Executive Summary

Health is a vital indicator of human development and a basic ingredient of economic and social development. A robust public health infrastructure and effective management of health services are utmost important to ensure good health of citizens.

This Performance Audit is an assessment of the healthcare services provided in the State of Rajasthan. It examined whether Government of Rajasthan took adequate measures to ensure adequate availability of infrastructure and healthcare services, drugs, medicines, equipment and human resources to beneficiaries. The Performance Audit covered the period 2016-22.

Audit observed that there was shortage of Doctors, Specialists, Nurses and Paramedics in the Primary, Secondary and Tertiary Healthcare Institutions. *The State Government should address the shortage of health care professionals in a time-bound manner by adopting a clearly defined recruitment strategy as well as ensuring their equitable distribution across the State.*

Audit noticed that essential minimum assured services like General Surgery, Paediatrics, Orthopaedics, and Accident and Trauma Wards were deficient in IPD of the Government Medical Institutions (GMIs). Deficiencies were also noticed in services such as Emergency, Intensive Care Units, Blood Banks of GMIs. *The State Government may ensure availability of the required Minimum Assured Services, like General Surgery, Paediatrics, Orthopaedics, Emergency, Intensive Care Unit, Blood Banks, etc. as per IPHS in the GMIs of the State.*

There was non-availability of adequate Radiology (in 12 DHs out of 34 DHs), Pathology (partially available in all 34 DHs), Dietary (in 18 DHs out of 34 DHs), Ambulance (in Seven DHs out of 34 DHs) and Mortuary (in one DH out of 34 DHs) services as per IPHS in the test-checked GMIs. *The State Government should make efforts to provide adequate services such as Radiology, Pathology, Dietary, Ambulance and Mortuary Services as per IPHS in the GMIs of the State.*

There was shortfall of availability of essential drugs in test-checked GMIs and district drug warehouses in the State. The State Government may take necessary steps to ensure sufficient availability of essential drugs in the hospitals and drug warehouses.

Audit observed that medicines issued to medical units were less than the quantity demanded and that there were delays in finalizing rate contracts. It was also observed that purchase orders were placed when the buffer stock was much less than the prescribed buffer level. *The State Government should specify reorder point at which purchase orders are placed and put in place a mechanism of system generated purchase orders for maintenance of prescribed buffer stocks.*

Delays were noticed in receipt of quality test reports from the laboratories which delayed the issue of medicines by the warehouses to the medical units, contributing to non-availability of medicines at the medical units. *The State Government may ensure timely testing of drug samples and receipt of quality test reports on time.*

It was found that test-checked GMIs purchased drugs locally without quality test reports. *The State Government may ensure issue of drugs to GMIs only after receipt of quality test reports.*

Equipment required as per Indian Public Health Standards (IPHS) in various categories were not available in the test-checked GMIs. *The State Government may ensure availability of essential equipment in the GMIs as per IPHS, as well as their periodic maintenance and calibration.*

There was shortage of healthcare infrastructure across the desert, tribal and plain areas of the State. The State Government did not have a concrete plan to address the shortage and prioritise areas with shortfall for setting up of healthcare infrastructure. *The State Government may ensure availability of healthcare institutions as per Indian Public Health Standards in the State and their equitable distribution to make healthcare accessible for all.*

Deficiencies were noticed in the provision of basic amenities like separate toilet facilities for male and female, electricity, and potable drinking water in the Government Medical Institutions (GMIs) of the State. The State Government should ensure availability of basic amenities like separate toilet facilities, electricity and potable drinking water in all the Government Medical Institutions of the State.

Capital Expenditure constituted only 6.67 per cent of the total expenditure on healthcare. The State Government may make efforts to augment the capital expenditure in healthcare sector.

The percentage of out-of-pocket expenditure to total health expenditure decreased in Rajasthan during the period 2016-20. However, it constituted 47.40 *per cent* of total healthcare expenditure during 2019-20, indicating low financial protection available to households towards healthcare payments in the State. *The State Government may take necessary steps to increase the budgetary allocation for healthcare sector both as a percentage of State Budget as well as Gross State Domestic Product, in line with the National Health Policy.*

There was non-availability of required tests, non-conduct of yoga sessions and inadequate screening of Non-Communicable Diseases in adults in the Health and Wellness Centres established under *Ayushman Bharat* scheme in the State. *The State Government may ensure proper functioning of Health and Wellness Centres as envisaged in the guidelines of Ayushman Bharat-Health Wellness Centre.*

There were delays in issuing and renewing of drug manufacturing licenses and regular annual inspections were not carried out in any of the test-checked manufacturing units. *The State Government should ensure that issue and*

renewal of manufacturing licenses are done in a time-bound manner and annual inspections are conducted regularly.

Action against firms manufacturing Not of Standard Quality drugs was significantly delayed. The State Government should fix responsibility of officers concerned for failure to ensure timely and appropriate action against the manufacturers of Not of Standard Quality Drugs.

Audit observed that neither the composition nor the functioning of Rajasthan Medical Council was in accordance with the requirements of Rajasthan Medical Act and Pharmacy Inspectors had not been appointed in the State by State Pharmacy Council. *The State Government should monitor the functioning of the State Medical Council and State Pharmacy Council to ensure effective regulation by these bodies.*

Rajasthan had not formulated any vision/ roadmap/ strategy for achievement of Sustainable Development Goals (SDGs). *The State Government may expedite the alignment of SDGs with the State Government Vision 2030.*