

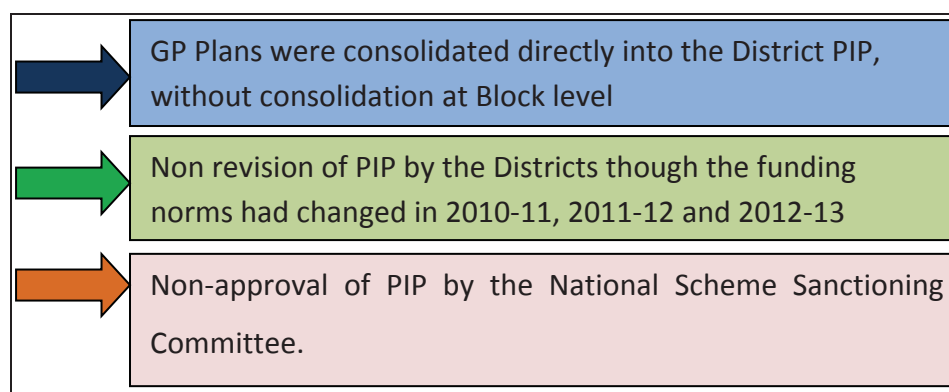
Chapter-2 : Planning

2.1 Introduction

Proper planning is considered as a basic requirement for success of any programme. Accordingly, plans should be evidence-based. Keeping this important requirement in view, TSC/ NBA included Baseline Surveys to assess the status of sanitation and hygiene practices, orientation of key personnel at district/ GP level and preparation of Project Implementation Plan and Annual Implementation Plan.

2.2 Discrepancies in preparation of Project Implementation Plans

As per Scheme guidelines, Project Implementation Plan (PIP) was to be revised due to change in funding norms and the project proposal was to include Baseline Survey and latest Census data available in respect of the districts. The proposal ought to emanate from Gram Panchayat, compiled at Block level, and then at district level. The proposal for revision of project was to be put up before the State Scheme Sanctioning Committee (SSSC) by the concerned department. On its approval by the SSSC, the proposal was to be forwarded to the Ministry for approval. Discrepancies noticed in preparation and approval of PIPs were as under:



Details are given in **Annex-2.1**. Other discrepancies noticed in projection of targets in PIP were as follows:

Sl. No.	State	Discrepancies
1.	Arunachal Pradesh	Total number of BPL households as per Baseline Survey 2012-13 in the 4 test-checked districts was 30,831. But the number of targeted BPL households in the approved PIP was 41,074. Thus 10,243 excess BPL households were targeted in the approved PIP. In West Kameng, East Siang and West Siang districts of Arunachal Pradesh, there were 22,883 BPL households as per base line survey of 2012, out of which 14,701 IHHLs constructed up to 31.03.2012, leaving a balance of 8,182 households to be covered. However, the 3 mentioned districts proposed for 17,112 IHHLs units (inflated by 8,930 units).
2.	Assam	Though the PIP was revised on the basis of baseline survey, however against the requirement of 792744 IHHL, only 628773 were projected in the PIPs. Thus 163971 IHHL were short projected in the PIP.
3.	Jharkhand	As per revised PIP of State, there were 51.60 lakh targeted rural households out of which 15.82 lakh ¹ households had already been covered as of March 2012. As such, only remaining 35.78 lakh ² households should have been targeted. However, Project Monitoring Unit (PMU) proposed coverage of additional 1.35 lakh households totalling to 37.13 lakh ³ households. In addition, Ramgarh district made provision for 8651 already constructed toilets for BPL households.
4.	Uttar Pradesh	As compared to baseline survey, eight districts ⁴ short planned for 6.36 lakh IHHL and five districts ⁵ excess planned for 0.22 lakh IHHLs while preparing the PIP.

Case Study: Mizoram

District Water and Sanitation Committees in eight districts prepared District PIPs of TSC/NBA projects covering the beneficiaries both in rural and urban areas of the Districts, which were consolidated into State AIP and submitted to the NSSC. The said State AIP, which irregularly included beneficiaries of urban areas, was approved by the NSSC.

Thus, this led to short coverage of needy population mostly belonging to BPL categories in the rural areas that could otherwise have benefitted from the sanitation facilities under the scheme.

Thus bottom up approach for preparation of PIP i.e. consolidation of GPs plan into Block plan and Block plan into district plan was not adhered to.

¹ BPL: 13,91,920 numbers and APL: 1,89,833 numbers.

² BPL: 11,12,930 numbers and APL: 24,65,883 numbers.

³ BPL: 12,34,929 numbers and APL: 24,78,370 numbers.

⁴ Deoria, Hardoi, Jalaun, Kaushambi, Mirzapur, Pratapgarh, Sitapur and Varanasi Districts

⁵ Auraya, Bijnor, Gorakhpur, Lakhimpur Kheri, Pilibhit Districts

2.3 Annual Implementation Plan

2.3.1 Non consolidation of GP Plan into Block Plan and further into District Plan

The objective of the Annual Implementation Plan (AIP) is to provide a definite direction to the programme in a systematic manner for creation of Nirmal Grams. The AIP are required to:

- a) Report on the progress made by the State in achieving the objectives of NBA during the previous year against the AIP objectives;
- b) Reasons and comments for variation, if any;
- c) A plan of activities with physical and financial estimates under each component of the NBA for the proposed financial year;
- d) Monthly/quarterly projected targets; and
- e) Write ups of success stories, best practices, innovations introduced, new technologies used.

Annual Plans are to be prepared by identifying the Gram Panchayats (GPs) to be saturated for attaining the project objectives. These GP plans are to be consolidated into Block Implementation Plans and further into District Implementation Plan. The State Water and Sanitation Mission (SWSM) is to suitably consolidate the District Implementation Plans as the State Implementation Plan.

Audit noticed that in 73(49 *per cent*) test checked districts of 12 States, GP Plan was not consolidated into Block Plan and further into district Plan as detailed in **Annex-2.2**.

2.3.2 Other discrepancies

Other discrepancies noticed in preparation/approval of AIP were:

➔	AIP did not indicate the District/Block/GP wise allocation of physical and financial targets.
➔	AIPs were prepared without obtaining Block AIPs.
➔	AIPs were not prepared following the community saturation approach highlighting comprehensive sanitation and water coverage on the basis of identification of GPs that could be made Nirmal during the year/in the coming years etc.

The details are given in **Annex-2.3**.

<p>Case study: Bihar (Incorrect consolidation of District AIP into State AIP)</p> <p>In Bihar, AIP prepared by Bihar State Water and Sanitation Mission and District Water and Sanitation Committees of nine Districts out of 10 test checked Districts, it was noticed that District wise figure of expenditure during 2011-12 was overstated by ₹ 24.82 crore in State AIP. Further, achievement under IHHL for Below Poverty Line (BPL) and Above Poverty Line (APL) for the same year was in excess of 86,798 and 18,911 units respectively. During 2012-13, expenditure figures for two Districts in State AIP were shown in excess by ₹ 2.29 crore from District AIP. However, for three Districts, it was lesser by ₹ 7.99 crore than District AIP. Similarly, during 2012-13, achievement figures of IHHL for BPL were overstated in two Districts by 557 and for APL in three Districts by 494 in State AIP. In addition, achievement figures of IHHL for APL and BPL in two Districts were understated by 2439 and 1804 respectively in State AIP from District AIP.</p>

2.4 Shortfall in coverage of Beneficiaries

2.4.1 BPL Beneficiaries

Audit noted that in the selected districts of three States (**Jammu & Kashmir, Meghalaya, and Nagaland**), BPL households were not identified for IHHL. The other irregularities in selection of BPL households are enumerated in the **Annex-2.4**.

2.4.2 APL Beneficiaries

Audit noted that in the selected districts of six States (**Bihar, Chhattisgarh, Jammu & Kashmir, Jharkhand, Meghalaya, and Nagaland**) APL households were not identified for IHHL. The other irregularities in selection of APL households are enumerated in the **Annex-2.5**.

2.4.3 Other discrepancies in selection of beneficiaries

Other discrepancies noticed in selection of beneficiaries were:

- Audit noted that in the selected GPs of three States (**Jammu & Kashmir, Karnataka, West Bengal**), selection of households was not approved by Gram Sabhas.
- In **Arunachal Pradesh**, the DWSM did not decide the number of IHHLs to be constructed Panchayat-wise for any financial year, but targets for districts were fixed by the Director, CCDU/WSSO at State level.
- In **Manipur**, during 2009-10 to 2013-14, 1,08,508 IHHLs costing ₹ 46.64 crore were to be constructed, but the physical achievement of 1,59,298 IHHLs was reported. The excess construction of 50,790 IHHLs was attributed to the non-identification of the APL and BPL households by GP/ Gram Sabha or General Body meetings in a transparent way.

2.4.4 Selection of GPs for saturation

2.4.4.1 Non selection of GPs for saturation

NBA guidelines provides that the AIPs should be prepared following the saturation approach highlighting comprehensive sanitation and water coverage on the basis of identification of GPs that can be made Nirmal during the year/coming years.

Audit noticed that the scheme was implemented in 220279 GPs of 30 States out of which Ministry planned 38941 and 26165 GPs for making

them Open Defecation Free (ODF) during the year 2012-13 and 2013-14. However, only 17346 GPs (44 *per cent*) and 1274 GPs (4.8 *per cent*) were made ODF during the year 2012-13 and 2013-14 respectively. The State-wise details are given in **Annex-2.6**.

Further it was noticed that no GP was saturated in 13 States (**Andhra Pradesh, Arunachal Pradesh, Assam, Bihar, Goa, Haryana, Jammu & Kashmir, Jharkhand, Manipur, Nagaland, Punjab, Tripura and Uttar Pradesh**) during the year 2013-14 against the target fixed for saturation of 4967 GPs.

2.4.4.2 Other discrepancies

Other discrepancies noticed for saturation of GPs were as under:

- In **Arunachal Pradesh** no GP was selected for saturation except in West Siang district.
- Kushinagar district of **Uttar Pradesh** released (2011-12) funds amounting to ₹0.63 crore to 83 GPs for construction of 2866 IHHLs of BPL families, despite the GPs already having been declared saturated with the IHHLs in 2010-11.
- In Almora and U S Nagar districts of **Uttarakhand** having 1455 GPs, no GP was targeted/proposed for saturation.

2.5 Structural arrangements

The Scheme guidelines envisaged formation of State Water and Sanitation Missions in the States, District Water and Sanitation Missions in the districts besides Village Water and Sanitation Committees, Water and Sanitation Support Organisation and Block resource Centres for operationalising the Scheme in the States. The deficiencies found by Audit are discussed below:

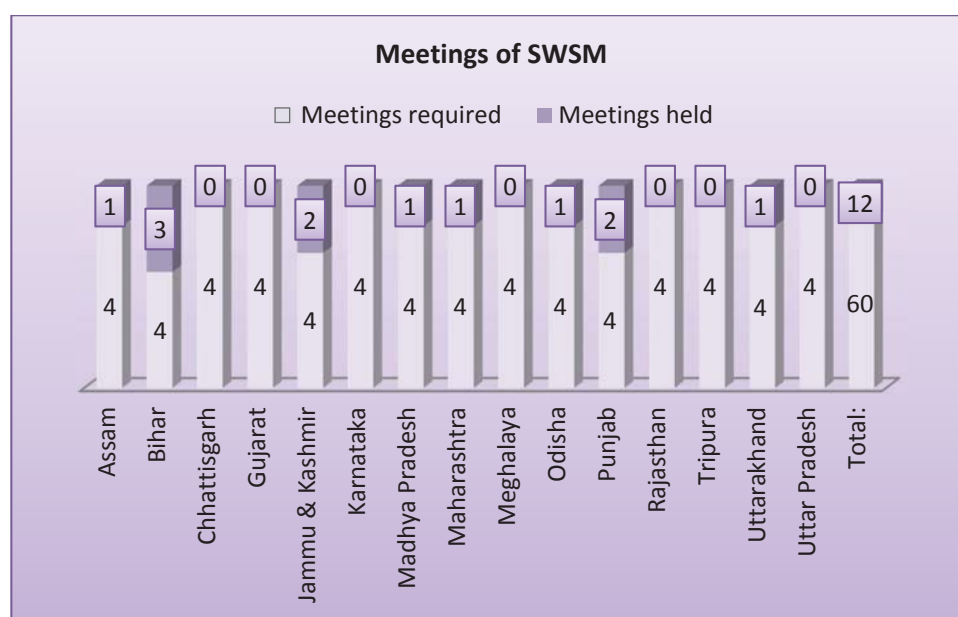
2.5.1 Lack of planning: shortfall in State Water and Sanitation Mission (SWSM) meetings

NBA Guidelines 2012 envisage that SWSM should meet at least twice in a year. The meetings were crucial as SWSM had a pivotal role in implementation of NBA through supervision in the project districts,

convergence with the line departments and preparation of the AIP for each district.

It was noticed in audit that against the mandatory requirement of 60 meetings, in seven States (**Chhattisgarh, Gujarat, Karnataka, Meghalaya, Rajasthan, Tripura and Uttar Pradesh**) no documented meetings were held and only 12 meetings (20 percent) were held in eight States during 2012-14. Meetings required/held in these states are depicted in the **Chart-2.1** given below:

Chart-2.1: Meetings of SWSM

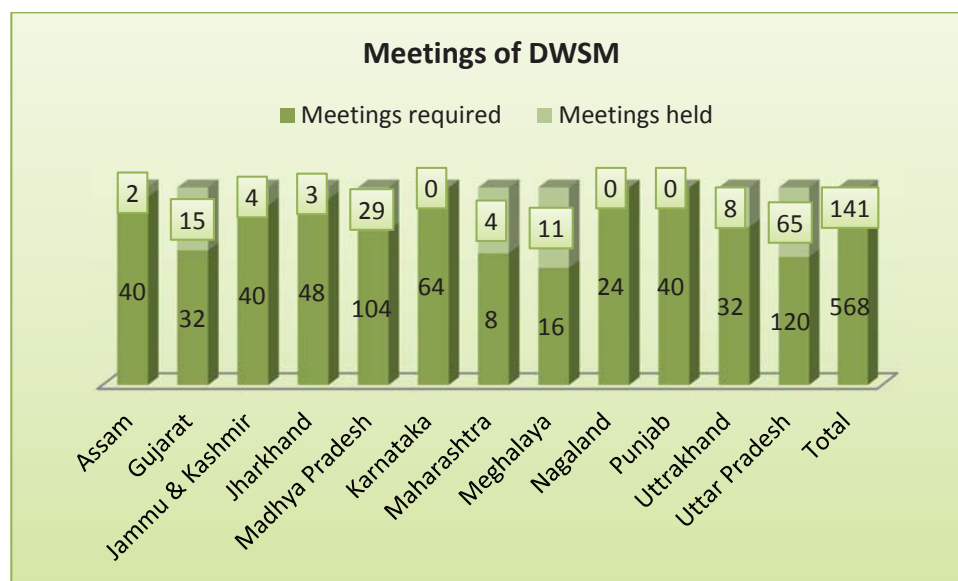


The details are in **Annex-2.7.1**.

2.5.2 Lack of planning: shortfall in District Water and Sanitation Mission (DWSM) meetings

DWSM was required to plan and implement the district NBA project with appropriate Information Education and Communication (IEC) strategies and convergence mechanisms with other line departments. It was expected to review and monitor programme implementation for achievement of the objective of the district annual action plans. For this purpose, the mission was required to meet at least quarterly. However it was noticed that in 71 districts of 12 States against the requirement of 568 meetings, only 141 meetings (25percent) were held during 2012-14 as depicted in the **Chart-2.2** below:

Chart-2.2: Meetings of DWSM



The details are given in **Annex-2.7.2**.

Other discrepancies noticed in composition of SWSM/DWSM were as under:

State	Discrepancies
Karnataka	The SWSM constituted in 2009 did not include the Principal Secretary/ Secretary of Departments of Education, Women and Child Development, Water Resources, Agriculture, etc., as members. Details of registration of SWSM were not forthcoming from the records at the nodal agency. DWSM was not constituted in the seven ⁶ districts. However, even the DWSM at ZP, Belgaum did not meet even once till the end of 2013-14.
Maharashtra	No separate DWSM was constituted in three districts (Raigad, Buldhana, and Nagpur) and the scheme is being implemented by existing Water Management Committee and District Executive Committee. Four ⁷ Block Resource Centres and eight ⁸ Cluster Resource Centers ⁹ were not adequately staffed and the shortfall was 57 per cent and 67 per cent respectively as on March 2014.
Manipur	As per Gol's letter (July 2010), Communication and Capacity Development Unit (CCDU) should have State Co-ordinator, HRD

⁶ Chitradurga, Davanagere, Mandya, Uttara Kannada, Raichur and Tumkur

⁷ Raigad District: Tala BRC; Buldhana District: Lonar BRC; Nagpur District: Katol BRC and Parbhani District: Sailu BRC

⁸ Buldhana District: Lonar & Sangrampur CRC; Nanded District: Naigaon CRC; Jalgaon District: Amalner CRC; Nagpur District: Narkhed CRC; Hingoli District: Aundha Nagnath & Hingoli CRC; Satara District: Patan CRC

⁹ Cluster Resource Centre is for a group of GPs

	Specialist, IEC Specialist and Monitoring & Evaluation Specialist. It was noticed in audit that neither State Co-ordinator nor the envisaged specialists were appointed. A team of experts to review the implementation of the scheme in different blocks though envisaged in the guidelines was also not setup.
Punjab	No separate staff had been sanctioned/appointed at District, Block and GP level for effective implementation of the Scheme

Non constitution of these crucial grass root level Bodies and infrequent meetings held by these suggests weak planning and less than required review of progress of implementation, analysis of reasons for shortfall, strategy for betterment as contemplated for successful implementation of the programme.

2.5.3 Non formation of Village Water and Sanitation Committee

Village Water and Sanitation Committees (VWSCs) were to be constituted as sub-committee of Gram Panchayat, for providing support in terms of motivation, mobilization, implementation and supervision of the programme. The VWSC was expected to play a crucial role in the comprehensive and saturation approach to Nirmal Grams. Audit noticed that out of 594510 Villages in which scheme was implemented, VWSC were not even set up in 51014 Villages of 30 States. Details are given in **Annex-2.8**.

Out of 509 GPs test checked, VWSC was not set up in 454 GPs (89 per cent) of five States as detailed in **Table-2.1** below:

Table-2.1: Details of GPs where VWSC were not set up

Sl. No.	State	Number of GPs test checked	Number of GPs where VWSC were not set up
1.	Jammu & Kashmir	77	77
2.	Karnataka	129	115
3.	Punjab	100	100
4.	Rajasthan	147	109
5.	West Bengal	56	53
	Total:	509	454

[Source: Data compiled from records of sample project districts]

Further in **Uttar Pradesh** the scheme was not implemented through VWSC in all 15 test checked districts and in **Assam** adequate staff was not posted in VWSCs. In 102 GPs of **Chattisgarh** neither registration of VWSCs was done nor specific bye-laws were prepared. The Sarpanch and Sachiv of GPs were functioning as President and Secretary respectively of the Committee. In **Jharkhand** 115 VWSCs were yet to be formed in three¹⁰ out of six test-checked districts as of March 2014.

2.5.4 Non formation of Water and Sanitation Support Organisation (WSSO)

All States were also required to set up Water and Sanitation Support Organization (WSSO) under State Water and Sanitation Mission (SWSM) to deal with IEC, HRD and Monitoring and Evaluation at the State level. Communication strategy for the State was to be planned by the WSSO and they had to regularly monitor it for effective implementation. In States where water supply & sanitation are handled by two different departments, a Communication and Capacity Development Unit (Sanitation) was to be associated with the WSSO. Audit noticed that in four States (**Andhra Pradesh, Bihar, Jammu & Kashmir and Meghalaya**) no WSSO was set up.

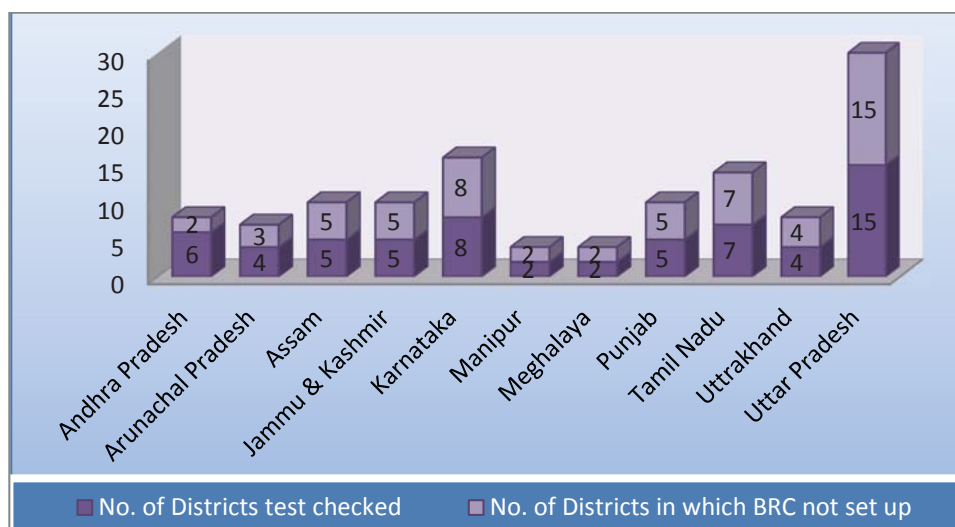
2.5.5 Non formation of Block Resource Centre (BRC)

As envisaged in the guidelines, Block Resource Centres (BRCs) were to be set up to provide continuous support in terms of awareness generation, motivation, mobilisation, training of village communities, GPs and VWSCs. The BRC was to serve as an extended delivery arm of the DWSSM in terms of software support and act as a link between DWSSM and the GPs/VWSCs.

We noted that BRC were not set up in 58 districts out of 63 districts test checked in 11 States as depicted in the **Chart-2.3** below:

¹⁰ Dumka: 2593 VWSCs in 2664 villages, Garhwa: 812 VWSCs in 848 villages and Ranchi: 1311 VWSCs in 1319 villages.

Chart-2.3: Status of BRC



[Source: Data compiled from records of sample project districts]

The details are given in **Annex-2.9**.

In the absence of BRC, there was no link between DWSM and GPs, thus hampering awareness generation, motivation and mobilisation regarding various aspects of sanitation amongst the village communities.

Recommendations:

- AIP and PIP should emanate from the grass root level to be consolidated in Block and district plan. PIPs should be revised periodically by conducting door to door survey to assess the latest status of hygienic practices.
- The required organisational arrangement to plan and monitor should be established in all states receiving funds under sanitation programmes of Government of India.