depriving the trainees from the resultant benefits.

***The State Government may issue instructions to GSPHCL to take up the works and complete the same within a stipulated time frame.***

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<sup>12</sup> Bharuch, Junagadh, Kheda and Sabarkantha

<sup>13</sup> Dog school and Indoor Firing Range proposed for construction at Cammando Training Centre, Kalal

<sup>14</sup> Band school and Wireless school

<sup>15</sup> Dog school, band school, wireless school and indoor firing range

### 3.3.10 Police Reforms, Human Resource and Monitoring

#### 3.3.10.1 Implementation of Supreme Court directive on police reforms

Audit had pointed out in the earlier Audit Report for the year ended March 2009 (Paragraph 1.1.17.1) that four Bodies/Authorities<sup>16</sup> established (September 2007 and November 2008) had not commenced work till July 2009. In the detailed explanatory notes submitted (June 2014) to PAC, the department stated that District Police Complaint Authorities are now functional.

However, Audit observed that State Security Commission constituted in November 2008 and State Police Complaint Authority constituted in September 2007, held only one and three meetings respectively, till March 2015 during the period 2009-15.

The District Police Complaint Authorities (DPCA) are required to meet every quarter, however, Audit observed that the number of meetings of DPCA of test-checked districts ranged from one to three during the period 2009-15 (upto July 2015) as shown in **Appendix-XX**. Inadequate functioning of these Authorities could lead to delay in redressal of complaints against police officials for their misconduct, misuse of power, *etc.* In a citizen-centric policing environment, such mechanisms devised for redressal of grievances should function optimally with utmost efficiency.

#### 3.3.10.2 Human Resource Management

From the information furnished to Audit, it was observed that the vacancy in all cadres had increased as compared to the vacancy position as of March 2009, which was pointed out in the earlier Audit Report for the year ended March 2009. In the detailed explanatory notes submitted (June 2014) to PAC, the department accepted the shortage of police personnel in various cadres/posts and stated that proposal of reorganisation of the police force in various cadres/posts was pending with the department for consideration.

#### 3.3.10.3 Annual Firing practice

Non-imparting of prescribed rounds of firing practice was pointed out in the earlier Audit Report for the year ended March 2009 (Paragraph 1.1.18.1). The State Government prescribed (June 2009) 32 rounds of firing practice twice a year per trainee. In the detailed explanatory notes submitted (June 2014) to the PAC, the department stated that mandatory firing practice is being provided. However, Audit observed that out of 63 units in the State, a few units had not provided any firing practice to the trainees in a year and some units had not provided the prescribed number of firing practice in a year *i.e.* twice in a year.

<sup>16</sup> (a) State Security Commission (lays down the broad policies and gives directions for the performance of the preventive tasks and service oriented functions of the police, evaluates the performance of the State police and prepares a report thereon each year for being placed before the State Legislature), (b) Police Establishment Board (decides all transfers, postings, promotions and other service related matters of officers below the rank of Deputy Superintendent of Police), (c) State Police Complaint Authority (looks into the complaint against police officers of the rank of Deputy Superintendent of Police and above) and (d) District Police Complaint Authority (looks into the complaint against police officers of the rank up to Police Inspector)

The year-wise details of firing practice imparted by the 63 units in the State during the period 2010-15 are shown in **Table 8** below –

**Table 8: Year-wise Annual Firing practice given in the State**

| Training phase     | Number of district unit imparted training |         |         |         |         |         |
|--------------------|---|---------|---------|---------|---------|---------|
|                    | Total Unit                                | 2010-11 | 2011-12 | 2012-13 | 2013-14 | 2014-15 |
| 1st Phase training | 63  | 47      | 46      | 50      | 49      | 49      |
| 2nd Phase training | 63  | 16      | 10      | 14      | 20      | 13      |
| No Training        | 63  | 16      | 17      | 13      | 14      | 14      |

(Source : Information provided by the DG&IGP)

The above table shows that the number of units which had provided prescribed firing practice in a year ranged from 10 (2011-12) to 20 (2013-14) and the number of units which had not provided any firing practice in a year ranged from 13 (2012-13) to 17 (2011-12). Inadequate training on fire arms could adversely affect the effectiveness of police force in meeting emergent situations and efficient handling of firearms.

#### **3.3.10.4 Internal Audit Wing and State Level Empowered Committee**

Audit observed that the department had not constituted an Internal Audit Wing till March 2015 for examining and evaluating the level of compliance with departmental rules and procedures so as to provide reasonable assurance to the management on the adequacy of the internal control mechanism of the department. Five meetings of State Level Empowered Committee set up for monitoring the implementation of MoPF were held during the period 2011-15. However, it was observed that the committee met only for approving the AAPs and no review of implementation of AAPs was done by the Committee. This indicated that implementation of the scheme was not being monitored by the Committee.

#### **3.3.11 Conclusion**

Audit observed that corrective actions have been taken by the department in respect of mobility, weaponry, communication equipment, utilisation of funds and equipment pertaining to Forensic Science Laboratories and allotment of quarters. However, following deficiencies need urgent attention of the State Government for remedial action-

Submission of AAP to the GoI by the State Government was found to have been delayed in every year during audit period. Though, adequate number of four-wheeler and two-wheeler vehicles were available with the department, some PSs were not having the prescribed number of vehicles as per norms of BPR&D. Shortages in modern weapons as against the requirement assessed by the State Government was noticed especially in respect of BORE shot guns, Gas Guns and AK 47s. Weapons against ₹ 12.54 crore released to Ordnance Factory Board during the period 2003-15 are still awaited. POLNET remains non-functional since its installation. The funds provided for Mega City Policing were not optimally utilised. GSPHCL could utilise only 26 per cent of funds received during the period 2009-15 due to slow progress of works and non-commencement of works. Construction of Training-cum-Store

complex for Home Guards at Ahmedabad commenced after a delay of more than 10 years due to non-acquisition of land and construction of Baffle Range sanctioned in 2008-09 had not commenced due to non-finalisation of tender by GSPHCL. The police reforms were not implemented properly though directed by the Hon'ble Supreme Court of India. No corrective steps had been taken to fill up the vacant posts in the Anti Terrorist Squad and technical posts in communication. Proper monitoring by State Level Empowered Committee was found wanting in the police modernisation scheme.

The matter was reported to the Government (September 2015). Reply is awaited (January 2016).

## URBAN DEVELOPMENT AND URBAN HOUSING DEPARTMENT

### 3.4 Unfruitful expenditure of ₹ 1.12 crore

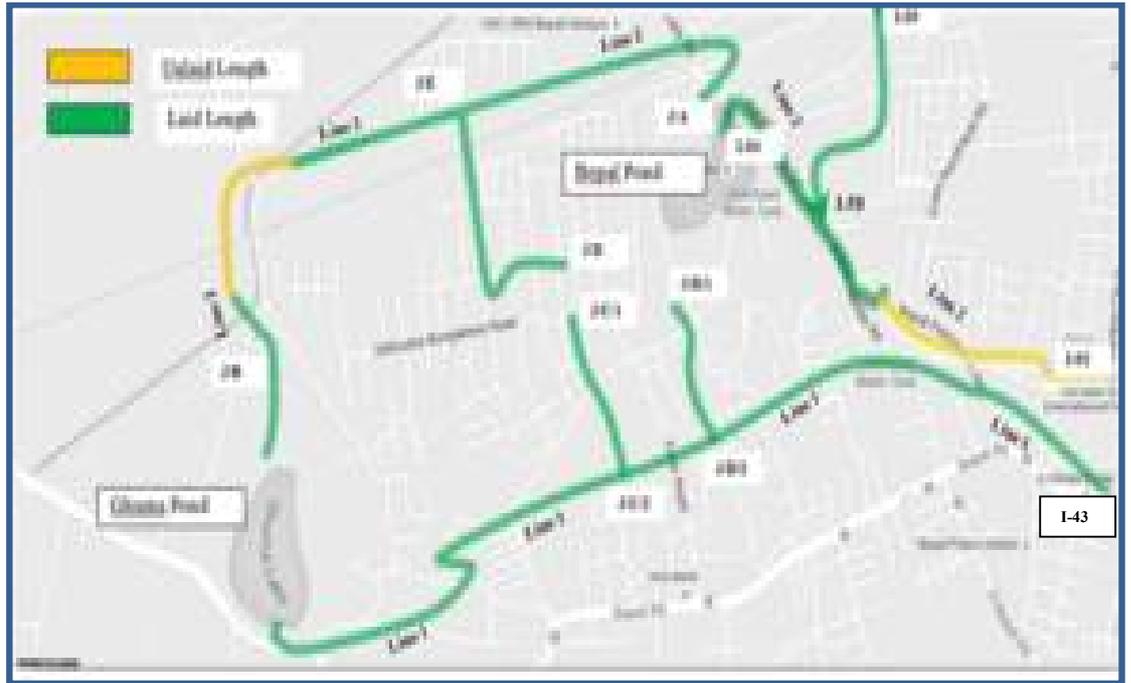
***Non-acquisition of land by Ahmedabad Urban Development Authority resulted in non-utilisation of pipes laid besides defeating the purpose of disposal of excess storm water from Bopal pond to Ghuma pond.***

To avoid water-logging during rainy season in the Bopal area of Ahmedabad city, Ahmedabad Urban Development Authority (AUDA) decided to implement storm water disposal system in Bopal area covering around 21 societies. AUDA awarded (July 2011) the work of “providing and laying of storm water disposal system from Bopal junction to Ghuma pond” to an agency<sup>17</sup> at a tendered cost of ₹ 6.78 crore against the estimated cost of ₹ 9.22 crore with stipulation to complete the work within one year. The work consisted of providing and laying of storm water network of 8,515 metres which included construction of road of the same length and 3.5 metres width. As shown in the **Picture**, two different pipelines were to be laid including the road from the Bopal area to Ghuma pond to conserve storm water *i.e.* line one - 3,845 metres<sup>18</sup> length of pipeline from Bopal area (I-43) to Ghuma pond and line two – 4,670 metres<sup>19</sup> length of pipeline from Bopal area (I-02) to Bopal pond (I-04) and then from Bopal pond (J/A) to Ghuma pond.

<sup>17</sup> Shri N.P Patel and Company, Ahmedabad

<sup>18</sup> 3,160 metres (Starting point (I-43) to Ghuma pond), 255 metres (J/D-1 to J/D-2) and 430 metres (J/C-1 to J/C-2)

<sup>19</sup> 2,050 metres {Starting point (I-02) to Bopal pond (I-04)}, 660 metres (I-59 to I-58), 1,300 metres {Bopal pond (J/A) to Ghuma pond (J/B)} and 660 metres (J/D to J/E)



On scrutiny of records, Audit observed (January 2015) that the agency had completed the work of line one from Bopal area to Ghuma pond (3,845 metres length). As regards line two, it was observed that out of 2,050 metres length of pipes to be laid from Bopal area (I-02) to Bopal pond (I-04), the agency had not laid 780 metre length of pipes from the starting point due to legal problem in acquisition of land. Thus, the purpose of diverting storm water from a particular area in Bopal to Bopal pond and controlling water-logging during the rainy season was not achieved.

Audit further observed that the agency laid 1,772.55 metres<sup>20</sup> length of pipes in the line two between Bopal pond (J/A) and Ghuma pond (J/B), however, it remained incomplete (September 2015) due to non-acquisition of 126 metres of land in Survey No. 71, 72 and 73 as the land owners denied consent for handing over the possession of their land. Audit observed that the Gujarat Public Works Department Manual stipulates commencement of work only after acquisition of land, however, AUDA awarded the work before the acquisition of land. It was further observed in Audit that as the land was to be acquired by AUDA and it was not possible in short time, AUDA treated the work as complete by issuing completion certificate and made final payment of ₹ 5.56 crore to the agency. Thus, the purpose of diverting excess water from Bopal pond to Ghuma pond was not achieved and the expenditure of ₹ 1.12 crore<sup>21</sup> incurred towards pipes<sup>22</sup> laid between Bopal pond and Ghuma pond proved unfruitful.

<sup>20</sup> 1,143.95 metres {Bopal pond (J/A) to Ghuma pond (J/B)} and 628.60 metres (J/D to J/E)

<sup>21</sup> The estimated cost of laying 1,200 mm dia.pipelines in 1,300 metre length was ₹ 1,37,66,720.00 and estimated cost of laying 600 mm dia pipeline in 660 metre length was ₹ 31,55,410.00. Thus, the estimated cost of the work in laying pipes for 1,960 metre length was ₹ 1,69,22,130.00. As the bid of the agency was 26.50 per cent below the estimated cost, the tender cost of the laying of pipeline in 1,960 metre length comes to ₹ 1,24,37,765.55. Thus, actual cost of laying of pipeline in 1,772.55 metre length (1,143.95 metre and 628.60 metre) was ₹ 1,12,48,245.57.

<sup>22</sup> NP Pipe of 1,200 mm dia – 1,143.95 metre and NP Pipe of 600 mm dia - 628.60 metre.

The Government stated (August 2015) that remaining work would be completed after getting possession of the land on finalisation of Town Planning Scheme. It was further stated that presently the excess water from Bopal was flowing through the laid pipeline of 1,143.95 metres length and then with open flow through Survey No. 71, 72 and 73, which was parallel to railway line to Ghuma pond with natural gradient. However, Audit is of the view that though the instant arrangement may be a stop gap arrangement, but the very purpose of the project for disposal of storm water from Bopal area to Bopal pond and transfer of excess water from Bopal pond to Ghuma pond and conservation of water in Ghuma pond was not achieved.

*AUDA may take action to complete the work as per the approved plan to avoid water-logging in the area and conserve water in the pond which could help in increasing the ground water level.*

Rajkot  
The

**(BIBHUDUTTA BASANTIA)**  
**Accountant General**  
**(General and Social Sector Audit),**  
**Gujarat**

**Countersigned**

New Delhi  
The

**(SHASHI KANT SHARMA)**  
**Comptroller and Auditor General of India**

# **APPENDICES**

## APPENDIX-I

## Statement showing the details of year-wise outstanding IRs/Paragraphs

as on 31 December 2015

(Reference: Paragraph 1.7.1; Page 9)

| Year         | IRs          | Paras        |
|--------------|--------------|--------------|
| 1992-93      | 1            | 2            |
| 1993-94      | 9            | 13           |
| 1994-95      | 10           | 14           |
| 1995-96      | 43           | 49           |
| 1996-97      | 70           | 84           |
| 1997-98      | 67           | 72           |
| 1998-99      | 79           | 93           |
| 1999-2000    | 104          | 147          |
| 2000-01      | 91           | 124          |
| 2001-02      | 100          | 143          |
| 2002-03      | 128          | 189          |
| 2003-04      | 141          | 245          |
| 2004-05      | 156          | 209          |
| 2005-06      | 155          | 283          |
| 2006-07      | 153          | 265          |
| 2007-08      | 250          | 363          |
| 2008-09      | 186          | 370          |
| 2009-10      | 273          | 520          |
| 2010-11      | 263          | 491          |
| 2011-12      | 168          | 457          |
| 2012-13      | 185          | 411          |
| 2013-14      | 194          | 368          |
| 2014-15      | 287          | 860          |
| 2015-16      | 148          | 515          |
| <b>Total</b> | <b>3,261</b> | <b>6,287</b> |

**APPENDIX-II**

**Details of Detailed Explanations pending as of 31 December 2015**

(Reference: Paragraph 1.7.3; Page 10)

| Sl. No.      | Department                                      | 2003-04   | 2005-06   | 2006-07   | 2007-08   | 2008-09   | 2009-10   | 2010-11   | 2011-12   | 2012-13   | 2013-14   | Total     |
|--------------|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| 1.           | Co-operation                                    | --        | --        | 01        | --        | --        | --        | --        | --        | --        | --        | 01        |
| 2.           | Education                                       | --        | --        | --        | --        | --        | 01        | 01        | --        | 01        | 01        | 04        |
| 3.           | Fisheries                                       | --        | --        | --        | --        | --        | 01        | --        | --        | --        | --        | 01        |
| 4.           | Forest and Environment                          | --        | --        | --        | --        | 01        | --        | 01        | --        | --        | --        | 02        |
| 5.           | Health and Family Welfare                       | --        | --        | --        | --        | 01        | 01        | --        | 01        | --        | 01        | 04        |
| 6.           | Home  | --        | --        | --        | --        | --        | --        | --        | 01        | --        | 01        | 02        |
| 7.           | Labour and Employment                           | --        | --        | --        | --        | --        | --        | --        | --        | 01        | --        | 01        |
| 8.           | Legal   | --        | --        | --        | --        | --        | --        | --        | --        | --        | 01        | 01        |
| 9.           | Panchayats, Rural Housing and Rural Development | --        | --        | 01        | 01        | 01        | 01        | --        | 01        | --        | 01        | 06        |
| 10.          | Ports   | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | 00        |
| 11.          | Revenue   | --        | 01        | --        | --        | --        | --        | 01        | --        | --        | --        | 02        |
| 12.          | Roads and Buildings                             | --        | --        | 01        | --        | --        | 01        | 01        | --        | --        | --        | 03        |
| 13.          | Science and Technology                          | 01        | --        | --        | --        | --        | 01        | --        | --        | --        | --        | 02        |
| 14.          | Social Justice & Empowerment                    | --        | --        | 01        | 01        | 01        | --        | --        | 01        | --        | --        | 04        |
| 15.          | Urban Development and Urban Housing             | --        | --        | --        | --        | --        | --        | 01        | 01        | 01        | 01        | 04        |
| 16.          | Water Resources                                 | --        | --        | 01        | 01        | 01        | 01        | 01        | --        | --        | --        | 05        |
| 17.          | Water Supply                                    | --        | --        | --        | --        | 01        | --        | 01        | --        | --        | --        | 02        |
| 18.          | Women & Child Development                       | --        | --        | --        | --        | --        | --        | --        | 01        | --        | --        | 01        |
| 19.          | Youth Services and Cultural Activities          | --        | --        | --        | --        | --        | --        | 01        | --        | 01        | 01        | 03        |
| 20.          | <b>General paragraphs</b>                       | --        | --        | 01        | 01        | --        | 01        | --        | --        | --        | --        | 03        |
| <b>Total</b> |   | <b>01</b> | <b>01</b> | <b>06</b> | <b>04</b> | <b>06</b> | <b>08</b> | <b>08</b> | <b>06</b> | <b>04</b> | <b>07</b> | <b>51</b> |

## APPENDIX-III

Paragraphs to be discussed by Public Accounts Committee as of 31 December 2015

(Reference : Paragraph 1.7.4; Page 10)

| Sl. No.      | Department   | 2003-04   |           | 2005-06   |           | 2006-07   |           | 2007-08   |           | 2008-09   |           | 2009-10   |           | 2010-11   |           | 2011-12   |           | 2012-13   |           | 2013-14   |           | Total     |           |
|--------------|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
|              |  | C.A.      | P.A.      |
| 1.           | Co-operation   | --        | --        | --        | --        | 04        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | 04        | --        |
| 2.           | Education  | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | 02        | 01        | 01        | --        | --        | --        | 02        | --        | 01        | --        | 06        | 01        |
| 3.           | Energy and Petro Chemical                            | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        |
| 4.           | Food, Civil Supplies and Consumer Affairs Department | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | 01        | --        | --        | --        | 01        |
| 5.           | Fisheries  | --        | --        | --        | --        | 01        | --        | --        | --        | --        | --        | 01        | --        | --        | --        | --        | --        | --        | --        | --        | --        | 02        | --        |
| 6.           | Forest and Environment                               | --        | --        | --        | --        | --        | --        | --        | --        | --        | 01        | --        | --        | --        | 01        | --        | --        | --        | --        | --        | --        | --        | 02        |
| 7.           | Health and Family Welfare                            | --        | --        | --        | --        | --        | --        | --        | --        | --        | 01        | 01        | 02        | --        | --        | 01        | 01        | --        | --        | 01        | 01        | 03        | 05        |
| 8.           | Home   | --        | --        | --        | --        | --        | --        | 01        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | 01        | 01        | --        | 02        | 01        |
| 9.           | Home (Transport)                                     | --        | --        | --        | --        | --        | --        | --        | 01        | --        | --        | --        | --        | --        | --        | 01        | 01        | --        | --        | --        | --        | 01        | 02        |
| 10.          | Labour and Employment                                | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | 01        | --        | --        | --        | 01        | --        |
| 11.          | Panchayats, Rural Housing and Rural Development      | --        | --        | --        | --        | 01        | --        | 02        | --        | 01        | --        | 02        | --        | --        | --        | 01        | 01        | 02        | 02        | 03        | 01        | 12        | 04        |
| 12.          | Ports  | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | 01        | --        | --        | --        | --        | --        | --        | --        | 01        | --        |
| 13.          | Revenue  | --        | --        | --        | 01        | --        | --        | --        | --        | --        | --        | --        | --        | --        | 01        | --        | --        | --        | --        | --        | --        | --        | 02        |
| 14.          | Roads and Buildings                                  | --        | --        | --        | --        | 01        | 01        | --        | --        | --        | --        | 05        | --        | 02        | --        | --        | --        | --        | --        | --        | --        | 08        | 01        |
| 15.          | Science and Technology                               | 01        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | 01        | --        | --        | --        | --        | --        | --        | --        | --        | 01        | 01        |
| 16.          | Social Justice & Empowerment                         | --        | --        | --        | --        | 01        | 01        | --        | 01        | --        | 01        | --        | --        | --        | --        | 01        | --        | --        | --        | --        | --        | 02        | 03        |
| 17.          | Urban Development and Urban Housing                  | --        | --        | --        | --        | 01        | --        | --        | --        | --        | --        | --        | --        | 01        | --        | --        | 01        | --        | 02        | 05        | --        | 07        | 03        |
| 18.          | Women & Child Development                            | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | 01        | --        | --        | --        | --        | --        | 01        |
| 19.          | Water Resources                                      | --        | --        | --        | --        | 01        | --        | 06        | 01        | 02        | --        | 01        | 01        | 02        | --        | --        | --        | --        | --        | --        | --        | 12        | 02        |
| 20.          | Water Supply   | --        | --        | --        | --        | 01        | --        | 06        | --        | 03        | --        | 01        | --        | 02        | 01        | --        | --        | 03        | --        | 06        | --        | 22        | 01        |
| 21.          | Youth Services and Cultural Activities               | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | 01        | --        | --        | --        | 01        | 01        | --        | 01        | 02        |
| 22.          | Legal  | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | --        | 01        | --        | 01        | --        |
| 23.          | General paragraphs                                   | --        | --        | --        | --        | 01        | --        | 01        | --        | --        | --        | 01        | --        | --        | --        | --        | --        | --        | --        | --        | --        | 03        | --        |
| <b>Total</b> |  | <b>01</b> | <b>--</b> | <b>--</b> | <b>01</b> | <b>12</b> | <b>02</b> | <b>16</b> | <b>03</b> | <b>06</b> | <b>03</b> | <b>14</b> | <b>05</b> | <b>09</b> | <b>04</b> | <b>04</b> | <b>05</b> | <b>08</b> | <b>07</b> | <b>19</b> | <b>02</b> | <b>89</b> | <b>32</b> |

Note: Performance Audit (PA) and Compliance Audit (CA)

APPENDIX-IV

Availability of Doctors and Para-Medical Staff as on 31 March 2015 in test-checked DHs  
(Reference: Paragraph 2.1.7.1; Page 19)

| District Hospitals                     | Number of beds in Hospital | Minimum requirement as per IPHS | Sanctioned strength | Men-in-position (MIP) | Percentage shortfall in MIP as compared to IPHS | Percentage shortfall in MIP as compared to sanctioned strength |
|--|----------------------------|---------------------------------|---------------------|-----------------------|---|--|
| <b>A. Specialist Doctors</b>           |                            |                                 |                     |                       |   |  |
| Anand (Petlad)                         | 119                        | 21                              | 14                  | 07                    | 67  | 50   |
| Palanpur                               | 225                        | 35                              | 19                  | 14                    | 60  | 26   |
| Dahod                                  | 150                        | 21                              | 26                  | 15                    | 29  | 42   |
| Godhra                                 | 210                        | 35                              | 18                  | 08                    | 77  | 56   |
| Himatnagar                             | 200                        | 35                              | 19                  | 15                    | 57  | 21   |
| Surendranagar                          | 150                        | 21                              | 26                  | 07                    | 67  | 73   |
| Vadodara                               | 213                        | 35                              | 17                  | 13                    | 63  | 24   |
| <b>Total</b>                           |                            | <b>203</b>                      | <b>139</b>          | <b>79</b>             |   |  |
| <b>B. Medical Officers</b>             |                            |                                 |                     |                       |   |  |
| Anand (Petlad)                         | 119                        | 13                              | 06                  | 04                    | 69  | 33   |
| Palanpur                               | 225                        | 15                              | 19                  | 13                    | 13  | 32   |
| Dahod                                  | 150                        | 13                              | 12                  | 08                    | 38  | 33   |
| Godhra                                 | 210                        | 15                              | 15                  | 08                    | 47  | 47   |
| Himatnagar                             | 200                        | 15                              | 16                  | 14                    | 7   | 13   |
| Surendranagar                          | 150                        | 13                              | 13                  | 05                    | 62  | 62   |
| Vadodara                               | 213                        | 15                              | 15                  | 14                    | 7   | 7  |
| <b>Total</b>                           |                            | <b>99</b>                       | <b>96</b>           | <b>66</b>             |   |  |
| <b>C. Nursing Staff</b>                |                            |                                 |                     |                       |   |  |
| Anand (Petlad)                         | 119                        | 90                              | 34                  | 28                    | 69  | 18   |
| Palanpur                               | 225                        | 135                             | 73                  | 69                    | 49  | 5  |
| Dahod                                  | 150                        | 90                              | 33                  | 25                    | 72  | 24   |
| Godhra                                 | 210                        | 135                             | 62                  | 56                    | 59  | 10   |
| Himatnagar                             | 200                        | 135                             | 51                  | 39                    | 71  | 24   |
| Surendranagar                          | 150                        | 90                              | 90                  | 84                    | 7   | 7  |
| Vadodara                               | 213                        | 135                             | 52                  | 39                    | 71  | 25   |
| <b>Total</b>                           |                            | <b>810</b>                      | <b>395</b>          | <b>340</b>            |   |  |
| <b>D. Para-Medical and other Staff</b> |                            |                                 |                     |                       |   |  |
| Anand (Petlad)                         | 119                        | 57                              | 22                  | 10                    | 82  | 55   |
| Palanpur                               | 225                        | 87                              | 39                  | 27                    | 69  | 31   |
| Dahod                                  | 150                        | 57                              | 16                  | 06                    | 89  | 63   |
| Godhra                                 | 210                        | 87                              | 40                  | 23                    | 74  | 43   |
| Himatnagar                             | 200                        | 87                              | 102                 | 60                    | 31  | 41   |
| Surendranagar                          | 150                        | 57                              | 37                  | 20                    | 65  | 46   |
| Vadodara                               | 213                        | 87                              | 35                  | 28                    | 68  | 20   |
| <b>Total</b>                           |                            | <b>519</b>                      | <b>291</b>          | <b>174</b>            |   |  |

## APPENDIX-V

## Availability of beds in district level hospitals in the State as of March 2015

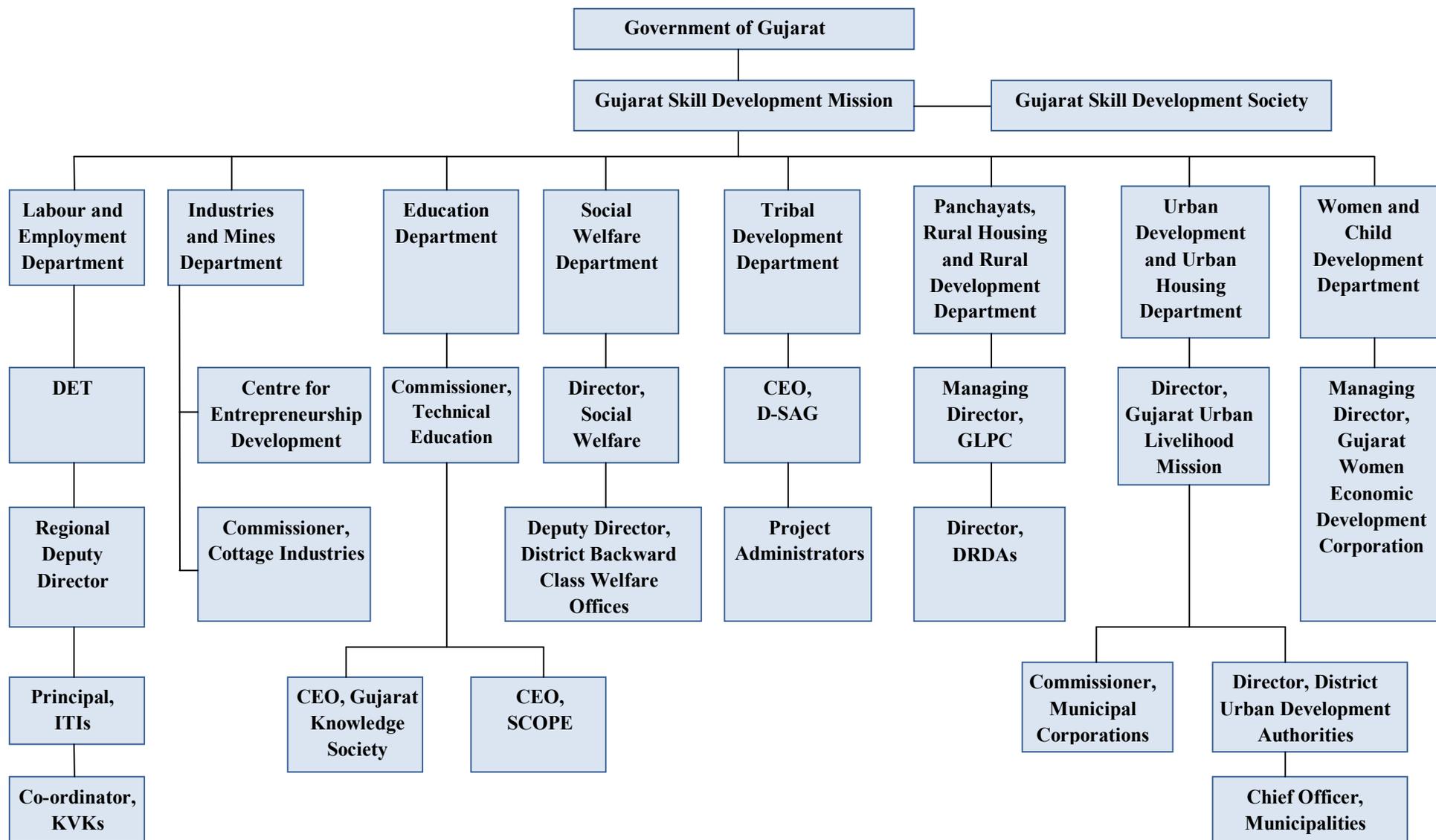
(Reference: Paragraph 2.1.7.2; Page 20)

| Districts       | DH  | Number of beds in DH | CH  | Number of beds in CH | Hospital attached with GMERS/PPP | Number of beds in GMERS/PPP hospital | Total beds in the district |
|-----------------|-----|----------------------|-----|----------------------|----------------------------------|--------------------------------------|----------------------------|
| Ahmedabad       | NA  | 0                    | YES | 2,000                | YES                              | 530                                  | 2,530                      |
| Ahwa-Dang       | YES | 150                  | NA  | 0                    | NA                               | 0                                    | 150                        |
| Amreli          | YES | 200                  | NA  | 0                    | NA                               | 0                                    | 200                        |
| Anand (Petlad)  | NA  | 119                  | NA  | 0                    | NA                               | 0                                    | 119                        |
| Bharuch         | YES | 210                  | NA  | 0                    | NA                               | 0                                    | 210                        |
| Bhavnagar       | NA  | 0                    | YES | 709                  | NA                               | 0                                    | 709                        |
| Bhuj-Kachchh    | NA  | 0                    | NA  | 0                    | YES/PPP                          | 300                                  | 300                        |
| Botad           | YES | 100                  | NA  | 0                    | NA                               | 0                                    | 100                        |
| Chhotaudepur    | YES | 100                  | NA  | 0                    | NA                               | 0                                    | 100                        |
| Dahod           | YES | 150                  | NA  | 0                    | NA                               | 0                                    | 150                        |
| Gandhinagar     | NA  | 0                    | NA  | 0                    | YES                              | 415                                  | 415                        |
| Panchmahal      | YES | 210                  | NA  | 0                    | NA                               | 0                                    | 210                        |
| Sabarkantha     | YES | 200                  | NA  | 0                    | NA                               | 0                                    | 200                        |
| Devbhumi Dwarka | YES | 150                  | NA  | 0                    | NA                               | 0                                    | 150                        |
| Jamnagar        | NA  | 0                    | YES | 1,263                | NA                               | 0                                    | 1,263                      |
| Junagadh        | NA  | 0                    | NA  | 0                    | YES                              | 327                                  | 327                        |
| Mahisagar       | YES | 100                  | NA  | 0                    | NA                               | 0                                    | 100                        |
| Mehsana         | YES | 243                  | NA  | 0                    | NA                               | 0                                    | 243                        |
| Aravali         | NA  | 0                    | NA  | 0                    | NA                               | 0                                    | 0                          |
| Morbi           | NA  | 0                    | NA  | 0                    | NA                               | 0                                    | 0                          |
| Kheda           | YES | 160                  | NA  | 0                    | NA                               | 0                                    | 160                        |
| Navsari         | YES | 180                  | NA  | 0                    | NA                               | 0                                    | 180                        |
| Patan           | NA  | 0                    | NA  | 0                    | YES                              | 415                                  | 415                        |
| Banaskantha     | YES | 225                  | NA  | 0                    | NA                               | 0                                    | 225                        |
| Porbandar       | YES | 241                  | NA  | 0                    | NA                               | 0                                    | 241                        |
| Rajkot          | YES | 115                  | YES | 850                  | NA                               | 0                                    | 965                        |
| Narmada         | YES | 150                  | NA  | 0                    | NA                               | 0                                    | 150                        |
| Surat           | NA  | 0                    | YES | 1,050                | NA                               | 0                                    | 1,050                      |
| Surendranagar   | YES | 150                  | NA  | 0                    | NA                               | 0                                    | 150                        |
| Vadodara        | YES | 213                  | YES | 1,513                | YES                              | 530                                  | 2,256                      |
| Valsad          | NA  | 0                    | NA  | 0                    | YES                              | 415                                  | 415                        |
| Veraval         | NA  | 0                    | NA  | 0                    | NA                               | 0                                    | 0                          |
| Tapi            | YES | 150                  | NA  | 0                    | NA                               | 0                                    | 150                        |
| <b>Total</b>    |     | <b>3,516</b>         |     | <b>7,385</b>         |                                  | <b>2,932</b>                         | <b>13,833</b>              |

APPENDIX-VI

Organisational Set-up

(Reference: Paragraph 2.2.2; Page 54)



## APPENDIX – VII

**Statement showing list of schemes of eight departments selected for Audit  
(Reference: Paragraph 2.2.3; Page 54)**

| Sr. No. | Name of Department                              | Name of scheme   |
|---------|---|--|
| 1       | Labour and Employment                           | Skill Voucher Scheme (SVS)   |
| 2       |   | Craftsman Training Scheme (CTS)  |
| 3       |   | Apprenticeship Training Scheme (ATS)   |
| 4       |   | Skill Development Initiative Scheme (SDI)                                      |
| 5       |   | eMPOWER  |
| 6       |   | Kaushalya Vardhan Kendra (KVK)   |
| 7       |   | Industrial - Kaushalya Vardhan Kendra (i-KVK)                                  |
| 8       | Education                                       | Skill Development Training and eMPOWER by GKS                                  |
| 9       |   | English language proficiency training by SCOPE                                 |
| 10      | Industries and Mines                            | Setting-up of State Level Anchor Institute (SLAI)                              |
| 11      |   | Setting-up of Skill Upgradation Centres (SUC)                                  |
| 12      |   | Setting-up of Short Term Bridge Courses (STBC)                                 |
| 13      |   | Setting-up of Specialized Skill Development Centres (SSDC)                     |
| 14      |   | Cottage Industrial Training Centres (CITC)                                     |
| 15      | Tribal Development                              | Vocational Training Centres (VTC)  |
| 16      |   | High Quality Employment Oriented Skill Training Programmes (HQEOSTP)           |
| 17      | Social Justice and Empowerment                  | Sant Shri Ravidas High Skill Training Programme (SSRHSTP)                      |
| 18      | Urban Development and Urban Housing             | Urban Youth Motivation, Employment and Entrepreneur Development (UMEED) Scheme |
| 19      | Panchayats, Rural Housing and Rural Development | Mission Mangalam Skill Development Programme (MMSDP)                           |
| 20      |   | Deen Dayal Upadhyay – Grameen Kaushalya Yojana (DDU-GKY)                       |
| 21      | Women and Child Development                     | General Training Programme (GTP) for BPL women                                 |

**APPENDIX - VIII**

**Statement showing list of test-checked ITIs and KVKs during Performance Audit  
(Reference: Paragraph 2.2.3; Page 55)**

| Sr. No. | Name of District | Name of ITIs      | Name of KVKs  |
|---------|------------------|-------------------|---------------|
| 1       | Ahmedabad        | Kubernagar        | Ghatlodiya    |
| 2       |                  | Bavla             | Kavitha       |
| 3       |                  | Sanand            | Virochannagar |
| 4       |                  | Ranip             | --            |
| 5       |                  | Thaltej (Mahila)  | Koth          |
| 6       | Bharuch          | Bharuch           | Jadeshwar     |
| 7       |                  | Dahej             | --            |
| 8       |                  | Ankleshwar        | Bhadkodara    |
| 9       | Jamnagar         | Jamnagar          | Aliyabada     |
| 10      |                  | Jamnagar (Mahila) | --            |
| 11      |                  | Dhrol             | Latipur       |
| 12      |                  | Kalawad           | Kharedi       |
| 13      | Mehsana          | Mehsana           | Gojhariya     |
| 14      |                  | Vijapur           | Ladol-Falu    |
| 15      |                  | Kadi              | Langhnaj      |
| 16      | Panchmahal       | Godhra            | Gollav        |
| 17      |                  | Godhra (Mahila)   | Orwada        |
| 18      |                  | Lunawada          | Kothamba      |
| 19      |                  | Kalol             | Vejalpur      |
| 20      | Rajkot           | Rajkot            | Kotharia      |
| 21      |                  | Rajkot (Disable)  | --            |
| 22      |                  | Morbi-Road        | --            |
| 23      |                  | Tankara           | Lajjai        |
| 24      |                  | Dhoraji           | Moti Marad    |
| 25      |                  | Upleta            | Paneli Moti   |
| 26      | Vadodara         | Dasarath          | Sokhada       |
| 27      |                  | Gorva (Mahila)    | Bajwa         |
| 28      |                  | Kwant             | Panvad        |
| 29      |                  | Karjan            | Valan         |
| 30      |                  | Padra             | Dabka         |
| 31      | Valsad           | Dharampur         | Kalgam        |
| 32      |                  | Bhilad            | Bilpudi       |

## APPENDIX - IX

Statement showing field units of eight departments test-checked in Audit  
(Reference: Paragraph 2.2.3; Page 55)

| Sr.No. | Name of Department       | Name of schemes   | Name of Districts | Name of Unit/<br>Training Provider   |  |
|--------|--------------------------|---|-------------------|--|--|
| 1      | Labour and<br>Employment | Industrial –<br>Kaushalaya<br>Vardhan Kendra<br>(i-KVK) | Ahmedabad         | M/s. Corrttech<br>Energy Ltd.,<br>Changodar  |  |
| 2      |                          |   |                   | M/s. Precision<br>Bearings Pvt. Ltd.,<br>Changodar   |  |
| 3      |                          |   |                   | M/s. Inox Wind<br>Limited, Bavla   |  |
| 4      |                          |   |                   | Bharuch  | Sanofi India Ltd.<br>Ankleshwar                          |
| 5      |                          |   |                   | Mehsana  | Hitachi Home and<br>Life Solutions<br>(INDIA) Ltd. Kadi  |
| 6      |                          |   |                   | Vadodara   | Rishi FIBC<br>Solution Pvt Ltd.                          |
| 7      |                          |   |                   | Valsad   | M/s. Excel<br>Processing Pvt.<br>Ltd., Vasiar,<br>Valsad |
| 8      | Industries and<br>Mines  | Anchor Institute  | Ahmedabad         | Centre for<br>Environmental<br>Planning and<br>Technology<br>University (CEPT),<br>Ahmedabad |  |
| 9      |                          |   | Ahmedabad         | Central Institute of<br>Plastics<br>Engineering and<br>Technology<br>(CIPET),<br>Ahmedabad   |  |
| 10     |                          |   | Vadodara          | Maharaja Sayajirao<br>University,<br>Vadodara  |  |
| 11     |                          | Skill Upgradation<br>Centre in GIDC<br>(SUC)            | Ahmedabad         | M/s. Everron<br>Education Ltd.,<br>Vatva   |  |
| 12     |                          |   | Bharuch           | M/s. Gurukul<br>Online Learning<br>Solutions (GOLS),<br>Jaghadiya                            |  |

| Sr.No. | Name of Department | Name of schemes  | Name of Districts                                      | Name of Unit/ Training Provider                    |  |
|--------|--------------------|--|--|--|--|
| 13     | Education          |  | Mehsana  | Ms IMS Proschool, Kadi                             |  |
| 14     |                    |  | Panchmahal   | M/s. GOLS, Halol                                   |  |
| 15     |                    |  | Rajkot   | M/s. Everron Education Ltd., Metoda                |  |
| 16     |                    |  | Vadodara   | M/s. GOLS, Savli                                   |  |
| 17     |                    |  | Valsad   | M/s. GOLS, Vapi                                    |  |
| 18     |                    |  | <b>Short Term Bridge Course (STBC)</b>                 | Ahmedabad  | Saraswati Nactwarlal Bhagwati Charity Trust, Ahmedabad           |
| 19     |                    |  | <b>Specialised Training Courses Centres (STCC)</b>     | Ahmedabad  | ITI Kubernagar-Toyoto Motors and Kirlosker Motors                |
| 20     |                    |  |  | Bharuch  | Narmadanagar Rural Development Society (NARDES) with GNFC –Dahej |
| 21     |                    |  |  | Vadodara   | M/s. Rishi FIBC Solution Pvt. Ltd., Padra, Vadodara              |
| 22     |                    |  | <b>Cottage Industrial Training Centre (CITC)</b>       | Ahmedabad  | Kubernagar   |
| 23     |                    |  |  | Bharuch  | Bharuch  |
| 24     |                    |  |  | Mehsana  | Mehsana  |
| 25     |                    |  |  | Panchmahal   | Halol  |
| 26     |                    |  |  | Rajkot   | Morbi  |
| 27     |                    |  |  | Vadodara   | Vadodara   |
| 28     |                    |  |  | Valsad   | Vapi   |
| 29     |                    |  | Education  | <b>Gujarat Knowledge Society (GKS) Gandhinagar</b> | Head office, Gandhinagar   |
| 30     |                    | <b>Society for Creation of Opportunity through Proficiency in English (SCOPE), Ahmedabad</b> |  | Head office, Gandhinagar                           | --   |
| 31     |                    | <b>Social Justice and Empowerment</b>  | <b>Sant Shri Ravidas High Skill Training Programme</b> | Ahmedabad  | M/s. Institute of Computer Accountants (ICA)                     |

| Sr.No. | Name of Department        | Name of schemes  | Name of Districts   | Name of Unit/ Training Provider   |
|--------|---------------------------|--|---|---|
| 32     |                           |  | Rajkot  | M/s. Jetking  |
| 33     |                           |  | Vadodara  | M/s. Institute of Computer Accountants (ICA)  |
| 34     | <b>Tribal Development</b> | <b>Vocational Training Centre (VTC)</b>                                    | Bharuch   | Society for Education Welfare and Action (SEWA) Rural, Jaghadia                       |
| 35     |                           |  | Vadodara  | All Gujarat Institute of Driving, Technical Training and Research (AGIDTTR), Vaghodia |
| 36     |                           |  | Valsad  | M/s. Atul, Valsad   |
| 37     |                           |  | Bharuch   | M/s. Prakshal   |
| 38     |                           | <b>High Quality Employment Oriented Skill Training Programme (HQEOSTP)</b> | Panchmahal  | M/s. Institute of Computer Accountants (ICA)  |
| 39     |                           |  | Vadodara  | M/s. Omni Soft  |
| 40     |                           |  | Valsad  | M/s. Aid-et-action  |
| 41     |                           | <b>Panchayats, Rural Development and Rural Housing</b>                     | <b>Mission Mangalam Skill Development Programme (MMSDP)</b>           | Bharuch   |
| 42     | Panchmahal                |  |   | M/s. Gramin Vikas Trust   |
| 43     | Rajkot                    |  |   | M/s. Institute of Computer Accountants (ICA)  |
| 44     | Vadodara                  |  |   | M/s. Institute of Computer Accountants (ICA)  |
| 45     | Ahmedabad                 |  |   | M/s. Sanskruti Nikol  |
| 46     | Bharuch                   |  | M/s. Orion Edutech Pvt. Ltd.  |   |
| 47     | Mehsana                   |  | M/s. Everron Education Ltd.,  |   |
| 48     | Jamnagar                  |  | M/s. Navjeevan Trust  |   |
| 49     | Panchmahal                |  | M/s. All India Society for Electronics & Computer Technology (AISECT) |   |

| Sr.No. | Name of Department                         | Name of schemes   | Name of Districts  | Name of Unit/ Training Provider       |
|--------|--|---|--|---------------------------------------|
| 50     |  |   | Rajkot   | M/s. Navjeevan Trust                  |
| 51     |  |   | Vadodara   | M/s. NIFA Info Com Services Pvt. Ltd. |
| 52     | <b>Urban Development and Urban Housing</b> | <b>Urban Youth Motivation, Employment and Entrepreneur Development (UMEED) Scheme</b> | Ahmedabad  | M/s. SAATH                            |
| 53     |  |   | Bharuch  | M/s. India Can                        |
| 54     |  |   | Jamnagar   | M/s. Orchid                           |
| 55     |  |   | Mehsana  | M/s. Kutumb and Bal Kalyan Samiti     |
| 56     |  |   | Panchmahal   | M/s. Skill Pro Pvt. Ltd.              |
| 57     |  |   | Rajkot   | M/s. Aid-et-action                    |
| 58     |  |   | Vadodara   | M/s. India Can                        |
| 59     |  |   | Valsad   | M/s. CAP Foundation                   |
| 60     | <b>Women and Child Development</b>         | <b>General Training Scheme</b>  | Gujarat Women Economic Development Corporation Gandhinagar | --                                    |

## APPENDIX – X

## Statement showing skill training capacity of various departments of Government of Gujarat as on 31 March 2015

(Reference: Paragraph 2.2.6.2; Page 60)

| Sr. No.      | Name of Department                              | Annual Skill Training Capacity of various departments |
|--------------|---|---|
| 1.           | Labour and Employment                           | 8,04,152  |
| 2.           | Education                                       | 1,65,915  |
| 3.           | Industries and Mines                            | 28,500  |
| 4.           | Social Justice and Empowerment                  | 4,100   |
| 5.           | Tribal Development                              | 14,643  |
| 6.           | Panchayats, Rural Housing and Rural Development | 58,000  |
| 7.           | Urban Housing and Urban Development             | 25,000  |
| 8.           | Women and Child Development                     | 11,000  |
| <b>Total</b> |   | <b>11,11,310</b>                                      |

**APPENDIX - XI**

**Statement showing scheme-wise actual number of trainees trained**

(Reference: Paragraph 2.2.6.2; Page 60)

| Sr.No. | Name of Department    | Name of scheme   | Number of total Trainee after deducting duplication      |
|--------|-----------------------|--|--|
| 1      | Labour and Employment | Skill Voucher Scheme   | (44,128) <sup>1</sup>                                    |
| 2      |                       | Craftsman Training Scheme  | 2,96,394   |
| 3      |                       | Apprenticeship Training Scheme   | 16,619 Fresh (Total 59,995 (-) 43,376 ITI <sup>2</sup> ) |
| 4      |                       | Kaushalya Vardhan Kendra (KVK)   | 7,82,556 <sup>3</sup>                                    |
| 5      |                       | Industrial - Kaushalya Vardhan Kendra (i-KVK)  | 2,862  |
| 6      |                       | eMPOWER  | 6,29,555   |
| 7      |                       | Skill Development Initiative Scheme  | 76,269   |
| 8      | Education             | eMPOWER by GKS   | 1,49,816   |
|        |                       | Girls Empowering   | 30,255   |
|        |                       | GKS – Skill training   | 85,013   |
| 9      |                       | English language proficiency training by SCOPE                                       | 3,59,133   |
| 10     | Industries and Mines  | Setting up of State Level Anchor Institute   | 15,627   |
| 11     |                       | Skill Development Centre   | 35   |
| 12     |                       | Scheme to establish Skill Upgradation Centers  | 9,866  |
| 13     |                       | Setting up of specialized skill development centres                                  | 7,184  |
| 14     |                       | Training in the traditional and modern trades in Cottage Industrial Training Centres | 13,557   |
| 15     | Tribal Development    | High Quality Employment Oriented Skill Training Programmes                           | 14,746   |
| 16     |                       | Vocational Training Centres  | 15,049   |

<sup>1</sup> As vouchers were purchased for SCOPE training, figures already included in SCOPE scheme figures

<sup>2</sup> The ITI passed out candidates training under Apprenticeship scheme were already included in CTS figures

<sup>3</sup> 20 per cent considered as employable training (Approximately)

| Sr.No.       | Name of Department                              | Name of scheme   | Number of total Trainee after deducting duplication |
|--------------|---|--|---|
| 17           | Social Justice and Empowerment                  | Sant Shiri Ravidas High Skill Training Scheme                                  | 17,052  |
| 18           | Panchayats, Rural Housing and Rural Development | Mission Mangalam Skill Development Programme                                   | 1,155   |
| 19           |   | Deen Dayal Upadhyay – Grameen Kaushalya Yojana (DDU-GKY)                       | 3,312   |
| 20           | Urban Development and Urban Housing             | Urban Youth Motivation, Employment and Entrepreneur Development (UMEED) Scheme | 1,53,670  |
| 21           | Women and Child Development                     | General Training scheme  | 58,188 <sup>4</sup>                                 |
| <b>Total</b> |   |  | <b>27,37,913</b>                                    |

<sup>4</sup> 10 per cent considered as employable training (Approximately)

APPENDIX - XII

Statement showing targets on share of land use as per Development Plans

(Reference : Paragraph 2.3.6.1; Page 91)

(Area in hectares)

| Sr. No.                       | Zone                        | Proposed land use             |                                       |  |
|-------------------------------|-----------------------------|-------------------------------|---------------------------------------|--|
|                               |                             | First Development Plan (1984) | First Revised Development Plan (1996) | Second Revised Development Plan (2011) |
| 1                             | Gamtal                      | 799                           | 799                                   | 799                                    |
| 2                             | Residential                 | 9,957                         | 12,325                                | 17,381                                 |
| 3                             | Commercial                  | 623                           | 779                                   | 2,286                                  |
| 4                             | Industrial                  | 3,244                         | 3,652                                 | 4,966                                  |
| 5                             | Restricted area             | 2,202                         | 2,224                                 | 2,154                                  |
| 6                             | Public and Semi Public      | 611                           | 611                                   | 744                                    |
| 7                             | Reservations                | 132                           | 132                                   | 63                                     |
| 8                             | Transport / Circulation     | 3,939                         | 4,589                                 | 5,539                                  |
| 9                             | Information Technology Node | --                            | --                                    | 900                                    |
| 10                            | Technology Park             | --                            | --                                    | 825                                    |
| 11                            | Knowledge Township          | --                            | --                                    | 2,426                                  |
| 12                            | Health and Medical Node     | --                            | --                                    | 225                                    |
| 13                            | Recreation                  | --                            | --                                    | 225                                    |
| <b>Total Urbanisable Area</b> |                             | <b>21,507</b>                 | <b>25,111</b>                         | <b>38,533</b>                          |
| <b>Water Body</b>             |                             | <b>440</b>                    | <b>823</b>                            | <b>823</b>                             |
| <b>Agriculture</b>            |                             | <b>49,509</b>                 | <b>45,522</b>                         | <b>32,100</b>                          |
| <b>Total</b>                  |                             | <b>71,456</b>                 | <b>71,456</b>                         | <b>71,456</b>                          |

## APPENDIX - XIII

## Status of Town Planning Schemes as on 31 May 2015

(Reference : Paragraph 2.3.6.2; Page 92)

| Sr. No.                                | Name of TP Scheme      | Date of declaration of intention | Date of submission of Draft TP scheme to the Government | Date of approval by State Government |             |          | Time taken in final approval (in years) |
|--|------------------------|----------------------------------|---|--------------------------------------|-------------|----------|---|
|  |                        |                                  |   | Draft                                | Preliminary | Final    |   |
| <b>Before First Development Plan</b>   |                        |                                  |   |                                      |             |          |   |
| 1.                                     | Padra TP-1             | 17.03.79                         | 19.12.80  | NA                                   | NA          | 20.08.90 | 10                                      |
| 2.                                     | Padra TP-2             | 17.03.79                         | 19.12.80  | NA                                   | NA          | 20.08.90 | 10                                      |
| <b>First Development Plan</b>          |                        |                                  |   |                                      |             |          |   |
| 1.                                     | Bhayli TP-1            | 19.12.94                         | 31.01.96  | 29.07.97                             | 15.07.14    | Awaited  | 21                                      |
| 2.                                     | Bhayli TP-2            | 19.12.94                         | 31.01.96  | 16.12.97                             | 21.01.14    | Awaited  | 21                                      |
| 3.                                     | Bil TP-1               | 02.09.89                         | 17.11.90  | 19.03.91                             | 11.03.96    | 07.06.99 | 10                                      |
| 4.                                     | Harni TP-2             | 07.04.93                         | 17.03.94  | 22.11.95                             | Awaited     | Awaited  | 22                                      |
| 5.                                     | Khanpur Sevasi TP-1    | 30.04.94                         | 04.03.95  | 16.12.97                             | Awaited     | Awaited  | 20                                      |
| 6.                                     | Khanpur-Ankodia TP-2   | 30.04.94                         | 04.03.95  | 01.07.96                             | 14.12.06    | Awaited  | 21                                      |
| 7.                                     | Nimetha TP-1           | 07.03.91                         | 25.10.91  | 03.11.92                             | 19.01.95    | 28.06.98 | 04                                      |
| 8.                                     | Sevasi TP-1            | 22.05.92                         | 08.05.93  | 14.10.93                             | 30.11.99    | 07.05.13 | 21                                      |
| 9.                                     | Sevasi TP-2            | 19.11.94                         | 30.11.94  | 16.12.97                             | Awaited     | Awaited  | 19                                      |
| 10.                                    | Vemali TP-1            | 07.04.93                         | 27.04.94  | 22.12.95                             | 25.05.06    | Awaited  | 22                                      |
| <b>First Revised Development Plan</b>  |                        |                                  |   |                                      |             |          |   |
| 1.                                     | Ankodia TP-1           | 02.01.09                         | 10.11.09  | Awaited                              | Awaited     | Awaited  | 06                                      |
| 2.                                     | Bhayli TP-3            | 21.04.97                         | 18.01.99  | 19.05.99                             | 12.04.13    | 22.01.14 | 16                                      |
| 3.                                     | Bhayli TP-4            | 21.08.96                         | 18.01.99  | 06.05.99                             | 10.12.10    | 08.01.13 | 16                                      |
| 4.                                     | Gorva Ankodia TP-1     | 02.01.09                         | 10.11.09  | Awaited                              | Awaited     | Awaited  | 06                                      |
| <b>Second Revised Development Plan</b> |                        |                                  |   |                                      |             |          |   |
| 1.                                     | IT Node                | 28.01.14                         | 27.06.14  | Awaited                              | Awaited     | Awaited  | --                                      |
| 2.                                     | Sama-Dumad-Vemali TP-2 | 16.07.12                         | 17.07.12  | 16.05.14                             | Awaited     | Awaited  | 03                                      |
| 3.                                     | Samiyala Bil Bhayli    | 16.07.12                         | 17.07.12  | 16.05.14                             | Awaited     | Awaited  | 03                                      |
| 4.                                     | Sevasi TP-3            | 03.07.14                         | 27.06.14  | Awaited                              | Awaited     | Awaited  | --                                      |

**APPENDIX - XIV**

**Details of various development works in First Development Plan and First Revised Development Plan**

(Reference : Paragraph 2.3.9.1; Page 99)

|   |   | (₹ in crore)  |
|---|---|---|
| Sr. No.   | Description of Project  | Total cost of project with land acquisition wherever required |
| <b>(A) First Development Plan</b>                                     |   |   |
| 1   | Residential (Housing and new township)                            | 96.65   |
| 2   | Commercial  | 6.99  |
| 3   | Industrial  | 0.88  |
| 4   | Water supply system   | 24.30   |
| 5   | Sewerage system   | 13.20   |
| 6   | Storm water disposal, River channelization and reclamation scheme | 13.50   |
| 7   | Street light  | 12.00   |
| 8   | Arboriculture   | 2.75  |
| 9   | Traffic and transportation  | 4.46  |
| 10  | Health service  | 0.36  |
| 11  | Development of Community centre, Janta cinema and fire station    | 4.95  |
| 12  | (i) Primary schools   | 0.39  |
|   | (ii) Secondary schools  | 0.42  |
| 13  | Pollution Control Programme                                       | 1.00  |
| <b>Total Development cost</b>   |   | <b>181.85</b>   |
| 10 per cent for escalation, contingencies and administrative expenses |   | 18.19   |
| <b>Total cost</b>   |   | <b>200.04</b>   |
| <b>(B) First Revised Development Plan</b>                             |   |   |
| 1   | Road and sewerage   | 140.94  |
| 2   | Proposed TP schemes   | 164.90  |
| 3   | Land Acquisition (Transport Nagar)                                | 13.83   |
| 4   | Infrastructure facility   | 108.60  |
| <b>Total cost</b>   |   | <b>428.27</b>   |

## APPENDIX - XV

Statement showing delay in execution of agreement in respect of road works

(Reference: Paragraph 2.3.9.5; Page 103)

| Sr. No. | Name of work                                     | Date of issue of work order | Date of agreement | Delay ( in days) |
|---------|--|-----------------------------|-------------------|------------------|
| 1       | Construction of Carpet Road Bhayli TP -1         | 09.09.2010                  | 21.04.2011        | 223              |
| 2       | Construction of carpet roads for Sevasi TP-1     | 27.02.2012                  | 14.08.2012        | 168              |
| 3       | Construction of carpet roads for Bhyali TP-2     | 31.08.2012                  | 07.10.2012        | 36               |
| 4       | Construction of carpet roads for Bhayli TP-3     | 31.08.2012                  | 26.12.2012        | 116              |
| 5       | Construction of carpet roads for Bhayli TP-4     | 31.08.2012                  | 28.12.2012        | 118              |
| 6       | Construction of Carpet Road Vemali TP-1          | 20.06.2012                  | 30.10.2012        | 131              |
| 7       | Construction of 24 meter Carpet Road at Bhayli   | 24.09.2013                  | 03.12.2013        | 69               |
| 8       | Construction of Carpet Road Khanpur Ankodia TP-2 | 25.02.2014                  | 02.06.2014        | 96               |
| 9       | Construction of Carpet Road at Khanpur-Sevasi TP | 25.02.2014                  | 02.06.2014        | 96               |
| 10      | Construction of road in Sevasi TP-2              | 25.02.2014                  | 02.06.2014        | 96               |

APPENDIX – XVI

Extra expenditure for printing works

(Reference: Paragraph 3.1; Page 111)

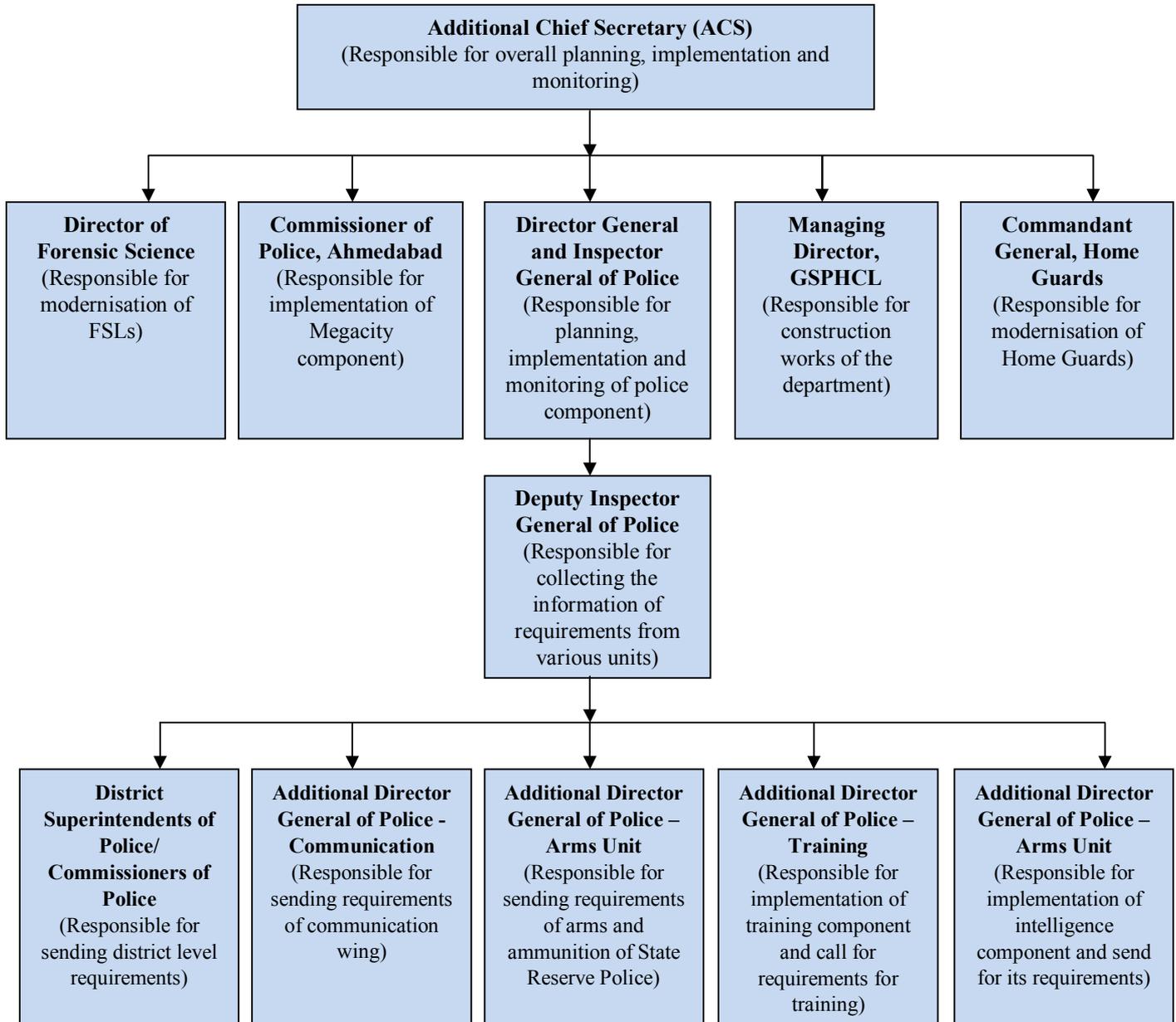
| Name of publications/ magazine/ books/ papers, etc.                                    | Date of work order             | Copies of the magazine/books/ papers, etc. with specification  | Rate at which paid (in ₹)   | Total payment made to the Agency (₹ in lakh) | Payable as per evaluated rate                      |                            | Avoidable extra payment (₹ in lakh) |
|--|--------------------------------|--|---|--|--|----------------------------|-------------------------------------|
|  |                                |  |   |  | Rate as per Evaluation (in ₹)                      | Payable amount (₹ in lakh) |                                     |
| SCE teacher guidance book  | February and March 2014        | <b>2,15,000 numbers (Nos.)</b><br>Four colour, 130 GSM Art paper, A-4 paper, 160 pages per book              | 2.90 per four pages + 5 per cent VAT  | 261.87                                       | 1.4 per four pages <sup>5</sup> (₹ 56.40 per book) | 127.32                     | 134.55                              |
| Format A to C, D-2 and D-4   | February 2014                  | <b>1,47,78,900 Nos.</b><br>Single colour, 70 GSM A-4 paper, four pages                                       | 0.27 per single side + 5 per cent VAT   | 167.59                                       | 0.29 per double side                               | 90.01                      | 77.58                               |
| Format D-1, D-3 and F  | February 2014                  | <b>59,57,965 Nos.</b><br>Single colour, 70 GSM A-4 paper, two pages  | 0.27 per single side + 5 per cent VAT   | 33.78  |  | 18.14                      | 15.64                               |
| Format E for Standard-1  | August 2014                    | <b>7,27,778 Nos.</b><br>Single colour, 70 GSM A-4 paper, 16 pages  | 0.29 per single side for 12 pages + 2.90 for title cover (4 pages) + 0.50 for transportation + 5 per cent VAT | 52.57  | 0.29 per double side and 1.41 per title cover      | 24.08                      | 28.49                               |
| Teacher Edition Textbooks for Standard 1 to 8  | February, June and August 2014 | <b>29,21,64,000 Nos.</b><br>Single page four colour, 80 GSM for inner pages and 140 GSM for title cover page | 0.36 per single side + 5 per cent VAT   | 1,104.38                                     | 0.46 per double side                               | 705.58                     | 398.80                              |
| Test-papers and Score- sheets for first Semester for Standard 3 to 8 (GAP-7)           | September 2013                 | <b>57,84,240 Nos.</b><br>Single pages Single colour, 70 GSM  | 0.27 per single side + 5 per cent VAT   | 15.62  | 0.29 per double side                               | 8.81                       | 6.81                                |
| Test-papers and Score- sheets for 2 <sup>nd</sup> Semester for Standard 3 to 8 (GAP-7) | March 2014                     | <b>59,21,212 Nos.</b><br>Single pages Single colour, 70 GSM  | 0.27 per single side + 5 per cent VAT   | 15.99  | 0.29 per double side                               | 9.02                       | 6.97                                |
| <b>Total</b>   |                                |  |   | <b>1,651.80</b>                              |  | <b>982.96</b>              | <b>668.84</b>                       |

<sup>5</sup> Cost of ₹ 6.05 per magazine included 32 pages of 70 GSM single colour and four pages title cover of 130 GSM four colour. Rate for 32 single colour 70 GSM pages was ₹ 4.64 (32/2=16\*0.29). Thus, the rate of title cover was ₹ 1.41 (₹ 6.05- ₹ 4.64).

**APPENDIX – XVII**

**Organisational set-up**

(Reference : Paragraph 3.3.1; Page 113)



**APPENDIX - XVIII**

**Statement showing the details of action taken by the department on observations made in the earlier Audit Report for the year ended March 2009 upto June 2014**

(Reference: Paragraph 3.3.1; Pages 114 and 115)

| Para Number | Para Heading  | Subject  | Action taken by the department   |
|-------------|---------------|--|--|
| 1.1.8.1     | Planning      | Non formulation of perspective plan  | Provision of perspective plan was not in revised MoPF guidelines.                        |
| 1.1.8.2     | Planning      | Delay in submission/approval of Annual Plan  | NIL  |
| 1.1.9       | Finance       | Financial Management   | NIL  |
| 1.1.9.1     | Finance       | Short utilisation of funds   | NIL  |
| 1.1.9.2     | Finance       | Revalidated grant not utilised for earlier approved components                                 | NIL  |
| 1.1.9.3     | Finance       | Utilisation of Grants for items not approved in Annual Action Plan                             | NIL  |
| 1.1.9.4     | Finance       | Revalidated grants for Forensic Science Laboratory not transferred to FSL                      | NIL  |
| 1.1.10      | Mobility      | Mobility   | Partially  |
| 1.1.10.1    | Mobility      | Shortage of vehicles at police stations  | NIL  |
| 1.1.10.2    | Mobility      | Irregular purchase and allotment of vehicles   | Fully  |
| 1.1.10.3    | Mobility      | Replacement of condemned vehicles  | Fully  |
| 1.1.11      | Weaponry      | Weaponry   | Partially  |
| 1.1.11.1    | Weaponry      | Shortage of Modern weapons with Gujarat Police   | Partially  |
| 1.1.11.2    | Weaponry      | Shortage of ammunition in police department  | Fully  |
| 1.1.11.3    | Weaponry      | Non-availability of usable gas shells  | Fully  |
| 1.1.11.4    | Weaponry      | Working of Anti-Terrorist Squad (ATS)  | NIL  |
| 1.1.11.5    | Weaponry      | Weapons not supplied by GoI  | NIL  |
| 1.1.12      | Communication | Communication  | Partially  |
| 1.1.12.1    | Communication | Police Communication Network (POLNET)  | NIL  |
| 1.1.12.2    | Communication | Shortage of Communication equipment  | Fully  |
| 1.1.12.3    | Communication | Non-operation of Global Positioning System (GPS) based Automatic Vehicle Locator System (AVLS) | Fully  |
| 1.1.12.4    | Communication | Acute shortage of Technical Manpower in communication wing                                     | NIL  |
| 1.1.13      | Equipment     | Equipment  | No action required being introductory para.  |
| 1.1.13.1    | Equipment     | Defective planning in purchase of pollution measuring equipment                                | The equipment transferred to Commissioner of transport (Ports and Transport Department). |
| 1.1.14      | Mega City     | Mega City Policing   | No action required being   |

| Para Number | Para Heading   | Subject  | Action taken by the department              |
|-------------|----------------|--|---|
|             |                |  | introductory para.                          |
| 1.1.14.1    | Mega City      | Planning and Financial Management  | NIL   |
| 1.1.14.2    | Mega City      | Non-purchase of CCTV network   | NIL   |
| 1.1.14.3    | Mega City      | Inordinate delay in purchase of Digital Radio Trunking System                                  | NIL   |
| 1.1.14.4    | Mega City      | Non-installation of variable Signal Messaging (VMS) System                                     | NIL   |
| 1.1.14.5    | Mega City      | Non-utilisation of Crash-Lab System  | Fully                                       |
| 1.1.14.6    | Mega City      | Non-purchase of Video Surveillance System  | NIL   |
| 1.1.15      | FSL            | Forensic Science Laboratory  | Fully                                       |
| 1.1.15.1    | FSL            | Non-utilisation of optimum capacity of Automated Finger Print Identification System            | NIL   |
| 1.1.15.2    | FSL            | Non-utilisation of Forensic Science infrastructure in investigation by District Police Officer | Partially                                   |
| 1.1.15.3    | FSL            | Under-utilisation of Mobile Forensic Science Laboratory (MFSL)                                 | Partially                                   |
| 1.1.15.4    | FSL            | Pendency of Finger Print at Regional Forensic Science Laboratory (RFSL), Ahmedabad             | Partially                                   |
| 1.1.15.5    | FSL            | Shortage of technical manpower at FSL  | NIL   |
| 1.1.16      | GSPHCL         | Gujarat State Police Housing Corporation Limited   | No action required being introductory para. |
| 1.1.16.1    | GSPHCL         | Cost overrun to the tune of ₹ 1.23 crore due to re-inviting tenders                            | Fully                                       |
| 1.1.16.2    | GSPHCL         | Non-commencement of works for want of clearance of site  | NIL   |
| 1.1.16.3    | GSPHCL         | Non-allotment of quarters  | Fully                                       |
| 1.1.16.4    | GSPHCL         | Savings under MoPF Scheme  | NIL   |
| 1.1.16.5    | GSPHCL         | Booking of unspent balances as expenditure   | NIL   |
| 1.1.17      | Police Reform  | Police reforms, human resource and monitoring and internal control                             | No action required being introductory para. |
| 1.1.17.1    | Police Reform  | Non-implementation of Supreme Court directives on police reforms                               | Partially                                   |
| 1.1.17.2    | Human Resource | Human Resources Management   | NIL   |
| 1.1.18      | Training       | Training   | Partially                                   |
| 1.1.18.1    | Training       | Annual firing practice not imparted to police personal   | Partially                                   |
| 1.1.18.2    | Training       | Infrastructure not provided at Police Academy  | Partially                                   |
| 1.1.19      | Audit          | Absence of Internal Audit Wing   | NIL   |
| 1.1.20      | Monitoring     | Monitoring and Internal Control  | NIL   |

APPENDIX – XIX

Statement showing availability of four wheelers and two wheelers with Police Stations as of March 2015

(Reference: Paragraph 3.3.4.1; Page 117)

| District                 | Number of PSs | Required number of four-wheeler | PSs with no four-wheeler | PSs with one four-wheeler | Total four-wheeler available | Required number of two-wheeler | PSs with no two-wheeler | PSs with one two-wheeler | PSs with two two-wheeler | Total two-wheeler available |
|--------------------------|---------------|---------------------------------|--------------------------|---------------------------|------------------------------|--------------------------------|-------------------------|--------------------------|--------------------------|-----------------------------|
| 1                        | 2             | 3                               | 4                        | 5                         | 6                            | 7                              | 8                       | 9                        | 10                       | 11                          |
| Ahmedabad city           | 40            | 80                              | 0                        | 0                         | 144                          | 120                            | 0                       | 1                        | 2                        | 329                         |
| Rajkot City              | 10            | 20                              | 0                        | 1                         | 19                           | 30                             | 0                       | 0                        | 0                        | 109                         |
| Surat City               | 27            | 54                              | 0                        | 3                         | 114                          | 81                             | 2                       | 0                        | 0                        | 216                         |
| Vadodara City            | 19            | 38                              | 0                        | 1                         | 44                           | 57                             | 1                       | 0                        | 0                        | 155                         |
| Ahmedabad Rural          | 17            | 34                              | 0                        | 10                        | 25                           | 51                             | 1                       | 1                        | 0                        | 76                          |
| Ahwa-Dang                | 3             | 6                               | 0                        | 1                         | 5                            | 9                              | 0                       | 0                        | 0                        | 21                          |
| Amreli                   | 21            | 42                              | 0                        | 1                         | 26                           | 63                             | 0                       | 1                        | 1                        | 95                          |
| Anand                    | 19            | 38                              | 0                        | 18                        | 20                           | 57                             | 0                       | 4                        | 5                        | 57                          |
| Aravali                  | 10            | 20                              | 0                        | 9                         | 11                           | 30                             | 0                       | 0                        | 2                        | 44                          |
| Banaskantha              | 27            | 54                              | 0                        | 15                        | 44                           | 81                             | 1                       | 0                        | 0                        | 126                         |
| Bharuch                  | 22            | 44                              | 0                        | 14                        | 30                           | 66                             | 0                       | 2                        | 5                        | 90                          |
| Bhavnagar                | 24            | 48                              | 0                        | 11                        | 50                           | 72                             | 0                       | 1                        | 0                        | 135                         |
| Botad                    | 6             | 12                              | 0                        | 4                         | 10                           | 18                             | 0                       | 0                        | 3                        | 20                          |
| Chhota-udepur            | 9             | 18                              | 0                        | 5                         | 14                           | 27                             | 0                       | 0                        | 2                        | 36                          |
| Dahod                    | 14            | 28                              | 0                        | 8                         | 21                           | 42                             | 1                       | 0                        | 1                        | 58                          |
| Devbhumi Dwarika         | 8             | 16                              | 0                        | 4                         | 13                           | 24                             | 0                       | 0                        | 1                        | 45                          |
| Gandhinagar              | 14            | 28                              | 0                        | 1                         | 45                           | 42                             | 0                       | 0                        | 1                        | 67                          |
| Gir Somnath              | 10            | 20                              | 0                        | 4                         | 20                           | 30                             | 1                       | 0                        | 1                        | 43                          |
| Panchmahal               | 11            | 22                              | 0                        | 5                         | 20                           | 33                             | 0                       | 0                        | 0                        | 84                          |
| Jamnagar                 | 12            | 24                              | 0                        | 12                        | 12                           | 36                             | 0                       | 0                        | 0                        | 82                          |
| Junagadh                 | 19            | 38                              | 0                        | 16                        | 22                           | 57                             | 1                       | 1                        | 0                        | 65                          |
| Kachchh-East             | 13            | 26                              | 0                        | 5                         | 25                           | 39                             | 1                       | 0                        | 1                        | 51                          |
| Kachchh-West             | 22            | 44                              | 0                        | 16                        | 33                           | 66                             | 3                       | 3                        | 1                        | 97                          |
| Kheda-Nadiad             | 18            | 36                              | 0                        | 14                        | 23                           | 54                             | 2                       | 0                        | 1                        | 67                          |
| Mehsana                  | 19            | 38                              | 0                        | 6                         | 35                           | 57                             | 0                       | 0                        | 1                        | 92                          |
| Mahisagar Lunavada       | 8             | 16                              | 0                        | 5                         | 11                           | 24                             | 0                       | 0                        | 1                        | 39                          |
| Morbi                    | 8             | 16                              | 0                        | 2                         | 19                           | 24                             | 1                       | 0                        | 0                        | 40                          |
| Narmada                  | 7             | 14                              | 0                        | 6                         | 9                            | 21                             | 0                       | 1                        | 1                        | 38                          |
| Navsari                  | 10            | 20                              | 0                        | 3                         | 17                           | 30                             | 0                       | 0                        | 0                        | 60                          |
| Patan                    | 15            | 30                              | 0                        | 8                         | 22                           | 45                             | 1                       | 0                        | 0                        | 61                          |
| Porbandar                | 10            | 20                              | 0                        | 7                         | 13                           | 30                             | 0                       | 1                        | 0                        | 43                          |
| Rajkot Rural             | 18            | 36                              | 0                        | 12                        | 30                           | 54                             | 1                       | 0                        | 2                        | 81                          |
| Sabarkantha              | 14            | 28                              | 0                        | 11                        | 17                           | 42                             | 1                       | 0                        | 0                        | 62                          |
| Surat Rural              | 11            | 22                              | 0                        | 9                         | 13                           | 33                             | 0                       | 1                        | 1                        | 48                          |
| Surendranagar            | 18            | 36                              | 0                        | 18                        | 18                           | 54                             | 0                       | 0                        | 5                        | 65                          |
| Tapi                     | 8             | 16                              | 0                        | 6                         | 10                           | 24                             | 1                       | 0                        | 0                        | 45                          |
| Vadodara Rural           | 12            | 24                              | 0                        | 8                         | 16                           | 36                             | 0                       | 0                        | 0                        | 62                          |
| Valsad                   | 13            | 26                              | 0                        | 6                         | 21                           | 39                             | 1                       | 1                        | 0                        | 62                          |
| West. Railway, Ahmedabad | 14            | 28                              | 1                        | 12                        | 14                           | 42                             | 1                       | 4                        | 6                        | 26                          |
| West. Railway, Vadodara  | 8             | 16                              | 1                        | 5                         | 10                           | 24                             | 0                       | 0                        | 5                        | 22                          |
| <b>Total</b>             | <b>588</b>    | <b>1,176</b>                    | <b>2</b>                 | <b>302</b>                | <b>1,065</b>                 | <b>1,764</b>                   | <b>21</b>               | <b>22</b>                | <b>49</b>                | <b>3,014</b>                |

## APPENDIX – XX

**Details of Constitution of District Police Complaint Authority and meetings held in test-checked districts during the period 2009-15 (upto July 2015)**

(Reference: Paragraph 3.3.10.1; Page 125)

| Sr. No. | District units                           | Number of meetings to be held up to July 2015 | Number of meetings held up to July 2015 | Shortfall in meetings |
|---------|--|---|---|-----------------------|
| 1       | Superintendent of Police, Dahod          | 25  | 1                                       | 24                    |
| 2       | Superintendent of Police, Panchmahal     | 25  | 3                                       | 22                    |
| 3       | Superintendent of Police, Kachchh-West   | 25  | 2                                       | 23                    |
| 4       | Superintendent of Police, Mehsana        | 25  | 3                                       | 22                    |
| 5       | Superintendent of Police, Porbandar      | 25  | 1                                       | 24                    |
| 6       | Superintendent of Police, Rajkot Rural   | 25  | 2                                       | 23                    |
| 7       | Superintendent of Police, Surat Rural    | 25  | Not available                           |                       |
| 8       | Superintendent of Police, Vadodara Rural | 25  | 3                                       | 22                    |

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